

ELECTIVE (SSC5b) REPORT (1200 words)

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

As part of my elective I was able to spend four weeks at the Western Region Hospital in Belize. The Western Hospital is the 3rd largest in the country, providing both primary and secondary care services to the Belizean population. The hospital is situated in Belmopan, the country's capital, however it attracts patients from many more rural areas who often have to travel significant distances to be seen. It is equipped to deal with general medical and emergency medical problems but also has specialist departments for paediatrics, obstetrics and psychiatry.

In Belize, the primary care clinic at the hospital is usually the first port of call for patients, however for individuals who live further afield this is not a particularly convenient option. For these patients there are nurse led community clinics which run in collaboration with the hospital. These clinics are able to provide antenatal clinics, health education, contraception and paediatric immunisations. This takes some of the pressure away from the hospital and also provides a more convenient point of care for individuals who do not live in the capital.

The healthcare in the country is publically funded, although the option to access private healthcare is also an option for the few that can afford it. Having spoken to many of the local people it seems that there is little trust in the Government run hospital, many people have their own horror story to share from their experiences at the hospital. As a result anyone who can afford to pay for healthcare tend to go to neighbouring countries such as Mexico or Guatemala in search of a better level of care. The public healthcare provided in Belize is organised by the Ministry of Health who spend \$489 per capita of the country's GDP compared to \$3500 per capita in the UK. This is perhaps reflected in the facilities and technology the hospitals are able to provide. The Western Regional is often working at maximum capacity with limited resources, relying solely upon ultrasound and plain radiographs for imaging. This often required patients with more complex care needs to be referred to Belize City for further investigation.

During my time spent in the Western Regional Hospital, I witnessed patients with a wide range of tropical diseases, most of which we do not encounter in the UK. Communicable diseases such as malaria, chikungunya and zika are particularly prevalent in Belize. Before starting our placement we were provided with a teaching session on each of these diseases, how they are treated and the signs and symptoms to be aware of. This was particularly useful to enable us to screen for these illness correctly when taking histories from patients. As these diseases are common and can cause significant morbidity and mortality, a huge emphasis is placed on preventative measures. Leaflets and posters around the hospital explain the importance of taking precautions from mosquito bites and what symptoms to be aware of.

Another major public health priority is the reduction in HIV transmission. Unlike the UK, many Belizeans do not have access to the internet and other means of technology that we use to distribute health campaigns. Instead there are many smaller health promotions and projects that work on a local basis to educate people about ways to limit their risk of contracting HIV. During my time spent at the hospital I was able to attend a clinic in which a huge focus was on HIV prevention. Patients were taught about methods to preventing transmission and recognising features of opportunistic infections. When discussing these clinics with one of the senior doctors, it was clear that despite a lack of funding in the hospital, a huge emphasis was placed on preventative medicine. In his opinion education and practicing preventative medicine was the best way to manage these conditions. I feel this programme empowers patients to take the necessary steps to avoid contracting HIV and from engaging with this programme they are able to educate others and spread the importance of practicing safe sex. Despite this programme, many of the healthcare promotions we see in the UK are not practiced in Belize. Most notably, the absence of promotions for healthy diet and smoking cessation. The most prevalent non-communicable diseases that affect the Belizean people are cardiovascular disease, obesity and diabetes, much like we see in the UK. I feel that the ministry of health in Belize should be seeking to implement campaigns to address these issues, especially targeting children to prevent them developing bad habits at a young age.

Poverty is a poignant part of Belizean healthcare, problems with nutrition in the paediatric population is a particular problem. In an attempt to address this, breast feeding is avidly promoted for mothers and their babies. However, I noted that once a child is weaned, there is little advice or help to guide parents on what to be giving their children. This is further complicated by families being unable to afford to provide for their families. As a result the cheaper fizzy drinks and 'junk food' end up being the staple for many families. It was common in the hospital to see young children with coke cans in hands and many dental caries. The government and health authorities really need to be doing more to address this problem to ensure these children have the best opportunity to live long and healthy lives.

It was a great experience to witness medicine practiced in a different country. It was interesting to see that the challenges and hurdles that we face in the NHS are also seen in Belize. I have learnt a great deal about the importance of health education and preventative medicine and hope to put an emphasis on this during my future career.