patients at home or abroad should always have the goal of leading others to Christ. Just as we are called to develop and cultivate younger generations of pharmacists, we are also able to educate and equip patients with the knowledge needed to care for themselves and their families.

Whether you are in a community pharmacy in the United States or a clinic in a developing country, you are in your mission field. While medicine may help our physical bodies, we can only be spiritually and eternally healed through Christ. Christian pharmacists have the unique ability to share the Gospel through their actions in any setting. Community pharmacists may have opportunities to share their faith with their staff and patients as they build long-term relationships with them. Pharmacists on the mission field meet new people every day, allowing their testimony to be spread among everyone they meet. While the practice sites may vary, the end goal remains the same: to be the hands and feet that bring people to Christ across the earth. Access to healthcare and medicine should not be a privilege, but rather a commodity. Until this goal is achieved, we are called as Christian pharmacists to promote and advocate for the safe and effective use of medications to all patients in all populations.

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Reflections of La Frontera: A Medical Brigade to Honduras  By Danielle Tully and Carrie L. Griffiths

As a fourth-year pharmacy student, I have learned to appreciate the slightly intimidating, yet educational experiences that have been part of my experiential curriculum at Wingate University School of Pharmacy. It was these rotations that, by expanding my knowledge and level of comfort, motivated me about my future as a practicing pharmacist. However, rarely did I feel that I belonged to any particular area of pharmacy, as I often enjoyed the specialties. Graduation was around the corner, and I was beginning to lose focus on what it was that I really wanted to do for my pharmacy career. How would I begin to find joy and pleasure in my chosen profession of pharmacy?

Rewind to the summer months during my undergraduate years, I consistently found myself working at a local mission program called The Hinton Center. After falling in love with local outreach work, I knew that God would allow this type of service to find its way back to me. Without knowing when or how, I continued to embark on my life’s journey.

It happened during a meeting block on campus. A fourth-year pharmacy student spoke about her experience during an international rotation. This was it! My very first opportunity to combine service with pharmacy. The tiny flame that I thought was buried years ago reignited with a force so strong, nothing had the chance of preventing me from going. Not lack of money, not personal struggles with faith, not anything. I spent the next few months researching about medical
brigades, the available sites offered by Wingate, and healthcare and demographics in those areas. Before I knew it, I was standing in line to get my typhoid vaccination as part of the traveling requirements. Honduras, here I come!

I had the privilege of traveling with Shoulder to Shoulder, a non-profit organization that provides basic health care to remote areas such as Guachipilincito, Intibucá, Honduras. Our group consisted of seven health care professionals: a maternal-fetal medicine physician, an OB/GYN physician and two OB/GYN residents, a pharmacist, a student pharmacist, and a pre-medical student. Once we arrived at the clinic, we were greeted by the local health committee and employees of Shoulder to Shoulder. Alongside the sweet aroma of chicken stew, rice, and vegetables, a friendly welcome and sincere “thank you” awaited us for all the services we were about to provide. With my first impression being a sense of family, I was looking forward to spending my week learning and bonding with the brigade members and members of the community.

As quickly as my excitement rushed over me; I began to feel a bit lost. Everyone around me was speaking Spanish, a language I did not know well. How could I establish an initial connection with people if I can’t converse with them? My first barrier was language. Granted, I tried to utilize what little Spanish I knew. It was rusty, no doubt, but that didn’t matter to a little boy named Alja. A high-five from him made me feel right at home.

Following dinner, we discussed our plans for the week and received a tour of the clinic. It was splendid. There was a check-in station, four consultation rooms, a pharmacy, and a dedicated playroom for children. Compared to the work areas I’m used to in the United States, this pharmacy was much smaller, but the concern of being cramped was soon overcome. My preceptor had noticed an extra shelf located along a section of wall adjacent to the pick-up window. She informed me that this shelf was new and had never been there in previous years. I thought to myself, I’ve never seen someone react to a few pieces of constructed wood with such joy. Despite being so ecstatic for her and our new furniture, the truth was that I felt guilty for making an incorrect judgment based on what I’m used to having back in the USA (multiple workbenches with several compartments underneath). I took something at face-value and neglected to see it for all its worth.

As it turned out, that shelf provided us with extra storage and ultimately became one of the main focal points of our work. The shelf held a lot of medications including antidiabetic, antihypertensive, and anticonvulsant agents, vitamins, antibiotics, and pain relief prescriptions. The majority of problems that this population faces revolve around musculoskeletal pain (from working long hours in the fields or carrying supplies on their back and shoulders), poor vision (from excessive smoke and lack of ventilation when preparing meals inside their homes), and nutrition deficiency due to inadequately balanced diet and supplementation.

