



# Global Matters

The newsletter of the Office of Global Health

Volume 26, Winter 2014

## Spring 2014 Global Health Lecture Series



12:00 Noon CT  
ACB 120

- Wednesday, February 5  
Ambassador Tibor P. Nagy  
State of the World 2014:  
Predictions and Reflections
- Wednesday, February 19  
Clyde Martin, Ph.D.  
Global Food Security &  
Feed the Future
- Wednesday, March 5  
Kanika Monga, PLFSOM  
Voice for the Deprived
- Additional March Date  
TBA
- Wednesday, April 2  
Breedlove Foods, Inc.  
Bringing Life Saving Food  
to Those in Need
- Wednesday, April 16  
TBA
- Wednesday, May 2  
Greg Miller, MD  
Physicians Aiding  
Physicians Abroad

Presentations with hyperlinks were recorded and can be viewed on the [OGH website](#) or checked out from the [OGH library](#).

## First Global Health Film Draws Large Audience at TTUHSC El Paso

By Lisa Ruley, Associate Director, Media Relations, TTUHSC at El Paso

During Thursday's debut of the first film in the Global Health Film series on campus, the documentary "Not My Life", about human trafficking, 65 people—staff, faculty and students—watched as mostly women and children who have been trafficked told their stories.

Alma Aranda, unit coordinator for the Office of Global Health, TTUHSC at El Paso, warned the audience that many of the images and stories would be difficult to watch, but the film was important to watch "because it puts human faces on the numbers of people trafficked and brings them to life," she said. Aranda gave some startling statistics: There are somewhere between 21 to 30 million people in slavery today which is more than at any time in human history (Source: [freetheslaves.net](http://freetheslaves.net)). According to UNICEF, two million children are estimated to be trafficking victims of the sex trade each year. The average age of a girl being forced into the US domestic sex slavery market is 13. The average cost of a slave around the world is \$90. The average age of entry into prostitution in the U.S. is around the age of 12 to 14 for girls and 11 to 13 for boys.

Twenty eight percent of human trafficking victims report having had contact with a health care system while in a trafficking situation, according

to the U.S. State Department.

John Martin, who heads the Paso del Norte Center of Hope, a local center that exists to protect victims of hu-



man trafficking within the region through outreach, education, and victim-centered services, spoke to the audience before the screening about human trafficking. He mentioned that eight of 10 victims of human trafficking said they have had an encounter with a healthcare provider before anyone else, including law enforcement. The center became aware of a young victim when she was seen recently at a local emergency room because of a severe beating. She was being held against her will by

several people for prostitution. Martin asked those in the audience, as healthcare providers, and as future physicians, to look for signs in helping identify potential victims of trafficking during patient visits. His handouts which were available at the screening, listed some ways these potential victims could be identified:

- Is the person accompanied by another person who seems controlling (possibly the trafficker)?
- Is the person rarely allowed in public (except at work)?
- Can you detect any physical or psychological abuse?
- Does the person seem submissive or fearful?
- Does the person lack identification or documentation?
- Is someone else collecting the person's pay or holding their money for safekeeping?

The TTUHSC El Paso Office of Global Health will feature a monthly film and are in the process of building their Global Health library with movies, documentaries, and books for anyone on campus to check out.

For more information on the Paso del Norte Center of Hope, call 915-231-8882. The number to the National Human Trafficking Resource Center is 1-888-3737-888.



## Available from the OGH Library

The following resources are available for check-out:

### Book

*I am Malala*  
By Malala Yousafzai

*I am Malala* is the remarkable tale of a family uprooted by global terrorism, of the fight for girls' education, of a father who, himself a school owner, championed and encouraged his daughter to write and attend school, and brave parents who have a fierce love for their daughter in a society that prizes sons. *I am Malala* will make you believe in the power of one person's voice to inspire change in the world.

### Movie

*The Waiting Room*

*The Waiting Room* is a riveting look behind the doors of a public hospital's overtaxed emergency room in Oakland, California. A poignant blend of humor and drama, the film offers a raw, intimate and ultimately uplifting look at the struggle and determination of one community and one hospital coping with limited resources and no road map for navigating a health care landscape marked by historic economic and political dysfunction. *The Waiting Room* is an eloquent and urgent anthem of the power of our collective humanity to meet the greatest challenges of our time.

