God calls on everyone to do His work and our sufferings to produce perseverance and endurance, maturity and hope as illustrated in the country will ultimately align character, the word of God. Challenges such as leaving healthcare needs and, by association, spread with the ability to help others meet their and pharmacy students, God has gifted us with the ability to help others meet their healthcare needs and, by association, spread the word of God. Challenges such as leaving the country will ultimately align character, endurance, maturity and hope as illustrated in Romans 5:3-4, where there is glory in our sufferings to produce perseverance and hope.1 God calls on everyone to do His work in different ways. It does not require leaving the country in order to spread His word because there is still much work to be done locally. However, God put it on the hearts of fourteen members of the Lloyd L. Gregory School of Pharmacy at Palm Beach Atlantic University to travel to Siguatepeque and Lake Yojoa, Honduras to provide healthcare services and evangelism to urban and rural communities. The journey began with our arrival at San Pedro Sula airport to initiate the week of evangelism and health care services. The two hour ride to our first hotel was our opportunity to discuss the central theme of the trip: “Relying on God for Strength.” This discussion would prove monumental during daily devotions by team members, along with our anticipation of the tremendous heat we were about to endure in clinics. In 2 Corinthians 13:5, Paul says to “Examine yourselves to see whether you are in the faith; test yourselves.”1

The following will be four testimonies provided by four 4th year pharmacy rotation students and how their experiences in Honduras impacted each of their lives by relying on God:

**Although Medications May Run Out, Jesus Christ Completely Heals and Gives Eternal Life** by Charles Wight

As Christians, we must never forget our higher calling to bring people to Jesus Christ and spread the Good News. It is only through this that we can truly and fully heal people and bring them eternal life through Jesus Christ.

In Honduras, counseling is a critical area because this is where the most one-on-one interaction with patients occurs. Two patients in particular from the first clinic day stood out to me, and they were two men that I will not soon forget.

The first man came in complaining of swollen legs and what he believed was stage II heart failure. He knew what medications he needed to be taking but simply could not afford them, so he went without. Knowing that treatment of heart failure requires a regimen of medications ranging from beta blockers to ACE inhibitors to diuretics in an attempt to adequately control the progression of this disease, my heart sank when I opened his bag to find the team could only give him a thirty day supply of lisinopril and hydrochlorothiazide. We prayed with him and counseled him on medication and lifestyle interventions. We discussed how to take his medications and encouraged him to cut back on sodium and fluid intake as much as he could. Then we sent him on his way.

The second man had uncontrolled type 2 diabetes mellitus. Much like the first man, this gentleman knew the medications he needed but simply could not afford them. He told us his legs felt like they had fire ants crawling up them, his feet were numb, and he had an ulcer on his left foot, but there was nothing he could do about it. However, this was not why he came to clinic. He came complaining of bad heartburn that was keeping him up at night. Unfortunately, “GERD” was written on his form; but the Honduran doctor who was helping us that day did not understand what that meant, so she skipped it. So, I went to the doctor and the pharmacy to get him some ranitidine. In the meantime, he sat in counseling speaking with another student on the team. When I got back with his ranitidine, we counseled speaking with another student on the team. When I got back with his ranitidine, we counseled speaking with another student on the team. When I got back with his ranitidine, we counseled him on the importance of lifestyle modifications. We prayed with him, shook hands, and then he left.

For both of these patients, incredibly unsettling emotions developed after they left. I wish I could have done more for them. I wish that I was able to get all of the medications they needed and could heal their ailments. But then I remembered my higher calling: the mission that Jesus Christ himself started and commanded us to continue after His death and resurrection. Our skills and medications can only help people for so long. The medications we dispensed only last for a few weeks and our bodies do not last forever, but through Jesus Christ we are given eternal life.

In his book Jesus M.D., Dr. David Stevens discusses his experiences and encounters with his personal limitations as a missionary doctor in Tenwek, Kenya. He describes his frustrations when he says, “As a physician, I can only delay the inevitable. My skills cannot make people live forever; only the Great Physician can do that. Only as I...”
refer people to Him can they find eternal life.” As missionary pharmacists/pharmacy students, the most important medication we can dispense to the people we encounter is Jesus Christ. He tells us in John 10:10, “I have come that they may have life, and have it to the full.” Unfortunately, the man with heart failure may not live much longer and the man with uncontrolled diabetes may be in pain for the rest of his life; but if they give themselves completely to our Lord Jesus Christ, all of their pain will soon be gone and they will live for eternity in peace with our Father in Heaven who alone can free them of their ailments.

