

Annual Newsletter of International Health Service of Minnesota



News Break 2012



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Everyday People Make Significant Differences

Looking back at the International Health Service (IHS) October and February Honduras projects, I am profoundly impressed by the selfless energy of the volunteers who came from 17 states and four countries. Often beginning as strangers to each other, these volunteers formed teams that effectively delivered eye care and medical and dental services to needy men, women and children in remote locations across Honduras.

As a word-of-mouth organization composed entirely of volunteers, we are a group of hardworking individuals who, through teamwork, make significant differences in people's lives. Graduate students from South Dakota State University and registered pharmacists filled free prescriptions that our clients would have saved months to afford, or gone without. Some patients received critical surgeries that turned their lives around and, in a few cases, saved their lives. Young and old were screened for eye disease in two locations and referrals were made to follow-up eye surgery brigades. Teeth were cleaned and diseased teeth extracted, ending the pain people were experiencing. The patients continue to express profound thanks in ways that fill our hearts and inspire us to return. One village has even re-established a reliable supply of convenient water with IHS help. Honduran volunteers continue to work side-by-side with IHS and their support is critical to our ongoing projects. All this is done by everyday people working together.

Credit goes to the IHS Board of Directors who labor in near anonymity to make these projects happen each year. All year long they carry IHS around in their minds, make critical decisions and personally take action to assure that our fellow volunteers have the support in the field where it counts. I would also like to thank our several hundred private donors. They are the silent members of our teams who together with the Board of Directors and the volunteers can take pride in the successful outreach to the astounding numbers of patients attended to in October and February.

We are grateful for the in-kind donations that IHS receives from Anchor Scientific (receiving and storage), Katun Corporation (storage and shipping space) and Dole (economical shipping), making it possible to deliver a range of IHS services to more than 9000 people this past year. Without their help, we would not be able to support the 114 volunteers who also contributed their time and money to work in 10 locations around Honduras.

As a former Peace Corps volunteer in Honduras 39 years ago, I have noticed a variety of changes in the country. Currently more towns have running water; however, the water may not be clean or flow year-round. In the past five years electricity has crept into the moun-

tain villages for the first time as cell phone towers are built. Suddenly adobe huts contain televisions and everyone has access to someone with a cell phone. Nevertheless adequate sanitation and running water remains a dream for the majority of rural communities. We can only hope that the improved communication will lead to faster and more informed decisions by town and village governments as they set priorities.

For IHS, cell phone communication may be the most significant change as we continue our 30-year tradition of delivering medical services in Honduras. Our internal communications are dramatically easier in parts of the country. But, we still depend upon our shortwave radio operators in the more remote locations that do not have cell towers.

As the technical side of IHS work gets easier, the financial side becomes more challenging. Pharmaceutical, transportation and medical supply costs continue to increase and everything seems to go up at the same time. One big-ticket item is the pharmaceuticals that we give away. They make up more than 25 percent of our budget. Even though we get wholesale rates on medicines and supplies, these are not readily donated by their respective industries. (Alcon corporation and American Medical Systems are exceptions to this.) Those costs continue to rise for us as they do for local American hospitals. Of course, everyone is aware of the rise in fuel prices, which results in higher costs to place a volunteer in the field or transport emergency patients by bush plane to the next level of care.

Reluctantly, we have had to bump up the participation fee for both the October 2012 and February 2013 projects. Private donor support rounds out that part of the budget that cannot be carried by the participation fees alone. We thank our regular donors for their past support. You also make a significant difference! Many of you are former volunteers with a clear image of what happens in the field. You are still part of each and every team doing their incredible work in the mountain villages, jungle river towns and the operating rooms. We encourage your continued generous support as we find our bank balance squeezed more than it has been in years. It is a great way to say "Yes" to the generous donation of time and energy by the IHS volunteers who made this past year a success. I urge everyone to write a check of whatever size so that the tradition of medical, dental and eye care services can continue into the future. Everyday people working together do indeed make a big difference!

Steve Rice
Vice President and Project Director



What made you decide to come?

Jim: Because I wanted to be helpful in a program that seemed to be successful. I was encouraged to come by committed long time volunteers and friends, Jack and Karen DeMorett.

Laurie: I have wanted to do something like this for years, to get some new ideas and images in my head and put my nursing skills to use.

Johanna: I have always had an interest in international health and wanted to come on a mission trip in a Spanish speaking country.

What did you expect?

Jim: I expected to be busy helping team members because I was a general helper. I hoped to use my Spanish. As the week progressed, my wishes were answered.

Laurie: I tried to let go of expectations and be open to whatever may come.

Johanna: I think IHS did a great job of creating realistic expectations of challenging living situations. I was amazed by the level of responsibility that nurses take on in making the clinic run.

What was your impression?

Jim: I was overwhelmed by the problems that the people that we serve encounter. It rained for 6 of the 7 days that we were here and weeks before this. Harvesting and preparing food, communicating with neighbors was extremely difficult and yet they presented themselves with smiling faces. We encountered people with missing eyes, broken hips and other things which the nurses may elaborate on. I was amazed at the comradeship that developed among the team in such a short time. On a personal note, I was surprised that I could go a week without ice cream, take showers with 1/2 gallon of water and eat virtually no meat.

Laurie: The people are beautiful and patient beyond words. Through sustenance farming, they are able to provide all their daily needs. From a distance their day appears to have a peaceful rhythm. Personal note – I love rice and beans!

Johanna: I have never seen the kind of poverty that we encountered in Honduras. It seemed that most of the medical issues that we encountered were related to the lack of the most basic resources (clean drinking water, balanced nutrition, adequate rest and hygiene). Coming from a country of excess, I was amazed at the Hondurans' ability to make do with so much less. I was also amazed by their willingness to stand all day in the rain waiting to be seen and remain pleasant in spite of it all. Personal note – I came to enjoy being awakened each morning by roosters and cows.

What was your experience on the team?

Jim: We joined a dedicated team: Araldo who pulled 100+ teeth each day. Dale who filled countless prescriptions and was available for consultations about all of the med questions and made sure patients were properly instructed. Dan handled all of the labs and told the best stories. Marianne, who was our expert clinician, consultant, teacher, supply officer and leader. Jack kept our patients supplied with glasses and made sure our day-to-day needs were met. Andres, who was our expert translator, provided the Honduran perspective and supervised the Honduran support staff. Teri and Karen for helping the nurses and keeping them "under their wings". Jeannie for assisting in the pharmacy and keeping a running tally of the week's work. Finally, we could not have served the people without the assistance of Juan, Eddie and Roy, our Miskito speakers and Kruta River navigators.
Tengki Poli

Johanna Goepel
RN

Laurie Bengel
RN

John Wagner
General Helper



After being retired for one year and well adjusted to the new life style, I decided to step out of my comfort zone. I signed up for an IHS project after Dr. Irving Thorne provided me some basic background about the organization and his participation in the IHS Honduras projects. His excitement and interest in helping other people inspired me! Off to the website I went and did more research. Nine months later I was off to Honduras flying into San Pedro Sula and eventually meeting up with a group of 15 people in La Ceiba assigned to the October 2011 Project. Four of us were assigned to the Eye Care Team. I wondered what I would be doing?

After an enjoyable banquet where we met the “old timers” and listened to stories of past projects, the Eye Care Team headed to Jutiapa the next day. Jutiapa is a coastal village about 25 miles to the east of La Ceiba at the base of the mountains. Our team consisted of John Pope, the team lead; Dr. Victor Chu, the optometrist; Julia Rodriguez, translator; and me, as the general helper. The local Honduran support and the US Peace Corps worker were extremely helpful volunteering their time as translators, crowd control, patient registration, driver, etc. A very impressive group!

