

BELIZE DIARY

Punta Gorda, Southern Belize

October 31

Biking home from market this morning I saw Maria chalking a blackboard outside the Pelikan Restaurant: furniture for sale, cutlery, crockery, freezer, tables and chairs.

... Maria, are you selling up?

... Yes, (she was near to tears) I was robbed at the weekend. They broke in, took all the drink, the frozen food, everything. I can't do it anymore.

... I am so sorry. I was looking forward to you reopening evenings so we could come to dinner...

I love the Pelikan. It was the first place we ate out, when the clinic staff welcomed us just before Christmas last year. Maria rented a room from the fishing coop and built a shaded terrace over the water. The food was simple and good, the views down the wooded coast, up to the centre of town, or across the bay to the mountains of Guatemala, were beautiful. I always stopped there for fresh juice on the way back from the market. I would park the bike and sit watching a great white heron or a small blue poking about in the shallows by the pier.

But it's been a hard year. First of all, there was the seaweed, it began in March: great clumps floating in on the almost permanent breeze from the east. the shore line and the jetty created a perfect trap so it just piled up in a stinking mass in the corner until an occasional westerly or higher tide dispersed it for a few weeks, and then it would appear again. People told me they had never seen so much. Forget dreamy Caribbean beaches. The seaweed tide was everywhere. The stench made sitting on her terrace unbearable and days would pass when she was empty or closed. By July it was not just seaweed, we had a plastic as well. I heard that the Dominican Republic was entirely enmeshed, but there was plenty left over for Belize: bottles, sandals, cups and ... well... just endless unrecognisable bits of garbage.

But when I came back a month ago, the waters were completely clear, glassy and smooth and have remained so. I still wonder where does the plastic and seaweed actually go to... This remains a mystery. But Maria had told me she would reopen in the evenings. Then the break-in happened. After she has sold everything she will go to her son in the US and think what to do next.

I come in with her and buy 2 mugs and 4 bowls as a small contribution. The heron is poking around in the calm water.

So, there you have it, just one tiny example of the combined forces of human waste, climate change and criminality driving one lovely, very hard working Central American woman out of work.

I get home and unpack my shopping. I am ashamed today that, because I forgot my carrier bag, I have somehow ended up with 4 single use black plastic bags. The government of Belize says it is introducing a single use plastic ban next year. Meanwhile I cause a small tailback in the supermarkets almost every time I go shopping because I have to persuade the helpful young man always standing at checkout not to bag up my stuff and just allow me to put it in my backpack. A friend of mine up in the mountains is making recyclable shopping bags out of waste and trying to persuade local shops to stock them. Little success so far.

So, what am I doing in Belize, you might ask? Or indeed where is Belize? Take a map, any map, head for Cancun in Mexico and go south; or head to Honduras and go North across water, or go to Guatemala and go East over mountains. By any of these means you will arrive in a small country the size of Cornwall, with a population of around 380,000. Asmamaw took a position as medical director of a primary health care clinic serving remote communities in Southern Belize. It was set up almost 20 years ago with the idea of providing primary health care through mobile clinics to those communities the Ministry of Health found hard to reach. It also provides services that the government cannot manage, physiotherapy and rehabilitation and home nursing. What particularly appealed to us was that the charity has reversed the normal model of aid delivery through highly paid international staff and less well-paid locals. Here the core salaried staff are national. The international staff are all volunteers. The longer-term ones like Asmamaw and the nursing, rehabilitation and pharmacy directors get housing and food allowance. The doctors that volunteer for shorter periods pay to come. As do the students. Every month there are around a dozen students – medical, nursing, pharmacy, physician assistants and physios coming mainly from US universities but also from Europe and Australasia. They see the patients, and get supervision and lectures from Asmamaw and other volunteer licenced staff. They get an internship in primary health care in a low-income setting, while they help to finance health care to underserved communities, all done in close cooperation with the MOH. The charity said I was welcome to add in mental health, and Mr. Nic, the public health director asked me to focus particularly on children's mental health as it was completely unaddressed.

So here we are living in a small house at the end of a dirt road, in a small town about the same size and friendliness as Penzance. As we can watch the sun rise over the sea from our door and as it takes 5 hours to get to the capital by bus, there are other aspects that feel familiar as well.



November 2nd

Mental health morning at our Clinic today. Once a month I sit in and encourage the students to take an 'integrated approach'. This means that when they are doing their routine assessment and examination for whatever is the presenting problem, diabetes,

asthma, skin rash, hypertension, scabies, TB... they also do a mental state exam, and follow it up if there is cause for concern.

