Fall 2011 Global Health Lecture Series



12:00 Noon CT ACB 120

- Wednesday
 September 21
 Randy Gallaway of Partners in Development
 Worldwide
- Wednesday
 October 5
 Reed Flora, MS II
 PLFSOM
- Wednesday
 October 19
 Sergio Alvarado,
 MD, Resident
 Instructor, Family
 Medicine, PLFSOM
- Wednesday
 November 2
 Bolanle Olaniran,
 PhD, Professor,
 Department of
 Communication
 Services, TTU
- Wednesday
 November 16
 Tom McGovern,
 EdD, Professor,
 Psychiatry
- Wednesday
 December 7
 Student National
 Medical Association (SNMA) panel
 presentation

Global Health Outreach Makes Return Mission to Guatemala



Since 2009, SOP Assistant Professors Drs. Shawna King and Niambi Horton have spent part of their

summers introducing SOP students to mission work through an elective clerkship program they put together known as the Global Health Outreach (GHO). This year they traveled to Guatemala with Lubbock P4s Shawna Thomas Nunez and Matt Cox and Dallas/Fort Worth P4s Joshua Jacobs, Merlyn Joseph, Lauren Miller and Jackie Petty.

The GHO mission is to expose students to populations in which barriers to health care exist and to learn how pharmacists can help overcome these barriers. Students are expected to provide pharmaceutical care in a setting with limited resources and to patients with different cultural backgrounds and languages. The students also learn the role of pharmacists on multi-disciplinary health care teams and how to communicate effectively.

Guatemala was also the location of the 2010 GHO clerkship. However, Horton said this



year's trip varied a great deal from that of the previous year.

"None of the places we visited this year were places that Dr. King or myself had been before, so it was a totally new experience," Horton said. "The places we traveled to were more rural and remote than before. There was also more poverty and virtually no access to health care aside from self-medication with prescription drugs from the local pharmacies."

The rotation began during Block 1 and included four weeks of preparation and two weeks in Guatemala. The group provided services to more than 400 people in Guatemala City, Cobàn, Cahabòn and Amatitlàn, a total that does not include those they saw at hospitals and clinics. During their limited free time they also visited Antigua and Semuc Champey.



"The climate was different this year as well," Horton said. "Last year it was much more tem-

perate—we were in the highlands of Guatemala and this year we were in much more tropical areas with high temperatures and high humidity. The accommodations were more humble than last year, but still very nice."

Because prescriptions are not required for most drugs in Guatemala, including antibiotics and medications for chronic diseases, Horton said the students were exposed to some of the non-traditional ways of practicing pharmacy in a different culture and country. She believes these types of experiences help the students grow as future pharmacists and as people.

"During this rotation the students learn about and experience other cultures and see firsthand how other countries' handle health care issues," Horton said. "They have the opportunity to make a profound impact on others that will have positive long-term effects on both the students and the people we help. The students learn what it means to be citizens of the world, to truly see firsthand that we are all connected and to see beyond our self-centered culture to experience different—and sometimes better—ways of doing things."

Horton said the GHO experience is special to her because it combines the things about which she is passionate: serving others through mission work and teaching. She said she was "awestruck" by the 2011 mission because of the way she, King and the SOP students were able to help so many patients despite language, cultural and economic barriers.

"I'm not sure my explanation of what it means to

Continued at the bottom of page 7.
This article originally appeared in
From the Dean's Desk, 2011—Issue III

Available from the OIA Library

The following resources are available for check-out:

Book

The Immortal Life of Henrietta Lacks by Rebecca Skloot

Her name was Henrietta Lacks, but scientists know her as HeLa. She was a poor black tobacco farmer whose cells-taken without her knowledge in 1951-became one of the most important tools in medicine, vital for developing the polio vaccine, cloning, gene mapping, and more. Henrietta's cells have been bought and sold by the billions, yet she remains virtually unknown, and her family can't afford health insurance. This phenomenal New York Times bestseller tells a riveting story of the collision between ethics, race, and medicine; of scientific discovery and faith healing; and of a daughter consumed with questions about the mother she never knew.

Movie

Living in Emergency

Set in war-torn Congo and Liberia, Living in Emergency interweaves the stories of four volunteers with Doctors Without Borders / Médecins Sans Frontières (MSF) as they struggle to provide emergency medical care under the most extreme conditions. Amidst the chaos of their surroundings, each volunteer must confront the severe challenges of the work, the tough choices, and test the limits of their own idealism.