For more information about the resources available from the OGH library, visit our [website](#).

## International Medicine Club

### Working Together to Build a Healthier Jinotega

By Andrew Roth, School of Medicine, Class of 2016

When I enrolled in medical school, I knew that I would spend my first summer completing a global health elective.

Having already attended similar trips to Mexico and the Dominican Republic, this was my first opportunity to participate in an international program with the added responsibilities of a medical student. These experiences are valuable opportunities to learn from a new culture and gain medical experience, but most importantly for me, they represent a professional calling. I joined Dr. Patti Patterson, 16 of my classmates, and health professionals from throughout Texas to travel to Jinotega, Nicaragua. During our two weeks in Nicaragua, we collaborated with an organization called Misión Para Cristo to assist in mobile medical clinics and conduct educational programs about women's health for community health workers.

The drive into Jinotega is powerful. As you head north from the low-lying capitol city of Managua, the elevation quickly rises, taking you through clouds and alongside tree covered mountains with coffee plantations carved into them. The city of Jinotega is at the bottom of a bowl shaped valley, and depending on the time of day it may be completely obscured by a layer of mist. Misión Para Cristo's headquarters comprise almost an entire block in the heart of the city, across the street from a busy market and the main bus station.

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We awoke early each morning, loaded our supplies onto buses, and departed for our mobile clinics by sunrise. The clinics took us to remote parts of the country, requiring travel up steep climbs and through dirt roads. We arrived to dozens of people from the town and surrounding countryside waiting for us. As medical students, we took on a lot of responsibilities throughout the week, including triaging patients, taking histories and physicals, running the pharmacy, and assisting in the optometry clinic. Each of us had valuable opportunities to interview patients and formulate treatment plans with physicians. This important interaction gave us a glimpse into our patients' lives. I treated a woman who suffered from chronic respiratory infections because her kitchen did not have adequate ventilation. We found new eyeglasses for an elderly woman who needed her vision to sew. The most difficult cases that I saw were patients that we were unable to help, including a teenage girl with uncontrolled seizures and a father losing his vision to macular degeneration.

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TTUHSC students are working to improve women's health in Jinotega, an important goal identified by both Misión Para Cristo and the local government. For two days, we held an interactive educational program for community health providers and mid-

wives on basic principles of sexual health, prenatal care, and childbirth. Because many villagers do not have access to medical care, these people play an essential role in their communities. This is especially true when you consider that, about 40% of the births in the villages that we served occur in the home (by our team's estimates). Our training focused on teaching them the basics of women's health and also helping them to identify red flags such as a high risk pregnancy that should be sent to a hospital. Our team also administered a survey to women visiting our clinics in order to assess the state of women's health. We looked at endpoints related to childbirth, contraceptive usage, and preventive screening which will help us improve our educational programs for future trips. We will be working closely with students traveling to Jinotega this coming summer so that they can continue this work.

As I continue through my preclinical years of medical school, I find that my mind wanders back to my time in Nicaragua and to the people I served. They embody many of the diseases that I learn about and they remind me what a privilege it is to study medicine. I am excited for the future of the relationship between TTUHSC and Misión Para Cristo. This is a program where hard work and innovative ideas can make a real difference in people's lives.



## Bringing Care Back

By: Karla A. Arredondo, School of Allied Health Sciences, Class of 2015

Gunshots. Two children playing marbles at school are wounded. In Cobán, Guatemala, the hospital's only ambulance is out of order and the children cannot be taken to Guatemala City where the proper emergency services they need are available. The 13-year-old is in a coma after a high-caliber bullet traversed his skull, and the 9-year-old is in need of intensive care due to an injured trachea. The entire town, all of which is indigenous, helplessly waits and attempts to console the parents.

The political reasons behind this despicable act of terror lie in issues of land, territory, and natural resources that belong to this marginalized people. Unfortunately, the big and powerful terrorizing the poor and uninformed is not a novel story.

This incident provides insight into the great medical needs of this region.

The Inter-American Commission on Human

Rights (IACHR), an organization that promotes human rights in the Americas, was visiting Guatemala to gather information about the situation of indigenous peoples in the country. This Mayan-Q'eqchi' community in Cobán lost two children this past August, due primarily to an act of terror and secondarily to an ineffective health care system.