Our Experiences With the Patients Who Put Us Closer to God
by Patricia Gonzalez-Abreu

While working in triage at Iglesia Bautista Emmanuel in Siguatepeque, a patient came in for her blood glucose to be measured. After I simply asked her, “How are you today?” she began to cry. This really took me by surprise -- I was not expecting this sort of reaction from her. She explained that she had recently finished numerous chemotherapy sessions, yet she appeared healthy. These observations prompted those at the triage station to ask her more questions about her treatment, and they learned that her last chemotherapy session had ended eight days prior. When they inquired about her healthy appearance, she stated it was because she is a child of God. Before the patient left to visit the clinic doctor, the team prayed for her and gave her words of comfort and encouragement. Even though the team may never lay eyes on this patient again, we believe God is truly in her midst and that He will continue to watch over and protect her as she faces hardships.

Another experience that brought me closer to God was when I met another female patient. She was healthy and in no apparent physical pain. She came to the clinic to check her blood glucose and blood pressure, and to ask for some vitamins and Tylenol. Her measurements were all within normal ranges; however, during her medication counseling session she started speaking about her husband and his job. In this moment, the students in the room realized this patient was not seeking medical attention but emotional and spiritual support. She needed to talk with anyone who would listen to her. Instances such as these illustrate God’s presence and comfort through prayer, worship, and fellowship.

After successful medication counseling and inquiry of her situation, she told the team about her husband being an unemployed pharmacist in Honduras after losing his job a few years prior. She is now the sole provider for her family through baking pastries and bread to sell on the streets and various marketplaces. When I placed myself in her situation, I immediately felt hopelessness and despair. She then told us how her faith and trust in God keeps her going every day to be the provider for her family. She made me realize how much society can value and praise material things when there is so much more to life. As pharmacists, we work long shifts and sometimes even more than one job in order to provide everything our family “needs.” However, this sister in Christ taught us how God continued to provide for her and her family daily in spite of their limited income. By trusting in Him to provide medications, food, and supplies and by depending on Him for necessary provisions for the day, her family will to continue to flourish. This is one of the many lessons learned in Honduras that I will cherish and one of the many reasons why I will continue to enjoy serving God on the mission field.

A Reminder to Always Be Grateful
by Jennifer Mijares

It is easy to take for granted all the things we have in this world when we have so much more than others. The team was reminded of this during the last day of clinic in the mountain community of El Remolino. It was one of our most physically challenging clinic days which began by crossing a 290 meter length bridge, about 80 meters above the flowing river. We proceeded down a steep hill all while overcoming 100+ degree weather. By the time we reached the clinic, we were physically exhausted before we even began to see patients.

There was a specific point during the clinic day that I will never forget. I vividly remember sitting down next to a young girl with which a conversation promptly began. She was a 16-year old native and had been excused from school that day to seek medical attention at our clinic. She then asked for water, which in retrospect, is normally taken for granted back home in the States, but not here. She asked me if the team had any water to give her since she had traveled a long way here. She asked me if the team had any water to give her since she had traveled a long way here. I was amazed to see how something so simple could make her so content. I was overjoyed that such a small act could put a smile on her face. As we are reminded in Acts 20:35, “In all things I have shown you that by working hard in this way we must help the weak and remember the words of the Lord Jesus, how He Himself said, It is more blessed to give than to receive.” It is through moments such as these that enjoyment can be demonstrated on the mission field, for it is then that we learn to be more humble and gracious for the things we have been blessed with.

Storms are Inevitable by David Dakwa

Matthew 7:25 states “the rain came down, the streams rose, and the winds blew and beat against that house; yet it did not fall, because it had its foundation on the rock.” The team believes this rock to be Jesus Christ, and these harsh conditions came to life for us on our last clinic day. While on the mission field, the team braved its own inevitable “storm” of fatigue and dehydration from one week of clinic days. The intense heat experienced by the team at the mountain clinic site of El Remolino initially seemed impossible. As described in Jesus M.D., Jesus Christ specialized in impossible cases and this clinic day would prove to be a moment where trusting in the Lord for strength and guidance would open many doors for our team. The mountain community had one single classroom building which could not hold all of our supplies, stations, and patients. We set up our triage team and equipment under a large tree outside of the building to allow room for our pharmacy and counseling stations in the classroom. We had to fully rely on God for His strength to endure these conditions. No ventilation through the classroom led to stifling heat while the sun rays consistently beat down on the patients and team members in children’s ministry and triage. The team remained faithful throughout the heat and less than ideal working conditions. Despite the many adversities of the patients, their faith shone brightly through their smiles and gratitude for our help. The restricted working conditions forced the team to improvise in providing our health care services but God’s presence that day saw us through to the end. We all remained standing at the end of clinic as the patients, team members, and the community members all stood holding hands in prayer thanking Him for all He does in our lives.

