

students. CPFI pharmacists willing to accept students and CPFI student members desiring an work or experiential training with a CPFI pharmacist may contact Dr. Jeffrey Copeland (jtcopela@uiwtx.edu). Pharmacists should give their name, facility name and location, contact information, type of experiential opportunity, and availability dates. Likewise, students should give their name, institution name and location, and contact information. When information is submitted, it is consider that permission is granted to disseminate information to individuals registered in the system. This service is designed to facilitate connections and identification of potential opportunities, rather than circumvent existing guidelines or procedures at schools and colleges of pharmacy. All laws, regulations, poli-

cies, and guidelines established by the individual schools or colleges of pharmacy and state boards of pharmacy apply to this service.

## References

1. Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree. Effective July 1, 2007. Chicago, IL: Accreditation Council for Pharmacy Education; 2006: Appendix C. ☞

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**Dr. Copeland** holds a Bachelor of Science in Chemistry degree from Berry College, a Master of Theology degree from Dallas Theological Seminary, and a Doctor of Pharmacy degree from Mercer University in addition to his military education. He is a former

*United States Army ROTC scholarship recipient, Distinguished Military Graduate, Airborne Paratrooper, and Army Pharmacist.*

*While a Captain in the Army, Dr. Copeland married Julie, his beloved wife. They have two sons, Nathan and Matthew. Throughout his pharmacy career, Dr. Copeland has served as a staff, relief, and clinical pharmacist, directed pharmacy education, and served as an Administrator for ACPE. He is a member of Christian Pharmacist Fellowship International, Rho Chi Pharmacy Honor Society, and Kappa Psi Pharmacy Fraternity.*

*Dr. Copeland is the Assistant Dean for Experiential Programs and an associate professor in pharmacy practice at the University of the Incarnate Word, Feik School of Pharmacy.*

# Student News

## God Cares About the Big and Little Stuff

by Kristen Fitzter, Nathaniel Harscher, Kyle Mains, Kimberly TenHoeve, Kylie Webb

*Palm Beach Atlantic University Lloyd L. Gregory School of Pharmacy (GSOP) is committed to conducting short-term medical mission trips each year. The international trips for 2011 were Brazil, Costa Rica, Dominican Republic and Guatemala. This piece is a reflection on the trip to the Orosi and Cartago areas of Costa Rica.*

Life is complicated, and being a missionary does not imply that it will be any easier. Complications for missionaries, especially in the medical field, come in many forms. A core component of medical missions trip is the medications. Not having them takes away the draw we have to bring people to us to explain the love of Jesus Christ. Therefore, a potential complication for medical missionaries is a delayed arrival of medications. There is only one thing to do when you are preparing for a short-term medical mission trip and something like this happens: you pray. In our case, we prayed that God would watch over and bless each person involved in getting the medications to us in West Palm Beach, Florida via a delivery truck from Bristol, Tennessee in just a few short

days. God's hand was evident in the entirety of our mission trip, especially with the delivery of medications. Not only did the medications arrive during our lunch break when we were finalizing the packing, they also arrived while two of the students were on their way back to the packing room. It was an impressive thing to see, as the elevator doors opened, and two huge carts of boxes for the Costa Rica team came through the hall. The boxes were received with great jubilation, and even more so when we heard further details about the story. When the coordinator of the missions program at GSOP received a phone call that a freight delivery was here, she instantly knew it was our Costa Rica mission order. She obtained two carts and another staff member to bring the boxes

upstairs. To their surprise, there was over 250 lbs of supplies! They had no idea how they were going to get them on the charts, let alone upstairs. Just at that point, a university maintenance worker passed by and placed the boxes on the carts. This is when the two students arrived to push the heavy carts to the elevator. Once the supplies were upstairs, the students quickly unpacked, sorted, repackaged, inventoried, and placed the supplies in suitcases for the trip. It was God's hand that provided those medications in just the nick of time. Had they arrived a day later, there would have been no way to take the main medication supplies with us.

God is constantly watching out for us in our most desperate times of need. Just as He provided the medications for us in our last minutes of packing, He prepares and provides for us in other times of need as well. God has His divine hand in everything we do, especially on the mission field. Life comes at us fast, and we need to be prepared with the right reflexes. Take, for instance, the situation we had in the pharmacy on the first day of clinic during this trip. It was approximately 9:00 a.m., and our available doctors were seeing our first few patients. Previously, we were told we would be receiving four medical students from one of the hospitals in Cartago, under the watchful eye of their attending physician, Dr. Gomez. We had worked with him before, and we were proud to have him work with us again. In the morning, the four students arrived ahead of Dr. Gomez and began intensive triage, taking notes and preparing prescriptions for him to sign. At about 10:00 a.m. Dr. Gomez arrived with an additional four students, bringing our total up to eight students with a single attending physician. It was a moment none of us had expected, and we quickly began packing two



*Palm Beach Atlantic University, Lloyd L. Gregory School of Pharmacy Costa Rica Medical Mission Team 2011.*

to three medical students per tiny exam room, with Dr. Gomez running between exam rooms, signing prescriptions, and flooding the pharmacy with orders and questions. The number of patients being seen was stunning, unexpected, and well beyond our capacity to handle. But, again, God is in control. We sorted through the prescriptions from the eight medical students and managed to finish in a timely fashion, thanking God for His blessings, and for giving us the ability to react in an appropriate manner. In everything we do, we must be willing to move in order for God to do His work in our lives.

