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Independent Study Projects

Title

Improving Patient Education in Global Health Efforts in the Philippines

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Author

Haynie, Matt

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Improving Patient Education in Global Health Efforts in the Philippines

Final Overview of Independent Study Project

Matt Haynie, MD Candidate 2017

UC San Diego School of Medicine

Project Rationale:

Patient education is an important means of improving patients' ability to obtain, process, and understand basic health information, and in turn care for themselves. Some refer to this as a patient's "health literacy." Low health literacy has been shown to result in poorer health status, higher rates of hospital admission, and decreased adherence. In the global health setting proper healthcare and follow up is often inaccessible, therefore magnifying the importance of patient education and self-sufficiency in this underserved population. Education can help to bridge the gap between surgical treatment and successful long term health outcomes.

Objective:

This project involved the creation of educational materials used in the efforts of the Mabuhay Deseret Foundation (MDF) in the Philippines. This foundation is a non-profit organization that was established in 1988 in the Philippines with a focus on surgical treatment of strabismus, cleft lip/palate, club foot, and cataracts. The foundation has since expanded to include hundreds of volunteers operating out of 12 medical facilities in the Philippines. Their methods provide training and equipment to local physicians and hospitals in return for free or low-cost surgery to patients identified by local authorities and doctors during health screening trips. These patients are transported to major hospitals, cared for post-operatively in recovery homes, and subsequently returned to their native home. While the Foundation strives to ensure favorable long term outcomes with all patients, very little educational materials exist to provide the sort of health literacy that might empower patients upon leaving the medical care setting.

My goal was to work closely with the foundation, on site in the Philippines, and determine the educational needs of their patients. I expected to work with them to develop some form of written educational manual that would provide the basics about the foundation itself in addition to very simple explanations of the conditions they treat and the surgeries they provide. I then hoped to create videos, according to the requests of the foundation, to be used in their outreach and screening efforts.

Methods:

I lived in the Philippines in the month of August, 2017, while working on this project. My time there was spent either within the patient “hospice home” in Manila, or traveling with a handful of staff members to indigent populations in the smaller villages in the northern parts of the island of Luzon. While the majority of the work was done on site at the Mabuhay Deseret Foundation, work continued to be done editing and updating the educational manual and videos since my return to the United States.

Achievements:

1) My first involvement with the foundation was getting to know and caring for patients in the Mabuhay recovery home in Manila. This site housed 30-40 people at a time, both patients and family members, as they prepared for and recovered from surgery. During the first week I came to know and love the staff members and have sustained a lasting relationship with many of them. I also came to better understand the Filipino culture and lifestyle.

2) During the first week I developed a means of organizing the medical supply inventory of the foundation. They receive large shipments of medical supply donations from the United States every 3-4 months and use the materials to bargain with local hospitals and surgeons in exchange for patient surgeries. However, they have no medically trained staff to identify what the supplies are and to whom they should be offered. My simple system helped them by categorizing key words on item descriptions that would tell them if they applied to general surgery, ophthalmology, orthopedic surgery, etc. They can then use this to understand how to best allocate these donations.

3) I then served as the primary screener for cataract and strabismus patients at various screening trips throughout Luzon. We travelled to 4 different locations and screened over 400 people for the various conditions treated. I was also privileged to work with local ophthalmologists in the process of organizing screening trips, and participated in 4 surgeries. Over 200 surgeries were subsequently scheduled as a result of our screening efforts.

4) Towards the end of the trip I worked with staff at the hospice home to develop a manual that provides the basic information that the foundation wanted patients, family members, and volunteers to know when attending screenings or when staying in the hospice home. This manual also included a brief page about the main four conditions that are treated. As I worked with the staff and patients they asked that the explanations be more and more simple until they felt comfortable understanding its teachings.

A page of hospice home rules was also developed in conjunction with the staff members. Since that time, the Country Director for MDF has informed me that they have decided to use that manual to create a handbook that will allow them to be accredited by the Department of Social Welfare and Development.

