

Katie Lynch

Honors Enrichment Report



I recently returned from Guatemala, and I wanted to let you all know about my experience briefly. I traveled to Guatemala for a period of 7 weeks from mid-June until the very beginning of August. I was living just outside of Antigua, Guatemala, which is a World Heritage Site. During the week, I would travel to Chimaltenango, Guatemala, to volunteer in the Behrhorst Medical Clinic. Chimaltenango was a 40 minute bus-ride away, and I had the opportunity to travel by chicken-bus with many agricultural workers and women going to market.

At the clinic, I worked in Women's Health. For the first few hours of the morning, I would assist nurses in taking the blood pressure, temperature, and weight of incoming patients. After that, I had the opportunity to listen in on consultations with an Internal Specialist, Gastroenterologist, and Gynecologist. The majority of the patient population were Indigenous Maya, but there were also a number of Ladina women at the clinic. The Guatemalan population itself is 60% Indigenous, but most Indigenous live in the more remote areas of the country where there is no access to healthcare. In the afternoons, I would assist nurses in making bandages and updating records on the computer.

The Behrhorst Clinic was founded just over 40 years ago by an American doctor named Carroll Behrhorst. Dr. Behrhorst was specifically interested in providing healthcare to underserved populations, and for this reason, he organized his clinic to meet the needs of the Maya population. He created an atmosphere that was welcoming and comfortable, one in which patients could have their entire family stay with them and families were provided with space for cooking and laundry. I was extremely impressed with the Behrhorst message after reading "A New Dawn in Guatemala". The motivations of the clinic were the reason why I chose to become involved.

Dr. Behrhorst died in 1990, and since then the clinic has undergone certain changes. While the overall message is basically the same, healthcare is no longer geared towards just the underserved. The Behrhorst Foundation currently works in sustainable development programs and also interacts with the Guatemalan government in a program called SIAS. The government cannot afford to provide healthcare to over half of the population and it has asked financially stable clinics, like the Behrhorst Clinic, to join in a partnership. In this partnership, Behrhorst pays for about 60 additional staff members who travel daily to rural locations and administer vaccines, vitamin supplements, and general healthcare to people who normally do not have access.

I had the opportunity to travel with the SIAS representative one day, and I was astounded by the living conditions of people in the country. There was generally a poor water source located several miles away that women and children had to carry water from daily. The men worked long hours for less than \$5/day, while the women did not leave the home except when necessary. Over 80% of the Indigenous population is illiterate, so the healthcare instructions were all represented by pictures. In the area where I traveled, there was one doctor for a population of 20,000, and even though SIAS was helping there is a lot of progress yet to be made.

Overall I had a wonderful experience. I was able to become integrated in the culture through travel, work, and by attempting the daily activities of cooking, cleaning, and laundry Guatemalan-style. Thank you so much for your assistance!

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