This past summer I participated in the Interhealth South America program for advanced beginner/intermediate Spanish speakers through the University of South Florida. The program acted as an introduction to both medical Spanish and the Ecuadorian and South American primary and community health care systems.

The first week of the program was held in Quito, one of the main cities in Ecuador. While there, we spent the week living with host families throughout the city and taking medical Spanish courses during the day. In addition, we also given group assignments that encouraged us to explore the city of Quito further and become a bit more familiar with its health system. For instance, my assignment consisted of visiting a local market to learn about the alternative/community medicine that is practiced within Ecuador. We spent the afternoon speaking with Herbalists and being taught about different roots/herbs that can be used to ward off everything from “evil spirits” to urinary tract infections.

Once the week was over, we then traveled to Otavalo, a rural community north of Quito, famous for its indigenous community and marketplace. Our days here were spent continuing medical Spanish lessons and being exposed to the rural lifestyle and medical care of the local Quechua community. In addition to visiting the public hospital which practices modern medicine, we also spent some time at Jambi Huasi, which translates to “Health House” in English, and provides both modern and traditional medical treatment to the indigenous people of the area. While there, we met with various healers and learned about the methods and rituals that they employ in order to treat the sick. In addition, we were also able to witness a personal cleansing within the house of the local Shaman. However, not only did we observe medical practices, but we were also able to set up a health brigade of our own in a nearby school. Here we provided check ups for the students, dispersed anti-parasite medication, and held an educational program on the benefits of drinking clean water. Finally, in an effort to acquaint us with the everyday living of the indigenous people, we also spent a day visiting with local artisans and tradesmen of the community.

The third week of the program consisted of traveling into the rainforest to a small community off the Napo River. Each morning we would wake up, get in a canoe, and head down the river to a different community in which we would set up a medical station in whatever structure they could provide us with. Personally, this was the most amazing and worthwhile part of the trip, as we spent the most time interacting with the people of the area. It was here that I felt our presence made the greatest impact, as only two months earlier the area had lost its local doctor due to budget constraints. Unless one was willing to travel down river a few hours (which unfortunately most individuals could not even afford) we were the only medical personnel that they would be seeing over the next few weeks. However, as much as the communities appreciated our attempts and while we were able to help many, it was also an extremely frustrating time having a limited first year medical student education, and not having enough medicine to treat the entire community. Also, once we left, who was going to follow through on their care? Nevertheless, it was a great experience.

Our final week was spent returning to Quito, where we took up again with our medical Spanish lessons, and continued to hold medical brigades at a school that had been set up for the children of working mothers. Most of this week was spent winding down from our time in the rainforest, however it also was a very memorable experience.