Our mission was to provide eye care to Hondurans that do not have access to affordable services in the local community. The closest

optical shop is over 25 miles away from Jutiapa which is a long way when many people ride horses, bus, walk, ride bicycles or use small motorcycles to transport themselves. The Community Center was designated as the gathering place for eye care. The facility was very spacious for setting up a sign-in table, waiting areas, testing area and tables for us, the opticians, to fit glasses. We stacked the many trays of glasses on the edge of the stage which made it a lot easier on the back and shoulders when searching for eye wear. The optometrist set up the eye exam station in a corner of the stage where light was less intense so as not to impact the testing equipment which was fickle on a good day.

Basically, Dr. Chu did the eye tests and wrote a prescription then the other team members would search through the inventory looking for an exact prescription match. A match was not always available so we had to be creative, for example, popping out a lens to make it work for one bad eye and one good eye or issuing 2 pair of glasses so the patient could see near and far. Quite often an exact prescription match could not be found so close had to be good enough. After getting fitted for glasses and doing a basic near and far eye test many pulled out the cell phone as a final eye test (for some that was the first important test). Along with sewing and reading the bible, cell phone use was very important.

The Community Center, the hub for social activity and festivals in Jutiapa, had limitations when recruited for eye care. There was only one light by the front door and we contended with noisy street construction but we got the job done. Lessons were learned on the fly. The first day we had people waiting as darkness approached so flashlights were held over the eye charts to finish issuing glasses to the last patients. Queue management! We controlled entrance the next days so we could finish all eye work in the daylight.

894 was the official count of people that came through the front door and most received a pair of glasses. Regretfully, some could not be helped. Numerous referrals were collected and will be forwarded to future teams to correct cataracts and other eye problems that were beyond our expertise. The Hondurans’ hugs, handshakes and words of gratitude were from the heart, so the team said good bye to Jutiapa knowing we accomplished our mission.

Since the first time the team met in La Ceiba, I wondered how this would evolve since we never worked together before. Three of us were “newbies”. But with the guidance of our experienced Team Lead, we made a functional, efficient team. And, how good we have it in the U.S.! I never appreciated the numbers on that little slip of paper the optometrist provided. They just magically appeared as glasses that help me see.

I have many fond memories of the team members and the Honduran people we supported. Because of the rewarding experience, I will apply again.

Dale Watson
General Helper

Yocon Team



The Yocon eye team certainly gave out plenty of eyeglasses and sunglasses, but as expected we encountered several patients with medical eye problems. We were able to treat infections on site, and we dispensed glaucoma medication as needed, but patients requiring surgery in remote areas always present a challenge to management.

It's all well and good to identify those patients in need of eye surgery, but actually getting those patients to the surgeons is an entirely separate logistical problem. This can be an insurmountable problem in remote areas with a population unable to afford the expense of travel.

With this in mind, before we left for Yocon I spoke with John Pope about how we might deal with the problem. John informed me that a surgical eye team would be in La Ceiba in April, and we could send our referrals to them for surgical care. After speaking with Linda we decided the best approach would be to collect donations from team members to pay for transportation to and from La Ceiba. She suggested that the money could be left with a trustworthy person in Yocon to coordinate and purchase bus tickets for the patients.

We identified 26 surgical candidates with various conditions, mostly cataracts and pterygia, and the generosity of our team members provided the necessary funds to purchase round trip bus tickets for all 26. Amanda and Chico, Yocon residents,

accepted responsibility for contacting the patients, purchasing their bus tickets, and physically placing them on the bus on the appointed date. Idalia, one of our Honduran team members, volunteered to escort them to La Ceiba and guide them through the process.

Surgeries for the patients were scheduled in April, and they were due to travel to La Ceiba on the 10th. I'm really anxious to learn how our plan worked. I don't expect that all 26 actually made the trip, but even if a few were able to have their surgeries, the Yocon team will have the satisfaction of knowing we were able to change some lives for the better.

Doug Phillips
Optometrist

A Celebration in Yocon

I have been a participant with IHS for 25 years; approximately 15+ years of that time being spent in the mountainous area of Olancho.

Approximately 13 years ago, a young mother came to us with her 3 month old son, Yelvin. Immediately I noticed his large head size and discussed this with our doctor. It was confirmed that it was due to his having been born with spina bifida. Not being able to assist this child properly, we educated the mom and gave her a referral to Hospital Esquila in Tegucigalpa. We were not hopeful for this child. Imagine our surprise, when year after year

this mom continued to make the long trip by foot, from Rio Abajo to Yocon for her son to be seen. We monitored his progress, provided skin/wound care and sent her home with supplies (diapers, skin products, soap, foam mattresses, sheepskin, etc.).

Two years ago, the mom requested a wheelchair for her son. Unfortunately the two we had taken to the village were already given to others. However, we did have a couple of desk chairs with cushioned fabric and arms that were on wheels. I offered this to the young boy and he was happy. I then located a truck owner in the village, provided him with gas money, and had him drive this family home. Before they left I promised them the next time I returned there would be a wheelchair for him.

In February of 2012, with a donated wheelchair from my friend and physical therapist, Joyce Jensen, I returned to Yocon. Armed with a photo of the young boy, we located a neighbor of his at the clinic and sent a message to his mother for them to come to the clinic. The next day, she rode into Yocon on a horse with her three children. We did our usual exam and treatment and further education with mom & Yelvin. Then we produced the wheelchair; imagine his excitement (and Mom's!). We placed him in the chair and saw the biggest smile form on his face. Once again we were able to find someone to drive this family home.

This truly was a highlight of my years in the area and indeed a reason to celebrate!

Linda Erdman
RN & Team Leader

Puerto Lempira Team



Glenwood man's snapshots give glimpses of trip's triumphs

It's a tradition of compassion that now spans 30 years—that's how long [Minnesota-based] International Health Service (IHS) has been sending teams of volunteers into the Central American country of Honduras to provide much-needed medical and dental care to the people there. For eight of those years, Glenwood resident Grant Hanson has donated his time and talents to that tradition.

I had a chance to sit down with Grant last week as he shared some of the pictures and stories from his recent trip. When I asked him if he could describe a typical day, he laughed and said, "There is no such thing as a typical day." As we dove into the stories behind the pictures he was showing me, I began to understand what he meant.

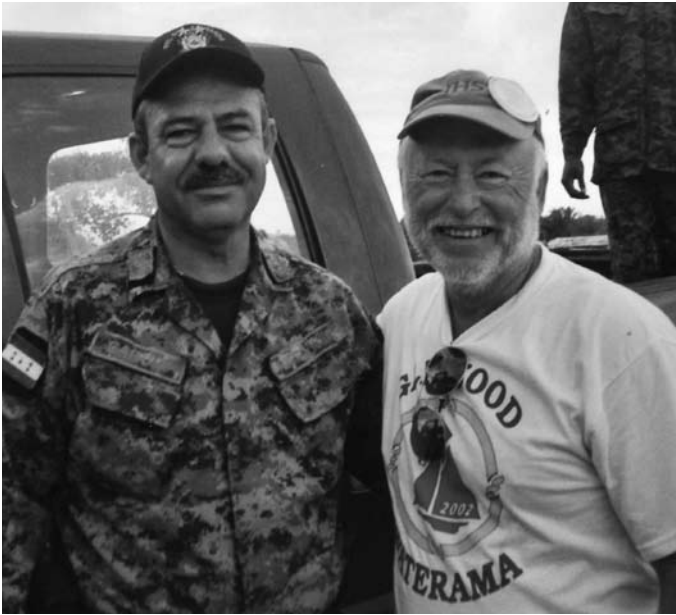
Grant is a self-described "fix-it" guy. He understands how things work, and has an intuitive creativity that turns any problem into a soon-surmounted challenge. Just to illustrate, here's a quick story Grant told me from a previous trip to Honduras.

