It's a Small World
Nursing Across the Borders

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• Speaker Disclosures:
  • AACN Speaker Bureau
  • AACN Speaker Bureau
  • Cross County Education Speaker Bureau
It's a Small World…
Midwest Illinois

Peoria •
International Experiences

• Mexico Medical Missions
  – Juarez and Creel – health prevention clinic
  – Ixtlan – providing ambulance supplies and training
  – Zacatecas

• Indonesia
  – Partnership with MAP International
  – Mobile Medical Clinic via boat -- island to island

*As we have therefore opportunity, let us do good unto all men, especially unto them who are of the household of faith.*  
Galatians 6:10
How far away is half way around the world?

• 9500 flight miles to Medan, Indonesia
• 22 hours in the plane --- not counting layovers
• 7 flights and a boat ride to base at Telo Island
• 12 hours time difference – crossed the international date line. Left home Saturday morning, arrived in Medan on Monday morning and Telo on Tuesday morning.
Do you have money in the bank?

Do you have change in your wallet?

Do you have spare change in a dish someplace?

YOU are among the TOP 8 % of the world’s wealthy.


If you have...

• Food in the refrigerator
• Clothes on your back
• A roof over head
• A place to sleep

You are more comfortable than 75% of the world.


Disparity of Wealth

- Half the world’s population lives on less than $2.50 per day.
Poverty

- Poverty is the most important factor associated with preventable death
- Poverty is associated with
  - Poor housing
  - Unsafe drinking water
  - Inadequate sanitation
  - Poor nutrition

10 Facts on the Global Burden of Disease

- 10 Million Children under the age of 5 die each year
  - Almost all these could survive with access to simple and affordable interventions

10 Facts on the Global Burden of Disease

• Cardiovascular Deaths are the leading causes of death in the world
  – At least 80% of deaths from premature CVD and strokes could be prevented through
    • healthy diet
    • regular physical activity
    • avoiding the use of tobacco.


10 Facts on the Global Burden of Disease

• HIV/AIDS is the leading cause of adult deaths in Africa

10 Facts on the Global Burden of Disease

• Population aging is contributing to the rise in cancer and heart disease


• Lung cancer is the most common cause of death from cancer in the world

10 Facts on the Global Burden of Disease

• Complications from pregnancy account for 15% of deaths in women of reproductive age worldwide
  – More than half a million women die from preventable complications during pregnancy and childbirth


• Mental disorders such as depression are among the 20 leading causes of disability worldwide
10 Facts on the Global Burden of Disease

- Hearing loss, vision problems, and mental disorders are the most common causes of disability


10 Facts on the Global Burden of Disease

- Road traffic injuries are expected to rise from **ninth** leading cause of death globally in 2004, to the **fifth** in 2020

10 Facts on the Global Burden of Disease

• Under-nutrition is the underlying cause of death for at least 30% of all children under the age of 5


Deaths Under 5 Years

Most deaths: India, Nigeria, China, Pakistan, DR Congo, Ethiopia (50%)
Highest Mortality Rate: Sierra Leone, Niger, Angola, Afghanistan, Liberia

[Map of deaths with note: Each dot represents 5000 deaths]

Lancet Vol 361 June 28, 2003
10 million children die each year before age 5

That is one every 3 seconds

- Neonatal (<28d) 3.9 million
  - 24% severe infections
  - 29% birth asphyxia
  - 24% prematurity
  - 7% tetanus

One every 3 seconds...