To view a complete selection of books and movies available, visit our website at ttuhsc.edu/cima/library

Beyond Borders, Beyond Measure



The Office of International Affairs cordially invites you to attend an exhibit of photographs taken by

TTUHSC students engaged in service & study abroad.

Friday, October 7
6:00—9:00 pm
Louise Hopkins
Underwood Center
for the Arts
Icehouse
Gallery
511 Ave J.
Come and go.

Featuring photographs taken by Katy Britten, Erin Cawley, Jason Chandrapal, Bree Goodwin, Greg Hannabas, Kourtnee Lindgren, Andrew Matthys, Michelle McClelland, Siobhan Shahan, and Chris Trautman.

All proceeds from the sale of photographs will go towards scholarships for TTUHSC students participating in international programs and activities.



The Suicide Tourist

A movie review by Michelle McClelland

"I'm not tired of living," Craig sighs. "I'm tired of the disease, but I'm not tired of living. And I still enjoy it enough that I'd like to continue. But the thing is that I really can't."

Craig Ewert and his wife Mary are a heartbreakingly endearing couple. They discuss their lives together; the hard times early in their marriage and the great times as they grew in their relationship. Photos are shown, children are described. The only problem, the elephant in the room really, is Craig's overwhelming disability due to Lou Gehrig's disease (ALS), a degenerative motor neuron disease. Craig, a former computer science professor, is slowly losing the ability to accomplish basic movements by himself, becoming more and more dependent on Mary. Eventually, he'll lose the ability to even breathe or swallow.

But Craig and Mary have a plan. They've discussed it thoroughly, something viewers witness early in the film, as well as their relationship and commitment to each other.

The Ewerts are the subjects of *The Suicide Tourist*, a 2007 documentary by John Zaritzky that was picked up by Frontline in 2010 as a short film. It follows Craig and Mary as they travel to Sweden for help in the most difficult decision of their marriage, willingly ending Craig's life.

After 37 years of marriage, the two of them have

come to Sweden to meet with a group known as Dignitas. Dignitas specializes in helping people legally end their own lives. The director and crew speak with Ludwig Minelli, the founder of Dignitas, about the implications of promoting elective suicide and the arguments of opponents, but the film avoids the underlying moral/ethical argument and instead, follows the Ewert's on their journey. Viewers accompany them to their meetings with a lawyer, a social worker, and Dignitas staff, and a final Skype call to their children.

In the end, it is understood that Craig alone must make the final decision as he has to be fully capable of drinking (independent of help) the liquid that will end his life, a feat that would be impossible to undertake in the later stages of his disease. As he listens to Beethoven, with his wife at his side, he chooses voluntary suicide over what he considers to be a massive burden on his family and a slow and tormenting death. The film highlights the final moments of a man's life, how Craig made his decision, the strength of both Craig and Mary, and in the end, Mary's journey home alone.

The Suicide Tourist is gut wrenching and leaves a lasting impression. I walked away with insight into the plight of families burdened with degenerative disease, as well as the logistics behind suicide tourism. While leaving me with thought provoking questions, the story is one of love, life, and free will—a message I believe that any and all viewers can relate to.

Michelle McClelland is a second year medical student. You can read more reviews of the movies OIA has available for checkout in past and future issues of Global Matters.

International Medicine Club Column

Medical Missions in Nicaragua

by Shamini Parameswaran, School of Medicine, Class of 2014



Every morning I was awakened by honking buses and cars, the sun's bright rays streaming through the windows. My surroundings reminded me of a scene from

Annie: a long room with 10 beds against the walls. all occupied by sleeping girls. Our day began at the crack of dawn. Each girl took her turn using the one bathroom. (Yes, 10 girls managed to make one bathroom work!) After dressing and eating breakfast, we set out for the day's activities. At the beginning of the week, I tackled the well project. I had dreamed of building this well all semester-long back home at TTUHSC. I always knew that 2 weeks in Nicaragua would not be enough time to give all I wanted to give, but I was determined to leave something behind that would help alleviate some of the immediate health concerns. As clean water is much needed in Jinotega, I set out to build a well. Thanks to a Lubbock church, we were able to fund the entire project. We started the project on Monday of the first

week. We drove up the mountain (one of the most exciting and scariest adventures I've ever had), and we found the site where the well would be built.