This second-hand experience in Guatemala touched deep fibers within me. As a future health professional, it helped me remember the true meaning of "health care." Health care is not about reimbursement, salary, efficiency, or "Obamacare." Health care is about exactly that: health care.

We may not know why Cobán lacked a functioning ambulance, but we can deduce that the neglect of outlying towns where people live in poverty often leads to carelessness.

While political leaders live in the capital with more than enough resources, and while the suffering of others is only an uninteresting rumor, it is easy for the leaders to label themselves as "us" and others as "them," widening the socioeconomic gap and turning a deaf ear to alien sorrow.

The richest experiences I hold come from moments where I have the opportunity to be of service to persons who feel unworthy, lesser, or who are expecting rejection because of the way a system is run. I am not in this for personal gain or benefit. We are all building very powerful tools as we prepare our minds and bodies for vital work.

As an occupational therapy student, I am learning that a client-centered approach to therapy is one in which we are respectful of each person's culture and unique system of values and beliefs; therefore, we do not bring our own biases and beliefs when interacting with our clients. Cobán reminds me that every person deserves respect and no one is more worthy just because of socioeconomic status, culture, background, or religion.

There will be many children like the two in Cobán who could not be helped, many suffering parents, and many people who have no income or insurance to pay for our services. It costs nothing to give, and what we gain is invaluable when we provide our skills and training to someone.

It is important to remember what led us into the health professions. Many of us have collected stories and experiences that have enriched us and further validated our career choice. We are privileged to have the opportunity to pursue that which we consider meaningful. This must not enlarge any gap between us and others. It is not always necessary to travel abroad to find opportunities to serve; it is merely a matter of awareness. Whether I find myself in a big city or rural village, the reasons that led me to a health care profession remain alive and ignited: to serve and care for those within my reach.



## Mark Your Calendar for the Global Perspectives Film Series



You're invited to join the Office of Global Health as we host a screening of one of the many films from our library.

**12:00 Noon  
CST  
ACB 240**

- Thursday January 23
- Thursday February 13
- Thursday March 27
- Thursday April 24
- Thursday May 1

### March Feature film:

***Survival: The Deadly Combination***

Tuberculosis is developing resistance to almost every drug available, which has led to fears of an epidemic. In South Africa, health authorities have locked up patients diagnosed with XDR-TB in an effort to stop the disease from spreading. How should the issue be resolved? Can countries balance their need to protect the public from a killer disease with the rights of the individual?

Attendees are welcome to bring their own lunch.

**Free snacks will be provided!**



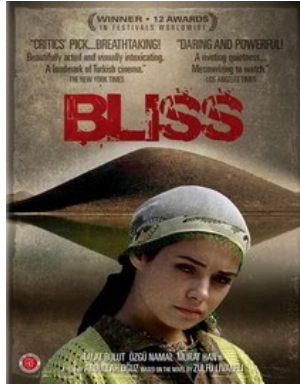
## When in... Russia

- Greet with a firm handshake and give several quick shakes while maintaining good eye contact.
- During social functions, wait to be introduced, rather than walking up to strangers and introducing yourself. Russians are not comfortable talking to strangers
- You shouldn't say hello to people on the street or shopkeepers. In general people don't make eye contact; they walk with their heads down and mind their own business.
- Don't use first names until you are invited to do so. Russians often introduce themselves by stating their surname.
- Russians love children, so make a fuss over them. Showing a photograph of your own family is a great way to break the ice.
- Russians can be very critical of their own country, but you should refrain from joining in.
- Russian hospitality is legendary, and they will take great care to entertain you in style, even if it means making financial sacrifices.
- Drinking vodka is inescapable, and a refusal is unacceptable unless you give a really good excuse ( such as medical or religious excuse).
- If you are a guest, the male host will usually pay, although it is polite to make a token offer to settle the bill if you are a man as well. A woman should never offer to pay the bill.

## Bliss

### A Movie Review

By Karla A. Arredondo, School of Allied Health Sciences, Class of 2015



In an Anatolian village in Turkey where ancient traditions overpower familial love, Meryem is a teenage girl who appears to have been a victim of rape. Kept in a room isolated from the rest of her family, Meryem is suffering the guilt of having brought shame to her family and must face her punishment: to die a sinner. As tradition requires, a woman who is "tainted" must be killed in order to relieve her family of disgrace. The village leader, also Meryem's distant uncle, orders his son Cemal to take her to Istanbul and get rid of her on the way there. The village will think she was sent off to an arranged marriage and, since Meryem was never registered when she was born, no one will mind her disappearance. Meryem walks out and into the car that will take her away, with the sadness and acceptance of someone who knows there are no open arms, only shut

hearts.

