

# Personal Reflections

## A Call for a People with a **Vision**

by **Linda I. Davis, PharmD, MA, TTS**

*Address given at the Hooding Ceremony for the 2011 Graduating class at Loma Linda University, School of Pharmac*

Ladies, gentlemen, family, friends, administrators, faculty, staff and especially the graduates of the Class of 2011, welcome to the Loma Linda University School of Pharmacy's sixth annual Hooding Ceremony! To the family and friends of our graduates who have given endless support and waited patiently for this season of celebration, tonight is a time to celebrate your contribution, along with the graduates, in this tremendous accomplishment. I congratulate you and thank you for encouraging your loved one when they needed it most. Finally, to the ladies and gentlemen of the hour, the graduates, I congratulate you for a job well done.

Four years ago this brilliant group of students arrived on the University campus eager, excited and, dare I say, some a little nervous about the new journey they were embarking upon. The interesting coincidence about my connection to this class is that their first year at the School of Pharmacy in 2007 was my first year as faculty. I had the privilege of spending time with them on their orientation retreat. Since then, it has been a fantastic whirlwind to see these students, now graduates, excel through the program.

In your first quarter here, you all wrote an essay sharing your life journey and your passion for the profession. You started this journey with a vision. Though the experiences of the last few years may have changed your vision, it is my hope that your passion for the profession is a fire burning just as bright as when you entered the program, if not ten times more brilliant!

My brief remarks tonight are to remind you to keep dreaming. Keep setting new goals to reach ever higher heights. See the height to which you desire to climb and you will get there. You may even have to fight to keep your vision alive, but this struggle is worth enduring. The wisest of kings once said, "Where there is no vision, the people perish" (Proverbs 29:18 KJV) and President Theodore Roosevelt said, "Far better it is to dare mighty things, to win glorious triumphs, even though checkered by failure, than to take rank with those poor spirits who neither enjoy much nor suffer much, because they live in the gray twilight that knows not victory nor defeat."<sup>1</sup>

So keep dreaming. Keep reaching. Our profession and your patients are counting on you. Endure the uncertainty of tomorrow with joy and peace in the confidence of the One greater than you that has already brought you this far. "Therefore do not cast away your confidence, which has great reward. For you have need of endurance, so that after you have done the will of God, you may receive the promise" (Hebrews 10:35-36 NKJV).

Today we celebrate that you have done well to maintain your vision, confidence and endurance which has brought you here. We sincerely congratulate you for that.

If you ever lose confidence in yourself, know that the faculty at Loma Linda University School of Pharmacy has every bit of confidence that you will offer excellent patient-centered pharmaceutical care. We are confident that you will be leaders in your practice settings and that many of you will be leaders in the profession. We are confident that you will touch thousands and perhaps millions of human lives by healing their bodies, souls and minds. Yes, you have a special gift and calling as Loma Linda University graduates to continue the healing ministry of Jesus Christ. If you ever feel overwhelmed by this ideal, remember in humility we are all vessels for the Holy Spirit to flow through and you have been given authority to co-labor with Him (I Corinthians 3:9a NKJV).

Part of labor and the professional working world is being dressed for the job, so tonight your educators and faculty are here to hood you. The excitement and thrill of this event comes in part from the mystery of its history and its significance.

What is this history and significance you ask? Well, in English tradition, the hood has a history dating back to the thirteenth century, used by monks, clergy and university students. 1 Prior to this, the hood originally had no academic significance and served the function of a head covering, a cape to cover shoulders in the cold and as a bag for alms.<sup>2,5</sup> By the fifteenth century graduations began to feature hoods with distinctive colors and linings.<sup>6</sup>

Tonight the hooding tradition reminds us that the covering and care of your mind with the provision of knowledge has been our privilege. The tradition of the utility of the hood to store finances reminds us that just as in the Middle Ages, you too will be sharing your intellectual resources to benefit and nurture yourselves and others. The tradition of the hood and the regalia you are now wearing reminds us you have authority in a new field. The symbolism of the hood also reminds us that amidst this academic feat, you also have a covering, a protection, a presence and guide with you always. We know this because He said, "I am with you always, even unto the end of the world" (Matthew 28:20b KJV).