Every patient received a five-month supply of medications to last them until the next brigade, along with a toothbrush and a bar of soap. Counseling patients in Guachipilincito (“Guach” for short) was like nothing I had ever experienced. Explaining what soap is and how to use it highlighted the varying degrees of poverty that are endured by so many people living in Guachi as well as other underdeveloped countries. Talk about a major priority shift!

Apart from the clinic, our brigade traveled to La Escuela Rural Mixta Dionisio de Herrera, the local school, where we educated children about proper dental hygiene and set up a fluoride varnish treatment station. We also gave multiple presentations to Honduran doctors, medical students, and nurses at a nearby clinic in La Concepcion regarding UTI’s and STI’s during pregnancy, first trimester hemorrhaging, and preeclampsia. In conjunction with operating hours, we scheduled home visits to patients who were unable to attend clinic (elderly, mentally unstable, or special needs children). Our schedule was in full swing Monday through Thursday, 8:00am to 4:00pm. Throughout the week, we dispensed 524 medications and completed a total of 17 home visits, one of which was a follow-up to initiation of a new olanzapine regimen.

The severe mental, situational, and financial poverty that I witnessed during my time in Guachipilincito was not only heartbreaking but eye-opening. Integrating health care resources for underserved communities requires a definite priority shift for both brigade members and the people living in these communities. I was in a foreign country to experience something different than what I’m used to back home. This experience was more than I ever could’ve hoped for and has become the driving force behind my personal and professional quest to strive for excellence, humility, and cultural competence.

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PRECEPTOR’S PERSPECTIVE

This was my first opportunity to take an Advanced Pharmacy Practice Experience (APPE) student along with me to Honduras. My biggest concern was if there was enough room in the pharmacy for the both of us! I had other bouts of anxiety regarding taking a student. The responsibility I felt was tremendous: A foreign country. A language barrier (although I am fluent in Spanish). Letting my student experience this rotation in her own way, but still precept. I wanted her to learn so much while in Honduras, and to actively participate in all the different opportunities available during the week including areas such as clinic, home visits, and going to the school to help apply vernish on the children's teeth.

1 Thessalonians 5:16-18 says, “Rejoice always, pray without ceasing, give thanks in all your circumstances; for this is the will of God in Christ Jesus for you” (ESV). A lot of prayers were said and conversations had with God, from the time I was told that a student would be accompanying me to the end of the rotation. God is Good. He gave me a sense of peace and confidence for the APPE rotation and my ability to lead a student through this experience.

With anticipation, our plane took off for San Pedro Sula, Honduras. I was both excited and nervous at the same time. It was time to let the experiences commence for the both of us.

We landed in Honduras and were picked up by Shoulder to Shoulder staff. We arrived later that evening in La Esperanza to stay the night. We arrived at the hotel and the city was experiencing a power outage. As the hotel management hooked up the generator, we unloaded our luggage, checked in and headed to our rooms. This was the first lesson in “going with the flow.” As I am a control freak, I was reminded to take a deep breath and remember that I’m in Honduras and on Honduran time.

The next day we drove to the clinic in Guachipilincito (“Guachi” for short) where we would be serving for the next 5 days. As we drove to the clinic, a feeling came over me that I was home. This was the second time I had been to Guachi, and I was so excited to be there again! I couldn’t wait to see some familiar faces and to set up the pharmacy for the week.

I was in for a big surprise when we arrived at the clinic and walked into the pharmacy. I was told that we had a new workbench, but when I saw all the spaciousness (not only in the pharmacy, but the workspace itself), I was thrilled! This made pre-packaging and filling prescriptions much more manageable due to the more spacious work area.

We unpacked the suitcases and storage bins of medications and set up the pharmacy. I explained the limited formulary with which we had to work. Then, with the help of some of the other group members, we started counting and prepping vitamins for the school children. Danielle jumped right in and I felt a sense of peace. I knew it was going to be a very fulfilling week for me and also for her. Before I knew it, it was time for dinner and a history lesson about the clinic and Shoulder to Shoulder.

The next 4 days were filled with clinic, home visits, visits to the school and an education session with Honduran healthcare professionals. I was grateful that Danielle eagerly wanted to participate in all of these experiences. This made my heart full.

The first day of clinic was a bit slow, which was a good opportunity for us to ease into what the next 3 days were going to be like. We pre-packaged medications so all we had to do was pull them off the shelf. This made things move much faster since we had up to four doctors seeing patients at a time. Danielle took charge in the pharmacy. She answered questions from the doctors, made notations in the patient’s charts, and counseled patients using an interpreter.

