



Pre-Medicine Internship Program

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From Uncertainty to Unshakable Purpose: How My Experience in Kenya Confirmed My Path in Medicine

All of my life I have known that I was interested in working in healthcare. There has never been anything else I have ever considered doing. In recent months I had started doubting, for the first time in my life, if healthcare was really the right career path for me as a person. When I signed up for International Medical Aid, I was hoping for some clarity into whether I was making the right career decision or if I needed to start going down a different path. I also looked forward to receiving a different view on healthcare than what can be seen in the United States. I got everything I hoped for out of this trip and so much more than I could have ever imagined.

When I walked out of the airport for the first time after a total of over 24 hours of traveling, I was immediately thrown into Africa's culture and everything it has to offer. I had known that this whole experience would be vastly different than anything I had experienced in America, but some aspects caught me off guard more than others. On the 30 min drive back from the airport, I could not keep my eyes from wandering all over outside and witnessing all of the differences that were already relevant. There were some obvious differences like driving on the opposite side of the road, but also others that I was not exactly expecting. One of these differences includes the amount of elderly and children that you would catch in the middle of the road tapping on your windows trying to get anything possible to be able to help their families out. There were many experiences like this and every one left me feeling so incredibly sad about the fact that we would not be able to help everyone.

Walking into the hospital on that first day with Doctor Shazim was an experience that I cannot even begin to explain. I have spent countless hours in U.S. hospitals whether it was for volunteering, visiting new babies, or being there for my relatives during surgery. Nothing could have prepared me for how different Coast General Teaching and Referral Hospital would be from any other hospital I have ever seen. Of course I knew that there would be some differences. That is always expected when visiting somewhere new. What I was not prepared for were the amount of mosquitos I would see in the operating room, the monkeys I would witness stealing bread from toddlers in the pediatric observation ward, and the cats I would see walking around labor and delivery. Obviously given the fact that it was an open air hospital, these things were not very easily preventable. That still did not stop them from coming as a complete shock to me.

Before we even arrived in Mombasa, we were made aware through various emails that Coast General was in the middle of a physician's strike. Thankfully by the time my week got there, the strike was coming to an end. This did not mean that there were not huge repercussions. The physicians at the

hospital were on strike for weeks and weeks because their pay had been cut back so much. They were not receiving enough pay for the amount of work they were doing, so it was acceptable for them to fight for their right for higher pay. The problem was that with this being the only public hospital in the area there were tons of patients who were suffering from the lack of physicians and did not just have the option to go to a different hospital. This left a lot of families suffering and struggling trying to figure out how to care for the ones they loved. Even after the strike was over, the hospital was still trying to catch up on all of the patients and surgeries that could not be taken care of over the strike. We witnessed the struggles of them trying to figure out which patient would be able to undergo their necessary procedures each and every day due to the lack of working anesthesiologists.

On that first Monday, I was starting in OB GYN with three other girls that I had just met a couple days earlier. I was so excited for what was to come on the first day, but I was also extremely nervous for what the day might consist of. Within an hour of being in the hospital we found ourselves in the surgical theater for an emergency c-section. This was the first surgery I had ever had the opportunity to witness in person, and I was so unsure of what to expect. There was so much adrenaline and as the procedure continued I was made very aware of how different and difficult the working conditions were. Obviously as an American I am not used to the heat, but there was also the aspect of 20 doctors, nurses, and students being packed into a very small operating room. The procedure ended up taking about two hours. As the adrenaline wore off and the heat, lack of water, and standing quite a while began to hit me, I realized that I did not feel so well. Within 10 seconds of that wave hitting me, I was passed out in a chair where my three brand new friends thankfully had caught me. Thanks to my friends and the wonderful nurses that wheeled me out of the operating room and gave me some water, I was all good to be back with the doctors doing rounds just a little while later. What that experience made me realize, as someone who had not been feeling well laying in a stretcher trying to get better in the high heat and humidity, was just how hard it would be to be both a doctor or a patient in that hospital.

