

“I’m looking at you!”

A father and daughter take a mission trip together

by Vicki Sairs, photos courtesy of Larissa Swartz

When Rob Swartz, pastor of London Christian Fellowship (London, Ohio), decided he wanted to do a missions trip with each of his four children, he wasn’t sure what that would look like.

Now he has a better idea. Rob and his oldest daughter, Larissa, 17, left their home on January 24 and flew to Nicaragua to help an eye project team conduct a two-week medical mission (please see sidebar for a list of participants).

Sponsored by Rosedale Mennonite Missions, Rosedale Bible College, and Medical Ministry International (MMI), this project brought together a team of ophthalmologists, optometrists, an optician, residents and nurses to check eyesight, remove cataracts, and perform other eye-related surgery. Rob and Larissa went along as general helpers.

They could relate to the words written by William T. Hunter, Jr., MMI’s

general director, in a letter to participants in this year’s Nicaragua Eye Project: *Those of you who have been participants previously can anticipate what it will be like, but for you first-timers: we know that some of you are full of excitement and some of you don’t quite know what to expect.*

Full of excitement and not quite knowing what to expect, they soon found themselves in scenic San Carlos, a town of about 12,000 people in south central Nicaragua.

The capital city of the department of Río San Juan, San Carlos is located at the point where the San Juan River and Lake Nicaragua meet. Rob and Larissa enjoyed the cobblestoned roads, the palm trees and tropical vegetation, the friendly people, and the little lizards that scampered around the walls and ceilings of their hotel rooms.

They found their accommodations at Hotel Cabinas Leyko comfortable enough. Rob described the hotel as “pretty nice,” and Larissa appreciated the tile floors in the bathroom, and, of course, the lizards: “They’re cute!”

What did a typical day working on the eye project look like for Larissa and Rob?

Asked to describe a typical day on the project, Larissa said they had to wake up at 5:30 a.m. if they wanted to go to post-op. This is when people who’d undergone surgery the day before had their patches removed and their eyes checked.

Rob said he was usually up by 5 a.m., and he was surprised that Larissa got up, too. But she explained that it wasn’t that hard. “You’d wake up so much earlier because of sounds in the night,” she said, sounds which included dogs getting in fights with each other.

And getting up early was worth it to her. “It was really neat to be there and see the people after they’ve had their surgery,” she said, “and to realize that after so many years, now they could see.”

The patients spent the night at the hospital after their surgeries, and in the early morning, the surgeons, a few nurses, and some translators would gather to check on them. “Usually it was just one eye,” said Rob. “They’d take the patch off and it was the first time they could really see.”

Rob smiled as he explained that he didn’t really understand a lot of what was being said, because it was all in Spanish. But there were a lot of smiles, he said, recalling one incident in particular. One of the ladies who was doing

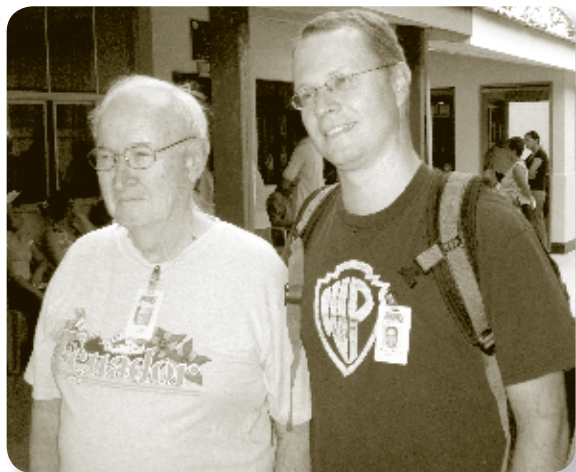
post-op with them was very attractive. When she worked with a man who’d just had an eye patch taken off, she held her fingers up and asked him, “How many fingers am I holding up?”



Rob and Larissa Swartz, father-daughter team!



The surgeons checked on their patients the day after surgery in post-op.



Levi Miller, project "mastermind," and his son, the medical director, Kenlyn Miller, MD.

And he said, 'I don't know, I'm looking at you!'

Everybody, said Rob, all the patients there, "just burst out laughing."

After post-op, they headed off to breakfast, which was served at 7 a.m. in a local home several blocks away. Usually they had rice, beans and a soft, salty cheese, said Larissa. Occasionally they had some fruit: papaya, pineapple, or fresh-squeezed orange juice. Because San Carlos is on the water, they sometimes had fish at their meals.

From breakfast, they walked to the school that was across the street from the clinic where they worked. "We had our devotions at 7:30," said Rob. "We took turns leading devotions." They spent about five minutes singing and then about five to ten minutes listening to announcements.

"And when we'd come up to the clinic, there'd already be this huge line," said Rob. People started lining up at 6 a.m., he explained, and there might be 100 people waiting by the time they opened the clinic. Some of them had to wait the whole day before they were seen.

"They were so patient," said Larissa. "I can picture Americans doing that and how antsy and frustrated they would get with waiting that long."

