



# Global Matters

The newsletter of the Office of International Affairs    Volume 23, March—April 2013

## Spring 2013 Global Health Lecture Series



12:00 Noon CT  
ACB 110

- Tuesday  
January 22  
Ambassador Tibor Nagy  
State of the World
- Wednesday  
February 6  
Dr. Yan Zhang  
Traditional Chinese  
Medicine
- Wednesday  
March 13  
SOP Student  
Organization—FIMRC  
International Experiences
- Wednesday  
March 20  
Cynthia Hester, RN  
Zambia Medical Mission
- Thursday  
March 28  
David Sacks, PhD  
NIAID
- Tuesday  
April 9  
Dr. Mohamed Bailor  
Barrie  
Well Body Alliance
- Wednesday  
April 17  
Marie Leiner, PhD  
Mental Health & Children  
on the US/Mexico Border
- Wednesday  
May 1  
Michael D. Parsa, MD  
Challenges of Short-Term  
Medical Missions

Presentations with hyperlinks were recorded and can be viewed on the OIA website or checked out from the OIA library.

## Voice for the Deprived

By Kanika Monga and Ritik Tiwari, PLF School of Medicine, Class of 2015

You see it the moment you step out of the airport in India. It is tough to avoid in any city but easy to become immune. Poverty - a vicious cycle, especially in India - affects more people than the population of the United States.

Between school lectures, clinic visits, and preparing for board exams, medical school can be grueling. Medical students start school with the dreams and ambitions that helped them write personal statements. But as they get deeper and deeper into their studies, inspiration seems fleeting. "Voice for the Deprived" (VFTD) was founded at Paul L. Foster School of Medicine as a way to remind students why they are here and how to make a difference. VFTD believes "what can be done now should not wait 'till later."

The idea for VFTD came about while interacting with the Urban Health Resource Centre (UHRC), a non-profit in New Delhi, India that works with the urban poor. The group was founded and is run by a physician, Dr. Siddharth Agarwal. Dr. Agarwal and the UHRC work to solve health care issues faced by the underprivileged in major Indian metropolises.

VFTD's purpose is to create a channel through which

the deprived in India can be heard, voices which many tune out because they have become an accepted part of the society's backdrop. The long-term plan is to travel to India and film a series of short documentaries highlighting the lives of the underprivileged. The film crew will not provide a storyline because the subjects of the documentaries will create the story. They will be the stars and VFTD will act as their crew, providing the resources they need. The documentaries will be used as a tool to seek solutions that can be implemented to improve the lives of the deprived.

VFTD is a venture that crosses borders, working with established documentarians and social activists. The team consists of dedicated professionals from the US, Mexico, Uruguay, and India. Each member of the project is donating his/her time to help further the greater cause. The project has even been embraced by a film production studio in El Paso. The studio recently filmed a promotional video at the PLFSOM facilities featuring a few medical students and staff at the PLFSOM ATACS center graciously

helped with the filming.

The next step is to raise awareness of the project using the promotional video currently in production. VFTD members will continue to gather footage from partners in India and Agency Eleven100 throughout the year. The bulk of the project will be completed during a trip to the subcontinent in December 2013. VFTD plans to work with the poor in New Delhi, India's administrative capital, and Agra, India's tourist capital. Agra will provide a unique backdrop for the stark contrast between two things for which India is best known: poverty and the Taj Mahal.

For updates, please visit our website; or Facebook group, or contact us.

website: [voicefordeprived.org](http://voicefordeprived.org)

email: [info@voicefordeprived.org](mailto:info@voicefordeprived.org)



## Available from the OIA Library

The following resources are available for check-out:

### Book

*Accessing Health Care: Responding to Diversity*  
By Judith Healy & Martin Mckee

For the first time, this book draws together examples of how to deal with diversity from health systems across the industrialized world. It considers population groups within countries and takes a broad approach, studying inherent population diversity (age, sex), citizen issues (migrants, asylum seekers), and ethnic and indigenous groups. This book provides an unparalleled breadth of perspectives from which to draw conclusions about how to meet the needs of societies characterized by diversity.