I have already taught them how easy it is to do a mental state in the lecture I gave two weeks ago. I ask them to chat about their day to each other for two minutes and then to jot down if they think their colleague is mentally well, and how they made this judgement. The exercise reveals what we all know: that while we might not be able to instinctively tell if someone has HIV, we make instinctive judgments about people's mental states all day, every day.

Then I ask them to identify the components that help them make that judgement and of course they come up with how they look, how they speak, what they talk about, how they interact, mood, attention etc, etc, all the basics of a mental state exam. My job is to help them systematise that, think about the impact of culture, gender and age, and think about how they can integrate it into their routine primary health care examination. I want to demonstrate that this is not a separate, time consuming process, but can go on while you are discussing a wheezy chest or upset stomach. Then if you feel something is not right, you can ask more questions.

Today they put it into practice, presenting their findings to both Asmamaw and myself. As always, this process turns up at least one patient with psychosocial concerns. This time it is a young woman who came to refill her asthma medications but is actually worried, sleepless and tearful about leaving home for the first time to work and live in a different town where she knows no one. She is leaving vulnerable parents in her village to care for themselves when she has been the lynchpin at home. We have one shot to help because she leaves town tomorrow. We sat together taking a problem-solving approach: How could she make new friends? She thought mealtimes at work would be a good opportunity and she would do what she did in high-school, sit with people who looked friendly. How could she get home regularly? Who could help the family in her place? It's not rocket science but both she and my student could see that pulling the problems apart, taking a morsel at a time, and looking for a solution for each bit, made them less overwhelming, cheered her up, and made her feel in control.

November 4th 2018

Barbed wire can be a beautiful sight,
Bringing to mind the broken bodies
Of boys so brutally destroyed
In the War that did not end all wars.

Barbed wire can be a beautiful sight,
Capturing the sunlight

As it contains and concentrates
All those considered unworthy of life.

Barbed wire can be a beautiful sight,
Dividing a city, country, continent,
Defining the frozen decades
Until they dared to tear it down.

Barbed wire can be a beautiful sight,
Feeding fear and frenzy while
Fencing out those unfit to feast
On the fruits of fortunes stolen
In the lands from which they flee.

18 months ago, Asmamaw and I joined a similar [caravan](#) to the one journeying across Mexico now. Thirty years ago, I was doing doctoral research in Guatemala, witnessing violence and cruelties inflicted on the civilian population by a US backed military dictatorship. Today my Guatemalan friends tell me the rich are richer, the poor are poorer and the violence just as bad, except it is even harder to escape.

November 6

Saw the hawk fly by with breakfast in his claws this morning. I have worked out that this might be the juvenile who stumbled bewildered into our garden in the spring. For the last week I have watched him just hanging out on the trees round the house, so perhaps he nests nearby.

I find myself spending more and more time watching birds. The cliff down to the water's edge is entirely wooded. Next door is a small hotel with a long garden. Then there is the town cemetery and beyond that woodland. It's a perfect place. Birdwatching is my form of mindfulness.



If I try to just empty my mind or pay attention to my breath I fail completely, especially these days when the roaring of the outside world is so great. But when I sit waiting and watching for the hummingbird in the garden and then follow as it flits from flower to flower, I am completely absorbed into the present. Birds are small works of art: mobile, musical and entrancing. Although the tch tch

clicking sounds the humming birds make are more like a ‘telling off’ than a small tune, they are still amazing.

November 8th

There are a handful of psychiatrists in the two main cities but mental healthcare in Belize is largely delivered by mental health nurses working in the polyclinics. Two of them work here and they asked me to assist them with child cases, so every two weeks we do a joint clinic.

Today there is Andrew¹, a 15-year-old whose continuing anger at his stepfather for beating up his mother is palpable in the clenched fists and pallor that occur when we discuss it. He cannot understand why she stays with him. The family are Mopan Maya and live in a village in the mountains. They have four other boys, but he has moved out to stay with his grandmother in town.

... my father beat me with his hands but also a belt and a stick or the side of a machete. Once he put my head in a garbage bucket. I don't remember what for. My mother just stood to one side. She took my father's side. He is silent for a moment. You know to ignore a person is to treat them like trash. If you hit them, they are less than trash

He is very bright and doing well in his first year at high school. He used to bring good marks home from school and his stepfather never praised him, just demanded to know why he had not done better. He wants to be a scientist when he grows up. But he is lonely and sad, with no close friends and spends much of his time alone in his room watching YouTube. Nurse B. and I want try to identify sources of support, friendship and activities that give him pleasure.

And then there is Joanna, another bright, Creole, girl in her last year at primary school, who has self-harmed in the past and whom the teachers complain behaves oddly in class. She appears to drift off and be in another world, not listening to them. Joanna was sexually abused by a neighbour. When we see her, she is friendly and polite but explains she does not know why she is here, as everything is fine, and she has no difficulties, she just sometimes gets sleepy at school. When I mention that I understand some bad things happened to her in the past she starts to breathe very fast and tells me:

... I never think about those things. If I do, they upset me.