The men from the local community provided assistance. They were extremely hard working and taught me exactly what to do to get the project started. Basically, we would build 12 round cement tubes that would be lowered into the ground as the hole was dug. I was fortunate to have my classmate, Chris Skillern, alongside the first day, joined by another, Michael Aterno, the second day. The well building team was composed of the three of us, Mark (an intern and translator at Mision Para Cristo), Clint Patterson (a middle school science teacher), and men from the local community of Sarasquesca. It was hard, but very rewarding labor.

Many children gathered to watch us work. The children kept us on our toes with constant requests for gum and stickers. We honestly loved every moment. Unfortunately, we were unable to complete the well as the rainy season set in and flooded the hole with water. Mark assured us the project would be completed at the end of the rainy season. We look forward to receiving pictures of the finished project in a few months.



Because the well project was put on hold, I joined the medical teams. We traveled to a stationary clinic in Yali. I was overwhelmed by the number of peo-

ple lined up to enter the clinic. Some had arrived as early as 4 or 5 am! It took about an hour to prepare the clinic for the first patient. Some students remained outside to triage the patients while the other students moved inside to help the physicians. We learned so much and observed different types of diseases that we probably would have never gotten the chance to observe in the States. I was amazed by the gratitude of those whom we provided with medical care. Little did they realize what a gift they were to me. I will never forget the families, the men, the women, and the children. I can never thank them enough for giving me the opportunity to serve. They reminded me to be grateful and content with the simple things in life that are too often taken for granted. Such amazing life lessons were learned in the small clinic that day.

The next day I joined the traveling medical team. This was an experience in itself! A two-hour drive took us to a very rural area in the mountains. It was absolutely beau-



tiful! We set up for clinic and within the hour, families had lined up awaiting pediatric check-ups. I had a great time shadowing the physicians. During one of the breaks, we decided to blow bubbles with the kids. What an adorable experience this was! I've never seen children so excited over something as simple as bubbles. As we blew bubbles of laughter their way, their fears diminished. Again, I was reminded to appreciate the simple things of life.

Mark Your Calendar for the OIA Film Series



You're invited to join the Office of International Affairs as we host a screening of one of the many films from our library.

12:00 Noon CST ACB 220*

- Thursday September 8
- Thursday October 6
- Thursday November 10
- Thursday
 December 1

October feature film:

Rx for Survival—
A Global Health
Challenge:
Delivering the
Goods
*note room
change—for
October film
only!

Attendees are welcome to bring their own lunch.

Free snacks will be provided!

Current Department of State Travel Warnings

Travel Warnings are issued when long-term, protracted conditions that make a country dangerous or unstable lead the State Department to recommend that Americans avoid or consider the risk of travel to that country.

- Afghanistan
- Algeria
- Burundi
- Central African Republic
- Chad
- Colombia
- Congo, Democratic Republic
- Cote d'Ivoire
- Eritrea
- Guinea
- Haiti
- Iran
- Iraq
- Israel, the West Bank and Gaza
- Kenya
- Korea, Democratic People's Republic
- Lebanon
- Libya
- Mali
- Mauritania
- Mexico
- Nepal
- Niger
- Nigeria
- Pakistan
- Philippines
- Republic of South Sudan
- Saudi Arabia
- Somalia
- Sudan
- Syria
- Uzbekistan
- Yemen

Student National Medical Association Column

Communication as a Tool of Medicine

by Rosa Guerra, School of Medicine, Class of 2014



This summer I had the opportunity to participate in an international elective. A group of 14 medical students, along with four amazing physicians from TTUHSC, joined Olive Branch Ministries and Misión

Para Cristo to set up clinics in a number of remote villages around Jinotega, Nicaragua. During our first week, we tended to over 1500 patients and distributed thousands of eyeglasses, vitamins, toothbrushes, and medications. Since maternal mortality is a major medical concern in Nicaragua, a local physician asked the TTUHSC medical students to focus on educating health volunteers and midwives from various towns during our second week. With the help of Dr. Patti Patterson, we constructed an educational seminar focusing on proper sanitation, prenatal care, and the signs of complications during pregnancy and labor. I had an amazing experience during our two weeks in Nicaragua, and I learned a valuable lesson about communication.