As so often happens in our daily lives, the intensity of the day led us to focus more on the physical needs of people than the spiritual. Our main goal became the physical demands of the patients, instead of the spiritual needs that we were really there to treat. As a result, the patients were not receiving prayer as they should have, and it was only by God's grace that we realized this after the clinic. That evening at our devotional time,

we discussed the need to pray with patients and how important it is to pray for them on a personal level. The entire group agreed that each of us must be committed to pray with every patient. Our motto was that "no one is left behind." The results of the following day were astounding. People who never had the chance or desire to pray out loud were praying for their patients in a very personal and interested way. It made a dramatic change in the atmosphere of the clinic as God's presence was felt among students and patients, bringing a feeling of peace and comfort to the entire situation. How wonderful it was to see and feel this change as a result of prayer and allowing God to do His work through us!

Each of us has the opportunity to act and react in all situations. This does not, however, mean we can clearly see the proper reaction. In another episode from the Costa Rica clinics, there was an opportunity in which our reaction could have made a negative impact on the way we were received and viewed as missionaries.



**Ultimately, it is a question of whether or not we are willing to step up, step out, and start the journey.”**



This took place in a small church in a plaza, where the buildings are about the size of a small office-space in the U.S. The pharmacy was sized for a maximum of four people, and the two examination rooms were even smaller, having two chairs and a small round table in each. One makeshift “exam area” had to be placed in an open area outside the pharmacy to accommodate the number of patients who needed to be seen. The waiting room and children’s areas were about the size of these two spaces combined, and was bristling with patients, children, mission team members, and the church pastor and his wife. Evangelism was ongoing in an exceptional way, and the pharmacy was moving at a pace comparable to a typical community chain. Throughout the entire process the pharmacy was cramped, the examination rooms were too small and often ended up protruding into one another, and the waiting

area was loud, making it very difficult to focus on the work that needed to be done. However, through the grace of God, nobody complained. Had we complained about the size of the spaces our witness would have been lost to these people, especially to the pastor and his wife, who were so willing to open their church to allow us to serve the people of Cartago and surrounding areas. Even afterward, while asking the students and mission team whether they felt the space was too small, the answer was “I never thought about it while I was there,” or “It had not occurred to me to care, we were not there for our benefit.” What a tremendous witness to other members of the team to hear this and know that it was true!

Finally, let us consider the outcome of these great clinics and our usefulness as missionaries for Christ’s work. Due to the language barrier we were not always capable of

praying for the exact things patients may have needed, but we do not have to know everything, because God does. One of the simple prayers we heard many times while in clinic went something like this: “Dear God, we do not know everything that this person is suffering from, but we know that you do, and we ask that you would bring peace and healing to this person and their families as only you are able to do. Thank you for giving us the ability to treat what we can here, and thank you for bringing this person to our clinic safely, in Jesus’ name, Amen.” Even with the simplicity of this prayer, God knows everything occurring in people’s lives, and He will do as He sees fit to treat them in the way only the Great Physician truly can. It was such a blessing to hear every member of the team praying with patients throughout the clinic. This gave us such a boost in morale when the challenges we faced

became almost too much to handle. We were able to conduct four days of clinic and see roughly 400 patients, treating not only their physical needs but also their spiritual concerns. God desires us to go forth and minister in every way we can. Praying for those we come in contact with is a requisite, not a request. God did not offer a choice when he said *“And you SHALL be my witnesses...”* (Acts 1:8).

Ultimately, it is a question of whether or not we are willing to step up, step out, and start the journey. It is true that not everyone is called to go overseas, but by taking that step forward and offering yourself for God’s purposes, He can use anyone and anything mightily for His name. Being available to heed God’s call is the most important part, and if we are not available, how can we even consider that we are working for God’s

greater good? After all, in a quote from the book *Jesus, MD*, Dr. David Stevens, MD, says: “It’s difficult for God to move parked cars, so take the first step, move forward, and God will direct you where He wants you to be.” It is the prayer of this team that those who read this article will find themselves moved to be available for Christ and willing to step out of their comfort zone, as we all were, to take that leap of faith.

## Serving the Poor On the Other Side of the Sea:

### A Journey to Roatan, Honduras

by Annie Zakian & Madoussou Kane

*“Therefore, I urge you, brothers and sisters, in view of God’s mercy, to offer your bodies as a living sacrifice, holy and pleasing to God—this is your true and proper worship. Do not conform to the pattern of this world, but be transformed by the renewing of your mind. Then you will be able to test and approve what God’s will is—his good, pleasing and perfect will.”*  
Romans 12: 1-2 NIV

In February 2011, two final-year pharmacy students from St. John Fisher College, participated in a 4-week Advanced Pharmacy Practice Experience (APPE) Pharmacy Missions elective rotation at the Clinica Esperanza, in Roatan, Honduras. Located on an island 30 miles off the coast of Honduras, Roatan is known for its tourism. Roatan is 37 miles long and 5 miles across at its widest point. It is a popular vacation spot for wealthy tourists seeking beach vacations and scuba diving in the world’s 2<sup>nd</sup> largest barrier reef, but it also consists of a community of nationals struggling to meet their daily needs.

