



The Duke School of Nursing and Curamericas Global: A brief history and celebration of our partnership

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On March 13, 2014, Curamericas Global attended a presentation by Curamericas Global experts Care Groups at the Triangle Global Health Consortium. At this meeting, Andrew Herrera, Barbara Muffoletto and Irene Felsman talked at length about a potential partnership between the Duke School of Nursing - Nursing Students Without Borders club and Curamericas Global for students to support our work in Guatemala through a Spring Break service trip. In January 2019 we signed an agreement with DUSON for course related clinical immersion experiences with ABSN and graduate students. Our project in Guatemala was added as a clinical site for Community and Public HEalth required ABSN course. This agreement deepened our commitments to supporting both students and nurses at our project sites.

Since 2014 we have had seven teams visit and support our Guatemala partners, with over 50 unique students and several clinical instructors; some students have gone twice. Since 2014, Duke students have contributed over 8058 hours of service, a \$177,276 in-kind value; and cash donations of \$15,000.

Nursing students observe and support labor and delivery practices, prenatal care, postpartum care, primary care, school health promotion and community health fairs for mothers and children under 5. They learn traditional health practices, and how to connect with diverse indigenous populations. These teams always travel with a DUSON preceptor/instructor who provides clinical guidance, and a Curamericas Global Facilitator who provides support for interpretation and travel to the western highlands of Guatemala (a remote high-need area, 10 hours by car from the capital city).

Prior to travel, we communicate with professional nurses at the program site to identify priorities needed for health promotion, education and quality improvement interventions.

DUSON students bring all supplies they will personally use during their time on site, in an effort to lessen burden on our partners. In addition, students have raised funds to purchase several simulation models (Mama Natalie) to support training needs. Here are some quotes from participants from Duke:

"The trip was amazing! I learned so much at the project site and surrounding casa maternas! They planned a diverse array of health care activities. I really appreciated how diverse and comprehensive our week was!"

"Excellent opportunity to experience personally the challenges of community/public health in low income areas."

"I learned a lot about capacity building and partnership in public health. Respecting and working with, not against local/traditional cultures."

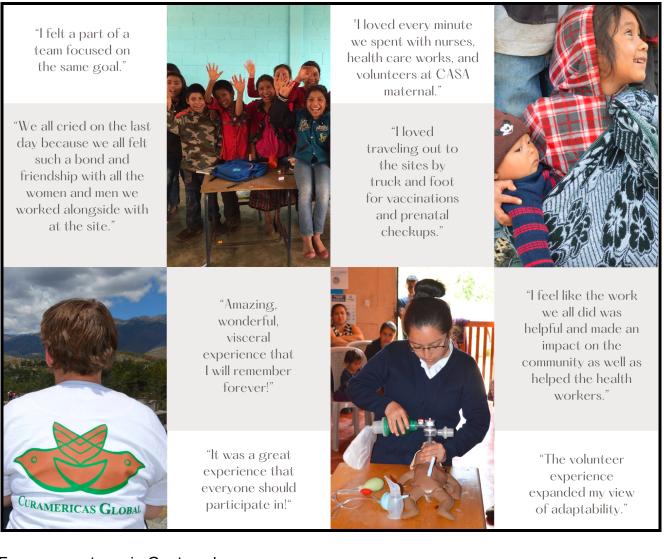
"I've done several "expeditions" abroad and this one I felt like I was making the most impact... It is so amazing to reflect on how much we were able to accomplish in such a short period of time!"

When the COVID crisis disrupted global travel, Curamericas Global served as a remote community health clinical site supporting 65+ students in a spring and summer clinical rotation. Students worked with experts at Curamericas Global to support community-health outreach across NC for Spanish speaking populations.

What makes Curamericas Global different:

- A professional public health program with deep connection with the local community;
- A chance for students to learn alongside experts in community-based health;
- Perspective on how to participate in global health in a sustainable and values-driven environment;
- Safety and global volunteering best practices in place;
- Experience with over 2,000 global volunteers and partnerships with other universities like Johns Hopkins, University of California in Los Angeles, University of North Carolina Chapel Hill, and the University of Florida, among others.





From our partners in Guatemala:

We are grateful for the DUKE group, since it has been a good exchange in health programs, especially nurse-to-nurse, university-university, and above all the exchange that takes place at the level of each team.

Thanks to the support of the volunteers, it has been possible to improve the quality of care for all families in the rural area because with their donations, both in cash and supplies, with all of this, families receive comprehensive care for all families, but especially for the women during childbirth care itself, which is cared for with respect, humanization and with cultural relevance and which, in addition, volunteers have been given the opportunity to participate together with the team to care for the mother and the newborn and, therefore, The same groups of volunteers, as I repeat again, have been able to express their gratitude for giving them the opportunity to be part of this beautiful experience of giving life to how the lady and the family appreciate the attention that has been given to them in the services.