"Before I could even speak the word 'laparoscopic' I had fixed a piece of laparoscopic equipment," he said. He laughed as he

described taking the surgical equipment apart out in the parking lot. Lacking anything else on hand, Grant destroyed an Eagle Bank pen and used some of its internal parts to insulate the laparoscopic tool – a tool without which the medical staff couldn't proceed. That's the kind of work Grant does when he signs on as part of an IHS team. "My part down there is that I basically help keep things functioning," he explained.

Over the years he's fixed roofs with duct-tape, cleaned carburetors with hypodermic needles, and revived broken-down buggies for children in need. But what really struck Grant from this year's trip was the importance of teamwork; though they were divided by hundreds of miles of difficult terrain, it was the separate teams' dedication to a common goal that literally saved lives.

The IHS teams, 10 this February, were sent to areas all across Honduras. The area where Grant worked this year was the La Mosquitia region, located in the country's northeastern department of Gracias a Dios. The IHS base of operations was located in Puerto Lempira, the department's capital. Sweeping pine, savannas, swamps, and vast tracts of rainforest make travel difficult in this region. In fact, the area is inaccessible by land; travel is only possible by small plane, sometimes by boat.



Grant held out a photo for me to see. He took a moment to gather his thoughts. “This is probably my favorite picture from the whole trip,” he said. At first glance, the photo doesn’t jump out. There is no “wow” factor. Parts of the action are cut off, parts aren’t in focus. But as Grant’s story unfolded, I realized it wasn’t the picture itself that held the power—it was what happened in the hours before the shutter clicked. Here’s the story behind the snapshot.

Late one afternoon a remote team working in Rus Rus, another IHS site southwest of Puerto Lempira, came across a young mother. Her baby was in serious respiratory distress. “It was one of those things where they were very concerned,” said Grant. If the child had been here in the U.S., a quick trip to the ER would have been warranted. But the reality of the region meant the child would have to wait—to hang on until morning when a trip to the hospital in Puerto Lempira might be possible. “The planes can’t fly at night. There are no lights on runways,” Grant explained.

As early as they could the next day, the Rus Rus team loaded the baby, the mother, and two nurses into a small plane. Thirty-five minutes later the plane landed at the airport in Puerto Lempira. “We met them in a pickup truck that one of the churches down there let us use,” said Grant. “We hauled the mom, the two nurses, the baby, as fast as we could to the hospital. From that point, once they were in the hospital, it was all that we could do, then.”

“As I look back at the teamwork of the teams out in the sticks—how they arranged things so that they could come with that young mom and her baby...” Grant paused, at a loss for words. He looked down at the photo. “What you see in that picture is nurses, one carrying the baby, one carrying the IV.” He pointed to the man at the left. “This is the airplane pilot carrying oxygen.” The barrel you

see in the back of the truck, he said, is the aviation fuel. If you look closely on the left, you can catch a glimpse of the baby’s mother hurrying out of the truck bed. “I call this teamwork,” said Grant. “There’s no one person that could go down there and do that. We’re a group of teams that work together.”

Grant pulled another photo from the stack. “This little girl had a severely abscessed baby tooth,” he said. “One of the dentists in one of the teams pulled the tooth to find out that the little girl was a bleeder—it wouldn’t stop and it wouldn’t stop. We brought her into this central area [by plane] where she could be monitored more closely. This is the point where she’s just going back out.” Grant said seeing the little girl’s father holding her was heartwarming. It’s not the usual situation he’s seen. I asked Grant if he would recommend that others experience the IHS trip to Honduras. He tried to put a wealth of emotions into words. “Most people have a heart. It touches people,” he said. “The things we take for granted here... it’s so, so different in a third world country. You just look at things different when you’ve been in a setting like that.” He paused. “It’s changed my life.”

Deb Mercier
Staff Writer

POPE COUNTY TRIBUNE March 12, 2012 Article reprinted by permission.

Lisangnipura Team

I first came to Honduras in February of 2011 with my mother who has been a part of International Health Service for years. My mom would return from the trip every year with a complete change in personality that I couldn't grasp. I decided it was time to experience something that had that much impact on someone's life, and now I'm addicted. Little things like turning on the faucet, throwing your clothes in the washing machine, microwaving a burrito or even setting a coffee maker in the morning are completely different after experiencing what we have. The opportunity that this organization has given me to help others who are less fortunate has changed my life as well now.

I was a general helper for the Lisangnipura team along with Chris Knoff and Chris Svihla. My outlook on this excursion, and the stories I have to tell are primarily related to my part of the trip but I would first like to give out kudos to our medical team. They were able to see almost 1500 patients in the time we were there from Lisangnipura and about four other surrounding villages. They were quite an amazing and dedicated group of individuals.

As for our team of general helpers, we found time in between cooking meals, sanitizing water, and helping our medical team to fix five water wells that were non-functioning and built three new ones. We also created two cisterns for the general population that would gather rain water from the rooftops for a cleaner supply of drinking water. I was also able to come up with an idea to turn the leftover "Rubbermaid tubs" into kitchen cisterns to give to a few of the helpers we had in Lisangnipura.

Another perk to this year's trip was having a large number of percussion instruments donated from a music store close to my home in St. Cloud, MN, which I sent down to have divided among a few of the villages.



I know that in Lisangnipura we were able to give a large Conga drum to the Minister, and passed out several other items like shakers for kids and smaller drums to the others that helped out throughout our time there. It was a blessing to see the smiles and hear the joy that those small items could bring to these people.

I can't say enough about our team as a whole. Barb, my mom was an amazing team leader! She knew how to run everything to a T and kept the entire team on our toes. Kelley was always able to find a way through our troubles with communication, and never made a peep on erecting any of the four antennas we had to try through the week. Dr. Joe was willing to help anyone that asked and treated his patients with the most kindness and love. I have never seen a man with such a respect for the culture and care of the people that he saw. Ricardito was wonderful to have as a last minute team member and translated through many tough conversations. Keely and Emily, our pharmacy team kept pumping me full of drugs to either "make me go" or "not make me go", hats off to their quick thinking. Our nurses Lori and Elizabeth worked better as a team than I have seen in any group. They served



the people with the most knowledge and respect anyone could have asked for. Hilario Nixon (my brother from another mother) was a great addition to our team. He could get anything that you needed. Firewood, building materials, men to clear our runway, a generator for our end-of-the-trip dance party; anything was a possibility through him. Dan Walker, our team story teller and medic-extraordinaire was a pleasure to have with us. He brought a lot of knowledge and spirit to the team. Our dentist, Jack, must have pulled a million teeth. He had more enthusiasm for what he was doing than most people I have met in his profession.

Of course I cannot say enough good things about Chris Knoff, our Chief Engineer. He has the spirit of a 15 year old and the knowledge of a 70 year old. I have learned a lot from him, and this organization has gained just as much. It's difficult to construct as much as he could in somewhere as remote as Lisangnipura but he made it look like a piece of cake. Chris Svihla, another new addition to our team is a good friend of mine and I am glad and very proud that he was able to contribute as much as he did. It would not have been the same without him.

I know it is not easy to save funds for this trip and justify it on a daily basis but the experiences that you gain and the help that is given to so many people who need it are justification enough in the end. I am very proud of and excited for this organization. We have provided so much for the people in these villages in Honduras, and I believe that the looks of gratitude we have all received from them are enough to keep me coming back for years to come. So as for me, this will never get old, only I will.