CMAJ 2005; 173(3):279-86
10 million children die each year before age 5
That is one every 3 seconds

- Pneumonia – 2.1 million
- Diarrhea – 2 million
- Malaria – 1 million
- Malnutrition contributes to 53% of deaths

One every 3 seconds…

Risk Factors for Mortality

- 88% of deaths from diarrhea
  - attributed to inadequate water for hygiene
  - unsafe water ingestion
  - inaccessible sanitation
- Being underweight confers additional risk of mortality from infectious diseases

CMAJ 2005; 173(3):279-86

Lancet Vol 361 June 28, 2003
Risk Factors for Mortality

• Non-breast fed babies are 7x’s more like to die from diarrhea/pneumonia than breast fed

United Nations Millennium Development Goals for 2015

• Halving Poverty and Hunger
• Achieving Universal Primary Education and Gender Equality
• Reducing Child Mortality by 2/3
• Reducing Maternal Mortality by 3/4
• Reversing the Spread of HIV/AIDS
• Halving the Proportion of People Without Access to Safe Water
Focus Of Recommendations

- **Newborn Health Care**
  - Skilled birth attendant, prevention of HIV transmission, tetanus protection, early postnatal visit
- **Nutrition**
  - Exclusive breastfeeding, complementary feeds
- **Vaccination**
  - Measles, DPT3, Hib
- **Preventive Measures**
  - Clean water, sanitation, vitamin supplements, chemically treated bednets
- **Case Management**
  - Early appropriate oral rehydration therapy, antibiotics, antimalarials

WHO recommends 20 docs & 500 nurses/100,000; U.S.256/782; Burundi 0.5/1
Can We Help?

- Yes…
- One way is with short term medical missions
- Share our experiences
  - Mexico
  - Indonesia

Challenges to for Medical Missions

- Diseases are different - Tropical diseases
  - Diseases of poverty - more appropriate term
- Medical Resources are minimal
- Cultural Context is different
- Short term medical missions –how effective are they?
- Nursing education is for high tech society not a developing country
How to prepare to successfully serve in a developing country

Health is the Goal…
Not simply providing services

Health care goals:
• Nutrition
• Safe obstetric care
• Infectious disease prevention
• Trauma prevention
• Provision of medical care

Source: INMED International Medicine, 2007
First Evaluate Yourself

- Why are you going?
  - Is it to serve and help them or is it just to fulfill an obligation
- Characteristics:
  - Willing to become part of their culture --- food, bathrooms, sleeping
  - Leave Type A personality at home
- Other team members also need these qualities

Learn about Diseases of Poverty

1. Institute for International Medicine
   www.inmed.us
   - INMED International Medicine course
Resource Books


Recommended Reading


Understand the Culture

American Characteristics that create conflict in developing countries

- Individualism ↔ Humility, Conformity
- Distrust of Authority ↔ Age or title entitles them respect
- Individuality ↔ Emphasis on the nuclear family

Source: INMED International Medicine, 2007
Time

- Time is a commodity in the U.S.
  - Spend time
  - Take time
  - Waste time
- Time in other countries
  - Pass time

Time

- Attempting to stick to a schedule will bring frustration
- Punctuality -- tardiness is norm
- Mañana
Culture and Health

- America: Evidence Based Practice
- Developing Countries
  - May have traditional and supernatural influences
  - Traditional healers

Building Cross Cultural Relationships

- Treat everyone with respect
- Avoid attitudes of cultural superiority
- Prioritize relationships rather than projects
- Ask, if in doubt
  - “Help me understand why”
- A “Smile” is the universal language
- Kindness
Building Cross Cultural Relationships

• Create trust and communicate your sincerity and good will
• Appreciate the unique characteristics of the new culture
• Learn how to effectively function in the midst of them
• Observe understand and adjust to the behavior of the them
• Understand the Do’s and Don’ts of the culture

Assess Community needs and resources

• With each of our medical missions, we will share how we assessed the community and the lessons learned.
We have great aspirations for curing the ills of the world’s poor....