I promise that I won't force her to discuss anything she does not want to, I would just like to understand what problems she is having right now. She tells us she does worry a lot about everything and sometimes she has nightmares. So today we start with some rebreathing and explain we will meet every week to help.

¹ All personal details of patients have been significantly altered to protect identity.

Almost all the children I see have mood and behaviour difficulties related to abusive experiences in which they were the subject or the witness, often over long periods of time, often disbelieved by those who were meant to protect them. One little girl told us she had heard her father say he would kill all of them if mother ever tried to leave. So now she lives in fear of both staying or going. She had been sent to see us because of ‘bad behaviour’ at home and school. Her mother responded with regular ‘lashings’ which just made the problems worse. I do think that to live every day in fear of those who are meant to love and protect you can be as terrifying as living in a war zone.

In my first month I spent some time in a local primary school observing in class and talking to the children. All of them liked school but complained of the same things: They were spanked or ‘lashed’ at home and there was a lot of teasing and bullying in school. One six-year-old was absolutely clear about the relationship between the two telling me that:

... beating is not good because it's a form of bullying.

Not all the children agreed. A nine-year-old told me she was *happy that my parents beat me because it is nice to know your parents care*. Heart breaking to think you have to be beaten to know you are loved. In fact, physical punishment is now forbidden in Belize schools. But not all the teachers are happy about that.

... My mum had 5 kids, a teacher told me. We knew if we stepped out of line, we would get whipped. And look at me now. I am a teacher. Whipping worked!

Another told me recently she was tired of UNICEF and other outsiders telling them that beating was not good. We did not understand it was their ‘culture’, and we should not interfere.

Not everyone feels like this. The local Ministry of Education asked me to develop a mental health training programme for their own staff, so for my first few months, along with the clinical work, I gave weekly lectures on child mental health, focussing on supporting children IN the classroom. I was asked to repeat these for both primary and high school teachers in the summer holidays, and then one of the school counsellors asked me to collaborate with her in training in both positive discipline and in an anti-bullying programme. Back in the UK I am usually the last person the child sees after things have gone seriously wrong and they have been referred up the line: school nurse, school counsellor, GP, primary mental health care nurse, secondary mental health care nurse, and finally if all else fails, psychiatrist. I went home in the summer and did a locum in my old patch to help clear a waiting list. I saw children who had been waiting two years for a possible ‘diagnosis’ of ADHD or ASD. The tragedy is that the parents believe that once the diagnosis is made, I will wave a magic wand and ‘fix’ the child, when almost always what is needed are changes in the environment around the child and the kind of support s/he receives, that will help her respond differently, changes that could have been made much earlier if

schools and families had the knowledge and resources. I love doing clinical work, but it's amazing to have a chance to try and prevent these problems occurring in the first place.

November 9th

I am standing in front of a class full of smiling six- and seven-year olds asking them what they need to eat to help their eye sight, *carrots, vegetables!* they all shout at me ... impressive.

Not my normal job, but Nurse K. and I want to set up a mother and baby group in this village. We need to meet the community health volunteers and so we hitched a ride here with the 'deworming team', on the condition that we helped them out first.

After Nurse K. gives a graphic description of worms eating up your tortillas inside your stomach, and we have had a quick Q and A on why and when you wash your hands, and the benefits of fruit and veg, we dispense vitamin A capsules and an albendazole tablet to every child in the class

Nurse K. starts on one side with the vitamin A, and I on the other with the albendazole. This happens every six months and the children are used to it, so each one tips back their head and opens their mouth and I drop my pill in with gloved hand. I feel somewhat like a mother bird faced with a nest of gaping mouthed chicks. Only one little boy clamps his mouth shut and bursts into loud wails. His teacher takes the tablets to dispense later.

There is something very satisfying about physical medicine, especially in this preventive form. Stopping children getting parasitic infections or vitamin deficiency has a concreteness and simplicity so different from wrestling with the lingering ghosts of parental abuse. Not that there aren't psychological moments.

After pill dispensing, we moved on to Human Papilloma Virus vaccinations which if given young can prevent women getting the virus that triggers cervical cancer. Almost all parents of children over 9 had consented, and the children lined up with remarkable stoicism for the injection. Except for one little girl who, at first sight of the needle, broke into loud yells. Interestingly she did not run away. She just sat screaming in the cheerful classroom, as her eight companions placidly accepted their injections.

