

### Year 5 SSC Reflection: Part 5C

#### **1. What are the common conditions that affect patients in Belize and contrast these to the UK, what national health campaigns are run in the country?**

Belize is a country with an approximate population of 324,000 as of 2012 according to the WHO website. At San Ignacio hospital 11 doctors serve a community of 40,000. I was able to conduct my elective at San Ignacio Hospital, where I encountered many conditions and was able to learn first-hand the common diseases affecting the citizens of Belize. It was very obvious that the vast majority of patients suffered from asthma, hypertension or diabetes. The doctor explained to me how the compliance to medication was poor and very little effort is made by patients on changing to healthier lifestyles. He believes there needs to be a national health promotion educating patients on dangers of non-compliance in the long-term, especially diabetics. This chronic disease profile is very similar to the UK where such diseases are also very prevalent. However I believe that the public is well educated on the diseases and have much better adherence. In Belize there is a high prevalence of HIV/AIDS and other infectious diseases such as tuberculosis.

There are a number of health promotions in Belize. Currently there was a very large push on breastfeeding, with numerous posters displayed everywhere around the hospital. There is a lot of education and high vigilance by the doctors on making sure patients are vaccinated. There was also a big emphasis on contraception use.

#### **2. What is the system of healthcare provision in Belize and contrast this to the NHS? What are particularly good and bad aspects of both?**

The healthcare provision in Belize and the UK is similar in the respect that it is free at the point of delivery. Belize health insurance schemes are used in order for this to happen. I expected the wards to be very basic and they were, there was a significant lack of resources and the hospital was very understaffed. As mentioned above 11 doctors serve a population of 40,000. As this is a developing country I did expect there to be a big difference between the healthcare provisions. There are many tests that are not available so readily and take a lot longer to process than in the NHS. I found that patients in Belize were very grateful for the care they received and were very respectful of the doctors. This was very nice to see where doctors were able to practice properly without having to worry about such high rates of impending lawsuits as we do in the UK. I think it created happier and more trusting relationships between patients and doctors. It is unfair to compare the healthcare systems, as there is such a huge gap in the funding for both, however overall the level of care the patients received with such limited resources impressed me.

### **3. Get a broader understanding of how Physicians deal with HIV/AIDs and other infectious diseases**

Belize is known to have the highest HIV prevalence in Central America, having at least 4,800 people living with HIV. In the age group of 15-49 AIDS is leading cause of death. The Doctor explained this to me that in Belize the lack of education on HIV prevention and other factors contribute largely to its high prevalence. An important factor is the very negative stigma surrounding the disease meaning patients are too embarrassed to present at clinics and get help. There have been campaigns to educate the nation and help prevent the transmission of the disease. The doctor mentioned the "Together We Can" (TWC) campaign as having been very helpful. Further measures have been put in place with a majority of women receiving HIV testing and almost all new-borns receiving prophylactic medication. Posters for the 'National Aids Program' help encourage getting tested for HIV as soon as possible.

There is also the importance of the Doctors themselves educating patients on safe sex and how to prevent transmission of disease. However the Doctors feel like more national health campaigns are need as it is very difficult for them to educate the masses.

### **4. Practice more practical skills, as well as learning how to communicate to a variety of different people. Also practice history, diagnosis and management plans.**

I had a fantastic experience working in San Ignacio Hospital. I believe I was able to learn so much in such a short time. I was able to practice lots of blood taking and cannulating which are the bread and butter for the junior house officer. I was able to communicate with all the patients effectively as they spoke English. I found it very easy to build up a very good rapport with them, as they are very friendly and extremely respectful. I was able to help take effective histories and think of suitable differential diagnosis. I found that I still have so much to learn. I am sure that I will get much better with lots of experience in the coming few months as I begin as a junior house officer. I was able to plan what I would do ideally for the patient if the management were up to me. It was quite different however to the Doctors management plan, as the resources are limited and not so easily accessible.