My First Medical Brigade  By Carrie Griffiths

Acts 1:8: “But you will receive power when the Holy Spirit comes to you; and you will be my witnesses in Jerusalem, and in all Judea and Samaria, and to the ends of the earth.” (NIV)

I have been on numerous mission trips over the years, but I had never participated in a medical brigade. In this case, the organization I went with, Shoulder to Shoulder (shouldertoshoulder.org) is a private, non-profit, non-governmental organization. They are not faith based. Therefore, our week of service is differentiated from a medical mission by calling it a medical brigade. My week with Shoulder to Shoulder (Hombro a Hombro) in the small village of Guachipilincito, Intibuca, Honduras was more rewarding than I could have ever anticipated! I was a nervous wreck prior to going as this was the first time I would be in the pharmacist role on a medical brigade. I was unsure of how I would feel, act, and interact with the community, especially since everyone else on the brigade had been multiple times. I wondered if the townspeople would be more receptive to the team members that had been there before. I knew one thing: being fluent in Spanish, I would at least be able to communicate with the members of the community on my own.

Our brigade of 5 (not including our interpreters) arrived at the small village on a Sunday afternoon and were greeted by several ladies in the community with a lunch. Our group consisted of a doctor, although 2 Honduran doctors were to join us later in the week, a dentist, a soon-to-be medical student, a college-aged student volunteer and me, a pharmacist. We spoke with them to determine any concerns since the last time the brigade was there four months earlier. Afterwards, I went to explore the clinic and to see where the pharmacy was located. I discovered a beautiful clinic with four exam rooms, an intake area, a pharmacy (this is what I was most excited to see), and a large room for group activities.

The pharmacy was stocked with medications that were needed by the community – among them were medications for hypertension, diabetes and seizures along with antibiotics, vitamins, birth control, and acetaminophen. Some of the medications we were able to obtain ‘in country’ and others we brought with us. It was a very limited but appropriate formulary for the community.

The clinic set up was very different than what I expected knowing the type of corruption that is facing Honduras. Unfortunately, throughout my short time in Honduras, I witnessed first-hand how the corruption of the country has affected this small village. In a recent opinion piece by Sonia Nazario in The New York Times called “Pay or Die”, she describes the gang violence and corruption within the country.1 While the United States does provide aid (although it has currently been cut off), those who are in the biggest need never receive aid due to the governmental corruption.

We had clinic the next four days for those patients who could come; no appointment was necessary. Our team saw the patients as they arrived. The patient would have their vitals taken, and then see the doctor for either an acute problem or a chronic condition. At this clinic, only enough medication is given to the patient to last them until the next brigade comes, which is usually every four months. Shoulder to Shoulder has been providing care to this community for over 20 years and they have built a strong trust with the people of the village. The patients receive the medications needed, along with a supply of acetaminophen or vitamins in order to have some on hand if it was needed. Boy, did I fill a considerable amount of prescriptions and counsel a lot of patients over those four days! While there always seemed to be a line of people waiting to pick up medications, none of them complained. They waited patiently until I could speak with them regarding their

Dr. Carrie Griffiths completed her Doctor of Pharmacy degree from Wingate University School of Pharmacy in May 2010. Following her graduation, Dr. Griffiths completed a PGY1 residency at the Central Texas Veterans Healthcare System in Temple, TX, and a PGY2 specialty residency in Critical Care at the North Texas Veterans Health Care System in Dallas, TX. Dr. Griffiths then transitioned her role into academia at Wingate University in Wingate, North Carolina where she is an Associate Professor of Pharmacy. Her practice setting is with Virtual Critical Care at Atrium Health in Mint Hill, NC. Her areas of interest include tele-therapy and toxicology.

medications and answer any questions they had. This was such a refreshing change from what I have experienced in the United States working for a retail chain... and I didn’t have insurance issues to troubleshoot!

For those patients who were unable to leave their homes, we went on home visits. I wish I could say that we were able to drive directly to the house, but since the village is located on the side of a mountain, many homes required some hiking to reach them. So, that I did. I put on my hiking boots and followed our guide. While the hikes were more than I anticipated (I will have to get in better shape before going again in October), the scenery was absolutely breathtaking! I have never seen anything more beautiful. After reflecting on these journeys, God gave me the strength to make those home visits. There were a few times I wasn’t so sure I would make it! Then I remembered the following verse: Philippians 4:13 (NIV) “I can do this through him who gives me strength.”

Once we arrived at the patient’s homes, I was able to see how they live, which fascinated me. I am a world traveler and the one thing I enjoy the most is to see how the natives live. Many homes had wild livestock such as chickens, turkeys, and cows running around. They also had farmland where they would grow corn or maize and vegetables. These people truly live off the land. I was able to see how God has provided and continues to provide for them.

While faith and ministry wasn’t the focus of this medical brigade, the Lord was definitely present. I felt led to share Jesus to those with whom I spoke. So after counseling each patient about their medications, I would tell them, “Dios le bendiga” which translates to “May God bless you.” Psalm 96:3 reads “Declare His glory among the nations, his marvelous deeds among all peoples.” (NIV)

The Lord moved in me during the week I was in Honduras. The people of the village blessed me more than they will ever know. They made me appreciate what I have and I look forward to returning in October 2019 and hopefully yearly. I’m thankful that God gave me this opportunity to not only provide pharmacy services in this village, but also to share Jesus with them. I am excited to begin building relationships with the people in this village and to watch the children grow up.

Reference: