

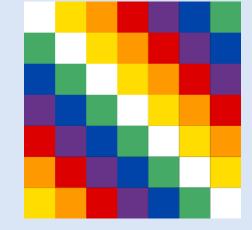
An International Observation of Social Work and Health Care

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Location: La Paz, Bolivia July 5, 2014 to August 2, 2014

Bolivia is a landlocked country located in western-central South America. The country features a wide variety of geography, from the peaks of the Andes, where La Paz is located, to the Eastern Lowlands of the Amazon basin





The estimated 10 million Bolivians are culturally and ethnically diverse. According to the Bolivian constitution, there are 34 official languages of the country, including Spanish, Guarani, Aymara, and Quechua.



Recent changes have occurred in pediatric health care within the country. Bolivia ranks second to last in the Western Hemisphere for key health indicators. The child mortality rate for the country is 69 per 1,000 live births. Some of the major health concerns are centered around malnutrition and sanitation issues. In 2002, the government passed the Seguridad Universal Maternal-Infantil (SUMI) which provides free health care for all children under 5 years old, pregnant, mothers, and mothers up to 6 months after a birth.

Special Studies Project Information

The educational purpose of my global studies experience was to examine pediatric health care in Bolivia through a social work lens and to compare/contrast it to the United States. In addition, I was to look at the use of social workers in both countries and make possible suggestions to improve both the United States and Bolivian health care systems.

Agency

I partnered with Child Family Health International's (CFHI) Pediatric and Adolescent Medicine in La Paz, Bolivia Program. The hospital where I was observing at was Hospital del Niño.

Outcomes

Compare/Contrast

- •Mental health stigmatization occurs prevalently in both countries
- Lack of mental health resources in rural areas in both countries
- •Similarities in health care protocols surround sexual abuse and neglect cases for children

Recommendations

- •For the US
- Open hospital units, removing individual rooms, in units with low risk of infection
 - •Facilities social support systems for patients and parents
- For Bolivia
- •Public health campaigns surrounding mental health
- •Increase funding for rural mental health resources

Skills Utilized/Developed

- Spanish language development
- Cultural observation and competency
- Interacting with children and parents in a clinical setting

Classroom Connection

All of my classes prepared me to self-reflect on privilege, oppression, diversity, and social justice (PODS) on both societal and individual levels.

Lessons Learned

From my global special studies experience, I increased my abilities to:

- •Confront my own privileges and their impact on my impact my personal and professional life
- Increase personal awareness of contrasting points of views and acceptance of these differences
- Learn historical current political perspectives external to the US experience



Advice

- Go in with an open mind to new cultures, new experiences, and to your self
- You will get homesick! Challenge yourself to look behind and beyond these feelings
- Self-care, self-care

Career Connections

Going forward, I hope to continue to personally examine and challenge my own privileges and assumptions when interacting with clients. I also hope my Spanish immersion, tied with my own cultural backgrounds, will help facilitate therapeutic alliances with future clients and families.

Acknowledgements

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