... *Get her mother* suggested one of the nurses, and a young boy ran off to do so. But as we waited the girl's screams grew in volume and intensity as she stared at us with terrified, reddened eyes. I suddenly had a 'flashback' to my own childhood: my GP mother had called me into her 'surgery' one evening. This room, where she saw patients, was normally completely off limits so to be invited in was very unusual. I stepped through the doorway uncertain, and when my father slipped behind me, slamming it shut and sliding the upper bolt, I suddenly realised it was a trap. Then I saw my mother uncovering one of those white kidney shaped dishes containing the most enormous syringe. I remember screaming and jumping to try and reach the door bolt, but my father caught me and held me down, while my mother pulled up my skirt to push the needle firmly in below my buttock. The whole thing had been precipitated

by an outbreak of diphtheria not far from home and their determination that I should be safe. What I remember was the feeling of absolute betrayal by parents who could be so complicit in inflicting pain.

... Don't wait I suggested. *The anticipation is much worse than the injection, and then when Mum arrives, she can comfort her, rather than be an accomplice and have to hold her still.*

The nurse moved quickly and the injection was over in a second, accompanied by one piercing scream, followed by a couple of small sobs and then silence, as the little girl absorbed the fact that it was not, after all, so bad.

Then the small boy arrived back with the information that mum could not come, she was busy. Almost all parents are hard pressed farmers in these villages So we all gave her a quick hug and lots of praise, as we left them to their very lovely teacher.

Belize does an impressive job in preventive primary health care. As well as preventive public health initiatives like this, the maternal and child health nurses do regular clinics in every remote village and every pregnant mother is followed up before and after birth. I go out regularly with the MCH teams and if they cannot find a mother, or a baby is missing out on vaccinations, they come back.

So, adding in infant stimulation is not too difficult. Many of the rural health nurses have already had theoretical training, but as so often happens, it does not get translated into practice. When I turned up at the beginning of the year, saying I had some experience in setting up groups to encourage more mother child interaction, Nurse K. asked me to work with her.

In the first half of this year we ran a cycle of early child development groups in two other villages up near the Guatemalan border and I also helped set up ad hoc groups on MCH days. Nurse K. could easily do these alone now, but she wants me to help her train other nursing aides and community health volunteers. We had a good meeting with the local ones who are very happy to help us start groups both in this village and the neighbouring one, beginning next week. So that's what we shall do.

November 11th

100 years since the end of the First World War and as far as I can see, the guns have not fallen silent.

November 12th

We have drawn an imaginary map on the floor, and asked the children to stand in the country where they were born. Then they shout out where they come from. All the 20 children in the room are migrants from El Salvador, Honduras or Guatemala, and have been here between 9 months and 5 or 6 years. Their parents have all fled from the poverty and violence in those countries.

Belize is off the normal migrant trail. If you are dreaming of the USA, Belize makes no sense as a through route, so no migrant caravans here. In fact, Belize did an amazing job welcoming the first big

influx of refugees from the various wars in Central America some 30 years ago. It avoided segregated camps and helped them to integrate, by allowing them to establish various communities across the country, providing infrastructure that benefitted both locals and refugees. The new influx began with the upsurge in violence that began a few years back. Many fleeing now seek to join family and friends in those same communities. But since 2015 the rules have got much tougher. One must apply for asylum within 14 days of entering the country. There is no leeway and once an application is made you cannot work, and processing the applications takes years. Only 28 people have been given refugee status since 2015, there is a back log of others just waiting in limbo.

So many families just stay under the radar. They come and settle here, both in these communities and in the border villages, without declaring themselves. Others manage to get work permits and do poorly paid agricultural work in the citrus farms and banana plantations in different parts of the country.



UNHCR invited me to come and do a camera workshop with migrant primary school children. I took a bus halfway up the country to one of the communities where many of them live. The local school has given permission for these 20 to attend. We have borrowed a meeting room and the rest of the morning is spent in the usual way: showing work by other children on the Migrantchildstorytelling.org website; letting the children experiment and

mess around with the cameras; teaching them the rules about getting consent, taking care of the camera and personal safety. Then the first group head off, promising to return their cameras the following day so we can pass them onto the second group.

In the afternoon some of them come back to do drawing and colouring. It turns out that four sisters from the same family are out-of-school. [Ana](#), (not her real name, every child chooses a pseudonym) the eldest at 10 years old, tells me she used to go to school but stopped 2 years ago when her parents moved to find work. They came back here recently but the school said she had to have papers or she could not attend. So, her mother has gone back to El Salvador to find her birth certificate.

November 14th

I met Pedro in the street this morning holding his younger brother Michael by one hand and his camera by the other.

... We were just coming to school to collect your cameras; do you want a lift?

