

**Medical Student Enrichment Program**

University of Alabama at Birmingham School of Medicine

**Clinical Elective:** Kijabe, Kenya – Kijabe Hospital

**Dates of Training:** January 27, 2019 to February 20, 2019

**Student:** Catherine Brown, MS4

**Date of Reflection:** March 4, 2019

My month in Kijabe, Kenya at Kijabe Hospital was rich, full, and impactful. I loved the sweeping views of the Great Rift Valley, the vibrant bougainvillea around every corner, and the spectacular (in price and quality) avocados and mangoes from the market within walking distance from our house. More important than any of those lovely things, was the fact that I was able to see a small glimpse of what my future might look like as a child neurologist.



Throughout my month in Kijabe, I was able to work with several of the hospital's full-time pediatricians. While watching them manage tuberculosis, paralytic rabies, and hyperbilirubinemia (so high I could not believe it), and severe malnutrition, among many other



pathologies, I witnessed the type of physician I want to become. I want to be creative with the resources available to me, I want to integrate context and culture into my clinical decisions, I want to practice using up-to-date and robust evidence, and I want to remain compassionate and kind in the midst of the stress and chaos that inevitably comes with a

career in medicine. These women give their all in ways that blew me away. I hope to emulate and remember their approach as I begin residency in the coming months.

In addition to the impact of simply watching them do their jobs, I had a really interesting and encouraging conversation with one of the pediatricians who is an American and trained in pediatric emergency medicine. She said that when deciding on a specialty, she was told that in order to be an effective global health physician, she needed to choose family medicine so she could see a wide variety of patients. The problem, though, was that she was much more interested in and excited about a career in pediatric emergency medicine. As I said earlier, she ended up choosing to pursue her passion and here she is, years later, utilizing her pediatric emergency skills every day and helping to start one of the first pediatric emergency and critical care fellowships in Africa, with the first fellows starting this year. She believes that though generalists may have been previously needed, many countries now have well-developed generalist training programs. In her opinion, nowadays the greatest need around the world is more abundant specialty care.

As part of this conversation, I naturally asked her, “Would a child neurologist be needed at this hospital?” and she responded with a resounding, “Yes!” About a third of all of their pediatric admissions are somehow neurologic in origin, and there are only three practicing child neurologists in the country of Kenya, none of whom are able to visit Kijabe for a variety of reasons. She feels confident that they will eventually have to hire a full-time child neurologist. I am so excited to start to envision the ways my future profession and skillset will be directly relevant to the needs of Kijabe Hospital, and I am hopeful, other hospitals around the world. I would love to be able to see child neurology patients in a global context but also to help educate local providers on ways they can incorporate child neurology principles into their clinical care. Overall, I’m abundantly thankful for the chance to meet inspiring providers and learn more concretely about the many ways global health and child neurology intersect. Though I am obviously nervous about the start of intern year, this experience made me so excited for my career to start!



*Catherine Brown*