

# LONG-TERM TIES AID POPULATION HEALTH

“**Y**ou waste so much of our time, and people who say they are coming to help are often totally unprepared.” This sums up what two African health care executives at the February 2015 African Christian Health Association Conference in Nairobi, Kenya, told me about short-term medical missions. Their comments were a reminder that U.S. health care, unfortunately, hasn’t always partnered as holistically as it could to improve the long-term health of a community.



**BRUCE  
COMPTON**

CHA recently had conducted research on short-term medical mission trips, and I was able to tell the executives that those who have traveled on short-term mission trips concede that their experiences often are more valuable to the travelers than to the in-country partners.

Our conversation was a good, two-way dialogue. By the end of the discussion, the three of us agreed that the work being done is well intentioned — but we also agreed that there is great opportunity for partnerships that truly strengthen a community’s health access. Our conversation revealed a need for more dialogue and honest feedback, and several experts from Africa have agreed to weigh in during our next phase of study.

In this edition of *Health Progress* addressing new models of care in community settings, it seemed appropriate to highlight Providence Health & Services and its work in Chicamán, Guatemala. Providence’s goal is to improve population health by investing in health care access for the local community through partnership with local nonprofit organizations and engaging Providence clinical and administrative staff in transformational international service.

The approach relies on establishing and maintaining relations in a single geographic region so that the relationships become long-term. The hope is that by getting to know the people in the region and coming to a mutual understanding of needs, Providence will avoid the pitfalls I heard about in Africa.

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## Thinking of Global Aid as Population Health

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**W**e live in a connected world. The health and well-being of every person affects us all, regardless of geography or borders. A crisis such as the spread of the Ebola virus, or even the measles virus, illustrates why we must think globally when we provide resources and education that help build sustainable access to health care. The good of the many benefits the good of the one.

Regardless of national boundaries, improving lives wherever relief, comfort and care are needed has been a part of the Providence mis-

sion since the Sisters of Providence began their work in Montreal nearly 170 years ago. From their French-Canadian homeland, Mother Joseph and four sisters journeyed in 1856 to the Washington Territory in the United States — a foreign country, to them — to answer a call for help from a pioneer community.

Nearly 160 years later, Providence continues to carry the same missionary spirit of international outreach. We are compelled to extend our healing ministry to the most vulnerable, locally and globally.

Our international programs include public health and surgical teams, educational exchanges and medical surplus donation. Each year, our supply warehouse recovers and responsibly redistributes about 20 tons of supplies to our partners in 25 economically developing countries. A significant part of the international program is to take a population health approach and focus on a single region with significant, basic needs.

Guatemala is one of the most impoverished countries in Latin America, where preventable illnesses are the leading causes of death, malnutrition is constant and health resources are completely unavailable in many areas. We are focused on improving the health of communities in Chicamán, a severely impoverished region in the country's central highlands.

This approach is a shift from the short-term service trips that Providence historically has funded. Short-term service trips can be critical in times of disaster, and they can provide immediate relief for acute and preventive care, but they are not a sustainable solution for creating access to health care. Our intention is to make lasting investments, and we know we will have more success with a community-focused, long-term partnership.

We never assume we know what the community needs. Instead, we partner with in-country organizations that understand the needs and complexities, and we expect to achieve measurable change for the long term.

#### **LONG-TERM POPULATION HEALTH**

A community-focused approach will achieve the greatest impact where it is needed most, resulting in long-term population health improvements and a strengthened local health system — not to mention brighter futures for those in need.

By embracing the size and resources of our five-state health system, Providence is supporting local efforts, investing in existing infrastructure and

### **The experience causes us to challenge our assumptions, witness the inherent dignity of every human and take personal responsibility for inequities and injustice in the world.**

working alongside community leaders to achieve the following results in Chicamán by 2017:

- Reduce child malnutrition from 35 percent to 15 percent
- Decrease diarrheal disease by half, from 41 percent to 20 percent
- Increase prenatal care from 22 percent to 60 percent
- Strengthen health system delivery for 35,000 residents

To meet these goals, our work includes public health solutions such as clean-burning stoves, sanitary latrines and clean water systems that get right to the root causes of serious health risks in Chicamán. Additionally, our clinicians not only provide surgical relief and medical and dental outreach in remote villages, but they also invest in strengthening the local health system through clinical education, community health worker training and educational exchanges.

It is critical that our international efforts create sustainable solutions that can be locally driven. We do not do this work alone. Providence has established relationships with like-minded in-country partners, including Medical Teams International, Faith in Practice and the Universidad de Rafael Landívar.

#### **ONE PERSON AT A TIME**

Incremental steps can have dramatic, lasting impacts, whether it is nearly 160 years ago when the Sisters of Providence came to the U.S. Northwest, or

fewer than 10 years ago with a medical supply donation that set the stage to later help save the life of a Guatemalan child.

In early 2013, two Providence clinicians were volunteering to install stoves in Guatemala. They discovered a baby in serious condition with apparent pneumonia, and they rushed the child to the nearest clinic for a referral to the hospital some distance away.

The clinicians knew they needed to use a nebulizer on the child, and it turned out the clinic had a nebulizer — just one — that, they realized, had been donated years before. How did they know? The nebulizer bore the former Providence Health System logo. It was just one of the thousands of medical supply items Providence donated throughout the world. That this one nebulizer was in a rural clinic in Guatemala, just at the right time, was providential.

#### **SOLIDARITY AS FORMATION**

Following in the steps of the Sisters of Providence, our international work continues a tradition of compassionate service and solidarity. At its root, our work in Guatemala is formational. The experience for our caregivers who volunteer is as transformative for them as it is for the people of Chicamán.

This opportunity for personal and organizational formation develops deeper understanding of the Providence mission. It gives a different perspective when we not only are serving those who are vulnerable, but are working alongside those who are vulnerable. The experience causes us to challenge our assumptions, witness the inherent dignity of every human and take personal responsibility for inequities and injustice in the world.

My own experiences installing clean-burning cook stoves in Guatemala reaffirmed for me that Providence must continue to not only serve the poor and vulnerable, but to be a witness to their needs.

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