5) Finally, we discussed the idea of having short videos made that would be designed to educate patients at distant screening locations, as well as on the foundation's website. I therefore created two videos at their request, teaching about cataracts and strabismus as those are the most common surgeries performed.

6) Perhaps the greatest of achievements resulting from this project can be attributed to the people of the Philippines and the workers at the Mabuhay Deseret Foundation. They instilled in me a passion for global health work that will no doubt stay with me during my career in ophthalmology.

*A copy of the manual now used by the Mabuhay Deseret Foundation has been included below.

*A public version of the videos can be found at the following websites:

Strabismus Video: <https://www.powtoon.com/online-presentation/fmkHVDoJgR6/?mode=movie#/>

Cataract Video: <https://www.powtoon.com/online-presentation/fjgNIYGkXdo/?mode=movie#/>

2017

Mabuhay Deseret Foundation



In affiliation with the Deseret
International Foundation/Charity
Vision





Mabuhay Deseret Foundation

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Welcome

Welcome to the Mabuhay Deseret Foundation! We hope you have a wonderful experience with us, whether you are a patient, accompanying a loved one, or here to help serve in whatever way you can. Here at Mabuhay we all work together, yourself included, to change each life for the better. This manual is designed to help you know what to expect throughout your experience and also to help you better understand the medical conditions that we treat.

Background:

Founded in 1988, the Mabuhay Deseret Foundation is the largest surgical charity in the Philippines, performing over 3,000 free operations per year to correct medical conditions for the poor such as cataracts, crossed eyes, cleft lip and palate, burn contractions, post-polio and club feet.

The word 'Deseret' comes from the ancient word for honeybee and represents the philosophy of the foundation. In a beehive everyone contributes to make something sweet. At Mabuhay Deseret, Filipino doctors volunteer their time, local hospitals provide discounts on the use of their facilities, and patients and their family members contribute by cooking and cleaning during their stay in our Hospice Houses.

By working together with members of the community, the Foundation is able to perform dramatic, life-changing surgery for thousands of Filipinos every year.

Our Mission:

We strive to work together with members of the community to eliminate needless blindness, cleft lips and palates, clubfeet, crossed eyes, and several other treatable medical conditions.

Our Role:

At Mabuhay Deseret we work primarily to find those people who have a need for treatment, coordinate with local leaders to transport patients to proper facilities, and arrange with hospitals and physicians to provide the necessary surgery at minimal cost to the patient. We also house patients and caregivers as needed during this process in a collaborative hospice house.

Information for patients

At one of our screening sites:

If you are found to be in need of surgery, you will be placed on our scheduling list and contacted when a surgery is available. The surgery may occur at a site near where you live, or you may be required to travel to a larger facility near one of our recovery homes. In that case you would stay in one of our hospice homes while preparing for and recovering from your treatment. The amount of time you stay at the home will vary based on what treatment you need. Before arrival, all patients must be screened by a doctor for certain illnesses and evaluated to be sure they are fit for surgery.

At the Mabuhay Hospice Home in Manila:

Mabuhay House Rules:

1. Everyone should wear clothes, including shirts, at all times (young, old, male or female).
2. There is no smoking or drinking of alcohol or coffee.
3. You must return in time for the 9:00pm curfew each day, and cannot leave between 9pm and dawn.
4. You cannot borrow from or lend money to other guests/workers.
5. Keep the environment around you clean.
6. Water the plants each day as assigned.
7. Do not let children leave the house alone.
8. Use house resources wisely, such as turning off lights when not needed and taking good care of mirrors. If unsure about the use of anything, please ask first. Guests will have to pay for any damage, such as broken mirrors, and may be dismissed from the house if disrespecting property.
9. Each guest is given a responsibility within the house, which will be posted on the board for all to know.
10. In addition to house responsibilities, we often have fun projects that you can be involved in to pass the time while waiting for or recovering from surgery.
11. Please encourage and befriend the other guests, and avoid any arguments or contention.
12. Respect other people and their belongings. If something is not yours, please do not take or use it without permission.
13. Conserve resources as much as possible, such as water, electricity, transportation costs, etc.
14. Former patients should not visit the house, unless approved by the Foundation.
15. By allowing us to serve you, you agree not to pursue any form of lawsuit or take us to court for any reason if not satisfied with your treatment. If you are overwhelmed or dissatisfied with something prior to your treatment, you may opt out at any time.

Information for patient companions

At one of our Screening Sites:

Thank you for accompanying your loved one as we review their case and determine the need for surgery. If surgery is needed, they will be placed on our list and contacted about when to appear at the Foundation along with one relative/companion. Patients will need to be screened by a doctor prior to arrival to ensure they are free of certain illnesses and fit for surgery. They may need to stay in one of our hospice houses during treatment and recovery; in which case it is required that you or another loved one accompanies them during their stay. Only one companion is allowed. Please plan ahead to be sure somebody would be available for this need.

At the Mabuhay Hospice Home in Manila:

Welcome to our hospice house, and thank you for staying with your loved one during their treatment and recovery! As we mentioned earlier, our goal here is to function like a beehive, where every member works together to provide all we need to live in a clean and safe environment. We hope you respect this effort and are willing to help as needed.

On Arrival:

On arrival you will meet with one of our members to get to know you better, make sure you understand what to expect while you are here, and to teach you the rules and responsibilities for all who stay at our hospice house.

During your stay:

You will be assigned certain responsibilities while staying at our hospice house, and we expect all to contribute as assigned and to follow the rules listed at the end of this manual.

Information for volunteers

At One of our Screening Sites:

Please meet with one of our representatives to find out how you can best help with the current screening project. Each site requires a different set up and screening procedure.

At The Mabuhay Hospice Home in Manila:

We welcome you to the Mabuhay Deseret Foundation and appreciate your willingness to help with our efforts! Below you will find some information that will help you understand how to best involve yourself here at our hospice house

- General rules can be found at the end of this manual. Please respect these rules.
- If you would like to bring food or provide an activity for patients and their loved ones, please check in with one of our staff members beforehand to be sure they are approved. Our patients absolutely LOVE special activities and we would be happy to accommodate all that we can.
- Balloons are not allowed in the hospice home
- There is a restroom available to staff and volunteers

Medical Information

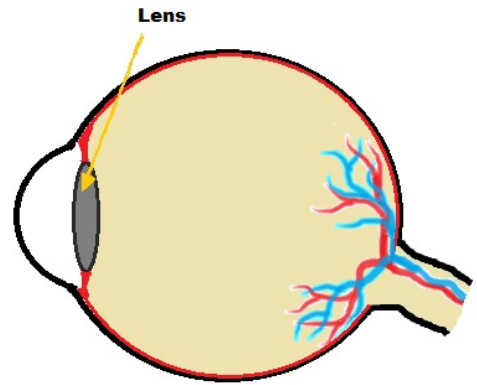
The following pages provide some basic information about the conditions that we treat at the Mabuhay Deseret Foundation. For more information and informational videos, please visit our website at mabuhaydeseretfoundation.org.

Cataracts

Background:

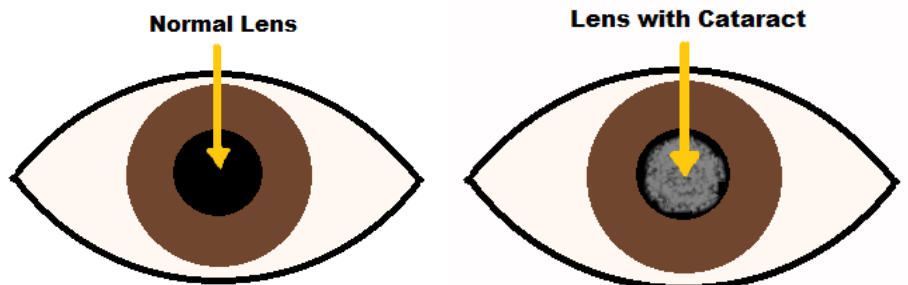
A cataract is a condition where the **lens** in your eye becomes cloudy instead of clear, affecting your ability to see. A cloudy lens causes your vision to be blurry because light cannot pass through, similar to trying to look through a dirty window.