### Movie

#### *A Small Act*

When Hilde Back sponsored a young, rural Kenyan student, she thought nothing of it. She never imagined her quarterly donation of \$15 would pave the way for Chris Mburu's journey to Harvard Law School. Years later, Chris became a United Nations human rights lawyer working to combat genocide and discrimination. He decides to seek out the stranger who dramatically transformed his life and is astonished to learn his benefactor, Hilde, is a Holocaust survivor. Beautifully interweaving seemingly separate lives to illuminate the truly interconnected world in which we live, *A Small Act* is a testament to the powerful, rippling effects that one single action can generate.

For more information about the resources available from the OIA library, visit our [website](#).

## International Medicine Club Column

The Heart of Nepal  
By Sharon Moore  
School of Medicine  
Class of 2015

I traveled to Asia the summer before I started 4th grade. Now, almost 15 years later, I can only piece together the trip through pictures and the most poignant of memories. The memories have helped define who I have become and how I view my place in the world, and they have influenced my desire to travel and practice medicine internationally.

In Nepal, my father and I trekked the Himalayas for about ten days. We traveled by bus from Katmandu to Pokara, the starting point of our trek. The bus was crowded with locals (and their live chickens) so we asked the bus driver (who understood only our gestures) if we could ride atop the bus on the luggage rack.

We trekked through stone villages, nestled in the occasional expanse of steep canyons filled with rushing water from almost-daily rains, whose only connection to the outside world was footpaths. One day we climbed Poon Hill (3,190 m) before dawn for a view of Annapurna before the daily cloud cover set in; the next day we hiked past the remains of a village

wiped out by a flash flood. The adventure was full of early mornings, leeches (even in the eyes of the roaming cattle), "showers" with cold buckets of water, straw-mattresses, and outdoor holes for toilets.

At my father's insistence, I brought very few clothes: only 3 complete outfits for 5 weeks. One vivid memory is giving one of my shirts to the maid of one of the guesthouses, a young girl barely older than I was. After a dinner of bread, rice, and chicken soup, she and I played together despite the language barrier (joking and being disruptive as kids do). As someone translated her words, I learned that her family lived in a smaller village deeper in the mountains. She lived and worked at the guesthouse about 6 months at a time, then returned home with her wages. It was with this girl, a girl who lived a very different life on the other side of the world, that I left my purple shirt.

As we returned to a lower altitude, we passed through a slightly larger village. The steps were so steep I had to turn sideways and use the previous steps to

balance myself with my hands. On an off-shooting stone path that ran through the center of the village was a crowd. Sitting on a stone wall was a somewhat hefty white man with a stethoscope pressed against the chest of the child who stood in front of him. We did not stop in the village; I have no idea if the man was part of a group or traveling alone, if he was there for a day or for a year. I only know that through my 9-year-old eyes I saw someone caring for people like the girl at the guesthouse. I wanted to become someone who cared for people in remote areas such as this.

At an age when it took two steps to match my current stride, I learned – in a very real way – to appreciate my life in America and all of the opportunities I have been given.

At nine years of age, I saw a doctor helping others. Now, at age 23, I have the chance to become one. This gives me the perseverance to continue with my education on those late nights when I struggle to understand the pathology of the heart. Someday, I hope that I can use the knowledge I have gained as I press my stethoscope against the chest of a child in Nepal.