Scott Hamilton
General Helper

Rus Rus Team



This year's medical trip to Rus Rus was a fantastic one. We accomplished very significant medical work plus the people on our team were excellent and deserve the credit for a job well done. For most of us, the trip to Rus Rus started with an international flight to Honduras. That was followed by a 3-hour bus ride to La Ceiba and then an IHS arranged flight to PLP (Puerto Lempira). For the last leg of the trip, Wes, our bush pilot made several trips from PLP to Rus Rus to get our team members and supplies to our team site. There are those in the world who would complain about the effort it takes to get to that area of the country. Perhaps that is why so few volunteer groups go there and all the more reason why it is so important that IHS does such trips.

This year was busier than most with a high percentage of serious cases with a diverse list of ailments plus we also observed a larger percentage of patients who only spoke Miskito. This kept our interpreters VERY busy having to do double translation on many occasions.

As we expected, we saw mostly moms with several children each. Most of our patients walked many hours, some all day, from very remote villages on both the Honduras and Nicaraguan side of the Coco River. Deanie, our team physician and Michelle our nurse practitioner saw nearly every patient who came to the clinic. It was amazing to see them lead a whole family of 5 or more people to their exam rooms, sit them on a wooden bench, and proceed to see each one. They gave each person great care and attention and yet they were able to see so many each day. Marisa and Carrie, our two RN's, were priceless in their care as well. They used their years of experience as emergency room nurses to skillfully handle each patient.

The pharmacy dispensed a lot of meds. Every patient who came in from the clinic received vitamins and parasite meds. Due to the serious ailments of many patients, they received many other needed items as well. Larry is an experienced pharmacist from Victoria, Canada and his wife Jean was a tremendous help, too. Melissa was our pharmacy student. She spoke some Spanish so she explained most of the instructions to each patient on how to take each of the meds they were given. She did so with patience and understanding and did not let anyone go until they understood how to take their meds.

Many times I went into the dental clinic area to see how things were going and each time our team dentist, Araldo, was busy seeing several patients at a time. He would line several up and go through them to give lidocaine to numb their tooth area. When he finished several people with the injections, he would start over with the first and start extracting teeth. By the end of the trip he had pulled over 600 teeth in the 8 days we worked.

Brian was our communications guy and he brought some interesting radio gear. He had several radio capabilities including voice contacts via worldwide short wave plus a local area 2-meter band radio. He also had a laptop and gear to do radio e-mailing. Brian also worked on faulty wall switches and outlets plus some light fixtures.

Another person helping our team in the clinic was Carlos. He was a Spanish teacher back in the U.S. and does super with both the kids and adults. Due to the serious nature of many of our cases, Carlos was an answer to our prayers as his interpreting skills added to those of Jen, our IHS interpreter. It took both of them to keep up with the patients in the clinic. Besides interpreting, Jen would jump in and do other odds and ends tasks. She is a go getter and really



helped to balance out the team so all went smoothly. We gave her the title of Honorary Nurse as she gave very compassionate care to everyone.

One of several tasks I did, besides being team leader, was to check many of the people who came in need of reading glasses. I observed several cases of pterygiums and some possible cataracts. Our team did not have the capability to handle such cases, nor prescription glasses, so we referred them to PLP and hoped they got the care they needed.

Our team report would not be complete without mentioning the help we had from Wes' wife, Denise. She did a ton of work for us in such things as preparing hot meals at the end of each day. She also did most of our laundry and she even made us popcorn a couple times for our evening movies (DVDs shown on an old TV). She says it is all a labor of love.

On the last morning in Rus Rus we all said our goodbyes and gave hugs to many new friends. It took four flights with the small plane to get us all back to PLP.



John Kirckof
Recruiting Director
Rus Rus Team Leader

BelAire Team

In February I went to Honduras with International Health Service for the first time. My wife has been asking me to go with her each year, and every year I tell her 'maybe next year'. When she returned from her 3rd trip last year, I told her 'next year for sure'. The 2012 applications were already in print so she wasted no time in signing us both up. As the date got closer I was actually looking forward to the break from winter and from work.

Once we landed in Honduras and were on our way by bus to La Ceiba, the adventure began. Right away I witnessed the poor road conditions and the crazy driving that I had heard about. People pass on corners and cut back in just in time to avoid a head-on crash. Traffic in Honduras is a bit of 'organized chaos' as they seem to have some mutual understanding amidst what seemed to be many close calls.

Once in BelAire (our clinic site) I was immersed in the Honduran culture. Our team of 15 set up clinic there in a local small clinic building. We worked some days in the clinic seeing around 200 people each day. Other days we would load up in pick-up trucks and travel into remote villages up in the Cloud Forest Mountains. These small villages were very remote with no electricity or plumbing and the homes were built from sticks and mud. The people from these villages greeted us very warmly, and we were graciously invited into their modest homes. I was amazed by their lack of material property; most homes had a wood-burning cook stove made from clay, and small handmade wooden stools. The single bedroom usually had one bed that everyone shared. Even with their poverty, they seemed to be very happy people with strong family bonds.

I had received a 'crash course' in Spanish from one of our interpreters on the way to BelAire. It was just enough to greet our patients and help them try on reading glasses. I wished I had learned more Spanish so that I could interact more. My goal for next year is to be conversational in Spanish so I can be even more immersed in the culture. Before going on this trip I thought it would have been equally nice to just go on a vacation in Honduras and skip the work. I soon found that I would have missed out on far too much if I visited the country like a tourist. The total immersion in their culture, eating what they eat, visiting them in their homes and spending time with them in the clinic cannot be experienced as a tourist.

During my 2 weeks in BelAire I had a variety of jobs: The first four days were clinic days, and with an abundance of medical people for



the clinic, I and another team member worked on the playground that the clinic had for children in the neighborhood. We put up a new slide, added monkey bars, painted all the equipment and put in a teeter-totter. On one village trip I tried out my hand as a Dental Assistant and helped our dentist with some extractions. Other days I kept busy fitting reading glasses, packaging medication for the pharmacy and other odd jobs around the clinic. Every day I had many opportunities to interact and photograph the local people. The children especially enjoyed having their pictures taken so that they can look at them in the camera.

I enjoyed working with our team as well. We were all from different backgrounds, yet for 2 weeks we were each other's family. Sharing our experiences and comforting each other after difficult cases. We each saw patients so gravely ill that they will most likely not survive. It's always hard to see children die from things that are so easily treated here in the U.S. It was time well spent and it makes me realize that we are far too materialistic and take too much for granted. I'm planning to return again next year.

Dave Donnelly
Paramedic

La Ceiba Team



Our La Ceiba surgery mission during the week of February 13-17 was a great success. We performed 28 cases, most of which were prostate surgeries. Our team, consisting of Steve Moore, the surgeon, Anne Dinsmore, the team leader, Lynn Olson, OR nurse, Betsy Hundertmark, CRNA and Chelsea Moore worked very well together. We also performed a number of major cases including a radical prostatectomy, a repair of a large vesico-vaginal fistula and a number of open stone cases. The procedures went very well with no complications.

Many thanks are owed to Alberto Busmail, the administrator at D'Antoni hospital for graciously hosting our team. In addition, the mission would not have been possible without the fine preparatory work done in advance by Dr. Gabriel Montoya, who triaged the patients many weeks in advance of our visit. The OR nurses, Ricky and Mateo were outstanding in assisting us with setting up cases. We also had fine accommodations at the Gran Hotel Paris.