Rob added, "And some of these people, especially later in the week, they were

coming from the outlying areas. It'd take them...probably a day to get there, and if they don't get out on time, they miss the bus."

This made it hard to prioritize, he said. Jo Anne Yon of MMI served as project director, and she worked on making sure things went smoothly in the line. "They had issues there with the line," said Rob. "People would try to cut in."

Rob, Larissa, and the other workers went to the front of the clinic, where everyone stood in line, and Jo Anne would talk to the people gathered there. They would sing a song together in Spanish, usually "Alabaré."

Somebody would lead in prayer, said Rob, and then Jo Anne would say, "Al ataque!" (Loosely translated: Charge!)



Patrona was around 90 and had huge cataracts. She said she was glad to be able to read her Bible again.

"She'd laugh every time," said Rob, smiling. "And then the surgeons and nurses went up to the hospital. The rest of us went into the clinic...to our stations."

All the patients had to begin at the clinic. First they registered, then went in groups to the health education class, which was taught in Spanish and made connections between spiritual and physical health.

Next, they went to Levi Miller's station

and went over the acuity chart, similar to the kind of chart we read here with rows of letters in varying sizes. Because some of the patients couldn't read, the chart was set up with E's pointing in different directions. The patients had to tell which direction the "prongs" of the E were pointing.

A nurse worked with the patients to fill out forms, checking boxes on blindness, etc. Larissa's station was next. She operated the autorefractor machine, a device which measures patients' eyes to get an idea of what kind of prescription they might need.

2009 EYE PROJECT TO NICARAGUA

The following is a list of participants in this year's medical mission trip to San Carlos in Nicaragua. Nationals and some others living in Nicaragua are not included in this list, which covers mostly the North American project members:

Project director (MMI): Jo Anne Yon, Managua, Nicaragua; *Medical Director*: Dr. Kenlyn Miller, MD, Harrisonburg, Virginia; *Coordinator* (MMI): Lauren Tingle; *Ophthalmologists*: E. Trevor Elmquist, DO; Vivian Fasula, MD, East Amherst, New York; *Optometrists*: Philip Shetler, OD, Mechanicsburg, Ohio; Douglas Buehler, Pigeon, Michigan; *Optician*: Angela Crawford; *Residents*: Anne Keating, Amherst, New York; Andrea Buccilli, Lancaster, New York; *Tech & Assistant, OR Technician*: Deborah Lansford; *Nurses*: Heather Keim; Debra Whetzel; Wendy Showalter, Bridgewater, Virginia; Lisa Hertzler; Alexandra Fasula, Philadelphia, Pennsylvania; Miriam Hunsberger, Earlington, Pennsylvania; Mary Ann Christophel, Worton, Maryland; *Interpreters*: Jonas Borntager, Harrisonburg, Virginia; Dorothy and Larry Chupp, Shipshewana, Indiana; Stephen Schrock, Middlebury, Indiana; Benjamin Yoder, Grand Ridge, Florida; *General Helpers*: Levi Miller, London, Ohio; Carol Yoder, Grand Ridge, Florida; Brenda Freed, London, Ohio; Amy Cook; Rob and Larissa Swartz, London, Ohio; and Mahlon Heatwole.



The 2009 Eye Project Team to San Carlos, Río San Juan, Nicaragua.



The medical team in the operating room.

The patients looked into a viewer at a picture. From her side of the machine, Larissa saw the person's eye as well as a circle of dots with a light spot in the center. "I centered a box around that and it would beep when the measurement was taken," she said.

After Larissa, patients went to the optometrists, Philip Shetler, OD, of Mechanicsburg, Ohio and Doug Buehler of Pigeon, Michigan. They checked to see what people needed: cataract surgery, a prescription for glasses, or some other form of corrective treatment.

If they needed prescriptions or reading glasses, said Rob, they came back to his station. He keyed their prescription into a laptop, which would come up with the closest match they had in stock.

The team had brought thousands of donated glasses with them, sorted into bags and boxes by prescription. After they found the closest matches, the optician, Angela Crawford, would look at the different options and say, "Let's try this one."

"I'd watch what she was doing," said Rob, "and I'd start doing that and then we'd pull those glasses and look at them, and say, no, this doesn't work for a 12-year-old boy." The optician would try the glasses on the patients until they came up with a good fit.

"We started running out of certain prescriptions," said Rob. "Ones that were common, so it got more difficult and there were times when we just didn't have something that helped them."

They worked till five or six each day. One day the power went out; they worked till it got dark and still had to tell people to come back the next day.

"I think one of the saddest things for me," said Rob, "is the last few days we were there, we already had all of our surgeries booked. The last two days or so people were coming in with big cataracts and we basically had to turn them away. If we stayed there another week we could probably take care of them." He paused, then said, "I don't know how long we'd have to be there."

Two Stories

From January 25 through February 4, the MMI eye project saw 1629 patients (1459 adults and 170 children). Ten children (age 18 and under) and 151 adults underwent surgery. This included 102 cataract extractions and 11 surgeries to correct strabismus (crossed eyes).

