

Cultural Crossroads in Healthcare Program
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I was frequently asked by classmates in my program why I chose the international program in Mexico, being fluent in Spanish and Mexican, to which I simply responded, “Because I’ve never been in Oaxaca.” Mexico is a huge country with thirty-one unique states, each with its own variation on the theme of Mexican culture. And Oaxaca is one of the brightest gems that Mexico has—rich in art, music, architecture, cuisine, and native customs that have long been the attraction of tourists. Mountains surround the great valley in which the heart of the state of Oaxaca—Oaxaca City, the capital—lies. While these mountains are breathtaking to anyone who takes the time to observe them; and while they have been the focal point of countless photographs and paintings; and have been the themes of many songs and poems, they have historically deprived the heart of Oaxaca from what lies beyond the horizon—the resources of industrial Mexico.

Don’t get me wrong! Oaxaca City has every modern commodity, including a very nice airport to fly into and a great highway that connects it to Mexico City, but the tradition of Oaxaca being last in line to receive any type of federal government funding still continues. Add to this a shortage of water and corrupt state government leaders and the result is a society with a minute upper class, very few middle class citizens, and an overwhelmingly large poor population.

Our language school, Becari Language School, where we had a minimum of two hours of Spanish lessons every day, had outstanding teachers—patient, caring, and flexible. Though it is obvious that the school focuses on teaching more beginning and intermediate Spanish learners, the teachers made a great effort to select a challenging and interesting curriculum that helped expand my vocabulary and refine my grammar skills—things all native speakers living in the United States need practice with. Living with a Mexican host family really allowed me to immerse myself even more in the language and culture. And our host families were all wonderful and provided us with the best of “hospitalidad Oaxaqueña,” Oaxacan hospitality. We all had our own rooms—some of us even had televisions in our rooms—and our own bathrooms. Our group would often debate on whose host mother was the best, based on the delicious meals we were served. The weekends were great for going on day trips or even long weekend trips like the one our group took to the beaches of Puerto Escondido.

Through our weekly lectures with the program medical director, Dr. German Tenorio, we learned how the Mexican health system divides to serve various groups, ranging from the government funded institutions for the poor all the way up the hierarchy to the private sector. In between these extremes are the institutions for working class citizens who can't necessarily afford the private sector. "Our health system is a young system, only about fifty years old," said Dr. Tenorio. Essentially everyone has access to healthcare in Mexico, but the quality of care depends on how much you can pay. The private hospitals have the most resources, the best equipment, and are well staffed. The working class institutions are well equipped, but slightly understaffed and are constantly jam packed with people waiting many hours to be attended. Interestingly, there are some types of insurance schemes where these people pay a small monthly charge that will allow them to walk right into the hospital and be attended without having to wait. Did I mention that triage is pretty much non-existent? And then there are the government institutions that are, of course, the least equipped and most understaffed. This is where I spent the majority of my time. In one week I was at the "Hospital Civil" observing in the labor and delivery operating room and in another I was helping combat dengue with the staff from a "Centro de Salud" located in one of the poorest neighborhoods in the hills of Oaxaca City.

What does one make of these unique experiences? Well, I have come to realize that you just cannot compare the Mexican health system to the American health system or its standards; they are like apples and oranges. However, in one of our lectures we learned that the vaccination program in Mexico is the only thing really up to par with the American health system. It is tied in with the public school system—parents must prove that their children have been vaccinated in order to enroll their children in school, and the vaccinations are free. Such programs have completely eliminated diseases like polio throughout Mexico. However, if people are living in third-world situations, then they will be prone to third-world diseases. During one of my conversations with my host father, Dr. Vicente, retired gastroenterologist, we discussed the economic situation of the poor people living in the hills. He assures me that because public schools are free, including universities, people in Mexico do have the opportunity to overcome poverty.

This experience really does make you appreciate all the resources we have in American healthcare settings, including the privacy and confidentiality regulations. That the lack of resources severely compromises the health and safety of patients in Oaxaca is undeterminable in such a short amount of time. I would be curious to know how often urinary tract infections occur in the "Hospital Civil's" obstetrics and gynecology operating room due to the lax practice of sterile procedure during foley catheter placements. But what one has to understand is that the Mexican health system really does work and is improving slowly but surely. Indeed, everyone in their respective healthcare profession does want nothing but the best for their patients.

I forgot to mention that fried grasshoppers, seasoned with salt, lime and chili are a traditional snack in Oaxaca. Everyone eats them like we eat potato chips. An old wives tale says that if you eat "chapulines," as they are called, you will return to Oaxaca some day. I can't wait until I become physician so that I can return to Oaxaca and actually lend the healthcare system a hand—yes I ate grasshoppers and they were quite tasty!
Thank you CFHI.