Cataracts naturally develop as people age, but some people get them sooner or more severe than others. You may start to have blurry vision, a glare when you look toward lights, or poor night vision. In addition, cataracts can also be present at birth or be caused by injury and certain diseases. The treatment is essentially the same for all types of cataracts.



Treatment:

Cataracts only need to be treated if they are affecting your vision. There are no medicines, glasses, or exercises that can make cataracts go away or stop them from forming. The best way to treat cataracts is by surgery to remove the cloudy lens and replace it with a new, artificial one. This new plastic lens will help your vision to be clearer. The actual procedure can take as little as 10 minutes and is considered to be very safe. However, there is a small risk of eye infection, bleeding, or damage to other parts of the eye. The eyeball is not removed during the surgery, instead small incisions are made in the clear part of the front of the eye and small tools are used to remove the old lens and insert a new one.



After surgery:

- Your vision may not seem to improve until 1-2 weeks after surgery
- Wear an eye shield as directed to protect your eye
- Use eye drops as instructed by your doctor. It is normal to have some burning or stinging pain with use of eye drops after surgery.
- Avoid injury: Do not touch or rub your eye for 2 weeks, do not wash eyes with soap (you can still bathe), do not lift anything over 20 kg, do not swim for 1 month, do not drive until approved by your doctor
- **Caution:** Let your doctor know if you have severe pain, sudden flashes of light, loss of vision, or shadows in your vision

Cross eye

Fancy name: "Squint" or "Strabismus"

Background:

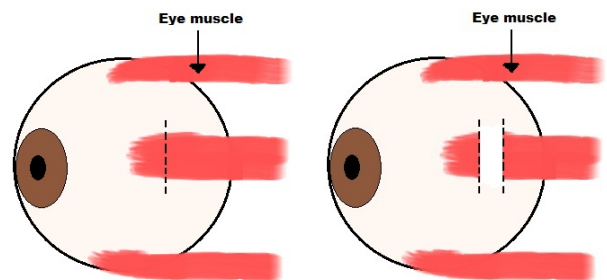
The movement of your eyes is controlled by 6 small muscles on each eyeball. Usually your brain works to make sure that both eyes stay pointing in the same direction. When one of these muscles is weak or the connection between the brain and the muscle is damaged, one eye might not move or stay centered as well as the other eye. If your eyes are not aligned it is known as cross eye, squint, or strabismus.

In older patients this may cause double vision because your eyes are each seeing slightly different pictures. In young children the eyes and brain are not yet fully grown, so instead of having double vision the brain chooses to ignore one of the eyes and over time that eye can lose its ability to see. This is why it is very important to treat cross eye before the age of 6 if possible.

Treatment:

There are several treatments that can help the eyes to point in the same direction, especially if started young. These can include certain eye exercises, an eye patch, or special glasses called prisms. These treatments do not work in all patients, so surgery may be needed. Surgery can correct most cases, but you may not have perfect alignment after surgery. This surgery works by changing where the eye muscles attach to the eyeball, or changing the length of the muscle. This is usually done by the following steps:

- 1) Uncover the muscle that needs to be fixed (the eye is NOT removed during surgery)
- 2) Detach the muscle from the eyeball
- 3) Change the length of the muscle or reattach it to a new site to correct its position



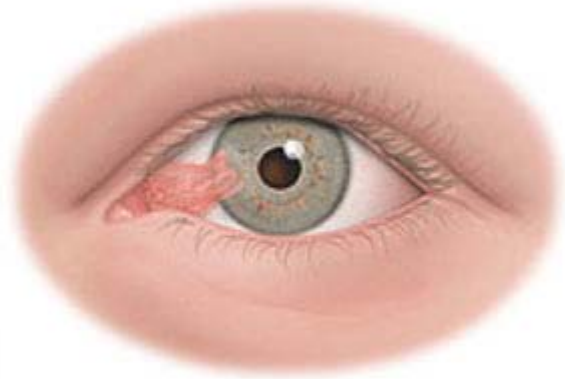
After surgery:

- You will likely have redness of the white part of the eye, bloody tears, and/or discomfort. This is normal, and the redness may last several weeks.
- You may gently wipe your eyes, but be careful not to be too rough.
- Avoid getting soap in the eye for 3 days. Avoid swimming for 1 month.
- You may continue other activities as long as they are not painful.