Here are the stories of two of these patients, as told by Rob and Larissa:

Wendy's story, told mostly by Rob: One girl came through the clinic, and she had really severe crossed eyes, they were actually criss-crossed. As soon as I saw it, I thought, oh, I hope we can fix that.

She was a 15-year-old girl and she was very self-conscious. She just looked at the ground continually—she wouldn't look you in the eye or anything. Everybody at the clinic was saying, "Oh, boy, we've got to fix that."

And then what happened was that surgeons need to make decisions on who to do surgery on. The clinic called up surgery to see whether we should do this one, and they sent a couple of interns down to see.

And after they checked her, they made the decision not to do it, because it was cosmetic and it really wouldn't help her vision. I was kind of shocked. One of the ophthalmologists who actually saw her had told her he could probably fix this, and so she was all excited.

I wouldn't want to have to make the decisions that the interns had to make. This story really shows how difficult it can be. I mean, if we did this surgery, you're talking about a cataract that wouldn't get done. And the translator had a rough job, too. She had to tell them we couldn't fix it, and the girl was just devastated. So they left.

And when the ophthalmologist found out about it, it was like, no. He called the surgeon up at the hospital and said, "I really think we need to do this."

And the surgeon said, "Well, let's do it."

But Wendy and her mom were gone. Somebody went running down the street and found them and told them that we could do the surgery. She came back to us really excited about it and we did that surgery.

Susanna Sheats, a nurse living in Nicaragua who translated for us, talked with Wendy quite a bit. She found out that the girl and her family went to church in San Carlos, and Wendy told her, "I've been praying for a long time that I could get my eyes fixed and it cost too much money in Managua to get it done."

This was a real answer to prayer for her. The next day when they were getting ready to operate, Susanna asked her, "Are you ready?" And she said, "Well, I'd like one thing yet. Can we pray before the surgery?"

The whole surgical team gathered around her and prayed together. She just kind of captured people's hearts.

Antonio's story, told mostly by Larissa: Antonio was a 14-year-old boy who was sword-fighting with sticks.

(Interviewer, a mother, interrupts: "Oh, no! Don't do that—You'll poke your eye out!")

He did! He poked his eye out. The stick perforated his eye, anyway.

Antonio and his dad rode for an hour on horseback and then four hours by bus to get to the hospital. They had no clue we were there. If we hadn't been there, they would have had to remove his eye. That's what Vivian, the surgeon, said.

He came in during the afternoon and they would've been finishing up with surgery. But they didn't want to allow him in surgery right away, because they wanted him to get more food out of his system.

So Vivian went back in at 8 or 8:30 that evening to do surgery on his eye. It had multiple perforations—jagged tears—and I don't think she got out of there till 11:30.

(Interviewer, who is terrified of eye surgery, interrupts again: "How do you fix something like that?")

You stitch it back together. And they re-inflated it with fluids. It had lost all its fluid and was flat. I saw it after surgery; they have to stitch it back together and it has to hold liquid.

They saved the eyeball but they don't really know how his vision will be until it heals.

We had a guy on our team who had a glass eye! He told us funny stories about it...

(Interviewer: "Stop there.")

A question for Rob and Larissa: What would you tell Americans about this experience?

Larissa: If you get the chance to go out of the country, do it.

Rob: It's really hard to get it, being here. You know, we read the stories of poor people and what it's like in other countries and it just kind of slides off.

Larissa: You need to experience it.

Rob: I think if this article could encourage people to either go or support young people who have the opportunity to go, it's well worth it. Because it changes your whole view of the world and how God loves people everywhere and not just here. We could see God working down there....

A question for Rob: Why did you commit to taking each of your children on a mission trip?

Rob's answer: I hope my children develop a compassion for the world and a desire to change it through Christ. I want them to see it from another perspective. I want them to understand the privilege and wealth they have in this country. I hope that it will help them answer the big questions about what they might want to do with their life. I hope they don't just settle for the American dream, but have much bigger



It wasn't unusual for 100 people to be waiting in line when the clinic opened up each morning.

ideas of how God might want to use them.

I'm not even sure I know exactly why, but simply that I felt prompted to do it. I really don't know how God will use it.

A question for Larissa: What has changed in you because of this trip?

Larissa's answer: This trip helped me to discover my passion for Latin American culture and serving God in other countries. It opened my eyes to the affluence of American society compared to the rest of the world, and also made me work out of my comfort zone, trying things I wouldn't normally try. I'm eager to see how God will use me in the future.

And what about next year?

Eye project mastermind Levi Miller is already planning for next year's medical mission trip to Nicaragua. If you want to know more about it, contact

him at levicora@juno.com, or call him at 740-845-1439 or 614-286-0171. Levi also suggests you check out the video at www.mmint.org. **BB**



Susanna Sheats, a nurse living in Nicaragua who helped translate for the team, poses with Wendy after her surgery.

Vicki Sairs is communications coordinator at Rosedale Bible College. She attends London Christian Fellowship, where Rob Swartz is lead pastor and Larissa rocks out on the drums.