

POON Grace Yen Yen

It is indeed a privilege for us MBBS students to be able to join forces with Project Mingde (PM) to provide new sectors of services at Dabao Sub-village. I am eternally grateful to Professor Nicolas Yeung for extending us the generous invitation to join him in PM in Spring 2015. Our (pizza) meeting with Professor Yeung and PM Student Association in Fall 2015 made us realize our inadequacy in pioneering a rural health project from scratch, and hence jumpstarted our training in public health knowledge, gaining rural health education field experience, and cumulating health project coordination skills. We are also extremely thankful of Professor Emily Chan and Ms. Carol Wong from CCOUC at CUHK for being our teacher and guide along the way: including us in their field trips, teaching us the intricacies of public health field work, and inspiring us in all ways possible. We soon received support from Professor CS Lau and Dr. Rex Lam from HKU Faculty of Medicine, who were so kind to accommodate our hectic schedule changes and to provide us relentless support on behalf of the faculty. When we finally touch based with PM end of April 2016, this time being a lot more equipped, we have then received so much help (in unthinkable and unforeseen ways!!) from Dr. Ivan Lau, Dr. Ryan Wong and Leo Poon from Project Mingde. There, unfortunately, were some team composition changes in which I lost my original teammates, but when all things seemed bleak, I serendipitously found new comrades in June 2016. Our little team of 5 eventually gathered at the Hong Kong-China cross-border train station on August 9 with health posters in hand, and a lot of enthusiasm (and fear of the unknown) in our hearts.

The five days at Guangxi passed like a whirlwind. As expected, there were many unexpected events eg. Needing to whip up a 45-minute event, with only a few hours to spare, when we were expecting only a 15-minute anti-smoking skit. We hauled +10L of “clean” tap water from the city into Dabao for our teeth-brushing activity, only to find the entire bucket accidentally emptied 5 minutes before the event started. The venue was only 10% occupied five minutes into our event starting time, and we had to commission the boys in the village to mobilize villagers to come attend our health show. The heat and humidity and mosquitoes, as expected, never failed to tire me. The workload we had this time was quadruple that of other rural health outreach experiences we have had (Typically, a team of 5 will be responsible for one health intervention. We had a team of 5 responsible for 4 health interventions, fortunately with the help of students from other faculties too), testing the limits of our expansile working potential. All the while, my caring colleague reminded me not to “chur” (aka. work too hard). I gently rebuked him saying, “Back in my days, it’s called ‘striving for the best’ and isn’t this the attitude we should generally adopt?”

In our debriefing on the last night of the trip, we crowded in Dr. Ivan Lau’s room and spoke our hearts. A fellow teammate from the faculty of social sciences spoke my mind: there really isn’t much we can do to help the villagers to attain a more prosperous and comfortable future. But equipping them with simple and useful health knowledge is something we can totally contribute to. Indeed, we are merely fulfilling our responsibilities as global citizens (and for some of us, future medical professionals) when we allow the villagers to enact their human rights to health. Regardless of how awkward it was to put on a skit about the malignant effects of cigarette smoking when the village head himself was puffing away in the audience, it was my responsibility to tell him the detrimental effects of smoking and benefits of quitting so that he will be able to make an informed choice if he decides to smoke another cigarette. Using only thirty minutes to teach the kids on proper ways of hand washing and teeth brushing will potentially reduce the incidences of transmissible disease incidence in the village as a whole, and malnutrition due to poor feeding caused by severe dental

caries. Sex education will hopefully have an even more profound effect since sex-related conversations are taboos in their culture, and ignorance has already led to multiple tragedies in their communities: ruining health, relationships and futures. Presented with such a gaping hole of health needs right in front of me, how dare I waste any time and not try my best to respond to the calling?

Dr. Rex Lam's advice back in May 2016 proved to be true: our own learning experiences will be maximized as we try to maximize the benefits of the villagers. I am glad to find myself saying that this four-month long story ended on a high note, and I hope that it is an adequate answer to Professor Nicolas Yeung's invitation a year and a half ago. If Project Mingde deems us a valuable partner, I look forward to serving more communities with you in the future!