Communication is defined as "the activity of conveying meaningful information." Having spoken Spanish for several years, I wasn't too concerned about being able to converse with the patients we



saw at the clinic. As we traveled from town to town, the educational level varied among the people, and I was quickly reminded that effective communication goes beyond being able to speak a language. In one particular encounter, for example, I vividly remember trying to explain to a patient that the physician I was working with was going to perform a breast examination. I told the patient, "Señora, el

doctor va a examinar sus senos," and immediately the patient appeared confused. She was not familiar with the formal word "senos" for breasts, so for her I might as well have been speaking another language, because the word I used was meaningless. I soon discovered that I needed to use colloquial terms familiar to the villagers, which often varied from town to town, in order to effectively communicate with them.



Later that week we met with Dr. Peña, a local physician from Jinotega, to review the informational material we had prepared for the maternal health workshop. Access to a physician is often limited in the remote mountainous

areas, so all the women have to assist them during their pregnancy is a volunteer from the village. Often, the volunteers have little education; therefore, Dr. Peña emphasized to us the importance of using terminology that both the health volunteers and pregnant women can understand. I was extremely impressed by the eagerness of the health volunteers and midwives to learn about various medical complications that could arise during pregnancy and labor. Their questions and our interactions during the workshop communicated to us that they were more than volunteers, they were leaders going out of their way to expand their knowledge in order to help others.

Additionally, my trip to Nicaragua taught me that I don't have to speak in order to communicate with people. In



fact, there are many ways to convey meaningful information without vocalizing any words at all. I noticed many of the patients who came to our clinics walked for hours in their best clothes just to see us.

Continued at the bottom of page 5.

Mission Trip a Success for New SOP Student Organization



During the 2010 -2011 school year, roughly 30 students from the TUHSC campus

in Amarillo organized a student chapter of the Foundation for the International Medical Relief of Children (FIMRC). In May, 16 of those students, all incoming P2s from the SOP, traveled to Alajuelita, Costa Rica as part of a mission trip to provide free medical services to children in need.

The group included Austin De La Cruz, Urvi Desai, Elena Doan, Kristin Foster, Bryant Gajdos, Odunayo Kajopelaye, Selcan Kasap, Myka McMeans, Violet Ndungu, Elizabeth Neyland, Traci Pafford, Michael Rayos, Elisa Rodriguez, Daryn Tidwell, Eva Vindekilde and Derrica Walker.

Doan, president for the FIMRC-TTUHSC-SOP student chapter, said the purpose of the mission was to provide free medical care to underserved children within communities that had little to no access to medical care. The location was selected from FIMRC clinic sites in Costa Rica, El Salvador, India, Nicaragua, Peru and Uganda.

"Since this was our first mission trip, I wanted a location for us that would be both safe and less expensive for the volunteers, so Costa Rica was the best choice," Doan said.

Pafford, the organization's fundraising director, said time was a factor in raising funds for the mis-

sion because the group wasn't able to start until the spring semester.

"Unfortunately, \$2,000 was paid by each member for the trip due to the late start on fundraising," Pafford said.

The cost included plane tickets, transportation, food, lodging and a program donation that went to help supply the clinics in Costa Rica with pharmaceuticals. Doan said the group received help from several Amarillo faculty members, including SOP Department Chair Dr. Cynthia Raehl, Regional Dean for the School of Allied Health Sciences Dr. Michael Hooton and SOP Associate Professor Dr. Eric MacLaughlin.

"Dr. Paul Lockman is our faculty advisor and he has been extremely supportive and helpful in getting our chapter started," Doan said. "We would not have had such a successful turnout without him."

Doan said SOP Assistant Professors Drs. Niambi Horton and Shawna King pro-

vided valu-



able insight from their experiences in planning mission trips for the Global Health Outreach elective clerkship. She said the group is also thankful to everyone who believed in and supported the organization through various fundraisers.

Having spent roughly 13 years working in retail pharmacy before entering pharmacy school, Pafford had firsthand knowledge of the impact pharmacists can have on their patients. She said making such an impact within other cultures was gratifying.

Continued at the top of page 6.
This article originally appeared in
From the Dean's Desk—2011, Issue III

Communication as a Tool of Medicine cont.