- We can best impact by TEACHING them the basics
  - Wash your hands
  - Eat fruits and vegetables
  - Good sanitation habits
  - Brush your teeth
Teaching

- May listen more to us --- as we are “Americans”
- Be careful of your habits --- Don’t eat candy and we hand out candy
Tips to Minimize Culture Shock

- Know the goal of the journey
- Set realistic expectations:
  - “We set great aspirations for curing the ills of the world’s poor…. And set ourselves up to fail”
- Anticipate the challenge and adventure
- Plan a light initial schedule
- Be prepared for new ideas
- Good humor is essential – laugh at yourself
- Keep a journal
- Keep in contact with friends back home

Source: INMED International Medicine, 2007
**Tips to Minimize Cultural Shock**

- Learn about the host culture in advance
- Get to know the national people
- Reject criticism
- Have an attitude of mercy and lightheartedness

*Source: INMED International Medicine, 2007*

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**Debriefing**

- What were my goals for this international experience?
- Were the goals met? In what ways?
- How could this experience have been better?
- What have I learned about myself in the process?
- How will this experience…
  - Change my personal character?
  - My interaction with others?
  - My life’s plans?

*Source: INMED International Medicine, 2007*
Why we do medical missions

- Opportunity to use nursing skills in a different culture
- Serve others who are underserved
- Share Christ
- Opportunity to travel to see and experience another culture

International Experiences

- Mexico Medical Missions
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It’s a Small World…. Juarez, Mexico

- Nogales
- Magdalena
- Creel
- Ixtlan
- Zacatecas
- Mexico City
- El Paso
- Juarez

Image of Juarez, Mexico with surrounding areas.
Use local physicians
800 – 1000 people per day
Remember Quantity
“Solo Vitaminas”
Name Tags
T-shirts/Uniform

Missions great for children
Juarez Assessment

- AMMAR group—asked for a medical team
- At the time, we were inexperienced so did not do a formal assessment…. Learned lots along the way
- Walk around the community
- Visit homes and grocery store
- Did a survey on one of the early teams to assess health practices and eating habits
- Communicate with local physicians regarding needs and how we can better serve
- Goal of this mission: To provide spiritual outreach via a medical mission

Juarez Lessons Learned

- 30+ medical teams
- Developed a relationship with local church group
- Feeding program, School, child sponsorship
- Have seen improvement in areas and in education level of the coloni
- Work with local physician and clinic
- TEACH, TEACH, TEACH
• Remember the health of your team members
• Water Boys
• Bottled Water

Juarez Challenges

• Would like to see better follow-up at local clinics --- difficulty getting MDs to stay committed
• Difficulty learning health system as it is a short term mission
• Border difficulties with supplies
• “Do we create beggars”
• And yet…. We provide a screening, preventative, and teaching clinic
17 years later

• Another opportunity to start medical clinics in new areas with a new missionary group - Isaiah 55 in Reynosa, MX

Triage – vital signs, blood glucose & teaching
It’s a Small World….Ixtlan, Mexico
Ixtlan Assessment

- PA living in community saw the need
- Email questions
- Carlos had the vision – gave a good assessment
- Mexico regulations for ambulance
- Meet with Carlos to plan
Manikins and other supplies
AED
Ixtlan Lessons Learned

- CPR manikins and Spanish First Aid DVD videos great learning tools
- Time…. “It’s Mexico….” Need to be ready to teach when they are ready.
- Broken down vehicles
- A short ambulance transport ends up with 12 hour run and a sight seeing tour to a cathedral and a stop for burritos
Medical mission resources

- Affordable CPR manikins:  www.cprprompt.com
- American Red Cross First Aid DVD – Spanish and English
- American Heart Association -- Spanish CPR and First Aid materials: http://aha.channing-bete.com
- Hesperian Foundation: Publications and resources for community health – many, including Where there is no Doctor books, can be downloaded free. www.hesperian.org
- International Aid --- Medical equipment and supplies: www.internationalaid.org
- International medicine course offered by: Institute for International Medicine www.inmed.us
- MAP International -- Medical Assistance Programs (medicines and supplies for medical teams): www.map.org

Ixtlan 2008

Transporting a 1 kg (2.2 pound) premie 2 hours to Guadalajara