Many thanks to Steve Rice for coordinating meals and transportation to and from the hospital. In all, the mission was a great success. The patients were very grateful and cooperative.

We hope to be of service to IHS on future missions.

Steve Moore
Surgeon

Patuca River Team



As South Dakota State pharmacy students, we are privileged to participate in an International Health Service of MN project during our final year of education. My classmates and I understood the terrific opportunity we were offered to visit and administer to the people of Honduras. I personally looked at the prospect of visiting Honduras as a chance to reflect on my blessings and to connect with a special group of people. Once I heard that I was selected to assist on the Patuca River Medical and Dental Team, I knew I would have that chance.

Upon arriving in La Ceiba, I met with the teammates I would be enjoying the next eleven days including: Cheryl Schraeder, team leader; Doug Pflaum, MD; Teri Houle, RN; Char Zimmerman, RN; Mary Bierman, RPh; Kelly Koehnen, DDS; Susan Prentice, DDS; and Mike Stapp, radio specialist. I knew that the Patuca Team was being assembled especially to care for a population of Honduras that had not been visited in several years. It was also wonderful to see that I was going into this unknown territory with a team that had a lot of experience on past IHS projects.

Early one morning, we boarded a small plane at La Ceiba International Airport for the tiny village of Patuca River. There we would meet several of our team members who flew out earlier to Puerto Lempira, including our essential interpreter, Andreas Martin. Upon landing, I was immediately submerged into a new world where the gravel runway met a small, broken hut that served as an airport terminal. After a short trip into town, we unloaded our gear at the Catholic Compound, caught up with the rest of the team, and





made ourselves comfortable as some of the gear was going to be delayed until the afternoon. Our initial plan was to move up the river to a small village named Krausurpi; but due to the uncertainty of the remainder of our materials arriving, we opted for patience. Our dental team made the most of the delay: they began pulling teeth for the children of Patuca River and continued for the rest of the afternoon.

The next day, armed with our materials, we boarded two dugout canoes and made our way up the Patuca River to the Village of Krausurpi. The river was amazing. The dense vegetation, tiny villages, towering hills, and endless wildlife immediately grabbed my attention. We arrived in Krausurpi, greeted by smiling faces and countless children eager to help carry our items.

For the next several days, we worked in our clinic. Mary and I focused our pharmacy care on providing vitamins, albendazole, antibiotics, and other medications for eligible populations. Mary emphasized the correlation of eliminating or decreasing parasitic titers with the direct improvement in growth and brain function. The rest of the team also took on very specific roles; ultimately, we cared for over 700 Miskito people in and around the Village of Krausurpi.

Sadly, our team ran into another unexpected event as a little girl's bleeding disorder was not relayed to our dental team in time to change treatment of her teeth extraction. Her inability to clot prompted half of the team to move back to Patuca River early so Kelly could take the girl to Puerto Lempira. I left with the early group and arriving in Patuca River then allowed us to take some time to get to know our hosts. Dr. Karen, a key player in making Patuca River the 2011 Malaria Champion of the Americas, was one of those people. She played an instrumental role in lowering rates of malaria in Patuca River and the surrounding communities through mosquito nets and education. We were able to enjoy the town, attend church with the villagers, and bathe in a local spring.

When the rest of our team arrived, we assembled our clinic and continued to see patients. Our clinic was located within the Catholic Compound. On our final day of clinic, Teri, Sue, Char, and I had the opportunity to assist Dr. Karen in testing local school children for malaria and administering albendazole. I was amazed at how well-mannered the children were at school. A few were fearful of having their fingers pricked for the malaria blood test, but most were extremely brave.

As our project wrapped up, we prepared to catch our flight back to La Ceiba. While in Patuca River, we administered to over 600 patients, including the boys and girls at the school. I was excited to get back to La Ceiba to see my classmates, but I had a hard time leaving the people of La Mosquitia, knowing that for a short time, I had a window into the lives of a very special group. I am also very thankful to have spent this time with a dedicated and experienced group of IHS members. Their effort and compassion can set precedence for other mission groups.

John Weitgenant
Pharmacy Student

La Esperanza Team



As a volunteer in the 65+ age category, I had already worked in, lived in and/or visited 43 countries and nine territories prior to Honduras. I had worked among the poor but also spent a lot of time at five star hotels. I chose to volunteer with IHS for pretty simple reasons. One reason was simply to prove to myself that I still could, in fact, be useful and even happy, without the luxuries that are part of my daily life. I also wanted to see what the people living without all the amenities we take for granted, were like. I found in many ways they were like my friends at home: They love their families and work hard to provide a good life for themselves and hope for an even better life for their children. The people I saw were kind, happy, generous, appreciative, honest and hard working.

Another goal was to finally participate in a third world volunteer experience. I have always felt that I missed out on something, having never been in the Peace Corps as so many of my generation were. At this point in my life, I have time for Peace Corps, but now, the combination of grandchildren that I would hate to not see for two years and minor medical issues have taken away the appeal of a long term out-of-the-country commitment. So the thought of helping out for two weeks in a third world country seemed like an alternative that would fit into my life at this time. After all – if not now, when?



What did I learn? That a team of strangers, both young and old, some with medical backgrounds and some without, can quickly bond and accomplish a lot in a very short time. We started in La Esperanza but actually worked in three separate villages. Everyone jumped right in with loading and unloading the buses, setting-up and tearing-down our clinics at all three locations and continued to help with whatever needed to be done in the course of the day. “That’s not my job,” was not part of anyone’s vocabulary. Most often heard was “Do you need anything? How can I help?”

I was very impressed by the unselfishness, generosity, kindness and energy of our team, especially the younger members who had extra energy to play soccer or baseball with the young children at the end of our working day. Everyone was generous – the team members who volunteered their time, the local Red Cross workers who were always there working with us, the teachers

and administrators whose classrooms we took over to set up our clinics, and the local people who went out of their way to show their appreciation. They showered us with thank-you presentations featuring songs, dances and skits, special dinners and special experiences, like a visit to a coffee bean farm, an early morning opportunity to milk cows at the neighboring farm, and a chance to ride a neighbor’s horse or to ride in an oxcart, smiling faces and hugs from people who could read with their new glasses. It was all good.

Sheila Bakke
General Helper



Perspective of the new guy on the trip:

Because of my ham radio interests, and being friends with one of the stateside supports of the missions to Honduras, I was a little bit familiar with the use of ham radio in support of the missions to that country. When I heard that there was a need for radio operators for the 2012 mission, I wanted to participate. Another piece was that, while I have no particularly bad health issues that would prevent me from going now, who knows when that might change. The push over the edge to volunteer came from a sermon our minister gave on answering those nudges that you get to do something because God doesn't always appear in the burning bush. Sometimes He is more subtle. In any event, I ended up on a plane to Honduras in February.

Larry and I were the only two men with this large group of very capable women. Most of them had medical or dental training and would take care of the actual patient contact. Larry and I went along to make sure there was communications and to do whatever else we could to facilitate things. To me, the amazing thing was how well this group, thrown together in a foreign country, worked even though many of us didn't know any of the others prior to the trip. But we quickly developed a working team that functioned together very well.

I was somewhat prepared for the level of poverty that we would encounter. The people we encountered were great, and obviously in need of not only the medical/dental service we offered, but so much more. My heart went out to them, especially the children who may never know the real potential they have. I left with an appreciation for the work and sacrifice of so many to make IHS work. I don't know if time and circumstances will allow me to go again, but it is an experience I will always remember.

Jim Russell
Radio Engineer

Upcoming IHS Projects

October Project: October 21 – 29, 2012

We will be fielding two teams for the October Project – an eye care team and a medical/dental team.