Pterygium

Background:

A pterygium is the name used when the covering over the white part of your eye is growing over the front of the eye, called the cornea. This is most often caused by too much sunlight. If untreated, the pterygium can continue to grow further over the front of your eye and eventually cause poor vision.



Treatment:

Surgery is only needed for a large pterygium, or one that affects your vision. Your eye will be numbed and you will remain awake for this procedure. The extra tissue is gently scraped off of the front of the eye and a few small stitches might be placed to be sure the white part of the eye stays in place.

After surgery:

- You may have some soreness and redness for several days, but recovery should be very quick.
- Drops are used to keep the eye wet
- You should wear sunglasses when outside, especially if working for long periods of time in the sun.

Cleft lip/palate

Background:

A “cleft” is a gap or split between two areas. This can occur in the upper lip or in the roof of the mouth, known as the “palate.” When a baby is first developing in the womb, there are several sections of the face that need to



grow together to form the mouth, lips, and nose. A cleft lip or palate occurs if these sections don't come together correctly and leave a gap. There is a wide range of gap size, and half of affected children have both a cleft lip and palate. This can cause difficulty with feeding and speaking, and also make it difficult to interact with others.

Treatment:

Cleft lip and palate both require surgery to be corrected. The best results are obtained if surgery is started as a baby. In this case, surgery usually occurs around 3 months of age to close the cleft lip. The palate is then surgically closed between 6-12 months of age. If not treated as a baby, cleft lip can still be repaired at any age, but cleft palate can only be repaired up until age 18. As an adult the palate is much harder to surgically correct.

After surgery:

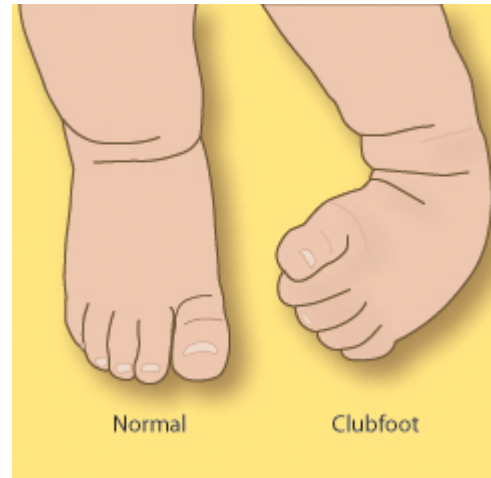
- It is very important that you follow your surgeon's recommendations after surgery regarding follow up appointments, taking care of your stitches, cleaning the mouth, eating, etc.
- These recommendations will vary based on your age and the stage of surgery performed

Clubfoot

Fancy name: "Congenital Talipes Equinovarus"

Background:

Some babies are born with feet that did not form in the right position. The most common problem is that the feet are turned inward and/or downward, making it difficult to walk normally. However, clubfoot can be so severe that the feet appear to be rotated completely backwards. There is nothing that parents could have done during pregnancy to prevent this from happening. Clubfoot appears to be genetic, meaning that it is more common in certain families.



Treatment:

Treatment of clubfoot should begin during the first week of life if possible. This would include using a leg casts and braces to slowly stretch the foot back into the normal position over several months. The braces look like a pair of shoes with a metal bar between them that holds the feet in the right position. A small surgery might be needed before doing this stretching.

If clubfoot is too severe to be treated with casting, or if it is not treated early in life, then surgery is needed to help the feet move back into the normal position. After surgery braces are used to continue to slowly adjust the feet over several weeks or months. This can be difficult as it requires much patience and can be very painful.