From dull and monochromatic scenery, the viewer is transported to a modern and dynamic Istanbul. Modernity here is colorful and welcoming. The benighted customs of the village are disparaged. Cemal delays killing Meryem, though he constantly struggles with his perceived obligation and his sympathy for her.

In a moment when Cemal decides to set compassion aside and carry out the orders he was given, he takes Meryem to a bridge and instructs her to jump. But when Meryem is about to let herself go, Cemal grabs her by the waist, pulls her over the railing, and the two become fugitives together. The village will never welcome them back.

Bliss offers an enlightening look at the steady awakening of Meryem's own autonomy. Cemal, too, faces confusion when Istanbul insists on challenging his inculcated idea of gender roles. Irfan, a Turkish university professor they meet and befriend, is the main vehicle for that tender awakening. As Cemal and Meryem discover the cosmopolitan world, where women wear bikinis and drop by for a drink, Mer-

yem chafes at Cemal's dominance. However, tradition does not easily die and Cemal's indoctrination in hyper-masculine authoritarianism runs to his very core, often causing him to react violently without thinking.

The story unfolds as a thriller, and Cemal has to face a truth he has been rejecting. With shock and disturbance, but unbreakable elegance, the conclusion ties loose ends together gracefully. Bliss represents a landmark of contemporary Turkish cinema. It also delicately touches on the topic of rape and how some societies condemn the victim and not the rapist. More than anything, Meryem's precious appearance and rare naivety stirs the viewer's heart and inspires love and understanding for the repressed and the voiceless. With striking images allegorical of Turkish nationality, Bliss is well represented by beautiful acting and is most certainly a story worth watching.

#### Answers to Name That Flag:

1. Zimbabwe
2. Russia
3. Suriname
4. Timor-Leste
5. Kyrgyzstan
6. Malta
7. Nicaragua
8. Ethiopia
9. Bermuda

**JOIN THE OFFICE OF GLOBAL HEALTH FOR  
THE SPRING 2014 CULTURAL EVENT.**



**MUSIC OF ZIMBABWE**

**WEDNESDAY, MARCH 12, 2014**

**NOON—1:00 PM**

**ACB 110**

**When in...  
Russia Cont.**

- A Russian home is a refuge, a place of sanctuary where the outside world is forgotten and people can be themselves.
- Avoid Russian police. Many of them are corrupt and view tourists as mobile ATM machines.
- There is a dual price system at many public attractions such as museums, so expect to pay up to 10 times more than a Russian citizen.
- Don't whistle indoors; it brings bad luck or financial loss.
- You may have to stand in line for a long time for a train ticket because everyone has to present a passport, even for internal travel.
- Always remove your shoes when visiting a Russian home. Often you will be provided with guest slippers.
- Gift-giving is popular and appreciated. Alcohol (other than vodka) is welcome. Bring flowers for the woman of the house when visiting a home.
- Tipping used to be illegal, but now a 10% service charge is usually added to the bill, and you may add another tip for excellent service. Don't scrutinize the bill—it indicates a lack of trust.

Taken from ***Behave Yourself!*** By Michael Powell

**Country Close-up\*** \*every issue OGH will select another country to feature

**Republic of Zimbabwe**

Zimbabwe is located in southern Africa bordered by the Zambezi and Limpopo rivers. Though the official language is English, the majority of the population speaks Shona.



Slightly larger than the state of Montana, Zimbabwe has a population of 13,182,908.

Zimbabwe gained its independence in 1980 and has had only one ruler since 1987. President Robert Mugabe has continuously won the general elections, but not without great scrutiny and accusations of

rigging the elections. In 2009, Morgan Tsvangirai was assigned the position of Prime Minister to create a power-sharing government.

Mining along with agricultural crops such as corn, cotton, and tobacco

play a key role in Zimbabwe's economy. As of February 2, one U.S. Dollar is equal to 361 Zimbabwean Dollars, although the U.S. Dollar is widely accepted within Zimbabwe.