–Questions or more information –
contact@ihsmn.org

Planning Trip – Late October

Around the same time as the October Project, a small group of people head to Honduras to lay the groundwork for the February Project. They determine team sites, arrange logistics, housing and meals. If you would be interested in getting involved with this aspect of the project **contact the IHS President at: president@ihsmn.org**

February Project: February 15 – 28, 2013

Over 100 participants from throughout the USA and around the world participate in the February Project. Everyone gathers in La Ceiba and then, with their teams, head out to remote locations around Honduras for approximately two weeks.

The Project usually consists of six medical/dental teams, two surgery teams, two eye care teams, and two administrative teams.

Many seasoned IHS'ers arrive early in La Ceiba to help with the many assorted tasks required to get everything set up. If you can help please let the Project Director know before the trip:
projectdirector@ihsmn.org.

Before or after the Project many participants schedule side trips to the Bay Islands, Copan, or enjoy other areas in Honduras. If you plan to visit a different country before the IHS Project be sure to check health requirements for entering Honduras from that country before setting up your trip!

HELPING A FRIEND FROM HONDURAS



Drew Mathews, IHS President and CRNA at Abbott Northwestern Hospital in Minneapolis, MN with Carmen Elvir

For the past twenty years Carmen Elvir has served as a liaison for the IHS surgery team in PLP. It came to the attention of IHS that she had a debilitating heart problem that could not be dealt with in Honduras. She had been on medication to control a heart rhythm problem, but the medication was no longer working and Elvir has had to have her heart shocked back to its regular rhythm twice. This problem has had a huge impact on her life and last year she had to stop working.

IHS President, and nurse anesthetist Drew Mathews stepped in, and recruited help from Abbott Northwestern Hospital's Minneapolis Heart Institute and IHS people who knew Elvir, to get donations for the help she needed.

Mathews was able to convince Abbott Northwestern Hospital, Northwestern Anesthesia and Dr. Bill Katsiyannis, a cardiac electrophysiologist at Minneapolis Heart Institute to treat Elvir at no cost.

After considerable correspondence with the US Consulate in Tegucigalpa a visa was secured for Elvir. Once this

clearance was secured flight arrangements were made and finalized using Mathews' own frequent flyer miles on Delta to buy her round trip ticket.

Not knowing when the specialized treatment would be scheduled, and how much time would be necessary for recuperation and possible side effects, a period of 6 weeks stay in Minnesota was predicted for her round trip ticket. This meant Elvir would need to have a place to stay before and after her surgery. In addition Elvir did not speak English and would need translation help. This was remedied when Rick "Ricardito" Reiter, a translator with IHS, volunteered to fly to Atlanta and escort Elvir to Minneapolis, and he and his wife Gwen allowed her to stay at their home until her return to Honduras.

Although her visit to Minnesota was short, she was very grateful to all for the help and care she received. IHS looks forward to working with Elvir again in PLP next year.

I•H•S FUND RAISER BRUNCH

Sunday, September 30, 2012

Green Haven Golf and Banquet Center, Anoka, Minnesota

Registration and Social: 11:00 A.M. All -You-Can-Eat Brunch: 11:45

**Many breakfast and dinner items
to choose from.**

Omelets, waffles, muffins, breads, and sweet rolls, bacon, various sausages, biscuits and gravy, scrambled eggs, fruit, juice, coffee, tea, milk, variety of pork, beef and chicken dinner selections, variety of potato and vegetable dishes, salads, desserts, and more!
Green Haven cash bar available.

All -You-Can-Eat Brunch
Silent Auction
Door Prize Drawings*
Live Auction

Live Music: "Rum River String Quartet"

* Door Prize Raffle Tickets available at the door.
\$1.00 each or eleven for \$10.00

Please consider donating an item for the door prize drawings and auctions. Your donations of quality items in the past have been an essential part of the fund raiser. In addition, this year dessert items such as pies, cookies and cakes are most welcome.

If you cannot join us for the event, please consider making a donation to IHS so that our October and February projects can continue serving the people of Honduras.

Thank you!

Reservation Form and payment are due by September 16th.



**International Health Service of MN
Fundraising Brunch, September 30, 2012**

Response:

___ Yes! I/We will attend the celebration!

Here's our check.

___ Sorry, I/We cannot attend but wish to purchase tickets
in support of the continued IHS service

___ Please accept my donation of \$ _____

In memory of... _____

In honor of... _____

Brunch Tickets

___ \$25/ person if purchased by Sept. 16,2012

___ \$30/ person if purchased at the door

___ Children 13 and under (\$12.50/\$15.00)

Names of those attending for nametags:

Please make checks payable to IHS!

Mail to: Deb Fischer,

3932 Florida Ave. No., Crystal, MN 55427

Donate your silent and live auction items:

Value: _____

Send items to:

Rick Reiter

rickreiter@msn.com

2200 2nd Ave. No. #101 Anoka, MN 55303

763-755-8267

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Send changes to: secretary@ihsmn.org

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To be put on the mailing list or submit
stories and photographs

Contact: newsbreak@ihsmn.org

**IHS Web Site: www.ihsmn.org
contact@ihsmn.org**

This Issue of News Break was Edited by:
Marcia Ernst and Steve Bakke
Designed & Produced by: Tom Roper



SEEKING:

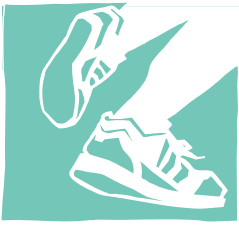
- Translators
- Pharmacists
- Dentists
- Physicians
- CRNAS
- RNs and OR Nurses
- Surgeons
- Dental Assistants
- Optometrists
- "Fixers"

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for your Group?



I·H·S

would love the
opportunity
to speak to your
group, club, church,
or organization about
who we are
and what we do!
For more information
contact us at:
contact@ihsmn.org



FIRST ANNUAL 5K WALK FOR HONDURAS



IHS held its first ever 5K Walk for Project Honduras on October 1, 2011 at Round Lake Park in Eden Prairie. The weather cooperated, and it was a beautiful fall day for the event. After the walk we grilled brats and talked to people about projects in Honduras.

We Need Your Help!

Please
consider holding a fundraising
event in your area to raise money
for IHS. Be creative and consider
holding a car wash, bake sale,
spaghetti dinner, pizza party, garage
sale, etc. Every dollar raised helps
support IHS projects!



Help Us Grow

Consider IHS in your planned giving. You can help through a Monthly Pledge, Lump Sum Gift, Gift of Stocks, Estate Giving or a Donation in Memory of a Loved One.

I•H•S RAFFLE FUND RAISER



Thank you.

This past winter IHS held its second raffle fund raiser. Once again, it was a great success. Thanks to everyone who sold tickets and/or donated to our cause.

The raffle raised \$11,000. To give you a little perspective, it generally costs IHS around \$30,000 each year just to purchase enough medications and vitamins to supply our teams.

Prize Winners:

- First Place - Fritz Arnason
 - Second Place - Jack Reed
 - Third Place - Kelly Koehnen
- Most tickets sold:
Elizabeth Lebakken





IN MEMORIAM

Willard (Bill) Raymond – died on Sept. 8, 2011. Bill was a co-founder of IHS. He was great guy, a hard worker, could fix anything, and liked by all.

Kelly Jo Mallicoat – IHS participant, died January 2012.

Carl Plateau – died on June 3, 2012. Carl helped fund some of IHS's first mission trips.