## International Medicine Club

—presents—

### THE INTERNATIONAL POVERTY BANQUET

with special guest speaker

DR. MOHAMED BAILOR BARRIE

April 8, 2013 | 6:00-8:00 PM | 1500 14<sup>th</sup> St. Lubbock, TX | Legacy Event Center Ballroom

Tickets are \$10

For more information please contact Sati Patel ([sati.patel@ttuhsc.edu](mailto:sati.patel@ttuhsc.edu)) or OIA ([cima@ttuhsc.edu](mailto:cima@ttuhsc.edu))

## Back to the Baskervilles

By Jillian Sanford, Paul L. Foster School of Medicine, Class of 2013

In the year 1901, Sir Arthur Conan Doyle told a tale of a man who has a fatal heart attack after a confrontation with a ferocious dog, the *Hound of the Baskervilles*.

Precisely 100 years later, University of San Diego sociologist David Phillips discovered that in a variety of

Asian-American patients, there was an elevation in the number of heart attacks on the fourth of every month as compared to other days in the month. Why would the fourth be such a fatal day? Dr. Phillips discovered that in Japanese and Chinese, the words “four” and “death” are nearly identical. Clearly, this profound fear of four, something not shared by all Americans, has deep cultural roots.

My sophomore year of college, I packed my bags and shipped off to Spain. I spent four months in Seville living with a host family and one other American roommate. It was the picture-

perfect trip. I learned about the Spanish language and culture, a valuable hands-on history lesson. Years

later, after graduating college, I pursued my lifelong dream and enrolled in medical school.

Months later, I found myself living on the border of Juarez, Mexico and El Paso, TX. So, during my third year of medical school, it came as no surprise to my friends and family that I

jumped at the chance to participate in a faculty-led trip to Honduras over spring break. Yet again I had the chance to see the world, but this time with the opportunity to provide education and support through my medical skills.

Weeks of preparation, followed by days of packing, culminated in many hours of travel by plane and truck to

reach our final destination: Choluteca, Honduras. On day one, we pulled up to a community school building and saw the never-ending line, or rather

huddle, of patients. There were too many people to count. Surely more than 100 eyes were on us. Boom, boom, boom. My heart raced and my hands turned wet. With only a team of ten, how could we pos-

sibly see all of these patients? I feared a demise fit only for a Baskerville. However, in a moment of clarity and with a nudge of support from our team leader, Dr. Parsa, I realized, “sí se puede.” We can do this. We have to do this. And we did.

Each day, our brigade of students was split into the same three teams. Each team had a supply of pharmaceuticals and 9-12 members. Led by community leaders, we headed out in our rented truck into the mountains to find the villages, sometimes traveling 2.5 hours before reaching the intended location. We would

then divide into groups, some members taking vitals, others performing H&Ps followed by a diagnosis/plan, and others functioning as a pharmacy and discharge station. The system was perfected each day, and each day we saw how our changes made a difference. Although the clinical work took most of our time, there was other work to be done. Our team of public health students and professors performed a needs analysis. It is our hope that their review of our “patient charts” will help identify the diseases that commonly affect the communities, enabling us to allocate resources and at-



Continued on the bottom of page 8.

## 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 240**

- Thursday January 24
- Thursday February 28
- Thursday March 7
- Thursday April 25
- Thursday May 16

### April Feature film:

#### *The Undertaking*

Thomas Lynch is a poet and undertaker whose family has cared for the dead — and the living — in a small Michigan town for three generations. For the first time, Lynch and his family allowed cameras inside Lynch & Sons giving behind-the-scenes access — from funeral arrangements to the embalming room — to the Lynches' world. *The Undertaking* illuminates the heartbreak and beauty inherent in the journey taken between life and death.

Attendees are welcome to bring their own lunch.

**Free snacks will be provided!**

## When in... China

- A greeting rarely includes a handshake. The Chinese bow or nod their heads, often without a smile, as greeting is a solemn, respectful affair. If you do shake hands, do not expect to receive a firm handshake.
- Punctuality is very important, especially in business. If you are with a group, arrive together.
- Offer a business card with both hands and with the text facing away from you. When receiving a business card, it is polite to scrutinize it closely and then keep holding the card, rather than stuffing it into your pocket (which is rude and also signifies the end of the meeting).
- Keep gestures to a minimum. The Chinese use very few gestures when speaking and may find them distracting and irritating.
- Saying no is hard for a Chinese person, who will prefer to say something like “perhaps” or “I’ll think about it” in order to be polite.
- Meals usually take place in restaurants rather than in private houses.
- Guests are usually seated according to rank, with the guests of honor seated to the right of the host.
- Do not start eating until the host has served the principal guest. Don’t talk business during a meal.