According to the

CIA World Factbook, the life expectancy at birth for males is 53.79 years, while for women it is 53.93 years. Zimbabwe is ranked number nine in the world for HIV/AIDS. In 2009, there were an estimated 1.2 million people living with the disease. It ranks number five in HIV/AIDS deaths with 83,000 reported in 2009. Other major infectious diseases in Zimbabwe include

hepatitis A, typhoid, malaria, dengue fever, rabies, and bacterial diarrhea.



## International Flavor

Recipe provided by Thea Murray, School of Medicine, Class of 2017

### Cou-Cou

#### Ingredients

- 6 okras, sliced thinly
- 2 cups cornmeal
- 1 tbsp. butter, plus extra for buttering dish
- 1 medium onion, chopped finely
- 2 large cloves of garlic, minced
- 1 tbsp. thyme, minced finely
- 1 tbsp. oil
- 1 tsp. salt
- 4 cups boiling water
- 2 cups tap water

#### Instructions:

- Soak cornmeal in 2 cups tap water 5 minutes before you are ready to start making the cou-cou.
- Heat oil in pot and sauté onions, garlic, and thyme for 1-2 minutes.
- Add sliced okras and sauté for one minute.
- Add 4 cups of boiling water, cover pot and let boil for 10-12 minutes.
- Using a slotted spoon, remove the okras, set aside, and keep warm.
- Pour out half of the liquid from the pot and set aside (reserve).
- Turn the heat to very low, add the soaked cornmeal and salt.
- Stir constantly to avoid lumps and to avoid the cornmeal mixture from scorching.
- As the cornmeal begins to dry out, add the reserved liquid in stages until the cornmeal is cooked.
- As the mixture begins to break away clean from the sides of the pot, add back the okras.
- Let the cou-cou continue to cook until firm.
- Pour the cou-cou into a generously buttered bowl and shake it around to form a mold.
- Invert the bowl with cou-cou onto a platter.
- To serve, create an indentation in the center of the cou-cou and heap with frying fish sauce.

### Flying Fish Sauce

#### Ingredients

- 8 flying fish (scaled, deboned, and butterflied)
- 3 tbsp. Bajan seasoning (also called green seasoning)
- Lime juice, as needed
- Salt, as needed
- 1 tbsp. butter
- 2 large onions
- 3 cloves garlic
- 1 stalk celery, diced
- 1 bay leaf
- 1/2 tsp. curry powder
- 1/2 tsp. mustard
- 1 tsp. sugar
- 1 cup water or fish stock
- 1/4 green bell pepper, sliced
- 1/4 yellow bell pepper, sliced
- 1/4 red bell pepper, sliced
- 2 large tomatoes, chopped
- 2 tbsp. mixed chopped herbs (dill, chives, parsley, thyme)
- 1/4 tsp. hot sauce








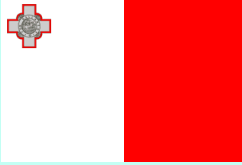
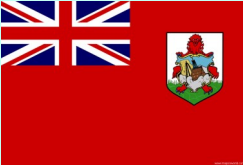
#### Instructions:

- Rub the flesh side of the fish with Bajan seasoning and lime juice and salt, to taste.
- Roll fish up tightly and secure with a toothpick.
- Heat butter in large skillet with a lid, over medium heat.
- Add the onion, garlic, celery, and bay leaf and cook, stirring until soft.
- Add curry, mustard, sugar, and stir.
- Add water (or fish stock if using), stir to combine, and bring to a simmer.
- Arrange the rolled fish in the skillet and cover with the bell peppers, tomatoes, herbs, and hot sauce.
- Cover and simmer until the fish are cooked through, about 10 minutes.
- Season with more salt if needed.

Thea's family resides in Barbados. This recipe is Barbados' national dish and one of Thea's favorites.