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## Extending Hands to the Dominican People

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As part of the medical missions program at Palm Beach Atlantic University, 13 student pharmacists, a pharmacy practice resident, and 2 clinical faculty went to the Dominican Republic in June 2011.<sup>1</sup> The School partnered with VivaKids, a non-profit organization that serves underprivileged children around the world.<sup>2</sup> VivaKids takes a holistic approach to working with children, focusing on spiritual, physical, social, and mental needs.<sup>3</sup> The field directors and partners of VivaKids strive to aid children in the Dominican Republic by providing classes, workshops, health clinics, feeding programs, Bible studies, and discipleship groups.<sup>2,3</sup> The foundation for VivaKids is found in Luke 18:15-17 (NIV), "But Jesus called the children to him and said, 'Let the little children come to me, and do not hinder them, for the kingdom of God belongs to such as these. I tell you the truth, anyone who will not receive the kingdom of God like a little child will never enter it.'" We describe the experience of the team in this article.

### Preparing for the mission trip

Considerable time and dedication from leaders to prepare the budget, solicit funding, book flights and accommodations, develop a pharmacy formulary, and order prescription medications, over-the counter products, and various supplies are essential to preparing the team. It also requires dedication from students to learn about the culture and the health needs of the people they are preparing to serve. Encouragement for this aspect of the trip can be found in Galatians 6:9 (NIV), "Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up." The team needs to be physically, emotionally, and spiritually prepared for the experience. To prepare we used a series of educational meetings that included Bible readings and personal testimonies and reflections being shared among team members. The team consistently prayed for God's guidance and blessings while preparing for the trip. Every meeting was filled with His presence and we saw God enable the preparation process to go smoothly.

## **Serving on the field**

Jesus said, “Dear children, let us not love with words or speech but with actions and in truth.” 1 John 3:17-18 (NIV) “There will always be poor people in the land. Therefore I command you to be openhanded toward your fellow Israelites who are poor and needy in your land.” Deuteronomy 15:11 (NIV) Faculty and students on this team were able to put these words into action. They collaborated with interpreters, health care professionals from the Dominican Republic, including three physicians and several medical students from the School of Medicine at Universidad Central del Este in San Pedro de Macorís. The multidisciplinary team provided medical care to patients with acute infections and with chronic conditions. Despite uncomfortable working conditions in makeshift clinics, hot and humid weather, flies, and mosquitoes, the team served a total of approximately 600 patients, half of which were children, and dispensed more than 1,800 prescriptions in six clinic days (Table 1). Team members understood the compassion of Christ and the joy of being obedient to Him. “When Jesus landed and saw a large crowd, he had compassion on them and healed their sick.” Matthew 14:14 (NIV)

“Then the King will say to those on his right, ‘Come, you who are blessed by my Father; take your inheritance, the kingdom prepared for you since the creation of the world. For I was hungry and you gave me something to eat, I was thirsty and you gave me something to drink, I was a stranger and you invited me in, I needed clothes and you clothed me, I was sick and you looked after me, I was in prison and you came to visit me.’” Matthew 25:34-36 (NIV)

Our purpose as a team was to serve the physical and spiritual needs of the poor and children. Team members prayed with each patient, asking for God’s grace, healing, and peace. Crosses, bracelets with beads were used to help in sharing the gospel, and bookmarks with Scripture were provided during patient counseling. We were overjoyed to see many patients praising God and praying for the well-being of the team. A powerful bond developed between the team and the patients. Between clinic days, team attended Sunday Mass at Catedral de Santa María la Menor in Santo Domingo, the oldest existing cathedral of the Americas and an evening service at Iglesia Emanuel in San Pedro de Macorís.

## **Involving student pharmacists**

Students at the Gregory School of Pharmacy may choose an elective advanced pharmacy practice experience (APPE) in medical missions. Of the 13 students on the team 8 used this as an APPE elective. Students getting APPE credit were required to prepare and present educational activities describing the culture and health beliefs of people in the Dominican Republic, and on common diseases encountered in the country. All students were required to participate in the screening patients for hypertension and diabetes mellitus, keeping an active inventory of medicines, compounding, dispensing prescriptions and over the counter products, and counseling patients on lifestyle modifications and the proper use of their medications. Students were encouraged to develop servant-leader attitudes, share testimonials and devotionals, and engage in evangelism. After returning, students reflected on their experience and presented a report in Pharmacy Chapel.

