

## **Mariam Rela – Mongolia, Summer 2012**

I've always thought that medical volunteering in a different country would be a greatly valuable experience, observing what the health systems are like in developing countries and learning clinical skills which will undoubtedly be beneficial for me in my later medical career. Mongolia appeared an elusive and attractive destination to undertake this learning.

We were placed in a family clinic for two weeks by our volunteering organisation where most of our exposure was to pregnant women and babies. We worked alongside the doctors, learning a number of practical skills such as taking blood pressure, feeling pregnant women's bellies, weighing babies and carrying out physical examinations on babies and adults alike. What struck me about this clinic was the great emphasis upon public health and preventative medicine which I was not expecting from a country like Mongolia. We observed some cervical and breast screenings which are done every 3 years on Mongolian women rather than every 5 years in the UK suggesting more rigorous preventative measures there than in the UK. Another example of their meticulous public health measures were regular visits by the doctors to the local kindergarten to measure the children's heights and weights and carry out a general check up to treat any ill children that they encountered which I found very unusual and almost excessive. We did have a great time on our visits to the kindergarten playing with the children and getting involved in their games. The doctors also made home visits to very ill patients suffering from cancer. These were exciting cases that were a contrast to the day to day patients we saw at the clinic which enthused us about our project abroad. Moreover it was a wonderful opportunity to see how Mongolians lived in their gers which are small felt tents that are characteristic of the Mongolian landscape. Our experience at the clinic was one of great technical difficulty; the language barrier severely disrupting the amount we could learn and communicate with the doctors and patients. The doctors were all equipped with a Mongol-English dictionary on their desks which they constantly consulted.

After two weeks at the clinic we moved to an orphanage for the last week, craving a different environment and wanting to interact with children after our fun at the kindergarten. Here the language barrier was an even greater obstacle with the teachers knowing absolutely no English, us knowing very few words in Mongolian and the absence of dictionaries. Worse than this was the level of organisation on the part of the volunteering organisation and the orphanage who were not informed of our imminent arrival, our purpose or our identity before we came. Once this was cleared up we had a great time with the children doing a great variety of activities including teaching English; as rewarding as this was it was really very challenging. Firstly, children of all different ages were put in one class, all of them having varying grasps of the language. Secondly, the smaller children were almost impossible to teach, running around, singing and dancing. We had no authority and they would not listen to us when we asked them to sit down and be quiet. They enjoyed it a lot more when we played games with them; such as the traditional Mongolian ankle bone game which one of the boys taught me with great patience and English games like 'What's the time Mr. Wolf' which they loved and asked to play over and over. The children also had art classes which we joined in with and thoroughly enjoyed. They were keen to learn and adopted my more abstract art style with enthusiasm. The orphanage gave us a much more interactive experience where we got truly involved and immersed in the Mongolian culture and language.

My trip to Mongolia taught me a lot; more than the clinical skills, I found that the most useful skills I learnt were how to cope in difficult situations where you aren't understood and there is a lot of disorganisation. Furthermore I feel that the language barrier may have improved my communication skills more as you need to learn how to simplify your language; this is crucial for a doctor. I've also learnt how to earn the trust and respect of people such as the children in the orphanage who initially did not listen to us but eventually looked up to us. The trip was filled with its positives and negatives but this has made me a more resilient person who can adapt better to unfamiliar circumstances.