**Name That Flag**  
**Can you name the countries represented by the flags below?**  
**Answers on page 4**

- |    |   |    |   |    |   |
|----|---|----|---|----|---|
| 1. |  | 4. |  | 7. |  |
| 2. |  | 5. |  | 8. |  |
| 3. |  | 6. |  | 9. |  |

**In the News, Around the World**

- [Some Health Programs Overseas Let Students Do Too Much, Too Soon](#)  
 A pre-med student at the University of Minnesota helped deliver a baby during a visit to a health clinic in South America as part of a trip sponsored by a student organization.
- [Want to Move Abroad?](#)  
 This map shows the best and worst countries to be an expatriate.
- [The International Student Economic Tool](#)  
 Use NAFSA's International Student Economic Value Tool to view ten-year trends and access breakdowns of the analysis at the regional, state, and congressional district level.
- [U.S. Universities Increasingly Enroll the World](#)  
 The United States remains the World's top destination for international students. A record 819,644 studied at American colleges in 2012-2013, an increase of 7.2%, according to new data from the Institute of International Education's annual report.
- [Translation Apps and Traveling Abroad](#)  
 Apps available to make the daily information processing while abroad a little easier.
- [The Man, The Myth, The Reading List: Nelson Mandela](#)  
 Since Mandela's release from prison in 1990 the myths and stories about him have grown, through many narratives constructed by journalists and the numerous films made about him and the many books written about his life. But these three provide a good introduction to this remarkable man, who always insisted that he was part of a larger struggle and movement.
- [Getting Away with Murder: A Study of Benazir Bhutto's Death](#)  
 In 2007, Benazir Bhutto—twice prime minister of Pakistan and then-leader of the Pakistan People's Party— was killed in a suicide bombing attack that claimed 38 lives. The factors at play in her assassination, however, reached deeper than many imagined.
- [Paula Johnson: His and hers...healthcare](#)  
 Every cell in the human body has a sex, which means that men and women are different right down to the cellular level. Yet too often, research and medicine ignore this insight—and the often startlingly different ways in which two sexes respond to disease or treatment.
- [Treating The 'Body and Soul' In a Russian TB Prison](#)  
 Russia has struggled for decades to control deadly forms of tuberculosis among inmates. A clinic inside a Siberian prison is finally having some success against the disease by teaching inmates to care for themselves—and their families.



## December

01—World AIDS Day; South Sudan  
06—Quito Day; Ecuador  
08—National Youth Day; Albania  
10—International Human Rights Day; Namibia  
19—National Heroes and Heroines Day; Anguilla  
22—National Unity Day; Zimbabwe  
23—Emperor's Birthday; Japan  
25—Christmas Day; International  
26—Boxing Day; Swaziland  
27—Anniversary of Benazir Bhutto's Death; Pakistan  
31—New Years Eve; International

## January

01—New Year's Day; International  
05—Armenian Christmas Eve; Armenia  
06—Three Kings Day; Spain  
14—Revolution and Youth Day; Tunisia  
20—National Day of Mourning; Azerbaijan  
23—Bounty Day; Pitcairn Islands  
26—Australia Day; Australia  
28—National Army Day; Armenia  
29—Tet Holiday; Vietnam  
30—Chinese New Year's Eve; Taiwan  
31—Independence Day; Nauru

## February

01—Lunar New Year Holiday; Mongolia  
04—Spring Festival; China  
08—Day of Slovenian Culture; Slovenia  
10—Family Day; Canada  
11—National Sports Day; Qatar  
17—President's Day; United States  
21—International Mother's Language Day; Bangladesh  
23—Motherland Defenders' Day; Russia  
28—Andalusia Day; Spain

# International Holidays and Celebrations

## Language Lesson: I miss you

**Afrikaans**  
**Aragonese**  
**Basque**  
**Corsican**  
**Dutch**  
**Estonian**  
**French**  
**German**  
**Haitian Creole**  
**Indonesian**  
**Italian**  
**Kinyarwanda**  
**Malay**  
**Portuguese**  
**Scottish Gaelic**  
**Somali**  
**Spanish**  
**Swedish**  
**Tagalog**  
**Tswana**  
**Wolof**

**Ek mis jou**  
**Me fas falta**  
**Zure falta somatzen dut**  
**Mi manchi**  
**Ik mis je**  
**Ma igatsen sind**  
**Tu me manques**  
**Ich vermisse Sie**  
**Mwen sonje w**  
**Saya rindu kamu**  
**Mi manchi**  
**Ndagukumbuye**  
**Aku rindu pada mu**  
**Tenho saudades tuas**  
**Tha mi gad ionndrann**  
**Waayadan kuma arag**  
**Te echo de menos**  
**Jag saknar dig**  
**Hanap-hanap kita**  
**Ke go gopotse**  
**Namm naa la**