... No miss, we are not going to school today

... *Why not?*

... *Because they asked us to bring things to school miss.*

... *What sort of things?*

... *Chicken and beans so the teachers can cook lunch and we don't go home for lunch, but mother don't have no money miss, for buying things, so we don't go to school.*

... *Ok you can come and join us.*

The out-of-school girls are waiting by the door. We open up the work room and invite all of them in, and I get out all the drawing materials and my bag of puppets and they settle down happily at the table drawing pictures and playing. Then the sisters say they have to leave but they are coming back. When they return one of them says she left a 2 Belize dollar note on the table and now it has gone. I had actually seen it, so I believe her. I ask the two boys if they took it. They shake their heads and Pedro turns out his pockets, but there is something in six-year-old Michael's face. I ask him to turn his pockets out as well. He drops his head, lower lip quivering. I go over and gently feel in the trouser pocket: there is the 2-dollar bill. As I take it Michael runs and curls up in a tiny ball under Pedro's chair.

... *Will you tell our mother?* Pedro asks anxiously.

... *There is no need. All I want you to do, Michael, is take this bill and give it back to Diana and say you are sorry.*

... He curls up even more tightly.

... *Well, when you are ready come and get it from me.*

I go back to sorting photos; the older children return to work. Michael stays under the chair.

When Gladis, my UNHCR collaborator, arrives I ask her to repeat the instructions in better Spanish than mine. Michael has crept out and is standing forlornly eyeing the activities at the table. I have told him he cannot join in until he apologises and returns the money. Gladis nods. She used to be a teacher herself.

Michael stares at her and refuses to budge, over the next 30 minutes when he thinks we are not looking, he tries to re-join the drawing group. Gladis and I are firm, explaining that first he has to return the money and apologise.

It's breaktime that does it. Gladis has snacks and drinks. Michael can have one after he has given the money back. He watches as she hands them out to everyone else, then suddenly rushes over, grabs the money, runs to Diana, and pushes it in her hand with a muttered apology.

Gladis gives him his snack and drink with a smile and we heap praise on him for doing something difficult and brave. *Saying sorry and giving back is not easy.* The girls praise him as well, and for the first time I see a tiny smile.

It does not last. Pedro says they should go home, and Michael looks terrified.

... *What's wrong?*

... *He does not want to go. He's afraid.*

... *Of what?*

Pedro shrugs his shoulders.

... *Is your mother there?*

... *No ...*

... *Who is there then?*

... *Other people, some men, he says vaguely.*

Both children look extremely anxious.

... *Look you don't have to go. I say, you can stay here all day with us. It's no problem.* The relief on their faces is palpable. What is going on at home? I wonder.

Meanwhile our job today and tomorrow is to sit with each child while they choose three pictures they want to keep, and the one they want to exhibit. Then we ask them to explain why they have chosen that picture and what it's about. I love this part of the project. [Pedro](#) has chosen a picture he has taken of a jetty stretching out to sea and the words pour out as he tells us about living on an island when they first got here and the pleasure he got from his first experience of water.

Over the two days Pedro and Ana and their respective sibs spend most of their time hanging out in the room. Other children come in when school is finished: to draw and paint or play with the puppets in my toy bag. The need for a permanently staffed child friendly space could not be clearer.

November 15th

All the cameras have been returned. (Some people are astonished when I say we lend children cameras and they always bring them back. Don't be. In three years of working with children who have nothing, I have not lost a camera.) And every child has chosen their pictures to be printed and one picture to be exhibited. Just like Mexico and Greece, what they want to show us are pictures of those they love and the beauties of the natural world. I am, as always, astounded and heartened that children who have been through so much, had bodies dumped outside their door, relatives killed, parents threatened, and perhaps

experienced neglect and abuse in their own homes, still want to show us beauty, love and friendship. [Vandan](#) for example told me he missed so many things:

... I have lost touch with all my old friends. I miss all my family, my cousins, grandparents, aunts and uncles. I miss my house and my teddy bears that I used to hug. I left everything behind. All my pictures taken since I was a baby, they were left as well.

He chose a picture he had taken of a wall painting of wild animals because he found it beautiful. Max took some 50 pictures of his disabled brother and chose one of them to exhibit² because

... I love him. He is not well. He has been ill all his life and sometimes he gets a fever. He can speak, he can say our names. I think he understands us. I help to take care of him, I hold him and he is happy.

Before we leave, we make plans for the Exhibition next week. We want parents and class teachers to attend. Gladis prints beautiful invitations for the children to give to their parents. The amazing and incredibly tolerant head teacher has again given permission for the children to leave class early. We talk to her about both Ana and Pedro. She is eager to have every child in school. She knows how vulnerable they are if they don't attend. She tells us about another family, known to her. The parents had seven children. They ran a bar. When the oldest girls were 14 and 15, they both got pregnant. The parents took them out of school. Social services were involved, and then the parents refused to let any of the other children attend school. She is still trying to get those children back. She definitely wants to help Ana. As to Pedro, the teachers always explain that children do not have to bring food for communal meals if they cannot afford it. But Pedro's mother works long hours and is rarely at home and the children are often left alone, or strangers come to the house. She is very worried about them and will keep an eye on the situation.