The medical mission experience was demanding, rewarding, humbling and enlightening. Each team members used the knowledge, skills, and values acquired in pharmacy school to provide culturally competent patient care and decrease health care disparities. All of the team realized how we are blessed material goods and healthcare, and felt the call to give back. “Each of you should give what you have decided in your heart to give, not reluctantly or under compulsion, for God loves a cheerful giver.” 2 Corinthians 9:7 (NIV) Our desire for this report is to encourage the pharmacy professionals to fulfill what Jesus commanded, “Therefore go and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit.” Matthew 28:19 (NIV)

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# Students

## Student Mission Scholarship Report

by **Meredith Bodah, PharmD Candidate**

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With assistance from the CPFI student missions scholarship, I was able to join a short term mission trip to La Union, El Salvador. Six other people from St. John Fisher College were on the team that consisted of 35 other health care professionals and students from the United States and Canada. My intent for joining this trip was to show God's love in a tangible way. Our team partnered with a local church. Members of the church helped with translating and counseling. Our team provided care to approximately 2,000 people throughout the course of the week. Many of these patients could not afford to see a doctor outside of this clinic.

Our typical day started with a time of devotion, worship, and sharing testimonies. We then took a bus to the naval base at La Union, where we set up the clinic. On our arrival, people were already lined up waiting for the clinic to open. Every patient saw a physician or physician's assistant, visited the eye clinic, and saw a dentist if needed. My time was primarily spent in the pharmacy. Patient interaction is somewhat limited due to the busy nature of the pharmacy, but I was able to shadow a physician for a half day.

God used our team to touch the people in El Salvador, and worked in me during this trip. My first mission trip was a year ago, and this second trip was just as much of a learning experience, as was the first trip. The most challenging part of this trip for me was the limitation of providing health care in another country. We did not have the resources familiar to most team members, for example the ability to treat chronic diseases. It was really difficult to watch people with these problems leave our clinic without receiving the care they needed. It was frustrating, but I was constantly reminded that God is not limited by the things that limit us. He is able to heal, both physically and spiritually.

My impression is that the trip was a success for me and for the team. While we were limited in many ways, we were not limited spiritually. It was exciting to share the Gospel of grace with people who attended church regularly, but were only familiar with salvation by works. I am sure the seeds we planted start to grow and produce more fruit.

## El Salvador Reflection

by **Casey R. Utter, PharmD Candidate**

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Within a month after my return from a weeklong mission trip, memories of La Union are fading. Pictures, journal entries, and conversations with team members on the trip are evidence I went to El Salvador. However, I have questions about the impact I made and how the trip impacted me.

As a third year pharmacy student, I must complete 20 hours of service learning to better understand and appreciate the patients I serve. I knew participating in a medical clinic for the underserved in another country would help me to accomplish these objectives, while experiencing a new culture and learning more about what God's plans are for me.

The goal of the mission team was to set up a medical clinic for five days in La Union, El Salvador, with the purpose of meeting the medical needs of people in that area. Love and compassion for others, along with the desire to help people through emotional, physical, and spiritual struggles have always been important to me. This trip would help me to see the impact I could have on others through God's help and what I can gain from other people in this setting.

Our team of about 40 members arrived in San Salvador, El Salvador on a Saturday afternoon, looking forward to the upcoming week. Even though 6 of the team members were from my college, I knew there would be many people to meet, and many more to serve in the clinic. Even though I was anxious about meeting others, throughout the trip I became more comfortable and open in these interactions. I wondered what the people would be like, and how different from each other we would be.

On Sunday morning the team went to a local church, and many of my questions started to be answered. The service was in Spanish, but everything was translated into English. Before the sermon, our team and the church members worshipped for over an hour in both languages. Reflecting on the experience, it seems surreal. As our voices joined together in praise to God, His presence permeated the room. I never felt such love and devotion to our Father, and it was a blessing to be part of this meeting. My fears dissolved when I saw how we came together in praise and worship to God. On an emotional high by Sunday afternoon, I felt prepared for the rest of the trip.