In their own silent ways, they were communicating with us signs of respect and thankfulness for our help. A small group of us were able to visit a school for special children and interact with a classroom of hearing-impaired students. I was extremely nervous and worried about communicating with them because I barely knew how to sign the alphabet. After several picture drawings, smiles, and charades I knew their names, ages, dates of birth, as well as the signs for "friend," "likewise," and "happy."

My trip to Nicaragua left me with incredible memories I will never forget. It taught me that effective communication is crucial especially in the field of medicine. Simple



gestures or even expressions can convey meaningful information; but when words are involved, communicative commonalities are essential. I know my experience in Nicaragua will help me become a better physician who takes the time to truly communicate with and understand my patients.

International Flavor

Baklava recipe provided by Raindrop Turkish House

Ingredients:

- 2 sticks of butter, melted
- 1 package phyllo dough
- 2 1/2 cups finely ground walnuts
- 2 1/4 cups sugar
- 1/2 TBS lemon juice
- 1 1/2 cups water

Instructions:

- Preheat oven at 350 degrees.
- Layer 2 sheets of phyllo dough on a cutting board and sprinkle with walnuts
- Using the short side of the phyllo sheets, roll the sheet on a skewer or dowel stick (don't roll too tightly).
- Push the ends of the phyllo roll into each other so that the dough wrinkles.
- Remove from dowel stick and place in 13X9 glass pan.
- Continue with previous steps until pan is completely lined.
- Cut 3-4 slices of baklava per roll.
- Spoon melted butter over baklava rolls.
- Bake for 30-40 minutes until golden brown.
- While baklava is baking, make syrup by bringing water, lemon juice, and sugar to a boil.
- Stir until all sugar is dissolved.
- Boil for 3 minutes then remove from heat.
- Pour cooled syrup over pan of hot baklava.
- Let cool at least 2-3 hours before serving.

When in... Belgium

- Shake hands when greeting and departing. Greet every member of a group individually with a handshake.
- Belgians reserve les trois bises (three air cheek kisses, alternating right, left, right) for those they know well. Don't presume to initiate this greeting, but be prepared to reciprocate if someone offers his or her cheek.
- Belgium is composed of three linguistic groups and 10 provinces. The north (Flanders) is Flemish (Dutch)speaking; the south (Wallonia) is French-speaking; and there is also a small Germanspeaking enclave in the east. Always be aware of whom you are addressing and to which group they belong. However, don't highlight this linguistic and cultural diversity, as it can be an uneasy subject.
- The Belgian culture is very diverse and often difficult for an outsider to define in simple terms. Try to open yourself to the subtleties of this highly individualistic and pragmatic society.
- Use Monsieur, Madame, or Mademoiselle for Frenchspeakers, or Meneer, Mevrouw, or Juffrouw for Flemish-speakers, to mean Mr., Mrs., or Miss
- No slouching or hanging loose, and do not put your hands in your pockets.

Mission Trip a Success for New SOP Student Organization cont.



"Seeing the faces of those children light up when they saw our group was indescribable," Pafford said. "They understood we were there for them and we were a safe haven from the conditions and heartaches they endure daily. To be a part of the good experiences in a child's life for that brief time is a fulfilling experience that will endure for the rest of my life."

McMeans, FIMRC-TTUHSC-SOP vice president, was also moved by the mission. "It enhanced my knowledge and skills to better serve the people who need care," McMeans said. "It also meant getting to spend quality time with those who are in desperate need and desire of attention and help."

Doan said the mission complimented the clinical experiences that form the foundation of the SOP

program. She said each mission participant gained a new perspective on their roles as pharmacists and most of them are now driven to take medical Spanish classes so they can effectively communicate with a broad spectrum of patients.

"We also participated in setting up and managing a small pharmacy without any guidance, which was definitely an unforgettable experience," Doan said. "A lot of us were able to step in and become leaders when necessary, as well as work in a team setting in different areas of the clinic. This mission trip gave us the opportunity to apply knowledge we acquired in the classroom to a clinical setting and to help underserved children while doing so, which made it a very rewarding experience."

In the coming year, Pafford said the organization will try to put together two foreign missions. She said they will also investigate ways to conduct local missions to provide care to U.S. families.

"As a new organization, one of our key goals for next year is to increase membership so we can also increase the services we can provide," Pafford said. "The officers will be holding a general meeting that will help to explain our chapter goals and give more students and faculty a chance to become involved. We are excited about the upcoming year."