With Africa having both 34 million men and women suffering from HIV and also a significant portion of the world's tuberculosis burden, there were many encounters that gave me a unique learning experience and a unique outlook on the upsetting differences in healthcare abilities. According to the World Health Organization (WHO) Regional Office for Africa, tuberculosis remains a major health challenge: in 2022, an estimated 424,000 people died from TB in the African region, and over 33% of all global TB deaths occur here. People living with HIV are 20 to 30 times more likely to develop active TB disease, and in 2022, 26% of HIV deaths were due to TB. I had known about both HIV and tuberculosis prior to this experience, but I had never had such hands-on and in-person experience with its diagnosis process and effect on the patients. While I was in pediatrics, I met a 2 year old patient that was living with HIV. His mother had HIV and thankfully was put on medicine to help her symptoms at the hospital's Comprehensive Care Center. Sadly, while the mother was pregnant she started

experiencing extreme morning sickness she attributed to the medicine, so she decided to stop taking her meds. She thought that seemed like the only choice for her and the only way she could make it work. This resulted in her baby being diagnosed with HIV when it was born. When I was in the POW, the baby was in the hospital dealing with the repercussions of his diagnosis including extreme weight loss and malnourishment. As the hospital staff made us aware of, 1 in 4 people in the area are living with HIV. As sad as it was for me to hear that this mother and her son were living with HIV, there are so many others in the same situation as them. I was thankful to hear about Coast General's amazing CCC clinic where they help out so many families and also try to take away the stigma regarding HIV.

One thing you hear a lot about regarding Africa is the problems regarding the water. In Mombasa there is not a lack of water, the problem is that there is a lack of access to drinkable tap water. In the residence, we brushed our teeth, cooked, and drank from the gallon water bottle kept in the kitchen. For other families that had the money, they were able to pay for drinkable water similar to us, and they could just buy water bottles from the store and at restaurants. For other families that are struggling with money, buying water bottles all of the time is just not something that they are financially capable of doing. Since Coast General is a public hospital, a lot of the people that we saw there were in the lower economic classes. According to UNICEF, there are approximately 779 million people in Africa lacking basic sanitation services. This makes them unable to have access to clean drinkable water and also other sanitation services regarding hygiene. In pediatrics there were a large number of babies that were hospitalized for malnourishment. There are plenty of reasons that this could be caused, but there was one specific case that stuck with me. There was a one-year old baby boy that was in the pediatric open ward for the entirety of my week spent in pediatrics. By the end of the week, he had finally started to recover, and his food and liquid intake were both up due to his gastrointestinal issues being resolved. I was very excited for this family as I had seen the recovery that this baby was experiencing first hand. The other interns and I talked to the clinical officer intern that we had been following around for the week, and she made us aware that the family was homeless and living on the streets. This meant that they did not have consistent access to clean water. The reason that the baby was experiencing issues from malnourishment was because of the water and its effects on the babies GI tract. The COI told us that, sadly, as long as the baby was still drinking the contaminated water he would probably keep on continuously being hospitalized on and off for a while because his little body could not tolerate it. The hospital had done all they can to make the baby better while hospitalized, but there is nothing they can do for the baby while it is not in their direct care.

As the weeks went on, my experiences with both the doctors and nurses in the hospitals and also International Medical Aid's wonderful staff only made me fall in love with Mombasa and Africa more and more. I learned so much about myself through this process. It has shown me that being in healthcare really is where I want to be, and I truly cannot imagine doing anything else with my life.

Being able to help people when they really need it is such a fulfilling process, and I really want to be able to do that for others. Following patients throughout their treatment and being able to see them as they make their way through their recovery process is such a unique and life changing experience. To be the person that is there to help them through what may be one of the worst days of their life. I can never thank International Medical Aid and Coast General Teaching and Referral Hospital enough for such an enlightening and life-changing experience.

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