Early Monday morning, we arrived at the clinic. A couple of hundred people were already waiting. We started taking patients within a half hour and rushed to prepare the pharmacy. The pharmacy group, including 3 pharmacy students, a pharmacy faculty member, and I, worked quickly to unpack and organize over 20 suitcases of medications and supplies. The medications were arranged alphabetically and by class, and saw our first patients within the hour. Most prescriptions were simply written for a diagnosis. For example, "antibiotic for UTI," "PPI," or "Daily Multivitamin." Using our clinical judgment, knowledge, and what was available in the drug supply, we provided the appropriate medications. This is in contrast to pharmacists in New York who have little to no prescribing ability. Being able to use the knowledge I have worked hard to learn was empowering. I felt my skills were finally being utilized, and fellow health-care professionals appreciated my knowledge. The camaraderie we had was a breath of fresh air.

Love and support was expressed among team members and by the Salvadorians. Our translators, high school seniors volunteers from San Salvador, worked tirelessly and graciously to help us communicate with patients. After long, hot, and exhausting days our translators remained positive and energetic. The translators expressed compassion for the people. Such selflessness is commendable, and these students were lights of hope throughout the clinic week.

In addition to student translators and church volunteers, there were 2000 patients who touched my life. Throughout the five days of clinic we saw approximately 2000 individuals. I have never met such humble and deserving people. Each patient waited for hours to be seen without the slightest hint of impatience. In the US, we try to rush through doctor's appointments and counseling sessions in a few minutes. Despite the pharmacy being extremely busy, taking time to talk to patients never was a problem.

The pharmacy was the last stop for our patients. After being in clinic all day, patients and families waited longer for prescriptions to be filled. My inclination was to move quickly as prescription order piled up. After speaking with several patients I realized speed was not important. My primary objective changed from filling prescriptions quickly to filling prescriptions productively and having a conversation with each patient. Most patients did not have chronic diseases treated as our medication supply was limited to acute therapy. However, taking a few minutes to show emotional and spiritual support was comforting. I was blessed to have personal and meaningful contact with patients. This included praying with them and for others struggling in their lives, reassuring them of care, or to simply sharing a hug. I felt that with God's help, I was making an impact in these people, and was never more satisfied by what I was doing.

Although I was able to impact the lives of others on the trip, God, and the people and patients I worked with were profoundly impacting my life. I gained new appreciation for medical professionals of different areas working together.

I felt more compelled than ever to help those in need in the US, especially after seeing the selflessness of our translators. Finally, I regained the love I lost for my patients, through my encounters with the beautiful people of El Salvador. Before the trip I felt somewhat disillusioned with healthcare in the US, but through the trip I realized why I entered pharmacy school. My desire was to help those in need, no matter what their situation or how they might treat me in return. My purpose is to love them as God loves me, and provide them with medical, emotional, and spiritual support. I completed the 20 volunteer hours and promoted civic integrity while on the trip. However, my goal now is to always look on these memories with fondness, and not forget what they have taught me or how they have impacted my life.

## Close to Home but **Worlds Apart**

by **Scarlett Allen, Angelo Bugayong, Julie Cho, Michelle Cua, Meghan Edgar, Ngoctran Huynh, Christine Jones, Chad Rhodes, Priyanka Vashi, Theanna Willard**

Pharm.D. Candidates, 2012

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Palm Beach Atlantic University, Gregory School of Pharmacy (GSOP), sends students and faculty on several overseas medical mission trips each year to various countries. This year, we participated in the school's first domestic medical mission trip, to a location 40 miles from West Palm Beach. Despite the close proximity to affluent areas of south Florida, the Glades region around Lake Okeechobee faces major health care challenges, due to depressed economic condition. Our team was able to serve in the towns of Belle Glade, Pahokee, and Clewiston, Florida.

The challenges we faced made it seem like we were going overseas. Communication with local organizations was difficult, as there was little infrastructure to accommodate healthcare teams from outside the community. It did not take long to realize that the trip was in God's hands.

Because we remained in Florida, we had to meet all legal and regulatory requirements, especially those pertaining to dispensing medication and limitations on student activities. One of the biggest obstacles was resistance to accepting help from outside of the community. After extensive planning and persistence by the trip's coordinator, God provided contacts in key organizations established in the community. These contacts enabled the minds and hearts of the people to be receptive to assistance and fostered acceptance of our efforts to serve individuals spiritually and medically. The focus of our efforts was on educating youth on preventative care, performing blood pressure and blood glucose screenings, and providing miscellaneous preventative healthcare education for adults.