To conclude, the medications will eventually run out for the patients we served during our stay in Honduras. But more importantly, their continued faith in the Lord will guide them through illness, lack of resources, and poverty because anchoring themselves in Jesus during
the good and bad times will be their only salvation. Although we made an impact in the communities we served by dispensing over 2,500 medications and reaching 640 patients over the 8 days spent in Honduras, each patient has a name and identity with Christ. And each of these lives deserves to be loved. We thank God for the opportunity to serve Him and we continue to pray for the well-being of the patients we served as well as those that we could not reach.

At the time this article was written (summer 2016), all four students were 4th year pharmacy students at Palm Beach Atlantic University Lloyd L. Gregory School of Pharmacy completing a mission elective rotation:

After graduation, Charles plans to pursue a pharmacy residency and a career in ambulatory care.

After graduation, Patricia plans to continue working in community pharmacy where she strongly believes she can have an impact in her patients’ medication therapy management while continuing to spread the gospel.

Advocating for Haiti by Frank J. Nice and Lysette A. Deshields

Author’s note: The authors wrote this article several years ago, but it was never published. We have reviewed it and updated it as necessary. In fact, not much changes in Haiti, especially for the good. It has now been over seven years since the earthquake, and truthfully, Haiti has never fully recovered from the earthquake and has literally become a failed nation state. Despite this, the Lord is still in control, and there are wonderful stories of love and redemption.

Haiti at a Glance

It is impossible to visualize the poverty and desolation prevalent throughout Haiti unless you have been able to personally witness these images. In the literature, we read that Haiti is among the poorest and least developed countries in the world. Haiti’s inadequate infrastructure, lack of healthcare, and political turmoil perpetuate an environment that is defined by social instability and the uncertainty of whether improvements in medical care and social structure will ever occur. The suffering and long-term consequences in this community resulting from environmental disasters and a long history of government instability have not offered an easy solution to uplift this island from poverty and despair.

Subsequent to the earthquake that struck Haiti on January 12, 2010, Haiti was left with widespread destruction and a death toll of more than 200,000 people. Additionally, the earthquake forced over two million individuals to become homeless with as many as 500,000 still without homes (Note: Even until today, most Haitians have yet to recover or returned to their homes; instead they have moved to the countryside with relatives). Even after seven years, the aftermath continues to plague the island, especially in the many tent cities that emerged in response to the need for shelter for those who had lost their homes in the earthquake (Note: Most of these tent cities, or at least the blue tarps, have recently disappeared. See previous note concerning where the tent people relocated.) These communities provide testimony of the extreme poverty and serve as the epitome of the struggles that Haiti is continuing to endure. For those who have never travelled to Haiti, no photograph will be able to truly capture the pain, utter poverty, and death that define the country.

An element of heightened concern that clouds the minds of those worldwide is the devastating state of the existing healthcare system. The longstanding inadequacies in healthcare, education, and social stability have resulted in high illiteracy and unemployment rates, clean water and electricity scarcity, malnutrition, and unsanitary conditions. These conditions fail to promote and ensure good health and exacerbate the stresses that illness and death have continued to impose on the country. To further illustrate the effects of a failed system: according to the World Health Organization, the average life expectancy in Haiti is 61 years for men and 63 years for women as compared to 76 years for men and 81 years for women in the United States. Furthermore, Haiti has the highest rates of infant and maternal mortality in the Western hemisphere with diarrhea, respiratory infections, malaria, tuberculosis, and HIV/AIDS being the leading causes of death.

Jon M. Huntsman Sr., an American businessman and philanthropist once said, “Wealth isn’t always measured in dollar signs. We each have time, talent, and creativity, all of which can be powerful forces for positive change.” Christian pharmacists have played a significant role in the delivery of medical and spiritual care to this underserved population. With 77% of the population living below the poverty line and the limited access to medical care, it is increasingly important that pharmacists and other healthcare professionals continue to come together to help those in Haiti to rebuild their country.

Being Inspired

Over 20 years ago, the primary author’s vision was to improve the quality and delivery of healthcare, not only in the developed world, but also in a developing nation. Christian pharmacists have made a significant impact in Haiti as seen by their continued commitment to protect and serve the Haitian people through voluntary medical missions. The placement of pharmacists in Haiti has improved public