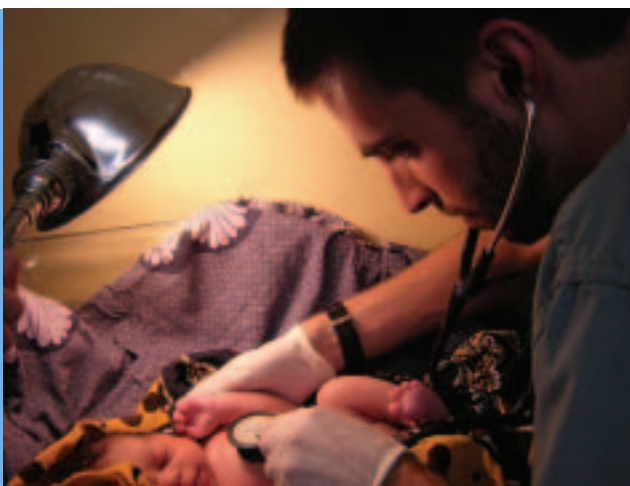


LIFE, DEATH, AND LESSONS LEARNED IN TANZANIA

By Kyle W. Vath



The author listens to a newborn baby's heart at the Chimala Mission Hospital in Tanzania.

A month after our team of nursing students and faculty from Harding University set foot back on American soil, I looked back on the situations we experienced during our six-week medical mission trip to Tanzania. They have formed in our minds as life-changing lessons we will never forget.

Each summer, the Harding University College of Nursing sponsors several medical-mission trips to foreign countries including Haiti, Guatemala, Africa, and others. These trips are voluntary but students receive clinical credit for the time spent abroad. For several years, I had greatly anticipated

participating in these trips. Fascinated by the stories of the returning students each summer, I had hoped to one day take my own trip abroad.

We left in early June 2004 with various expectations, preconceptions, and fears about African life. We arrived in Chimala, Tanzania after nearly four days of traveling. Our nursing practice in Chimala began abruptly as we were thrown into numerous new experiences and "firsts" for us all. We were stretched by our faculty, our fellow team mates, the staff at Chimala Mission Hospital (CMH), and the trying experiences we faced. We saw death of both the young and the old first-hand many times. The impact of a patient dying was frequently contrasted within minutes by the birth of a new life. Too often, after our spirits were lifted high with a successful resuscitation, or a new life born, we were quickly brought back down emotionally by someone suffering unbearable pain. And so, the roller coaster of emotions continued.

During our weeks in Chimala, much of the pain and suffering we witnessed was due to severe burns. Since it was winter in Tanzania, many families huddled around open fires to keep warm as temperatures dropped into the upper



The medical mission team in front of the hospital sign.

40s at night. The cloth "kanga" wraps worn as clothing would often catch fire and severely burn both children and adults. With pain medications in limited supply, the medicines were rationed out to only the most severe cases. The pain and suffering these people endured was unbelievable.

LESSONS LEARNED

In addition to our health care experience and the life-lessons we learned, we also learned much from the people of Tanzania. I will try to simplify them to "3 Rs."

Relationships. Everything in Tanzania is relationship-oriented. Their customs revolve around the idea that relationships are precious. Hand shakes are just one example of this. The people always greet one another with a firm hand shake and a verbal greeting. But the hand shake is different from ours. The right hand is extended and the left hand supports it at the forearm as a sign of warmth, friendship, and respect. Men who are close friends will often hold hands to show their friendship. The Tanzanians reminded me that relationships are to be cherished.

Respect. The Swahili word "Shikamoo" is, sadly, not easily translated into English. It is a greeting that literally means, "I bow down to you" and is always said as a greeting from a younger person to an older

one or to a person in a high position. To show even greater respect, the younger person places his hand on the older person's head, dipping at the knees slightly as he whispers softly, "Shikamoo." Often, the word is whispered with the eyes fixed on the ground so softly that usually the "Shika-" is the only sound heard as the "-moo" trails inaudibly. Respect for others is ingrained in their culture.

Relax. Americans in general are goal-oriented to a fault. We rush around like robots from job to job, and from event to event, with little time for the things we truly want and need to do in life. We get caught in the rat race of agendas, lists, organizers, and Palm Pilots reminding us of one more thing we must do before we have completed the last one. I had one Tanzanian ask me, "I have heard that Americans are so busy that they don't help other people or spend time with their families. Is that true?" I sat and thought for a minute, and I had difficulty arguing with his statement. Feeling much like a foreign ambassador, I felt it was my duty to defend the "good ol U.S.A.," but I explained weakly that we Americans try hard not to fall into this trap and that everyone is not that way...and the meaningless words flowed as I realized that, yes, in general, that is my life.

This mindset also carried over into hospital life. Even as we were called in to resuscitate a woman who was not breathing and had a weak heart beat, the Tanzanian nurses were relaxed! Much to the frustration of us borderline-obsessive-compulsive Americans, the clinical officer calmly greeted us and asked us how we were doing. As I tried to catch my breath and quickly mutter the customary "nzuri" (good) my American mind was not so polite. It screamed, "Get out of my way! You have a patient who is dying here! Get

an airway, bag her, push in the fluids, and get some help in here, for crying out loud!" Meanwhile the Tanzanians were thinking, "Relationships are key, and friendliness is crucial. I must first greet this crazy American who is running into this room like a madman."

The staff thought it was strange to see us Americans running to a resuscitation. Our rushing was to them as foreign as the country from which we came. The staff frequently commented to us that "you Americans are always running." Every second may count when a life is on the line, but we have much to learn about improving our lifestyle from the slower culture of the Tanzanians.

DIFFICULT QUESTIONS

I thought that on this trip I would find answers to many of the difficult questions we face in life. But instead, I just seemed to raise more. The question "Why?" was central in all of our thoughts. "Why was this innocent child killed by a car on the way to school?" "Why did this thief with a machete wound to the head live?" "Why did this baby die despite all our efforts and the modern medications we administered?" And "Why did this three-pound baby live when it would have had difficulty even in our most modern neonatal intensive care unit in the States?" To those questions I have not completely found the answers. But this I know: As humans we try to do what we know is right and what we are trained to do in certain situations. I believe, however, that ultimately God is the healer time after time; and I was humbled to see extraordinary healing despite any medication, any procedure, or any skill we *did* or *did not* perform. ☺

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