

Princeton in Latin America March Newsletter

Report from Erin Lough 07-08 PiLA Fellow

Princeton in Latin America is truly an ongoing journey. After living for one year as a PiLA Fellow in the Peruvian Amazon, I left the beauty of the rainforest to become a medical student at Mayo Medical School. However, the inspiration, experiences, and contacts of Princeton in Latin America will always be with me. I hope to pursue a career in Global Health and Infectious Disease, and through PiLA I was able to find a volunteer position with a physician from El Salvador during a recent break.

In **El Salvador**, 80% of the population lives without health insurance. Public hospitals and clinics provide the only health care to which the Salvadorians have access. These hospitals and clinics are so severely underfunded that there are only eight intensive care beds in the country's main public hospital, **Hospital Rosales**. These are supposed to sufficiently serve the sickest of the country's seven million people. Physicians are paid so little by the government that some choose to be taxi drivers rather than work in a public hospital. Others work only a few hours per day and "moon-light" (work after hours) in the more lucrative private clinics, available only to the country's richest ten percent.





Images from the Clinic.

Some physicians, such as **Dr. Daniella Flamenco**, are lucky enough to be employed by international non-profit organizations and are given the funding and medicines to treat the country's poorest patients. Dr. Flamenco and her three partners – a psychologist, a dentist, and a woman's health specialist – take a pick-up truck each morning to distant small rural communities where physicians are not generally available. For \$1 each, she provides affordable primary care and free medicine to as many patients as the day allows.

Three other Mayo Medical Students and I were fortunate to be able to accompany Dr. Flamenco as aids on a few of her excursions. Along with helping her treat patients, we also provided her with as many additional medical supplies as we could fit in our travel bags and gave the psychologist a number of donated children's books to use in his practice. He uses these books to help his youngest patients express their feelings through story telling.

Due to El Salvador's recent civil war in the 1980's and 90's, psychological health is one of the many overlooked health difficulties in El Salvador. Many adults have post traumatic stress syndrome due to violent incidents during the war. Additionally, many children are affected by depression because their parents have been forced to immigrate to the U.S. or Mexico to earn money, while the children are left to live with distant family members. While Dr. Flamenco is typically a primary care physician, she also prescribes a number of anti-depressants and other psychiatric medications. Her patients are among the lucky few in the country to have affordable access to these medicines.

We were also able to volunteer in El Salvador's main public children's hospital, **Hospital Bloom**. While Hospital Bloom is a small hospital (by U.S. standards), it serves El Salvador's sickest and youngest patients. Private rooms are unheard of here.

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The ICU consists of crowded, loud, rows of cribs divided by beeping respirators and heart monitors. Visiting hours are restricted to 1-3 pm, so the air is often filled with the cries of lonely children. The nurses and physicians do their best to comfort them, but are overwhelmed by the sheer numbers of patients and lack of staff. We were able to give over fifty children's books to make a small "library" for the hospital's oncology unit, which previously had sparse entertainment for the long hours between visiting hours.

Perhaps the most memorable patient was a twelve year old girl who had been in the "post-surgical room" (communal recovery room for post-surgical patients) since December 2008. She had been shot twice in the neck by local gangs, which are notoriously violent and responsible for most of the current bloodshed and crime in the country. Although she survived, the bullets severed her spinal cord and she was paralyzed permanently from the neck down. The physicians are currently trying to wean her off of her respirator, but in a country where the only available public hospice care is family care, her prognosis is bleak.

The second week of our trip, we were joined by a number of physicians and other medical students from the **Mayo Clinic**. We volunteered to treat patients in two urban clinics in San Salvador -- **San Jacinto and San Marcos** -- as well as set up a two-day "medical campaign" in which we treated over three hundred patients from rural communities. Except for the occasional physician like Dr. Flamenco, these people do not normally have access to a physician. One sixty year-old woman reported that she had never before visited a physician in her life. She had waited patiently for over an hour in the humid, 95 F heat of our make shift, concrete "clinic" to see one of our physicians.

But, El Salvadorian health care is not completely a dismal picture in which citizens rarely have the chance to see a physician and hospitals are so chronically underfunded that they are forced to choose to treat only a few children. There is a future in the health care of El Salvador and we can help.

I believe that there is hope in El Salvador, as exemplified by Dr. Flamenco who works tire-lessly out of love and compassion for her countrymen. There is also help from the world, as illustrated by all those generous individuals who donated items for our trip. Mayo Clinic physicians Dr. Adamson and Dr. Wilson have also proven this. Dr. Adamson brought the first x-ray machine to the main public hospital of Honduras and now sends medical technology to hospitals in El Salvador. Dr. Wilson, from the Division of Infectious Disease, is currently working with **Hospital Rosales** in San Salvador to create an exchange of information, technology, and aid from the Mayo Clinic.

The reality is that El Salvador needs additional help, and fast, but trips such as these and organizations such as Princeton in Latin America are a start as well as a welcome relief to those that they assist. Special thanks to all those who donated.





Images of the children at the hospital, taken by Erin.

Report from the Field: Jason Diggs ProPeru, Cuzco, Peru

During January, a group of NYU students came to work with us. They helped us at the *Chacan Chico*, a community which we recently started working with. We are trying to turn it into one of our new model communities. This is part of the goal we have set for this coming year: strengthening our development effects.

This means, that in the past we may have done a health campaign in one community or a stove campaign in another, but afterwards we weren't able to return to that particular community for some time, due to the number of communities we were working with. It is great to develop these types of projects for them, but these acts required a follow-up which we were missing.



Jason with the NYU students.



Jason in the Stove Campaign

Starting in 2009, we really want to focus on sustainable development, so we have decided to focus on 4 or 5 communities which will use all of our services. As a first step, we thoroughly analyzed a great number of communities, as the ones to be chosen needed to be highly motivated and interested in our efforts in order to carry out the projects by themselves once our on-site objectives were accomplished.

Chacan Chico is one of the communities we chose, and people within this community have worked really hard so far. We took special measures with this community, as it was the first one for 2009. Among some of these special measures, we spent a day taking fifty of their families to another model community, *Sunco*, so they could participate in talks on development, leadership, organization, and other very useful topics. This effort had very positive results, mainly because of the hard work of the community to-

gether with us and the NYU group. NYU's week

long program went as smoothly as possible, and everyone was really happy with the work we did. We will continue working with *Chacan Chico* and other communities in the *Chacan* area.



Jason with a school group.

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