SERVING INDIA’S HIMALYAN POPULATION: A MEDICAL AND CULTURAL EXPERIENCE
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Background Information: Epidemiology
• Annual income per capita: $1219
• Infant Mortality Rate: 44/1,000 live births
• Adult Mortality Rate: 242/1,000
• AIDS Infection Rate: 2.39 million people live with AIDS (50% decline in the last decade)
• Official Language Spoken: Hindi
• Population: 1.237 billion

Goals of Travel Abroad:
• To gain international health exposure and to apply this experience to our development as future physicians.
• To further our medical education by learning, developing and applying clinical skills in a non-traditional setting.
• To be exposed to knowledge, customs and social practices that reflect a different cultural frame of reference from our own experience.
• To develop our ability to relate to culturally different populations and to feel comfortable working in diverse environments.
• To enhance personal growth and development through exploration of our own cultural values and biases.

Himalayan Health Exchange:
• Aim: to provide healthcare and dental care to remote areas of the Himalayas in Northern India
• Spiti Valley: A remote area in desperate need of healthcare with about 1 person per square mile.

Villagers showed their thanks by gifting us with Buddhist scarves

Trip Summary:
Our experience was rewarding, eye-opening, and life-changing. The main focus of the trip was to provide medical care to local populations. Due to significant barriers to health care, the people of Spiti were very receptive and grateful for the care we provided. By the end of 10 clinic days, our group of 25 medical students, 3 physicians and 1 dentist saw a total of roughly 1,000 patients, a substantial number given the small population size of each village we visited. In terms of our medical education, we benefitted from the hands-on style employed by the physicians on the trip, which allowed us to practice interacting with patients, learning about endemic diseases, taking histories and physicals, and writing SOAP notes. During our time off from clinic, we enjoyed touring Buddhist temples and learning about the ancient culture of the Himalayas. Ultimately, our time in India strengthened our cultural awareness, compassion, and ability to work as members of a team.

Conclusions & Lessons Learned:
• This trip afforded us a better understanding of the medical issues that arise in a third world country and more specifically, what the barriers to healthcare are in underserved populations.
• Barriers to healthcare in Spiti Valley are related to access. Our trip was the only form of healthcare that certain towns will see all year. The nearest hospital is typically a two-three day journey away.
• We appreciated the importance of vaccinations, as we saw many women with cervical cancer, something that is avoidable in most US women with the use of Gardisil.
• In the future, we plan to do a global health elective, as we now see the invaluable experience that traveling abroad has brought us.