## Czech Republic Gives Pharmacy Student a Unique Insight Into Pharmacy

Taken from the Dean’s Desk 2012—Issue V

Many pharmacy students spend the summer between their first and second years of school traveling, working in hometown pharmacies, or recharging their mental batteries. Amarillo P2 Olga Shvarts found a way to do it all.

In July, Shvarts traveled to the Czech Republic where she worked as a pharmacy intern. Her roommate for the month long program was from Spain and she worked with other students from Portugal, Serbia, Poland, Russia, and Slovenia.

“I made a lot of friends, especially with people from other countries that participated in the program, and I also remain in contact with Czech students that lived in the dormitory where I stayed,” Shvarts said. “Everyone was friendly and nice and made it a truly rewarding experience. The people at the pharmacy where I worked were really helpful and seemed genuinely excited to work with me.”

Shvarts decided to participate in the program at her own expense because she has always been interested in experiencing pharmacy practice in another country. The opportunity to visit Europe for the first time and compare a foreign health care system to that currently in place in the U.S. was also very motivating.

“This was my first pharmacy-related trip abroad and it turned out even better than I anticipated,” Shvarts said. “Growing up in the former

Soviet Union, I noticed how valuable the pharmacy was to the community. When I immigrated to the United States, I saw the pharmacist’s role elevated to that of an essential

health care provider, and I feel it is necessary to integrate the various global approaches to the practice of pharmacy.”

In addition to observing the basic structure of the Czech pharmacy practice and health care system, Shvarts said the program exposed her to an array of cultures, customs, and beliefs. She believes health care providers are better able to improve the U.S. system if they have firsthand knowledge about how health care is applied in other countries.

“For a pharmacist, cultural competency and understanding is a must,” Shvarts said. “I think this internship opportunity directly prepared me, at least in part, for those challenges in the future. It

was a real learning experience. Going somewhere new, not being able to speak the language, and not knowing anyone — it’s really scary, but it teaches you to be independent. I wouldn’t trade this experience for anything, but initially it was quite intimidating. How-

ever, this sort of isolation forced me to truly immerse myself into Czech culture.”

Shvarts said the internship gave her an opportunity to apply some of the knowledge and skill she learned in her first year as a pharmacy student. She was amazed at how much she had retained, especially in the laboratory.

“I was surprised at how universal these concepts were, even on the other side of the globe,” Shvarts said. “My only previous pharmacy experience was in a community setting in Austin while working in undergrad, so this was a great way to get a completely fresh perspective on pharmacy practice. Often times, it is necessary to see what works and what doesn’t, and then use that as a model to shape our pharmacy practice based on personal encounters and experiences.”

Although she paid for most of the internship herself, Shvarts said she would not have been able to participate without the support she received from pharmacy school faculty and staff. It was an experience she would recommend to any student seeking a health care related career.

“I would especially like to thank Dr. Cynthia Raehl, Mark Hendricks, and Summer Balcer for all their support. I also strongly encourage everyone to seek practice opportunities in other countries, both in pharmacy and beyond. You won’t regret it.”



## Iron Jawed Angels

A movie review

By Shamini Parameswaran, School of Medicine, Class of 2014

In the late 1800s, Susan B. Anthony began to lay the groundwork for women's voting rights, creating the National Women's Suffrage Association (NAWSA), of which she served as president from 1890 to 1900. Her groundwork was carried over into the new century as young activists took her work one step further by taking it to the White House.