OCTOBER 2011 & FEBRUARY 2012 TEAM STATISTICS
 Total Patients Served – 10,067

 Dental Teams	Patients – 1,743	Extractions – 2,144	Other Procedures – 736
 Medical Teams	Adults – 4,042 Children – 3,136	Surgeries – 79 Pharmacy RX's – 17,307	Referrals – 79
 Surgery Teams	Surgeries – 71	Evaluations – 87	
 Eye Care Teams	Patients – 1,075	Prescription / Reading / Sunglasses – 1,418	

Dates to Remember

2012

- August 15** Applications and deposit due for October Project
- September 15** Balance of October Project fees due
- October 1** Applications and deposit due for February Project
- October Project** **October 21 – October 29**
- October** Planning Team heads to Honduras
- November** Team selection for February Project
Team information will be sent out
- December 21** Shipping deadline for February Project

2013

- January 1** Balance of February Project fees due
- January** Load container in Twin Cities
- February Project** **February 15– February 28**
- May 1** IHS News Break team articles and photos due
email to: newsbreak@ihsmn.org
or mail to IHS,
PO Box 16436, St. Paul, MN 55116-0436



Sign Up!

...for an I•H•S
 Project and make
 lifelong friends
 and create new
 memories that you
 will think about for
 years to come!

2012 I•H•S Teams

OCTOBER 2011 KRUTA RIVER TEAM

Left to right seated:

Teri Houle, Dan Walker, Jeanne James,
Jack DeMorett, Dale James

Left to right standing:

Andres Martin, Laurie Benge, Roy Morfy,
Marianne Serkland, Araldo Lopez,
Eddi Morfy, Karen DeMorett, Johanna
Goepel, Jim Wagner



OCTOBER 2011 JUTIAPA EYE TEAM

Left to right are: Roxne, Dale Watson,
Julia Rodriguez, John Pope, Victor Chu, Peace Corps Person,
and Candito.



BELAIRE MEDICAL/DENTAL TEAM

Back Row: Fred Roberson, Marisa Erlandson,
Dave Donnelly, Dave Kubes, Ron Grossman, Jim Daniel, Ben,
Mary Helen Hoffman, Josh Holstein.

Front Row: Evelyn Castellar, Patti Grossman, Cathy Frucci, Sonja,
Renee Donnelly, Jenine Graham, Sally Kubes, Bob Johnson.

Not Pictured: Pat Vencelli



LA CEIBA SURGERY TEAM

Left to right: Chelsea Moore, Anne Dinsmore, Steve Moore,
Becky Hundertmark, Lynn Cook

2012 I•H•S Teams



LA ESPERANZA MEDICAL/DENTAL TEAM

Back Row: Jim Russell, Marietta Rice, Jennifer Edwards, Nancy Zupan, Antoinette Lopez, Jessi Lambertz, Gina Knight, Lesly Diaz, Larry Foster.

Middle Row : Jennie Franck, Barbara Joe, Sheila Bakke, Lisa Duchene.

Front Row: Kellie Iramina, Megan Malone, Laura Nielsen.



LA ESPERANZA EYE TEAM

Left to right: Matt Gifford, Cristy Garrido, Terry Barrett, John Pope



LISANGNIPURA MEDICAL/DENTAL TEAM

Front Row: Elizabeth Soucy Lebakken, Jack Reed, Emily Smith, Dan Walker, Keeley Matson, Rick Reiter, Joe Tombers, Lori Jackson

Back Row: Barb Hamilton, Kelley Shelly, Ronan Morales Lopez, Hilario Nixon, Chris Svihla, Chris Knoff, Scott Hamilton

RUS RUS MEDICAL/DENTAL TEAM

Front Row: Carlos Paz, Christine Golnick, Brian Coulter, Carrie Lynch, Melissa Olson

Middle Row: Jean Thorne, Jen Leavitt, Marisa Messer, Araldo Lopez, Michelle Hall, Elia Molina, Geraldina Coleman, Elvin Valle

Back Row: Larry Thorne, Alfredo Perez, Denise Wiles, Wes Wiles, John Kirckof



2012 I•H•S Teams

TOCOA SURGERY TEAM

Left to right back row: Trudy Staubit, Henry Novotny, Bill Roussel, Alita Taylor, Dan Jaffurs, Denis Roussel, Kris Budke, Lillian Budke, Jo-Ann Prater
 Kneeling: Jim Prater & Meredith Johnson



YOCON MEDICAL/DENTAL TEAM

Left to right: Lela Damico, Beth Brightman, Jodi Gades, Josie Thomber, Gerald Phillips, Idalia's mother-in-law, Stephen Thomber, Kyle Prokosch, Corrie Thrumber, Jose Rico, Robert Slider, Jim Welch, Linda Erdman, Phillip Mitchell, Jodi Milton
 Not Pictured: Jeannine Leach, Idalia Maldonado, Rosalie Eckhoff

YOCON EYE TEAM

Rob Damico, Leila Damico, local helper, Bob Slider, Jose Rico
 Not pictured: Doug Phillips