After surgery:

- Continue to wear the brace or cast as instructed by your doctor
- Watch for redness and blisters on the skin, the brace may need to be adjusted to prevent this if possible

Others:

Leg amputations:

Mabuhay Deseret Foundation can also help patients to acquire prosthetic legs for those who have had previous amputations.

Burn Contractures:

Although less frequently treated than other conditions, Mabuhay Deseret Foundation has also been able to help burn victims. One of the difficulties in recovering from burns is called contracture or the skin, where the skin is too tight to allow movement of a certain part of the body. This can be repaired surgically if needed.

Post-polio Syndrome:

Mabuhay Deseret Foundation has also been fortunate enough to help certain patients with the crippling effects of previous polio virus infection. Many years after polio infection patients can develop new symptoms such as muscle weakness. This can be improved with certain therapies, some of which we are able to provide for patients.

Mabuhay House Rules

1. Everyone should wear clothes, including shirts, at all times (young, old, male or female).
2. There is no smoking or drinking of alcohol or coffee.
3. You must return in time for the 9:00pm curfew each day, and cannot leave between 9pm and dawn.
4. You cannot borrow from or lend money to other guests/workers.
5. Keep the environment around you clean.
6. Water the plants each day as assigned.
7. Do not let children leave the house alone.
8. Use house resources wisely, such as turning off lights when not needed and taking good care of mirrors. If unsure about the use of anything, please ask first. Guests will have to pay for any damage, such as broken mirrors, and may be dismissed from the house if disrespecting property.
9. Each guest is given a responsibility within the house, which will be posted on the board for all to know.
10. In addition to house responsibilities, we often have fun projects that you can be involved in to pass the time while waiting for or recovering from surgery.
11. Please encourage and befriend the other guests, and avoid any arguments or contention.
12. Respect other people and their belongings. If something is not yours, please do not take or use it without permission.
13. Conserve resources as much as possible, such as water, electricity, transportation costs, etc.
14. Former patients should not visit the house, unless approved by the Foundation.
15. By allowing us to serve you, you agree not to pursue any form of lawsuit or take us to court for any reason if not satisfied with your treatment. If you are overwhelmed or dissatisfied with something prior to your treatment, you may opt out at any time.

Thank you from MDF Staff and Volunteers!



Mabuhay House Rules (Tagalog)

1. Lahat ay dapat nakadamit (bata, matanda, babae o lalaki).
2. Bawal ang manigarilyo, uminom ng alak at kape.
3. Kailangang nasa oras ang pag-uwi sa gabi. Pagdating ng alas-nuwebe ng gabi, wala ng lalabas o papasok at patay na ang lahat ng ilaw.
4. Bawal ang umutang at magpautang.
5. Panatilihin malinis ang kapaligiran.
6. Diligan ang mga halaman.
7. Huwag pabayaang mga bata na nasa labas ng bahay upang maiwasan ang anumang sakuna.
8. Ingatan ang mga gamit sa bahay, lalung-lalo na ang mga ilaw at salamin. Kung hindi marunong gumamit, magtanong muna. Kung sino ang makabasag o makasira ay dapat magbayad o maaaring pauwiin.
9. Ang bawat isa ay bibigyan ng gawaing bahay na dapat niyang gampanan. Ito ay ipo-post sa board para alam ng lahat.
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11. Bukod sa gawaing bahay, mayroon ding mga projects na gagawin upang hindi masayang ang oras habang nagpapagaling o naghihintay maoperahan.
12. Hinihikayat namin ang bawat isa na makisama. Iwasan ang anumang alitan.
13. Respetuhin natin ang gamit ng ibang tao. Kung hindi sa atin huwag nating kunin.
14. Magtipid sa lahat ng bagay (tubig, kuryente, pamasaha...)
15. Ang dating pasyente ay hindi pwedeng tumigil dito. Bisita lang.
16. Bawal ang ligawan. Kung mayroon kayong nagugustuhan o napupusuan, hinataying matapos ang pagpapagamot.