*Iron Jawed Angels* is an excellent representation of the women's suffrage movement, with a touch of modern day cinema added to the story. Taking place in the early 1900s, the movie depicts the story behind the epic suffrage movement and demonstrates what both men and women endured to get the legislation for women's voting rights passed.

Alice Paul (Hilary Swank) and Lucy Burns (Frances O'Connor) were two of the main activists who

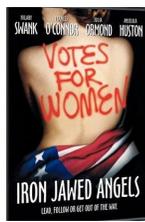
played a vital role in furthering women's rights. Faced with opposition from her peers within the NAWSA, Alice Paul was forced to separate from NAWSA and create the National Women's Party (NWP). Knowing they were going into this "alone," the activists continued to fight, standing in front of the White House day and night to silently protest with signs and acts of non-violence. President Wilson passed them on a daily basis, but would not heed their pleas. The women's suffrage movement was not a priority because World War I had started. That didn't stop Alice and her activists. War or no war, they were determined to push for the legislation to pass. Infuriating the public, police arrested the women for "obstruction of traffic," an excuse to remove them from the street.

As the story continues, all the female activists are imprisoned one by one, but they hold firm in their convictions. When Alice, the leader of

the group, force-fed raw eggs with a tube down her throat, the story takes another turn. The country is outraged over the news of the torture. Finally a light is seen at the end of the tunnel. In fact, it was a senator and husband of one of the jailed activists who notifies the press of the torture of Alice Paul, making it a national story.

After several years of hard work, public humiliation, and even deaths, women finally received the right to vote on August 26, 1920. Of course, the movie wasn't just about history; Hollywood added a small love story between Alice Paul and a reporter (Patrick Dempsey, "McDreamy" from Grey's Anatomy.)

*Iron Jawed Angels* did a fantastic job highlighting the suffering, humiliation, and discouragement suffragists endured on a daily basis for several years in order to ensure their daughters' and mothers' voices would never go unheard in the United States.



## When in... China Cont.

- Alcohol is practically obligatory, and your host will view it as his duty to get you drunk.
- Expect much toasting. The host utters the first toast with the words "Gan bei," which means "dry the glass," after which everyone should drain their glasses.
- Use the thick end of your chopsticks when taking food from a communal dish.
- Finish your rice or noodles as a sign of respect for the person who prepared the food, but leave a small amount of other food untouched to indicate that you are satisfied.
- Never leave your chopsticks stuck in your rice; this is associated with death.
- Chinese people often spit for good luck, especially when they see foreigners. The root of this tradition lies in the ancient belief that demons reside and breed in mucus.
- Chinese people will politely decline a gift three times before accepting it. They will not open it in front of you, and nor should you.
- Tipping is officially illegal, although it does happen. Often an offered tip will be politely refused and may cause embarrassment.

Taken from *Behave Yourself!* By Michael Powell

## Country Close-up\*

\*every issue OIA will select another country to feature

### Federal Republic of Nigeria

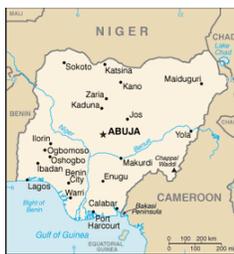
Nigeria is located in Western Africa between Benin and Cameroon, bordering the Gulf of Guinea. Nigeria boasts the largest population on the African continent, estimated to be over 150 million people. It is the seventh most populous country in the world. Nigeria has more than 250 ethnic groups. The Hausa and Fulani (29%), Yoruba (21%), and Igbo (18%) are the most populous and politically influential ethnicities. English is the official language, although there are over 500 additional indigenous languages in Nigeria. The majority

of Nigerians are Muslim (50%), while Christians make up 40% of the population.