Medical Missions in Nicaragua cont.

I spent the rest of the week alternating between the Yali Clinic and the traveling medical team. The physicians left that Saturday. As we said our goodbyes, we were confident we would see each other again. The medical students devoted the second week to teaching local midwives a class on maternal health. We distributed



maternal health books we had complied before our departure. This enabled the midwives to have something to take home once the class was completed. It was a great experience, and I was so happy to be part of a teaching team with so much passion! On the last day, we toured Nicaragua, visited a volcano, and shopped at a famous market place. Gathering goodies for loved ones back home, we said our good-byes to the friends we made during those past 2 weeks. We promised to stay in touch through Facebook. That night we stayed at a hotel, fell asleep early, and the next day returned to the States. Though we were exhausted and ready to go home, we all knew we would miss Nicaragua im-



mensely, as we had grown fond of Jinotega and it's warm residents during our stay.

Nicaragua will definitely be an experience I will

never forget. In fact, this experience has motivated me to pursue future medical missions. It is encouraging to know that all the sleep-deprived days spent studying countless proteins and nerves pays off. They provide the knowledge necessary for trips like these. The smiles we left on people's faces will remain with me always. The next time I become fatigued from school, I will remember my time in Nicaragua. I will tell myself, "I'm not doing this for me. I'm doing this for the mother who needs prenatal vitamins, the baby who has a parasite in her little stomach, and the father who lost his wife in childbirth and needs help caring for his five children." This summer opened my eyes. I have my teachers, classmates, friends in Nicaragua, and TTUHSC SOM to thank for this life changing experience!



Views of the World: in the news & on the web

- Ten Iconic Travel Experiences
 - From yoga in India to cooking in Hanoi, here are 10 experiences that are as special as the places they are from.
- In Pictures: Kenya Refugee Camp
 - Extended drought is causing a food crisis in the Horn of Africa, which includes Kenya, Ethiopia, Djibouti, and Somalia.
- Somali Famine: Ghana Schoolboy Raises Aid Money

An 11-year-old Ghanaian schoolboy has so far raised more than \$500 for victims of the famine in Somalia.

- The Tent That Turns Into Concrete in Less Than 24 Hours
 - The past 12 months have seen a remarkable number of humanitarian crises with earthquakes in Japan and New Zealand and deadly tornadoes in the southern US being among the most recent. Among new innovations which could help relief efforts is a fabric shelter that, when sprayed with water, turns to concrete within 24 hours.
- Former Child Refugee Becomes Hero to Hundreds of Orphans

Afghanistan has been called the worst place to be a child. One in five will die before their 5th birthday, according to UNICEF. But one woman is trying to improve the lives of Afghan orphans and change the sobering statistics.

Vision Quest: Providing Glasses to Kids in Need

One in ten schoolchildren in Mexico needs corrective lenses, but in poorer regions, as many as 60 percent of these kids aren't getting them.

- Nadia Al-Sakkaf: See Yemen Through My Eyes
 - As political turmoil in Yemen continues, the editor of the Yemen Times, Nadia Al-Sakkaf, talks at TED Global.
- New York Muslims Commemorate 9/11 with Blood Drives

New York Muslims come together to donate blood and get their fellow New Yorkers to donate blood in memory of 9/11.

- Zimbabwean Woman Wins Top Writing Prize for Tale of Starving Children
 - Zimbabwean NoViolet Bulawayo has won the Caine Prize for African Writing for her short story "Hitting Budapest."
- Why Young Entrepreneurs are Fleeing Russia

In the past three years, 1.25 million Russians have emigrated, most of them young and members of the middle class, according to recently released data.

- The Lone Woman Waging War on Barcelona's Pickpockets
 - Eliana Guerrero is the guardian angel of the Spanish city—blowing her whistle when she spots the thieves who prey on tourists in metro trains and stations but are rarely prosecuted.
- South Sudan Celebrates Independence with Pomp and Memories of Past

After a 56-year struggle, South Sudan has a country of its own.

