## **Medical Elective Report**

Name: Meera Lakhani

Elective Location: San Ignacio Community Hospital, Bishop Martin Drive, San Ignacio, Cayo District, Belize
Elective Dates: 16/04/14-28/05/14

I spent my medical elective in San Ignacio Community Hospital in Belize; this hospital primarily provides services in General Medicine, Maternity and delivery and it was a brilliant elective especially for me because I am interested in specialising in Obstetrics and Gynaecology in the future. Although it is a small facility, with only 6 doctors serving a population of 22,114 and a catchment of 22 communities, San Ignacio has a busy outpatient department although there are only a 16 beds available for inpatients. This hospital is part of the Western Regional Health Service in Belize and has contacts with the Western Regional Hospital, which provides additional services in San Ignacio including a paediatrician, general surgeon, and gynaecologist who come to run specialist clinics once a week.

Belize is a beautiful country, which is bordered by Mexico to the north, Guatemala to the west, Honduras to the south and the Caribbean Sea to the east. With a population of around 320,000, Belize has one of the lowest population densities in the world. Its people, however, make up a rich cultural mix of more than 10 diverse cultures including Spanish, Creole, Mayan, Mestino, Garifuna and East Indian. The official language is English, although many others are spoken, such as Spanish and the indigenous languages of Maya Mopan and Ketchi. I think this became quite a big barrier during our elective as a lot of patients who attended did not speak English and with our lack of Spanish skills it became incredibly difficult to take a history, and understand the patient's pain. We had to rely on the help of other doctors for translation although it was quite often difficult for them to have the time to do this with every patient. Our time at the hospital involved attending different clinics, going with the nurses into Santa Elena Town to vaccinate children, seeing births and generally getting involved in the hospital team at San Ignacio. It was an absolutely fantastic experience to see medicine in Belize and an incredible opportunity to get involved in the clinics with all the doctors and nurses helping us. It was very different to medicine in the UK and it became clear that there was a huge lack of resources the staff had to work with and this is due to lack of funding. For example, the largest section of the hospital is the maternity ward and there were two very basic delivery beds in the same room with only one dim light which wasn't really enough; with more funding they would be able to increase the lighting and help increase the quality of care for mothers and their child in labour.

One of the aims of my objectives for this elective was to compare Women's Health in Belize to the UK and see what issues were most prominent in this country such as HIV, teenage pregnancy and contraception awareness and abortion. San Ignacio Community Hospital was extremely keen on promoting breastfeeding. In 2012 this community hospital met the international requirements to be certified as a Mother and Baby friendly hospital- this is a global program sponsored by the World Health Organisation (WHO) and the United Nations Children's Fund (UNICEF) to encourage and recognise hospitals that offer an optimal level of care for infant feeding. San Ignacio promoted this heavily around the hospital with posters on almost every wall to show mothers that breastfed infants have a decreased risk of diarrhoea.

respiratory, ear infections and allergic skin disorders among others. The hospital also promoted safe sex around the hospital with leaflets available on contraception, posters showing how to use barrier contraceptive methods such as condoms correctly. HIV is a growing problem in Belize because of the lack of awareness in the population on safe sex, despite the hospital's efforts to increase this. There was also free HIV testing clinics Monday-Friday every week at the hospital. With an adult HIV/AIDS prevalence estimated as high as 3%, Belize is one of the most affected countries in the Central American region. From my time at the hospital, it seemed that transmission of HIV was mainly fueled by poverty, low levels of condom use and cultural attitudes that promote multiple sexual partnerships for men.

My other objective was to understand the healthcare system in Belize, which I learnt, is a mixed one of public and private. The government subsidises a significant proportion of health care for the average Belizean however there are a limited number of hospitals with inpatient facilities (eight government and five private). As there is a shortage of doctors and nurses in Belize, there are agreements with the governments of Cuba and Nigeria for the provision of healthcare professionals. In most communities, there are polyclinics, which serve as the first point of contact for patients. Appointments are allocated first thing in the morning. Those who do not arrive early enough to obtain an appointment usually wait until the end of the clinic hoping to be seen. This system is very different to that in the UK.

Overall, I have had an amazing time working in Belize amongst great healthcare professionals, patients and their families and I feel that working in this country helped me to appreciate the structure of the healthcare system and its differences to the UK. For example, before visiting Belize, I did not fully appreciate the availability of investigations and treatment in the UK and it was interesting to compare this. The availability of drugs is so limited in Belize as the government has to buy all the drugs from outside the country so the drug choice is extremely limited. I also saw unusual conditions such as malaria, Kwashiorkor, parasitic infections and even snake bites for which they have an abundance of antidotes, as it is so common. Even some of the maternity cases were extremely unusual; for example, one lady came in with abdominal pain and it was only when she was in labour and 4cm dilated that anyone knew (including herself!) that she was pregnant and having a baby. She had a healthy 7lb baby boy and they were both healthy and home within 2 days! It was a very interesting and exciting to see how the doctors and patient herself and her family handled this!

Visiting Belize helped me appreciate a new culture and understand the problems with communication that can arise as a result of this. I feel that this will help me in the future, as I will be able to communicate more effectively with people from different cultural backgrounds. An elective is an opportunity to explore parts of medicine. These experiences present a contrast to those of our own home grown views, which help us grow and develop on many levels. The experiences gained help us mould our future and as a direct result I can see Obstetrics and Gynaecology being a real possibility in mine.

1