The Spanish and Portuguese explorers were the first Europeans to begin trade in Nigeria in the 16th century. They also negotiated for a portion of the existing African slave trade. Nigerian ethnic groups were transported to the Americas and the Caribbean as part of the African diaspora of slavery. Nigeria became part of the British Empire in 1901. A series of constitutions after World War II granted Nigeria greater autonomy and eventually independence in 1960. Nigeria regained democracy in 1999 when it elected Olusegun

Obsanjo as the new president. Dr. Jonathan Goodluck, the current president, was sworn in as president in May 2010. He won the 2011 election with 59% of the votes.

According to the World Health Organization and the CIA World Factbook, the life expectancy at birth for males is 48.95 years. For females it is 55.33 years. The leading causes of death are lower respiratory infections, HIV/AIDS, Malaria, diarrheal diseases, perinatal conditions, and tuberculosis.



## International Flavor



### Nigerian Puff Puff

recipe from

All

Nigerian Recipes

#### Ingredients:

- 250g of plain flour
- 2 teaspoons of yeast (the one used in baking bread)
- 1/2 teaspoon ground nutmeg
- Granulated sugar to taste
- 3 pinches of salt
- Lukewarm water (for mixing)
- Vegetable oil (for frying)

#### Instructions:

- Put the flour in a bowl, add the nutmeg, powdered yeast, sugar and salt. Mix all together.
- Add water in small quantities and mix by hand until blended.
- Use warm water to mix the puff puff ingredients if you want it to rise faster.
- Keep mixing until the batter is smooth but not too watery to flow from a spoon.
- Cover the bowl with foil and make sure it is airtight.
- Leave to rise for 45 minutes.
- Pour some oil in a deep pot and allow to heat. The oil should be at least 3 inches deep.
- When the oil is hot, scoop some batter into the oil with your hand by pressing the batter to come out from between your thumb and index finger.
- Put in more scoops of the batter, as much as the space in the frying pot will allow without overcrowding.
- Once the underside of the puff puff has turned golden brown, flip the ball so that the topside will be fried as well.
- When both sides are golden brown, take out the puff puff balls and place in a sieve.

## The Pursuit

By Yoni Samocha, PLF School of Medicine, Class of 2014

All the stress and hard work I endure is for the good of my future patients. Indeed, the aspiration to help others is what drew me to this profession. I recently participated in a faculty-led trip to Honduras. The trip utilized the connections and resources of the Catholic Diocese of El Paso and Choluteca, Honduras. The team consisted of three physicians, 27 medical students, and a handful of public health personnel. We split into three

groups, and we were able to provide medical care and medication to over

3,500 needy people living in rural villages in Southern Honduras. These villages were so secluded that many of the patients had not accessed medical care in quite a while. We distributed over \$10,000 worth of medication.

This was the second time I participated in a trip to Honduras and each trip provided me tremendous experience as a medical provider and a humbling sense of gratitude for everything we have in the United States. I am grateful to have the opportunity to attain the tools needed to help and heal people. The

trip also helped reinforce the medical Spanish fostered by PLFSOM. I was thrown into a world where the only way I could communicate was to rely on the information gained over the past year and a half in Spanish class. I believe the best way to improve one's proficiency in a language is to be immersed in it.



The ability to apply my medical knowledge to assist those in need is a great feeling. Nothing gives me greater joy than helping others. I intend

to participate in medical mission trips in the future as well. I also plan to go to Honduras as a third year and fourth year medical student. I hope to help the program grow and provide more capable medical care as I expand my medical knowledge and diagnostic skills. In addition, I am interested in going on similar trips to help those less fortunate after I attain my

medical degree. I foresee myself going on annual mission or charity trips regardless of the specialty I choose. I

plan to work hard to improve my Spanish communication skills to be better equipped to help the pa-

tients I encounter on mission trips and Spanish speaking patients in the United States. I appreciate the fact that University Medical Center El Paso will provide many such opportunities. I also think my Sociology major has provided the tools to empathize with patients on a deeper level and better understand the different socioeconomic factors affecting them.

I hope to take all the skills and knowledge I have acquired not only in my first two years in medical school, but throughout my life —

and use them to continue my pursuit of greatness.