- Shake the Dust
 - "Shake the Dust" is a feature documentary that tells the stories of break-dancers in struggling communities around the globe.
- Ryan Lobo: Photographing the Hidden Story
 - Ryan Lobo has traveled the world, taking photographs that tell stories of unusual human lives. In this haunting talk, he reframes controversial subjects with empathy, so that we see the pain of a Liberian war criminal, the quiet strength of UN women peacekeepers and the perseverance of Delhi's underappreciated firefighters.
- Bill Gates Urges Young Scientists to Consider the "Needs of the Poorest"
 - Microsoft founder Bill Gates thrilled a crowd of 566 young researchers from 77 countries gathered for the June 26 opening ceremony of the 61st Meeting of Nobel Laureates, and he wasted no time in telling them what to do.
- Rick Smolan Tells the Story of a Girl

Photographer Rick Smolan tells the unforgettable story of a young Amerasian girl, a fateful photograph, and an adoption saga with a twist.

Global Health Outreach Makes Return Trip to Guatemala cont.

me does the experience justice; it is beyond words," Horton said. "This trip was eight people from different backgrounds, beliefs, perspectives and life experiences, yet we were able to come together to serve people in areas with great need despite the limited resources that were available for what we were asked to do.



"The Guatemalan people were physically poor but spiritually rich and it was an amazing experience. It wasn't easy by any

means, but the end results were worth every bit of discomfort we experienced for those 14 days. If we were able to help at least one of those people live a little better or a little longer then it was all worth it."

When in... Belgium cont.

- When toasting, raise your glass twice once while the toast is being said and again just before drinking.
- It is polite to eat everything on your plate and enjoy your food. The Belgians relish the good life, and they don't like to be wasteful. Compliment the food. Belgians take their cuisine very seriously.
- Smoking is widespread and allowed in most places.
- The penalty for drunk driving is severe and may result in a prison sentence.
- Belgians are not comfortable with a lot of bodily contact, so maintain an arm's length of personal space and avoid backslapping and other overt physical expressions.
- Don't drop into a Belgian home unannounced—even family members phone first to make arrangements to visit.
- Bring flowers or wine when visiting a Belgian home.
- Use your whole hand when pointing, and don't chew gum or blow your nose in public.
- Restaurant bills include 15 percent service charge and value-added tax (VAT), but you may leave an extra tip for excellent service.

taken from **Behave Yourself!** by Michael Powell

September

- 01—Ganesh Chaturthi: Hindu
- 02-National Day: Vietnam
- 03-Independence Day; Qatar
- 04—Father's Day; Australia
- 06—Bonaire Day; Bonaire
- 07—Independence Day; Brazil
- 08—International Literacy Day
- 09-Father Laval Day; Mauritius
- 10-Gilbraltar National Day; Gibraltar
- 11—Catalan National Day; Spain
- 12-Chuseok; North & South Korea
- 14—Battle of San Jacinto; Nicaragua
- 15-Our Lady of Sorrows; Slovakia
- 16—Independece Day; Mexico
- 18—Oktoberfest Begins; Germany
- 19-St. Januarius Dav: Italy
- 21—International Day of Peace
- 22—Independence Day; Bulgaria
- 23—Equinox; International
- 24-National Day; Guinea Bissau
- 25—Kamarampaka Day; Rwanda
- 27-St. Vincent de Paul Day; Madagascar
- 28-Confucius's Birthday; China
- 29—Battle of Boqueron; Paraguay
- 30-Manit Day; Marshall Islands

October

- 01—Unification Day; Cameroon
- 02—Gandhi Jayanti; India
- 03—Tag de Deutschen Einheit; Germany
- 04—Independence Day; Lesotho
- 05—Double Ninth Day; Taiwan
- 06—Remembrance Day; Turkmenistan
- 07—Yom Kippur; Judaism
- 09-Independence Day: Croatia
- 10-Fiji Day; Fiji
- 12—National Day; Spain
- 13—Santa Fortunata; Peru
- 15—Cayenne Festival; French Guiana
- 16—World Food Day; International
- 17—Dessalines Day; Haiti
- 18—Persons Day; Canada
- 19—Mother Teresa Day; Albania
- 20-Kenyatta Day; Kenya
- 23—Ghulalongkorn Day; Thailand
- 24—Independence Day; Zambia
- 25—Thanksgiving; Grenada
- 26-Diwali; Hindu
- 28-Ochi Day; Cyprus & Greece
- 29—Naming Day; Tanzania
- 30—Creole Day: Dominica
- 31—Samhain; Pagan



International Holidays and **Celebrations**

Language Lesson: Welcome

taken from Omniglot.com



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