“Therefore I tell you, whatever you ask for in prayer, believe that you have received it, and it will be yours,” says Jesus in Mark 11:24 (NIV). Taking a leap of faith, I stepped back and let Danielle take charge. How else would she get the experience, I thought as I sat in a chair outside the back door of the pharmacy and watched her interactions. The only thing I needed to do was a final check of the medications before they were dispensed.

We had such a rewarding week. In addition to serving, we had several wonderful discussions throughout the week about faith and pharmacy and future mission work. It was extremely exciting to see Danielle’s eyes light up as we chatted. She was so excited about the mission field opportunities and how she could bring her faith with her. I’m thankful I had the opportunity to spend the week in Honduras with her. After this wonderful experience I am excited to take students on future rotations and let them experience all that this rotation and site has to offer.
Dr. Danielle Tully completed her Doctor of Pharmacy degree from Wingate University School of Pharmacy in May 2020. Serving the underserved has always been a passion of Danielle’s and it wasn’t until a few years ago that she realized combining service with pharmacy would be a lifelong goal of hers. Traveling to Honduras was the first of many endeavors. Long term, she wishes to do more with Shoulder to Shoulder as a volunteer pharmacist for future brigades.

Dr. Carrie L. Griffiths completed her Doctor of Pharmacy degree from Wingate University School of Pharmacy in May 2010. Following her graduation, Carrie completed a PGY1 residency at the Central Texas Veterans Healthcare System in Temple, TX, and a PGY2 specialty residency in Critical Care at the North Texas Veterans Health Care System in Dallas, TX. Dr. Griffiths then transitioned her role into academia at Wingate University in Wingate, North Carolina where she is an Associate Professor of Pharmacy. Her practice setting is with Virtual Critical Care at Atrium Health in Mint Hill, NC. Her areas of interest include tele-pharmacy and toxicology.

Jennifer Sands – Facebook Post 3/24/20 about Coronavirus By Jennifer Sands

COVID-19 has turned our world upside down. So much uncertainty, so much fear, so much anxiety. Indeed, it’s disappointing to be forced to cancel vacations, proms, weddings. It’s distressing when our employer shuts down and we end up in financial crisis. It’s disturbing to see shortages of necessities like water, toilet paper, masks, gloves, medications, ventilators. And it’s downright terrifying to see the number of COVID cases – and deaths – rise each day. This is not a post linking Coronavirus to apocalyptic events, nor is this a post bashing how certain leaders and politicians are handling this healthcare emergency. I simply want to remind everyone of God’s sovereignty and our need to turn to Him.

Far be it from me to claim to know exactly what God is up to right now, but I think it’s safe to say that He’s trying to get our attention. For years I’ve been praying for a massive spiritual awakening in this country… and I know many of my Christian brothers and sisters have been doing the same. I’ve been praying for a Christian revival unlike anything we’ve ever seen before: Bigger than the Great Awakening of the 1700s. Bigger than the Welsh Revival in 1905. Bigger than the Jesus Movement of the 1970s.

Perhaps God will use this COVID pandemic to answer those prayers. If so, I believe that He wants us to be involved in bringing forth His answer. The Great Commission that Jesus gave us in Matthew 28:18 is not a suggestion — it’s a command.

Here in New Jersey, we have the second-highest number of COVID cases and deaths in the country, and we are currently in lockdown. My dear friend and sister in Christ, Barbara Hoagland, a member of CPFI, recently made 8 little “care bags” for her neighbors. Inside each bag was 1 individually-wrapped roll of Scott toilet paper, an informational brochure from her church, and a typed note:

Hello Neighbor! 😊

Just thought I’d share 2 things that we all really need: toilet paper and Jesus!

There’s a dire shortage of toilet paper right now. But there’s no shortage of Jesus.

He’s available and accessible to everyone, everywhere, anytime. And Jesus loves us so much that He sacrificed His perfect, sinless life as a substitute for our imperfect, sinful lives. If He went to that extreme in order to secure eternity in heaven for anyone who trusts in Him, how much more will He help us get through this health crisis?

With church doors shutting across America, my church (Living Faith Bible Church) will be live-streaming their service every Sunday morning at 10:30am. I invite you to watch the service online at www.livingfaithnj.com. There won’t be any people in the sanctuary, but you’ll hear great recorded music from our worship team and a powerful message from Pastor Alex… and you will be blessed!

Also, you may (or may not) know that I’m a pharmacist at Shop Rite Pharmacy. Please don’t hesitate to call me if I can help you with getting your medications… even if it’s just