

ELECTIVE (SSC5c) REPORT (1200 words)

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

Elective Title: General Medicine and Paediatrics in Belize

Objective 1: Describe the pattern of disease/illness of interest in the population with which you will be working and discuss this in the context of global health: What are the prevalent neonatal and paediatric condition encountered in Belize?

Problems with nutrition and malnutrition of mothers and babies were predominant in Belizian mothers and children. I was at a level two hospital so any potentially complicated births were planned to be escalated to the nearby capital city. I was impressed with the level of organisation and prenatal checks. Some of the other problems encountered were high levels of HIV, young mothers and lack of knowledge of contraception. Sexual health testing was not prevalent amongst a lot of the population, until presentation with pregnancy. Levels of domestic violence were quite high relative to the UK, but there are public health posters trying to improve the situation.

Objective 2: Describe the pattern of health provision in relation to the country which you will be working and contrast this with other countries, or with the UK: How is healthcare funded in Belize and what resources are available, compared to other areas in Central America and the Caribbean, and the UK? Healthcare in Belize is both privately and publically funded. The vast majority of the country is looked after through public health care and, from my understanding through talking to different doctors and patients there is a vast discrepancy between the public and private systems, although there are apparently systems in place to try and redress these differences. Everyone who needs it has access to care, and Belizians seemed very proud of their healthcare system. I met a number of doctors from other countries, most notably Cuba, where there is a brilliant reputation regarding medical training. There was good access to healthcare for those who needed it, but clinics were overbooked, and people had to travel a long way if they were from a rural community that only had a clinic not a hospital. There were fewer resources than hospitals in the UK, but pre- and peri-natal monitoring were similar in many respects and as discussed earlier potentially complicated cases which required more monitoring would be transferred to Belmopan (the capital city) for a stepped-up level of care.

Objective 3: Health related objective: How does local access to care and public health affect paediatric care in Belize?

The population of Belize is small (<400,000) and it is not densely populated so people in towns/cities have ready access to hospitals/clinics but people who live in more remote/rural settings or on islands may be a long way from a doctor let alone a hospital and dependent on the availability of transport (e.g. boats from remote islands). The provision of public care was good and access to medicine etc. was better than I had expected. The population of Belize is a young population and women often have children from a young age (many have their first child around the age 16). Public health regarding contraception is apparently changing greatly at the moment, with many of the doctors making a special effort to address this, especially with young mother and mothers with very many children.

Objective 4: Personal/professional development goals.: What are the most important things that you learn working in a very different environment to that of training? I think the most important things that I have learnt are actually fairly simple. Always introduce yourself to both staff and patients and if

you are unsure of anything don't be afraid to ask! Equipment will be different, protocols will be different and local customs will be different but simply being polite can get you a long way!