# West Africa Cultural Events

Join the Office of International Affairs to celebrate the enriching culture of West Africa

## MONDAY, APRIL 8

- \* 4th Annual International Medicine Club Poverty Banquet
- \* The Legacy Event Center, 1500 14th Street
- \* 6:00 – 8:00 PM
- \* Tickets are \$10
- \* Keynote speaker: Dr. Mohamed Bailor Barrie, Well Body Alliance, Sierra Leone

## TUESDAY, APRIL 9

- \* Global Health Lecture Series featuring Dr. Mohamed Bailor Barrie, Well Body Alliance, Sierra Leone
- \* 12:00 – 1:00 pm, ACB 110
- \* Free lunch to the first 40 attendees

## THURSDAY, APRIL 11

- \* West Africa Cultural Event
- \* Sample West African food; learn about West African culture including clothing, languages, authors & musicians; and visit with organizations combating health issues in West African countries
- \* ACB 1st Floor Lobby
- \* Noon – 1:00PM, come & go



FOR MORE INFORMATION CONTACT OIA  
806-743-2900 | [cima@ttuhsc.edu](mailto:cima@ttuhsc.edu) | [www.ttuhsc.edu/cima](http://www.ttuhsc.edu/cima)

## In the News, Around the World

- [Safe Pregnancy and Birth Mobile App](#)  
Hesperian's comprehensive app on pregnancy and birth contains a wealth of information.
- [In 'Redemption,' Collecting Cans to Survive](#)  
NPR host Audie Cornish talks with Matthew O'Neill about his Oscar-nominated short documentary, "Redemption." The film is about New York City canners — people who survive by collecting cans and bottles and redeeming them for change.
- [Garbage Homes - Bolivia](#)  
We follow one woman who is on a mission to build homes for the poor from the only resource she can find in abundance.
- [Photo Essay: When a Kid's Bedroom Isn't a Room](#)  
A few years ago, James Mollison began taking photos of children around the world and their rooms. Striking and unsentimental, Mollison's work shows that wherever a child lies down at night is not so much a retreat from as a reflection of the world outside.
- [Spain's Wind Farms Break Energy Record](#)  
For the first time, electricity production from Spanish wind mills topped that of nuclear, coal and solar. Spain's location in the south of Europe means it's endowed with lots of sunshine and clear windy skies—which it's put to use becoming a leader in renewable energy.
- [Why Lebanese Love Their Raw Kibbeh](#)  
Kibbeh nayeh, a dish that combines raw meat, bulgur and onion, is "the definitive Lebanese festive food," says Kamal Mouzawak, founder of Beirut's first organic farmers market.
- [Born in Sierra Leone, Young Woman Documents Her Final Steps On Path To Citizenship](#)  
Becoming a citizen was a long path for Veralyn Williams. She came to the U.S. from Africa as an infant, and found as a teen, she couldn't even get a job at a fast food restaurant. This is the final chapter in her journey to citizenship.
- [A Surprising Map of Countries That Have the Most Traffic Deaths](#)  
Thanks to a combination of insufficient or nonexistent safety laws, poor infrastructure and lack of enforcement, low- and middle-income countries account for 48% of the world's vehicles but more than 90% of the world's road traffic fatalities.
- [Mexico Aims to Save Babies and Moms with Modern Midwifery](#)  
In Mexico these days, the majority of babies are born in hospitals. That hasn't helped reduce the number of maternal deaths, though. So health officials are re-making the centuries-old tradition of midwifery. They are betting a new kind of midwife, one trained in a clinical setting, can offer a solution.