In preparation for this trip, the team researched the region and discovered much about the area known as "Muck City." Belle Glade is renowned for fertile soil, as reflected by the town's motto, "Her soil, her fortune." The local economy depends on agricultural, mostly crops of sugarcane and corn. Employment is primarily in farming, resulting in limited wages and seasonal fluctuations. The only other major employers are correctional institutions. As an economically depressed area, lower levels of education contribute to a cycle of poverty. Youth focus on sports in hope of a better future. Top athletes in football and basketball in the collegiate and professional levels come from this region. A high percentage of the population is African American, Haitian, and Hispanic. Many of the residents suffer from chronic diseases, such as obesity, diabetes, hypertension, and hyperlipidemia.

The true identity of a city lies within the minds and hearts of its people. Most of the elderly remember the glory days of Belle Glade, when it was a community of pride and success. Agriculture made jobs plentiful and people were able to earn a reasonable living. But increasingly, lower wage jobs were taken by migrant workers and salaries became stagnant. Economic hardships in the area eventually led to increasing crime, depressed property values, and poverty. The effects of the economy on young people caused a sense of futility and despair. Still, a spirit of resilience and determination exists, especially among the children. Amid these challenges and obstacles, our mission was to provide hope through compassion, to spread the good news of Christ, and to provide health screening and encouragement to a medically underserved population.

Diabetes is prevalent in Belle Glade and the surrounding areas. Diabetes and hypertension were the two most common diseases among patients who participated in our screenings. Overall, we encountered several patients whose blood sugar levels were above 350 mg/dL. Some patients had not taken their medication for a variety of reasons and did not understand the complications of diabetes, such as blindness, stroke, renal failure, heart attacks, or amputations. When instructed about diet and taking medication regularly, they seemed apathetic.

Nutrition is another major health challenge in the community. We frequently encountered individuals, young and old, who had symptoms or health-related issues due to diet. One child seen in the clinic presented with a complaint of constipation. Her mother described a diet of fried fast food, pizza, and processed foods. We attempted to address the issue of poor dietary habits. However, reluctance to change was often the response we received. Although people understood the need for better nutrition, they were not inclined to change their dietary habits. Future outreach programs should address this issue.

Regarding spiritual aspects of the trip, it was amazing to see the Holy Spirit quickly make a difference in a person's life, despite agonizing pain. An older Hispanic man wanted us to check his blood glucose and blood pressure. After a series of questions and some prodding, he began to share his feelings and talk about his pain. He had intense pain radiating down both legs. After months of over-the-counter treatment with chiropractic therapy, the pain did not resolve. We suggested non-pharmacological treatments and other medications he might obtain upon referral to a physician. We concluded by asking, "Do you mind if we pray for you?" He seemed elated with our offer. All of a sudden, prayers in various languages were spoken by members of our team and the patient's family. Language was not a barrier to our fellowship. We did not understand the prayers of the family, but God knew what was being prayed. The man and his family were emotionally and spiritually touched. All present felt a power will not be forgotten. This event impacted all of us, especially one man in pain. We were reminded of James 5:16 (NIV) "Therefore confess your sins to each other and pray for each other so that you may be healed. The prayer of a righteous person is powerful and effective."

Before the trip, we questioned how we would be perceived by the local community. We heard the people would be indifferent, unresponsive, and hesitant to receive help. Afterwards, we felt nothing but love from the community. The adults were eager to talk and the children were excited to play with us. All of the children kept asking when we would be back and kept saying, "I'll see you next week." We were blessed by the love of the Lord through them.

The GSOP desires to maintain a long-term presence in the Glades area. We hope to make regular visits to community centers and integrate these into service-learning aspects of the curriculum. Our goal is to focus on diet, exercise, disease state awareness, health screenings, and regularly supply the food banks with hygiene and food products. Additionally, we hope to return to the community, while migrant workers are in the area.

Throughout the trip, we saw God work in the people, and through the generous donations received for building their community programs. The Lord has blessed each of us individually, and as a group, through our experience in the Glades. Galatians 6:9 (NIV) states it well, "Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up." As we took each step in faith, we found that we reaped a tremendous harvest, and, in reality, we received far more than we gave.