



AUTHORS

Michelle Temby, BA

TITLE

Volunteers around the world: sustainable practices in healthcare abroad

ABSTRACT

1. As a member of "Volunteers Around the World," I had the opportunity to work in the Dominican Republic (2016) and Panama (2018). I learned protocols for medical work abroad, shadowed doctors, took patient vitals, translated medical prescriptions, and completed intake forms. With the help of my teams, we created sustainable public health projects to improve the health and sanitation of communities. The community we served in Jarabacoa, Dominican Republic, is surrounded by jungle. Marshes and contaminated water are plenty. The communities in Bocas Del Toro, Panama are spread out across different islands and are surrounded by water and mosquitoes. The team and I took early morning boat trips to reach each village. Bocas del Toro is also one of the poorest regions of Panama, since the remote distance from the capital has left the region forgotten by the government. Both communities lacked affordable and easily-accessible healthcare, thus our mission was to provide both medical services with local doctors and public health projects to reduce the need for physicians and medical visits overall.

2. Volunteers Around the World: <https://www.vawglobal.org/projects/> Volunteers Around the World at UC Berkeley: <https://callink.berkeley.edu/organization/volunteersaroundtheworldatberkeley>

3. In the Dominican Republic, 2016: My first team and I taught proper methods of hand-washing to young children in the Dominican Republic. While we spent the days hosting medical clinics across the community, we spent the evenings preparing for our all day educational event for children at a local school. We hosted hundreds of children and explained, in Spanish, the value of hand washing by acting out a play on germs and how to get rid of them with soap. We painted the children's hands to represent dirt and grime, then demonstrated using soap to scrub for 30 seconds or more to remove any disease-causing agents. The children were eager to do it themselves. We also explained that hand soap is affordable, available, and a valuable purchase. In Panama, 2018: With a different team, we demonstrated how to create self-made, natural mosquito repellent. With school children in a rural village on the water, we helped them create their own natural mosquito repellents with community lemons, eucalyptus, and clean water to reduce malaria transmission in communities. Once more, we explained the purpose of this action in Spanish by acting in a play. Then each child followed our demonstrations and made the repellent themselves. We sent them home with paper instructions we created in Spanish to share with their families and friends on how to make more repellent. We allowed time for questions, and advocated that these children share the technique with their community members and families.

4. The children of both communities enjoyed our interactive forms that explained, at a kid-friendly level in their primary language, the need for hand washing to reduce the spread of germs and the value of mosquito-repellent to reduce malaria rates. By sharing at the base of the community (the children), we were able to start our interventions with the youth. The outcome is that these children passed the lessons they learned onto their parents who can continue to spread awareness to other members. We learned that, by simplifying complex issues and starting with the next generation of humans, the community may start to see changes in disease rates.

5. In conclusion, Public Health projects aimed at changing an entire community should start small, at the base of the community; the children. These projects need to be long-lasting even once Western volunteers leave. These solutions must be sustainable, be relatively low-cost, work in tandem with the existing healthcare systems or medicine available to the communities, and deliver basic services that can help train local community members or future volunteers to either perform or follow up on the same interventions. By having hands-on experiences that the community members of interest practice and perform themselves, these interventions are more likely to stick and be implemented in daily life.

FUNDER: Self funded

COMMUNITY PARTNER

Public Health Abroad: Volunteers Around the World in Panama and the Dominican Republic

CATEGORY

Improving Health Equity, Healthcare Access, Service, and Quality,
Promotion of Health Awareness and Healthcare Access Through Education,
Building Capacity Locally and Globally