#### Historical background of the clinic

Clinica Esperanza was founded in 2002 by Peggy Stranges, a nurse originally from Ohio. Previously, she was a missionary nurse and coordinated mission trips with medical and dental teams that provided health care services to Roatan. Roatan is located in Honduras on an island about 30 miles off the coastline.

Originally, it was simply called “The Clinic.” Starting as a small exam room that also served as Peggy’s residence, the clinic cared for the neediest people on the island. Before the building of homes in what are currently called *colonia’s*, they used to be uninhabitable land with steep rugged hills with dense vegetation. The people who couldn’t afford to buy land began to clear brush and dig out the side of the hills to make a flat spot big enough to build a home. The homes range from plastic tents to shacks

made out of wood. The dirt paths to the homes become mud slides during the rainy season and it’s not uncommon for mudslides to destroy some of these homes.

In 2007, “The Clinic” became Clinica Esperanza and developed into a non-governmental organization supported by donations. The main goal of this new entity was to meet the needs of an island that had become more populated with the migration of people from the mainland to the island and an increasing number of tourists. The clinic now provides accessible healthcare in a location more convenient than the island’s hospital so island residents who need care are not deterred by transportation or healthcare costs.

#### Description and vision of the future of Clinica Esperanza

The first floor of the clinic contains a waiting room, triage area, consultation rooms, a laboratory, and a pharmacy. It serves as an ambulatory care clinic for impoverished residents who do not have access to health care. The staff consists of three permanent doctors, two dentists, and a nurse, who are supplemented by volunteers. These volunteers are students who serve in the clinic as part of their professional curriculum or licensed healthcare providers who are willing to donate time to the clinic.

A birthing center and recovery rooms are on the second floor of the clinic, and an inpatient pediatric unit opened in April 2011. This allows the clinic to

accommodate patients who require more intensive acute care. Most of the patients are currently giving birth at home and the fact that the clinic provides a birthing center is a great contribution to the community of Roatan. For the future, clinic leadership envisions additional buildings to house recovery, radiology unit, and surgery center. The purpose of these projects is to provide Roatan residents with superior health care services at affordable prices.

### **The Pharmacy**

The pharmacy was well equipped with two computers capable of keeping dispensing records, managing inventory, and providing prescription labels and patient information. Indeed, the pharmacy is an area where there is a great need for volunteer pharmacists and/or pharmacy students. Deuteronomy 15:11 (NIV) says: "There will always be poor people in the land. Therefore I command you to be openhanded toward your brothers and toward the poor and needy in your land."

To help reduce costs and meet the needs of the poor, prescription drugs are ordered from the International Dispensary Association (IDA) biannually at a discounted rate. The inventory is designed to focus on commonly encountered diseases, such as

malaria, intestinal parasites, diabetes, hypertension, and hypercholesterolemia. Over the counter medications are also available and are usually acquired from donations by volunteers.

### **Our experience**

*Madoussou Kane:*

My experience was eye-opening. It was amazing to work with a diverse population and well qualified volunteers. One of the more fascinating things was how the clinic positively impacts the lives of the poor and those unable to afford health care on the island of Roatan. This reinforced the purpose of my trip in serving the people coming to the clinic. The people of Roatan were a great encouragement to me. It was a privilege to serve at Clinica Esperanza and have a small part in providing health care to the needy population of Roatan. The trip was a reminder of what it is to be a servant, humbly meeting the needs of others. . Peter 4: 10 (NIV) says: "Each one should use whatever gift he has received to serve others, faithfully administering God's grace in its various forms."

*Annie Zakian:*

Volunteering at Clinica Esperanza was a humbling time for me. I observed a community of people who only have the bare necessities to live

and rely on each other to survive. I was amazed at the number of volunteers who come to the clinic for long and short term mission trips. The biggest challenge for me was adjusting to differences in how the pharmacy operated in comparison to practice in the United States. Additionally, I gained an appreciation for Honduran culture and the challenges of working in this type of setting.

### **Contact information/ volunteer opportunity**

Volunteer pharmacists or pharmacy students are greatly needed and welcomed by Clinica Esperanza. Visit the Clinica Esperanza online at [www.clinicaesperanza.com](http://www.clinicaesperanza.com) to see how you might consider helping. For any further questions, please contact Peggy Stranges at: [pstranges@clinicaesperanza.com](mailto:pstranges@clinicaesperanza.com) or 011-504-9885-1044. ✉

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*At the time of authorship, Annie Zakian and Madoussou Kane were final-year students at the St. John Fisher College, Wegmans School of Pharmacy in Rochester, NY. Both students participated in this project as part of their APPE rotations and would like to acknowledge CPFI for the scholarships received from the organization for this mission project.*