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Filling a great need in Guatemala

Houston-based group arranges for medical volunteers to help villagers

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TOOLS

LA LAGUNA DE TECOJATE, GUATEMALA — The sick and the curious already were lined up in the post-dawn coolness when the medical team from Houston rolled into this village, which is lost among the farm fields of Guatemala's Pacific Coast.

By the time the sun had climbed above the trees, several hundred people clogged the schoolyard's entrance, and others arrived by the minute. The doctors, nurses and pharmacists who had taken vacations and paid their own way were in for another long day.

"There is a great need," said Estuardo Quino, a 34-year-old nurse who runs the small government clinic in the village. "Many people come here because they have serious problems. And medical care here is completely deficient."

Rafael Espada, the longtime Houston surgeon who took the oath of office as Guatemala's vice president last Monday, has pronounced his country in need of "intensive care."

Estrada was referring to Guatemala's range of afflictions — from laughable wages to murderous violence. But he also meant health care for most of this nation's 13 million people, half of whom live on less than \$2 a day and are often malnourished and chronically ill.

"The crisis we face has been affecting the most vulnerable for decades," Espada, who has called for tripling the government's health budget, told Guatemalan reporters. "We can't waste any time."

Despite the intentions of Espada and many others, changing Guatemala's public health-care system will be neither easy nor swift. In the meantime, foreign volunteers — many from the United States, others from Canada, Europe and Cuba — strive to fill the gap.

Group formed in 1990s

Among the larger and more successful of these groups is Faith in Practice, a Houston-based organization that brought the volunteer medical team to La Laguna.

Faith in Practice was founded on a hope and a prayer in the early 1990s by a clutch of people that included Vera and Joe Wiatt, then owners of a home-supply store in southwest Houston who since retiring have run it full time.

The organization sent its first medical team to Guatemala in 1993 and has since acquired a

nationwide reach both here and in the United States. Its volunteers last year examined or treated more than 11,000 patients and operated on more than 1,000 of them. This year, Faith in Practice plans to bring 28 separate teams, or nearly 800 medical professionals, for one-week visits. There's a waiting list to join the teams.

The group, whose annual budget has climbed to \$1.7 million this year, raises money through private donations, volunteers and an annual gala in Houston. Espada, the vice president, has been on its board for the past four years.

"We've been blessed," said Joe Wiatt, 64, a devout, easy-going Christian who displays little patience for the religious, cultural and political squabbling of the times. "Our needs are filled almost even before we think of what to do about them."

Faith in Practice's funds have helped renovate Obras Sociales del Hermano Pedro, a Roman Catholic-run charity hospital in Antigua, the colonial city outside the Guatemalan capital that has become the country's premier tourist attraction. The organization is now funding renovations at four regional hospitals, which will be used by its volunteers.

Actions trump preaching

The volunteers' services are free, but the hospitals' costs must be met. Villagers are asked to contribute something toward the cost of their surgeries. But they usually can pay only a fraction of the cost. Faith in Practice makes up the difference.

As the organization's name suggests, the Wiatts and other Faith in Practice leaders believe actions trump preaching. Although many of the volunteers are fervent Christians, it's far from a requirement.

Some of last week's volunteers — organized by Houston's Northwoods Presbyterian Church — said an urge to use their skills to help humanity propelled them. Others were still head-scratching over their reasons for putting their shoulders to the wheel.

"I don't know why I'm here," said Mark Rigo, 57, an emergency-room physician from northwest Houston who first volunteered last year. "But you know what? I'll be back again next year."

Climbing down from their bus in La Laguna, the three dozen mostly graying volunteers — some retired, not a few of them grandparents — carried examining tables, medical supplies, food and water into a dusty cinder-block school building, transforming it in minutes into a workable clinic.

The gynecologists among them took one classroom, draping bed sheets around separate desks that would serve as examining tables. Another room became the general medicine area, still another the pediatrics ward and another the dentist's office.

"This is organized chaos," said Rigo, who spent much of his Guatemalan afternoons under the sun, working the line of villagers to weed out the "sore backs or just-plain-tireds" from those with more serious ailments. "But somehow it works."

With only essential equipment on hand and sophisticated tests unavailable, the volunteers had to reach diagnoses often on what they could observe and what they knew.

The villagers' complaints ranged from irritating warts and irritated tummies to blurred eyes, aching

teeth and wheezing chests. Pain relievers, vitamins and sympathetic ears sufficed for many cases.

But the medical team's main task was to tag for further treatment the serious conditions that would otherwise go untreated. Hernias, vaginal problems and other ailments made about 150 villagers candidates for surgery in Antigua.

Their trip's significance crystallized for many of the volunteers in a single patient or a particular instant.

A grim task

That moment came for Susan Gardner, a retired pediatrician, when she had to tell Julia Najarro that her 3-year-old son, Javier, all but certainly had a cancerous tumor in his abdomen.

Najarro, 33, who gave birth to her fourth child a little more than a month ago, had noticed a lump in her son's belly last fall, she said. But her pregnancy was difficult, Najarro said, and she didn't focus enough attention on the boy.

Najarro had hoped the doctors would be able to prescribe a quick fix for Javier. Now, it seemed, he could very well face death.

Faith in Practice and the Antigua charity hospital have no ability to diagnose or treat cancer. And the cancer hospital in Guatemala City usually charges far more than Najarro could manage.

"We're poor. We don't have the capacity to pay for this," Najarro said through tears as Javier scrambled on school desks and filled his mouth with a small chocolate bar given him by a volunteer.

Wiatt told Najarro that she and family members could stay free of charge at Faith in Practice's dorm-like guest house in Antigua while she seeks treatment for her son. And he offered to see what he could do about getting affordable care for him.

Gardner's diagnosis fell on Najarro heavily. But if the pediatrician hadn't examined the boy, the family might never have known about it until it was too late.

For David Chenault, a Houston ear, nose and throat specialist, the trip took meaning when he bestowed hearing on a youth who had been all but deaf from birth.

Marlon Diaz, 18, a rail-thin field hand, has no hearing in one ear, painfully little in the other. His deafness caused him to do poorly in school, all but assuring a life in the fields.

Ofelia Espino, Marlon's mother, said she'd known for years that her son needed a hearing aid. But Espino's husband earns about \$6 a day laboring in the fields. When she can get the work, Espino brings home another \$3 a day cleaning the houses of wealthier families.

A hearing aid? The boy might as well have needed a rocket ship.

After a quick examination of Marlon, Chenault fitted him with a solar-powered hearing aid that had been brought from Houston. The device costs \$130.

"He told me this morning "Mama, listen: The birds are singing," a beaming Espino, 40, said the

next day. "This group of doctors who came here fell upon us from heaven."

For the price of a night out in Houston, Marlon's once-muffled world became a sonorous one.

"We're just applying Band-Aids a lot of the time," a grinning Chenault said, "but there's also some real need."

"It made the trip for me," he said, "letting that kid hear."

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