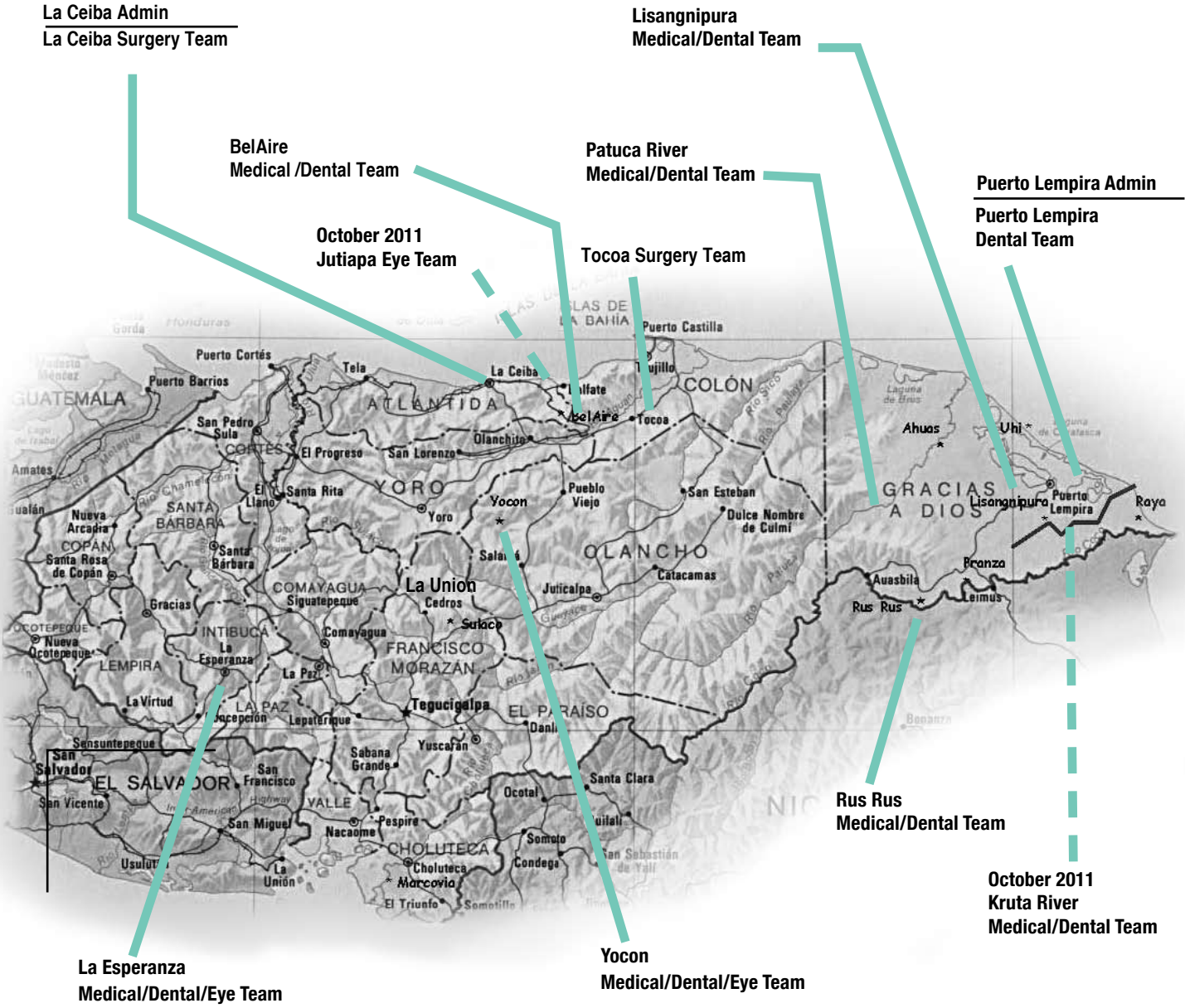


PATUCA RIVER MEDICAL/DENTAL TEAM

Left to right: Kelly Koehnen, Teri Houle, Sue Prentice, Cheryl Schraeder, John Weitgenant, Char Zimmerman, Mike Stapp, Mary Bierman, Doug Pflaum



I•H•S Projects October 2011 & February 2012



H O N D U R A S

I•H•S Projects:
October 2011 - - - - -
February 2012 —————



Monetary Donations

Founders Gift – \$2,000 & up

Founders Gift - \$2,000 & up
Welch, James

In memory of Delores Welch

Severson, Jon & Candy

In memory of Bill & Grace Raymond

Platinum - \$1,000 & up

Knoff, Chris & van der Hagen, Marjorie

Gold - \$500 & Up

Eckhoff, Devin & Kimm

In honor of Rosalie Eckhoff

Eckhoff, Rosalie

In honor of Andy & Risa Piper

Hackenburg, Jane

Helgeson, Don & Shepard, Sue

Kettner, Myrt & James

In memory of Cynthia, Dorothy Davis

In honor of Forrest, Yocon Team,

Andy & Risa Piper, Ann & Ray Henrich

Koopmeiners, Linus & Marina

Rotary Club of Anoka, MN

Thibault, Mr. & Mrs. Harold

Silver - \$250 & Up

Columbus Chapter of the Kiwi Club, OH

In memory of Barbara Lance Hughes

Dorsher, Paul & Joanne

Erdman, Warren & Linda

Ernster, Dr. Leon & Deborah

Harris, Carol & Peter

Kirckof, John & Karen

Kiwanis Club of Ely, MN

In memory of David Staubitz

Koehnen, Dr. Kelly

In honor of Dr. Julie Chavez

& Dr. David Basi

Odessa Rotary Club, TX

In honor of Bob Slider

Olson, Mr. & Mrs. Aubrey

In honor of Dr. Marianne Serkland

Pflaum, Dr. Douglas & Anne

Schiferl, Jim & Pauline

Scioto Valley Chapter 99s, OH

In honor of Jim & Jo-Ann Prater

Shuster, Dr. David

Sopkowicz, Steve & Quad/Graphics

Staubitz, Trudy

In memory of David Staubitz

Walz, Arla

In memory of Helen Wadhams,

Kelly Jo Malicoat, Richard Bayer,

Judy Snowberg Tomlinson



*The officers, board members,
participants,
and especially the people
of Honduras wish to express
their deep gratitude
and appreciation for your
contribution.*

*Every donation, no matter
how big or small, makes a
huge difference in helping us
continue our work with the
poor people of Honduras!
Thank You.*



Bronze - \$100 & Up

Addicott, Linda

Barkley, Jr. Robert & Esther

In honor of Jim & Jo-Ann Prater

Barrett, Teresa

Baxter, Dr. Anthony & Lavenia

In memory of Sallie McKemie

Boyle, Mary E.

In honor of Teri Houle

Cavis, Susan

Centenary United Methodist Women, MN

In honor of Linda Erdman

Chavez, Richard & Jeanne

Church of the Sacred Heart, Glenwood, MN

Coots, Kathy

Coulter, Brian

Daniels, Melissa

Darr, Marilee

In memory of Glenn Darr

DeMorett, John & Karen

Deutschmann, Ed & Gloria

Dunnigan, Ann

Engman, Fred & Lynn

Esau, Rex & Connie

Fernandez, Shanelle & Wilmer

Fischer, Deb & Dutch

In memory of Mathew Fischer

Haaga, Jim & Margie

Hagberg, Richard & Violet

Harriman, Karla & CJ

Hasti, Dr. Susan & Friedman, Max

Hein, Christine

Hill, Rich & Mary

Hobday, Kathleen

Hoye, Psyche

In memory of Bill & Grace Raymond

Hunter, Dr. Don

Huss, Joy

Jackson, Lori

James, Dr. Dale & Jeanne

Jensen, Dr. Paul & Marilyn

Johnsen, Robert

Johnson, Bob & Joyce

Johnson, Lola & Phillip

Johnson, Mark

Kirckof, Grace

Knittel, Cara

In honor of Jim Alexander

Koehnen, Beverly

Krakowski, Larry & Michele

Living Word Lutheran Church, MN

Lobdell, Douglas & Hoff, Julie

Lopez, Leyla

In honor of Marilyn Bostrom

Luce, Therese

Matheson, Karen & Lepp, Kathy

In honor of Kathy Lepp

McKemie, Dr. Frank & Jennie

Meade, Brenda

Mizpah Fellowship, MN

Monument Chapter DAR, MN

In honor of Marcia Ernst

Nelson Dr. Dick & Karen

Nelson, Stacy

Nemanich, Dr. George & Ann

Pack, Suzanne

In honor of Bob Slider

Panuska, Dr. Harold

In memory of Bill Raymond

Pflaum, Douglas & Ruth

Philippi, Jeffrey & Mary

Rachie, Marlene

Raycraft, Terrence & Ardelle

Reiter, Rick & Gwen

Rosenberg, Dr. Robert

Rossell, Doris & Len

Sater, David & Sharon

Schluter, Dean & Elayne

Schweigert, Kathleen

Severance, Dr. Perry

Shalom Community Lutheran Church, MN

Slider, Bob

Smoger, Fred
 Soucy, Barbara & Dwight
 St John's Missionary Circle, MN
In honor of Drew Mathews
 St. Hilaire, Thomas
 Stapp, Mike
 Struve, Dr. Dennis
 Thurmer, Corrie
 Tilleson, Arne
 Voss, Ted
 Walker, Dan
 Watson, Dale
 Watson, Dr. Robert
In memory of Dr. Don Watson
 Women of the ELCA Crosslake Lutheran
 Church, MN
 Year, Pamela
In memory of Bill Raymond
 Zimmerman, Wayne & Char
 Zupan, Nancy

Copper – up to \$99

Adams, Kathy
 Alexander, Jim & Barb
 Anderson, Jenna
In honor of Dr. David Shuster
 Anderson, Richard
 Bakke, Steve & Sheila
 Biernot, Robert & Mary
 Boler, Marie
 Brennaman, Wilamette
 Brightman, Elizabeth
 Brightman, Kathy
 Brown, Dr. Rod
 Callahan, Patrick & Patricia
 Campbell, Barbara
 Cavanaugh, Jane
 Collins, Joe
In honor of Steve Rice
 Conway, Nancy
 Coots, Pat & Connie
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