November 19th

Day off today because it's *Garifuna Settlement day*. In case you are wondering this is when Garifuna people (shipwrecked escaped slaves who intermarried with indigenous Caribs and Arawaks on Saint Vincent), having escaped British colonial oppression and enslavement in various other parts of the Caribbean, arrived on the shores of Southern Belize in small canoes. In PG the story goes that after being turned away twice by yet more British officers, when the British saw there was a pregnant woman in the boat, they were allowed to land and settle. Really?

I am out on a boat watching all this re-enacted with drummers and flags in small canoes at dawn. One of the other passengers turns to me and asks:

... You are British, aren't you?

... umm yes.

² Pictures of friends and family in this project have not been shared on the website to further protect identity.

*... So how would you feel if we
Garifuna people turned you away
repeatedly and would not let you in?*

I hang my head.

*... Deeply upset! and I am very
ashamed.*

Every one laughs. Lovely people.

Familiar story... except that happy
endings for those in search of safety
have all but disappeared.



The Garifuna are just one of at least seven cultural groups in the country. (I love the fact that everyone uses the term ‘cultural’, not ethnicity or race). Belize is an astonishing country. This small town of some 5000 people is one of the most diverse communities in which I have ever lived. The original population of Belize, like neighbouring Mexico and Guatemala, was Maya. 1500 years ago the region had a population of a million and was one of the power centres, in the classic Maya period. Asmamaw and I wandered around the astonishing temples when we first arrived. But something happened around 800 AD. Overpopulation, crowded cities and, according to my guide book the ‘demands of an unproductive elite’, combined with climate change in the form of prolonged drought, led to wars over resources, flight to the countryside, and the collapse of civilisation. Cannot imagine that happening today.

After that it was the familiar tale of settler colonialism, first the Spanish, then British loggers and pirates who fought off the Spanish, and imported 1000s of African slaves to cut logwood and mahogany while we ran this colony as our lumber yard. The Creoles are the descendants of those slaves. There are also East Indians, descendants of indentured labourers brought over by the British to work on sugar plantations after slavery was abolished. Add in Mennonite communities, welcomed here by the British in the fifties because of their prowess in farming, and now divided between the conservatives who reject modernity, including tractors, electricity and who will probably survive us all come the apocalypse, and the modern Mennonites, who can even be seen driving cars. There are also Chinese who appear to run the majority of supermarkets in the country, American and British expats running organic farms in the mountains, or the small hotel next door. Last Friday was ‘Cultural day’ when everyone dressed up in their traditional clothes and brought their own food to lunch. I met Pat at the bus stop in a Nepalese shirt.

... My father was a Gurkha, posted here with the British army, he explained, he met my mother here. She was Maya, and sadly Pat’s father did not stay, but Pat has just found a whole cache of his letters and is immersed in learning more about his family history.

November 22

Go back up country for the migrant children's exhibition. Find Ana waiting outside the meeting room so recruit her to help Gladis and me put up the pictures and texts on the Exhibition stands UNHCR has provided. We work flat out for 3 hours and then all the class teachers and children arrive with their families. Doing the show is my favourite moment. Most of the children sit on chairs at the front with teachers and family behind. Ana is too shy to stand when I thank her by name, for all the work she has done in preparing the exhibit, but you can see her pleasure as she blushes at the applause. It is the same with all the children as we show each picture and read their own words aloud in Spanish. The whole thing takes around an hour, then it's drinks and snacks and hugs from all the children, and I catch the express bus home. After working so intensively with them, I feel bereft.

November 23

I love taking the bus to work. Even after a year here the beauty of this country continues to astonish me. In one hour we move from mangroves that fringe a murky sea to small, densely forested mountains. Who knew there were so many shades of green? The 7.15 goes from PG to the border village of Jalacte and is packed with children and teachers heading to the schools along the route and the health workers heading to the main rural primary health care clinic.

Richard Horton, editor of the Lancet, recently tweeted: 'A friend (male) of mine has just written to me saying that global health is such a "boy's club." It surely is. How do we change that?'

My answer would be it depends where you think 'global health' actually takes place: In the universities where research is done, the academic journals where it is published and the conferences where it is discussed? Or here on the front line where practitioners carry out 'global health initiatives' on a daily basis'. My mental health colleagues in town are both women, as is the head of mental health in Belize today and the psychiatrist who introduced the mhGAP programme (a global health initiative) to Belize. This primary health care centre in the mountains serves 29 villages. The administrator is a woman; 5 of the 6 doctors are women, 7 of the 8 nurses are women. The administrator told me it was similar across the country, she was not sure why but it was mostly women who did health care. It's the same with the students who come to study global health at Hillside. The majority are women. Could gender be part of the reason why clinical practice and service delivery are so much less visible and get so much less public acknowledgement than research?