## March

01—Samil Day; South Korea  
02—Peasants' Day; Myanmar  
03—Mother's Day; Georgia  
04—Labour Day; Maldives  
05—Custom Chief's Day; Vanuatu  
06—Independence Day; Ghana  
08—Women's Day; Abkhazia  
10—Mahasivarathri Day; Sri Lanka  
11—Commonwealth Day; Gibraltar

12—Youth Day; Zambia  
13—National Decoration Day; Liberia  
14—Summer Day; Albania  
15—Youth Day; Palau  
17—St. Patrick's Day; International  
18—Ash Monday / Clean Monday; Cyprus  
19—St. Joseph's Day; Vatican City  
20—Persian New Year; Azerbaijan

21—Spring Holiday; Turkmenistan  
23—National Health Day; Kiribati  
24—Truth and Justice Day; Argentina  
25—Independence Day; Greece  
27—Holi Phagwa; Suriname  
28—Maundy Thursday; International  
29—Good Friday; International  
31—Easter Sunday; International

Happy   
St. Patrick's Day

# International Holidays and Celebrations



## April

01—Easter Monday; International  
02—Malvinas Day; Argentina  
04—Tomb Sweeping Day; China  
06—Act of Self Determination Day; Cocos Islands  
07—Tutsi Genocide Memorial Day; Rwanda  
08—Women's Day; Mozambique  
09—Day of Valor; Philippines  
11—Juan Santamaría Day; Costa Rica  
12—Laotian New Year Holiday; Laos

13—New Year; Thailand  
14—Water Festival; Myanmar  
15—Day of the Sun; North Korea  
16—Independence Day; Israel  
17—Women's Day; Gabon  
18—Independence Day; Zimbabwe  
21—Tiradentes Day; Brazil  
22—Saint George's Day; Canada  
23—Children's Day; North Cyprus

24—Remembrance Day; Armenia  
25—First Day of Summer; Iceland  
26—Union Day; Tanzania  
27—Independence Day; Sierra Leone  
28—National Heroes' Day; Barbados  
29—Carnival Day; Saint Maarten  
30—Valborg's Eve; Sweden

## Back to the Baskervilles Cont.

tention accordingly in the coming years. Our three teams saw a total of 3500 patients in 12 Honduran villages over the course of 4 days. This is just the start of something big.

After learning of the Baskerville Effect during my days as a psychology undergrad, I began to realize the importance of culture as both an individual and societal experience. For example, in Spain, it is common practice to consult a pharmacist to treat disease as opposed to seeking the advice of a physician first (a tradition I myself practiced during the trip). I was also reminded of the connection between culture and healthcare at El Paso's La Fe Clinic during my OBGYN clerkship. Many young mothers wore safety pins on their shirts to protect their unborn children from developing cleft lip, a birth defect they believe is caused by lunar eclipse.



Another belief that exists in both Mexican and Honduran cultures is "mal de ojo," or the "evil eye." This sickness is believed to affect children, especially babies, and is the result of excessive attention (staring or doting). Although feared, there is a fix. To mitigate the situation, the person who afflicted the illness on the child must neutralize the child's sickness by physically touching him/her. Cultural awareness is the start of something big.

The second and perhaps more difficult lesson to take from the Baskervilles is to grant relevance to an individual's cultural beliefs. We are taught early-on in our training to be sensitive to those who disagree with blood transfusions for religious reasons. Why not accommodate other beliefs that exist (the ones that don't show up on our tests)? With expanding globaliza-

tion, there is an ever-increasing chance for culture clash or culture cohesion, if we choose.

It takes moments to Google the Japanese translations of "four" and "death," however, it took years for Dr. Phillips to discover the pattern of deaths associated with these words. It may take longer to learn how to adequately provide support for Asian-Americans who find themselves hospitalized on the fourth. Similarly, it takes minutes to find an article that cautions pregnant women from drinking té de manzanilla, a tea that may induce premature labor. But it may take longer to explain to a woman that while this tea may be taken without consequence for a mild stomach illness, it may force a child from the womb too soon. Openly communicating with our patients about their expectations and beliefs allows cultural traditions and modern medicine to seamlessly coexist. Cultural competence is the start of something great.