

# [How i first arriving in haiti](https://assignbuster.com/how-i-first-arriving-in-haiti/)

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Self-reflection essay I remember first arriving in Haiti. The blast of heat stepping off the plane, cramming onto a mini school bus, and staring out the windows at the outskirts of Cap Haitian and the rural road to Milot. " I'm in Haiti... " , I kept telling myself, trying to absorb all that I was seeing. The landscape, the way people live here, the norms of thisculturewere so different from anything I had seen before. We walked the streets of Milot that first day and I strongly recall the uncomfortable feeling of all eyes on us, the trash and the pigs in the rivers, and the children crying, " Blan!

Blan! " as we walked past. It's funny what happens after you've been in a place for a while. It ceases to be constantly foreign and overwhelming. I no longer see only abjectpovertyout the windows or while we walk through villages. I notice the details, walls painted bright blue, yellow, red, the heart design carved out of brick that make up the windows of every home, the bright red hibiscus flowers and cacti that form walls around eachfamilyplot of land. When I walk through Milot now I expect people to stare, why wouldn't they?

I say " bonjou" to them and smile, and get a " bonjou" and a smile back. I look for the goat babies we pass on our runs, and am always comforted by the mountains surrounding this little town. Haiti is poor, yes, and I am reminded of that every day, but there is so much more to it than that. I wrote the above two paragraphs in my blog a little over a month into my trip to Haiti this summer. They sum up my feeling of becoming part of a place, as much as an American medical student can become part of a small Haitian town in 7 weeks. I had a truly amazing, fulfilling, and personally enriching experience.

My first learning objective was, " to ain confidence in applying the clinical skills I have learned thus far, through working with patients every day. " I became very comfortable working through an interpreter, as this was the only way to communicate with every patient I interacted with. I had a lot of practice in conducting patient interviews, performing a targeted physical exam, and taking vitals. This opportunity was an amazing way to remember and fine tune all the skills I learned in medical interviewing, physical diagnosis, and CAP.

Interviewing patients who speak English will seem a lot easier in comparison. My second learning objective was, " to learn how to ask publichealthquestions and carry out meaningful research to improve the health of a population. " About half of our time in Haiti was dedicated to conducting a public health project. This was an incrediblelearning experienceeven before leaving the US. Three of us and our physician mentor applied for three IRB approvals as a group. That required a lot of research, teamwork, and delegation.

We were able to get approval before leaving for Haiti, which let us hit the ground running. We spent about 2 days a week in small illages around Milot, working with translators and going door to door tointerviewwomen, or meeting large groups of midwives in village clinics. This experience was a true test of my patience and ability to put my type A, " get things done now'personalityaside. Vans were always late to pick us up, the translators weren't high quality, and there were myriad miscommunications between us and the volunteer coordinator.

Nevertheless, we managed to ge interviews conducted. I strongly believe that as a result of our research, positive developments will happen in Milot. This was a rewarding and challenging experience and even more educational than I thought it would be going into it. My third learning objective was, " to strengthen my teamwork skills by working closely and effectively with other medical professionals. " I think my teamwork skills were honed best through working with two other students on our public health project.

We all learned how to compromise, how to put our opinions forward effectively, and how to cede to other's opinions. We spent a lot of time and mental energy with each other without ever getting angry. There were times when we'd get frustrated with each other, but we were able to talk about it and move on. All seven of us students spent 2417 with each other for seven weeks and our collective ability to work together, to pick each other up when we were down, and to have fun together was like nothing IVe ever experienced.

My final learning objective was, " to improve mycommunicationskills and cultural competence while working with patients and other health care professionals with varied backgrounds and beliefs. " Of all my learning questions, this was perhaps the most important and the most difficult to successfully achieve. It will be a work in progress for my entirecareer, which is something I didn't really nderstand until this trip. It's not easy to put oneself, with one's own background, beliefs, and culturally created personality into another's shoes completely.

It's also difficult to understand a culture so far removed from your own. Although I say it's difficult, I spent every single day in Haiti trying to improve my ability to do so. From working with doctors who often worked at a pace that made it seem as though they didn't care about their patients, to waiting for 3 hours for a late ride to a village, to the miscommunications that occurred frequently, every day was a conscious effort to nderstand the culture in which I found myself.

Finally, I always heard about how hard it is to deal with the dysfunctional systems in third world countries, and I thought I understood. It's a whole different level of understanding when you see what that means on an individual human level in the eyes of the patients in front of you. And you are helpless to change the system. My time in Haiti I will remember, learn from, and be glad I did for the rest of my life. The things I learned, the relationships I made, and the experiences I had in those seven weeks would take a book to write down and do Justice to.