

Summary of Guatemala trip May 29 – June 2, 2009

1. Meeting with Bio and Derida Ochaeta.

An effort was made to improve the relationship and to accept each other's differences while still acknowledging our common efforts. We invited them to dinner which they accepted. Bio refused to have any conversation about the issue of working together and Derida again made it clear that this is a topic for which there is no resolution so we will no longer be able to partner in the future.

Derida explained that she had expected that we would no longer work in the Peten and that she was now in an uncomfortable situation since so many people had connected us together. She affirmed that their ministry is totally outside of any efforts that we are doing in Pueblo Nuevo and the surrounding villages so she was agreeable to us working there. She knew that we had expanded our relationship with Ischmael and that he was aware of the issue. She had discussed it with him and she feels that Ischmael is only willing to work with us because of the added income.

We told them that we had collected books for the school in Colonia Tikal. Again, because of her discomfort in being associated with us, she did not really react to this and did not want to be associated with distribution of the books.

She asked that we have a notarized letter signed by herself, Bio, Randy and Anne stating what was being retrieved from the clinic. She stated that none of the gynecology equipment/supplies/medications were being used and her only concern with having them removed was how it would look to the people there. She stated that she and Bio will be building a house soon and she did not want there to be any perception that they had sold any of the equipment.

In regard to the other medications, she stated that Dr. Valle rarely used most of them and this was confirmed by Marina and Elena. I told her that if the meds were being used, we would be happy to leave them there as the real intent was to use them to provide needed treatment for the sick. She acknowledged that many were nearing expiration and would rarely be used. We decided that Marina and Elena would keep whatever meds they thought would be useful. The nurses were unaware of the issue and were very helpful in dividing the medications as they realized they would be used in the villages to help the poor there.

Bio, Derida and Albana came to the airport to say good-bye and clearly an attempt was made on both sides to be cordial.

2. Storage Unit

Although we made several attempts to find a place where the equipment could be stored for free, this was impossible. We therefore found a storage unit (12x12?) to keep the supplies. It is clean, dry, near the bus station and costs \$60 per month. It is secure and requires a key to get through the gate and to get into the room. Some concern about heat given the medications but it seemed satisfactory for now. Rental is on a month-by-month basis.

3. Pueblo Nuevo

We spent a day there that was incredibly joyful! In contrast to the reception we received 2 years ago, we are now clearly trusted and welcomed. We brought 60 bags of the "Kids

Against Hunger” food (free of charge to us). We used 25 bags to make lunch for the entire village. The food was cooked in one of the kitchens on an open fire with the villagers. We also bought 25 pineapples and disposable plates and spoons. EVERYONE loved the food and the kids said it was the best thing they had ever eaten.

The preparation of the meal gave us numerous opportunities to do teaching in many areas of health and the food itself also gave us chances to discuss nutrition in general. At the end of the meal, Ishmael talked with the leaders and they decided that a community garden should be established.

We brought the “left-over” books that Sr. Pam had instructed to use at our discretion. The kids reacted with truly “wild enthusiasm”. They fought over who could read and one of the dads clapped when his son read out loud. There was a teacher there from a neighboring village. He explained that the school has absolutely NO supplies and any would be welcome. He was very excited about the idea of an American teacher helping them with their skills. He was the teacher for the 1st and 2nd grade and was clearly unable to read much above that level.

Latrines are continuing to be worked on. 10 are in varying levels of completion. The children have not been receiving the vitamins although they did receive the deworming pills during Dr. Coral’s trip.

4. Concern America

Met with Janette (their coordinator in Peten – she is married with 2 young children. She is fluent in Spanish, English and Quechi), Thomas (the coordinator for Concern America in Central America), Dr. Kate (the family practice doctor who will be living in Naranjo for at least the next 3 years with her 6 year old daughter) and Dr. Cliff O’Callahan (the American pediatrician who lived in Peten from 1996-99 and started the medical outreach of Concern America in the Peten. He is now on the board of the International Division of the American Acad of Pediatrics).

Concern’s major focus in the Peten is to train and work with Health Promoters. They have an excellent program that has trained approximately 150 promoters. They acknowledge that the education and expertise of the promoters is widely different. Kate will be working side-by side with the promoters in Naranjo. They also have a 3 week “emersion” program where American medical students come and work in the government hospital, work with the promoters and actually live with the local people. Concern rarely works with short term medical groups but are willing to work with us because of our familiarity with the area and the fact that we may be able to mutually meet each other’s needs.

They have a cervical cancer screening program which could definitely use help and we see this as an area where we both might learn from each other. It was also clear that our med students could learn a great deal from them.

They are clearly a “secular” organization although they work with the Catholic Church and other religious organizations in the past.

We decided to share some of the medications with Dr. Kate as they will definitely be used and are much needed. Many will expire within the year and with our current program, we were concerned that they would never be used.

We discussed with Dr. O’Callahan the possibility of working in the government hospital in Sayache where he has been developing a relationship over the last several years. He

will introduce us to their administrator during our trip in July. We are hoping that this will be a place where we can do surgeries in the near future.

5. Ischmael – Randy and I had a long talk with Ischmael about the possibility him working for us. He was very receptive to it for numerous reasons. He indicated that he has great respect for the work he has seen our groups doing and he is very interested in working to help the people in these particular villages as they are near his home village. He described 3 years where he came to the U.S. illegally in order to pay back a debt he incurred when one of his children had become ill. The description of his dangerous travels to the U.S. were shocking.

He understands that our board would have to approve hiring him and that his job expectations would be clearly spelled out.

Because of all the current issues and needs to prepare for the July trip, we decided to pay him 2 months salary plus the costs incurred for his bus trips to Pueblo Nuevo. We settled on \$250 a month which would include 1-2 trips per week to Pueblo Nuevo.

Job expectations include:

1. Determining the best method to insure that the vitamins would reach every child in Pueblo Nuevo daily. Distribution of the vitamins monthly
2. Talking with the school director and teachers about how best to serve the school on this trip.
3. Monitoring of the latrine building.
4. Education of the people regarding sanitation, nutrition
5. Getting the word out to the surrounding villages that we will be having a women's health clinic during the first week of the trip. Contact the Cuban doctor in the village of Mango (where there is a small clinic) to see if he has interest in our working with him during the trip.
6. Contact the health minister so we can meet him.