Thank You to the Kaimas Foundation!

Written by Malak Akl

This past year, the Kaimas Foundation graciously made a donation to the UACOM Global & Border program. As part of this program, medical students travel to different locations around the world to complete a global health rotation. Some of the funds for covering these travel expenses come from generous donors who support the UACOM’s global health mission. We greatly appreciate the Kaimas Foundation for supporting this program, and we look forward to our coming travels once the COVID19 pandemic travel restrictions are lifted. The Kaimas Foundation is a private family foundation incorporated in Colorado Springs, Colorado. They strongly support education, health, and the empowerment of women. Their donations have an international impact that aim to make a genuine difference in our world. Once again, thank you to the Kaimas Foundation! We look forward to our global health rotations, and you are helping to make that a reality for us.
Sometimes, especially in the midst of a pandemic, Global Health can be surprisingly local.

Our Summer Abroad in Arizona
Written by Daniel Sadoway, Isabella Blum, Shauna Bratton, and Connor Babbush

Rural Health Rotations

In order to model responsible behavior during the pandemic, a coalition of medical schools agreed to ban away rotations during the summer of 2021. Although this made global health experiences more difficult, it also opened up new opportunities to redefine how we approach global health. Thus several students completed online externships and three rising second year students at the University of Arizona traveled to reservations across Arizona, from Hopi, to Navajo, to Tohono O’odham, to demonstrate that global health skills can be learned right here at home. Here is one such story by Connor Babbush, MS2:

This summer I did an emergency medicine rotation at the Tséhootsooi Medical Center on the Navajo Reservation in Fort Defiance, AZ. Though traveling abroad was not an option for us, working on the reservation was an invaluable experience as I worked with a population experiencing significant socioeconomic barriers to health and wellbeing. With a population of just over 300,000, the Navajo Nation is the largest American Indian tribe, though roughly 30% of individuals live without running water or electricity, and ~44% of the population lives below the poverty line (3x the national rate). For this reason, it was especially important to consider patients’ living conditions and other barriers to health when developing care plans.

Transportation to the hospital also proved to be a significant barrier for many individuals, further confounded by an understaffed EMS structure with just one ambulance serving Fort Defiance and surrounding communities during the night. Several elderly patients only spoke Navajo, so it was particularly important to ensure there were no lapses in communication while using a translator. Cultural considerations were also necessary in several circumstances such as discussing death or negative health information. Living on the reservation gave me an incredible look into the friendly, rich, and unique Navajo community that few get the opportunity to experience. I gained a deeper understanding of how rural medicine is put into practice and look forward to utilizing these newfound skills abroad during a global health rotation in my fourth year.

I chose to 'visit' Uganda for my virtual program this summer through FIMRC. For two weeks, I learned about the rural communities that are served by the Project Bududa clinic funded by FIMRC near Kampala, Uganda. Some of the most prevalent health issues faced by the 40K inhabitants that the program serves are malaria, HIV, GI and respiratory infections. As a volunteer, I heard from FIMRC reps who have been on-site experiencing the day-to-day work in the clinic and the changes that COVID has brought over the last year. We were given a presentation on what living with a host family and spending a day in the community is like, which I appreciated! I created an infographic to be used as CME for clinicians at Project Bududa on HIV infection prevention, testing protocols, and counseling. I hope to visit Kampala one day to meet the community members in person and contribute to the medical care and impactful programs being implemented there. (Shauna Bratton, MS2)

I completed a virtual Global Health Volunteer Experience and Observation with FIMRC and chose a clinic in Nicaragua because I have worked there before. However, during this experience I would be learning about a different region of the country. Due to new government regulations in Nicaragua regarding NGOs, the FIMRC clinic in Limón, Nicaragua had to abruptly shut down. I therefore shifted my plans and got to virtually work with Project Alajuelita in Costa Rica, a clinic that provides pharmacy services and primary care that include psychology services. I got to hone my medical Spanish translation and interpretation skills, familiarize myself with the intricacies of tele-medicine practice, and participate in psychology consults which I have not yet had the privilege of doing thus far in my medical education. To contribute to the clinic, I created infographics in both English and Spanish to be sent out via WhatsApp to patients of the clinic. I am also writing an editorial about the new laws in Nicaragua that directly affect organizations that provide health care in rural areas. (Isabella Blum, MS2)

Foundation for International Medical Relief of Children (FIMRC)
Virtual Programs
G20 To Push for More Vaccine Sharing, but no Firm Commitment

As COVID-19 resurges, the delta variant, which surfaced in India, highlights the importance of fighting the COVID-19 pandemic beyond our borders. The World Health Organization’s vaccine sharing program, COVAX, has delivered 100 million doses to 130 countries, and hundreds of millions more have been pledged by wealthy nations. Yet the WHO says many more are needed. With a goal of delivering 2 billion doses by the end of 2021, COVAX’s targets are simultaneously ambitious and insufficient for achieving worldwide herd immunity.

Read the full Reuters article here

The Lancet’s Annual Global Burden of Disease Study

The GBD study offers a powerful resource to understand the changing health challenges facing people across the world in the 21st century. Led by the Institute for Health Metrics and Evaluation (IHME), the GBD study is the most comprehensive worldwide observational epidemiological study to date. By tracking progress within and between countries GBD provides an important tool to inform clinicians, researchers, and policy makers, promote accountability, and improve lives worldwide.

Read the full 2020 GBD Study Here
Viruses don’t pay attention to borders, so neither do we

Spotlight - Mobile Health

Written by Kinza Ahmed

The Mobile Health Program is a mobile clinic that goes out into the community to serve low income and mostly uninsured patients. For the past few months, the clinic has been hosting COVID vaccination events across rural cities throughout Arizona, many of which have been held at the Mexican border. These events allow those who do not have documents to cross the border and come to the port to get a COVID-19 vaccine. Through these efforts, thousands of Mexican nationals, first responders, and maquiladoras employees have been able to get their vaccines.

How You Can Help:

To donate to global health, go to https://give.uafoundation.org/com-tuc-family-community. In the Your Gift section, for "I would like to support," choose International Health Teaching Program from the pull-down menu.