November 29

Instead of sitting in the clinic I took Andrew birdwatching in the graveyard and along the forest edge this morning. He had brought his own binoculars. We sit quiet and still on the large slab top of a comfortable grave, looking out through the trees towards the water. There are a couple of noisy social

flycatchers and a small manakin. He tells me he has always loved nature but does not go out very much. When he was about five, he had three cats,

... I loved them. There was a black and white, a grey and a black. But my step dad did not like cats. He threw hot water on them. Then my mother took them away.

There are tears in his eyes as he tells me this: *I cannot forgive them.*

November 30

What to do with the news? In the last 10 days I have read about Central American children teargassed on the US border; the British government funding detention centres in Libya where children are abused and starved, paid for by my taxes, which also contribute to bombing and starvation in Yemen. I think about not reading the Guardian, turning off the World Service, closing down Twitter, why not just focus on what I am doing here. I think one reason is I keep hoping to hear that something has got better. Perhaps Trump has finally been impeached? He has not. Perhaps Britain will back out of Brexit? Not so far. Perhaps politicians will wake up to the looming planetary catastrophe caused by climate change? Dream on. But. there are children in the US suing the government for stealing their future and 1000s on strike in Australia demanding more action- inspired by one girl in Sweden. This is what gives me hope.

December 7th

The ECD groups went well today. In one village the community have built a small meeting room of wood. It is airy and clean and we unroll our playmats for the children on the floor. This week the group focussed on how to play, and toymaking. By the end of the group all the mums had made a toy out of rubbish. All the babies present gave beautiful demonstrations of how interesting homemade toys can be, as they lay there completely entranced by mobiles made by one of the mothers.

In the other group in the next village, the theme was love, responsiveness and attachment and as all the infants present were demonstrating deep attachment to their mums, and friendly interactions with each other, it was really easy to discuss how loving parenting leads to friendly children.

And then at the end as we were packing up to leave the health centre, one of the mums told me that the big bruise and the red eye on Louisa's face was caused by her partner. She thought I should talk to her. How had I missed this? I ran after Louisa, who was heading down the road, her 8-month-old son on her hip. She came and sat with me and burst into tears. Her partner has hit her frequently over the last year. Days ago, he threw her on the ground when she said she had to go to the river to wash clothes. So, she left and went to her older sister. He had come after her, and said if she did not come back, he would take the baby, so she returned. When she got back in the house, he hit her again. That was last night.

I knew the nursing assistants would have a better idea of what was available for domestic violence victims. Also, the other mothers, who already knew what had happened, might have ideas. Louisa was

happy to discuss what to do in the group. She looked relieved that it was all out in the open and she had nothing to hide. My colleagues explained there was no way her son could be taken from her. Everyone agreed she should not go home, and encouraged her to go to PG and make a police report while the bruises were visible, then she could get a protection order that would keep him away from her. Also, she could get her eye seen to in the clinic in town. She could come with us now and go on the bus with me. But she looked doubtful.

... What do you want to do? I asked.

... I really don't know. I really don't want to be with him but...

... I am really concerned that you are putting yourself in danger, particularly as he already knows you are thinking of leaving.

After more discussion with the other mothers in Ketchi, she agreed she would go back to her sister for now and think about what to do next. We dropped her at the sister's house. Her brother in law was home, slightly the worse for wear from drink, but friendly enough. When he heard what had happened, he staggered to his feet.

... I can go and shoot him now. I have a gun.

... No, really that's not the best solution. The best thing would be to help Louisa get to the police station tomorrow, on the early bus.

... Why not take her now?

... I would happily do so, but she does not want to come, she wants time to think

We drove away with me remembering my time working in a specialised clinic for children whose fathers had killed their mothers. Dora Black who had established it always taught us that the most dangerous moment, when a man was most likely to kill his wife was when he thought she might be leaving but had not gone yet. A week ago, a local man shot his wife and then himself in front of their children because she had told him she was going. I really hope Louisa does not decide to go back.

I walk home down Front street and stop in on Maria. She has sold almost everything. We look at the space where the shady wooden terrace used to be.

... I took it down. The Landlord wanted to keep it. But I built it and he would not give me any compensation for the work or materials, so I just deconstructed it again. Why should he profit from my labour for nothing?

... Good for you, Maria.

December 12th



I was sitting in the garden trying to focus on the hummingbirds and avoid thinking about chaos on every continent, when a green snake suddenly appeared and snapped up a lizard, which it then proceeded to swallow... slowly. I thought I would share this with you.

December 14th

Louisa is in the polyclinic this morning, both she and her son have colds. No, she never made a report. Yes, she went back to her partner. She felt she had no choice. Her brother in law continued threatening to shoot him, and her partner's parents were being abusive. She felt she was just causing trouble all round and it was better to go back home and keep quiet. My nursing colleagues both tell her she is NOT the problem. We take her back to the village with us. Today we have the Linda, the Domestic Violence person from social services doing education sessions for both our mothers' groups. I rang Linda during the week to discuss Louisa and she offered to join me. I can see all the mothers listening intently while the infants play happily on the floor. Linda hands out information leaflets and posters including the upsetting statistic: Globally, one in three women experience intimate partner sexual or physical violence or non-partner sexual violence in their lifetimes. What really catches their attention and leads to most discussion is learning that ex-partners must pay maintenance to the child, even if the mother was the one that left. A few women in both groups are in this situation and they had no idea. Maybe this will help a little. Then Linda and I sit with Louisa for an hour as she tells us more details of how simple slapping escalated over a year or so to visible injury:

... I don't know what provokes him. He just gets vexed. Perhaps because I want to go and do washing when he wants me in the house, or perhaps because I cook something wrong ... He just gets vexed...

... You are not the problem, Linda explains, you are not to blame. And she goes over again how simple it is to get a protection order, that her boyfriend cannot take her child from her and were she to leave him, he would have to pay maintenance and social services would discuss with her where she could go to live.

... what do you think you will do?

... I don't know I am still so confused. Louise buries her head in her hands. Neither of us want to push her. Linda gives her a phone number. The trouble is Louisa shares the mobile with her partner, so she takes it on a piece of paper. She will give it to her sister.

Everyone in these small villages is related and connected in some way, many see beating as acceptable. It is very difficult to leave unless you remove yourself completely from all family and friends. Louisa gave up secondary school because the journey into town seemed so long and so far, and the homework was too arduous. And her family tell her if she abandons this man, she will never have anyone.

... but you have your whole life in front of you, Linda says – *you have time to learn skills and make another life if you want to.*

On the way home Linda wants to talk to the new alcalde (mayor). He is not sworn in yet, but the headmaster told us he is more engaged in these sorts of problems than the old one who finishes in a week. Yes, he knows a bit about the situation, yes, he will keep an eye out and have a word with the young man, and if there is more trouble, he will encourage Louisa to contact Linda. She feels that is all she can do for now. We head home.

PG is just down the mountains, a bus ride away, but for Louisa it's another planet.

But one very good thing happened this week. Yesterday morning I took Andrew up to the hawk watch. For the last two months Belizean research volunteers have been counting the migrating hawks, kites, harriers and other big birds passing over. They pitched a small shelter by the coast at Cattle Landing, set up some easy chairs, charts and telescopes and anyone was welcome to join in. Andrew and I biked up there yesterday. The guys were welcoming and friendly and showed him how to use a telescope and within five minutes he was engrossed. If you have ever hung out in a bird watching hide you will know what it's like: an atmosphere of relaxed



concentration, with conversation mainly in the form of information exchange:

... Five hookers above the coconut palm, passing through the grey cloud (slang for Hook billed Kite- the main interest for the researchers)

... Black morph and 3 pale juveniles... do you see them?

... no... yes, black morph and 4 more ... wow... flying south now...

.... Common black hawk, left of the orange house... oh 2 more, ... no that's a vulture... to the left, got it? Amazing isn't it?

And so on ... companionable without being intrusive, perfect for a shy, lonely boy who loves nature. I knew all was well when I had to leave, and he said he wanted to stay on. The researchers told him he was welcome. So, he stayed.

December 21, Antigua, Guatemala

Asmamaw and I took the boat and then the bus and went to meet old friends in Guatemala City. In the Central Park by the Cathedral there was a Christmas Winter festival going on complete with an ice-skating ring, a field of snow where children were busy hurling snow balls at one another, artificial Christmas trees, Santa Claus posing with reindeer, and songs about snow and sleigh-bells blaring from the loudspeakers. The queues for everything were enormous and everyone looked really happy. Can someone tell me what it is about snowy winter scenes that makes them the essential setting in which to celebrate the birth a baby that took place in hot dry middle eastern country more than 2000 years ago?

Now I am sitting on the terrace of our rented room in Antigua, looking over red tiled roofs and small white cupolas out to the wooded volcanoes that surround this small beautiful town. Bright sunlight, a soft breeze, no snow here. Asmamaw reads and tomorrow we will hike. I hope all of you are also enjoying a peaceful and beautiful time.