A Narrative Summary About My Experience in Belize

By Katherine Leiter

My journey to Belize happened by chance. After learning about the R25 travel grant I started searching for programs and countries that would work with the grants specifications. I started out my search at the public library, with a stack of study/volunteer abroad programs. Several hours and book later I found one program that would work: Pro World. Pro World offered a variety of volunteer the opportunities around world. I narrowed my placement choice to Belize because it was the most affordable program fee and flight.

**History and Culture of Belize**

Belize is a relatively young country, gaining its independent from England only 29 years ago. According to my host father, the Belizean is flag is the only country in the world that pictures men. The flag depicts an early European settler and a Belizean working together to log the mahogany tree, Belize’s original economical resource. In the Latin the flag’s inscribed with the phrase, “sub unbra floreo”, which implies “under its [tree] shade we flourish”.

Unfortunately, because the industry did not replant many mahogany trees, the industry was short lived. Today, Belize plants more teak trees for export because they mature in half the time. Until the 1960’s Belizeans were hired to go into the jungle to collect chicle, which used to be the main ingredient for to making chewing gum (where the name Chiclet gum comes from). Today Belize’s greatest source of income comes from agriculture. According to locals, San Ignacio can grow all fruits except apples and grapes.
The second greatest source of income is generated from tourism, especially in the coastal areas.

Locals call Belize a country with an “identity crisis” because it was occupied by the English it does not share the same Spanish history as the rest of Central America and it not an island like the Caribbean. Initially Spain was not interested in Belize because of its swampy coast and lack of valuable resources. In approximately 1750, the territory came under dispute when Spain found out that the English was profiting off of the mahogany from Belize. Disputes over the territory continued until The Battle of St. George’s Caye (in 1798) when the English and Belizeans officially won the territory from Spain.

Belize considers itself a “rice and beans” culture made up of several distinct groups of people. For example when I asked what a national food dish or dessert would be I was told it would depend on which district I was in. In the south you would be served more fish and Creole influenced dishes, whereas in the north more poultry and Spanish dishes. Two popular dishes I had the opportunity to enjoy in the Cayo district were cow foot soup and pig tail.
Mennonites arrived in Belize around 1960. According to my project coordinator, Ronnie Leiva, the Belizean Mennonites fled from Mexico to avoid being forced to go to school, which is against their religion. There is two different sectors or communities of Mennonites: the traditional Mennonites, who shuns the use of technology; and modern Mennonites that embraces technology and industry. The two sectors of Mennonites live just outside of San Ignacio in Barton Creek and The Spanish Lookout. I had the chance to drive through and shop in Spanish Lookout, which is home to the modern sector. The Mennonites in this community have become known for their small industrial businesses. Industries I noticed on my drive through the community were big farms, merchandized stores (tires, office supplies, home goods, food, etc.), and ice cream. WD’s ice cream is sold throughout the country and was the only ice cream produce I found in San Ignacio.

Taiwanese are another large group of people that have settled in Belize. Taiwanese began to flee to Belize when Japan invaded Taiwan just before War World II. Taiwanese families own a large majority of the grocery stores and shops in San Ignacio. Leiva reported that it is easier for the Taiwanese to do business with the United States in Belize because they recognize Belize as a country, but not Taiwan. Levia also reports that most Belizeans refer to the Taiwanese as Chinese, which is not politically correct.

Belize is a laid back culture that enjoys going about things at their own [slower] pace. In Belize this is referred to as “Belize time”. A popular Belizean saying is “leave it for tomorrow, but start it today.” It is not uncommon for a professional
meeting to start 30 to 40 minutes later because no one is there on time. Because of this you might want to have someone you trust or a non-Belizean pick you up and take you to the airport!

Although Belizean are very welcoming and generous people, who often offer food and drinks to visitors, they also tend to be very blunt. For example my host father said he is trying not to ask the new volunteers when they are leaving because he realizes this blunt and to the point question is viewed as being rude to most Westerners. Leiva reports it is very common to bring attention and question a stranger’s physical deformities and even give them a nickname based on it.

**San Ignacio**

San Ignacio is a beautiful small town located in the highlands of the Cayo district. The eastern boarder of Guatemala is approximately a 30 minutes drive from San Ignacio. It is considered to be a “sister town” with St. Elena. The two town are separated by the Macal river. St. Elena is considered the “rougther” of the two towns in terms of crime rate and aesthetics. San Ignacio has many small grocery stores located on almost all main streets and side streets. Burns Avenue is the town’s main shopping street.
Just south to Burns Avenue is the town’s market, which is fully opened on Saturdays. Saturday market looks like a farmers market combined with a flea market. At market I enjoyed a local breakfast of Sambols and a Coke-a-cola (without high fructose corn syrup). I also purchased some local favorites including a star fruit, two coconut crusts, fresh okra, and a couple plantans. In addition to my food purchases I bought two small baskets directly from the weaver for about $15 US.

San Ignacio is the home to one of the countries smallest Mayan ruin, Cahal Pech. Cahal Pech is a self-directed tour that takes about an hour to complete. Entering Cahal Pech lend to the realization of being in the jungle—with huge vegetation and insects! Just up the road in the town of Banque is a larger temple by the name of Xunantunich. Here I had the amazing chance to hear and see several holler monkeys. At first it was quite scary because it sounded as if a lion or tiger was really close by!

Entertainment in San Ignacio includes bars, karaoke competitions, a casino, archeological sites, and some shopping. The town no longer has a movie theater.

**Getting Around the City**

Getting around the city is fairly easy with the exception of there being very few street signs and house numbers. The city of San Ignacio is located in the highland region of Belize, therefore the layout of the city is in the mist of number of large hills. Because the city of San Ignacio is fairly small, I got around mostly by foot. However it was easy to catch a taxi, which is identifiable by having a green license plate. It was also easy to take the bus to locations outside of town. Another option I had to
get around town was catching a ride in the back of a truck, however I never did because the driving in Belize is a little more haphazard than I was used to in the states. For example the country’s highway is single laned road with no signs or lines indicating upcoming hazards. I crossed a number of small bridges that had no guard railing. People there have the saying “you drive on the better half of the road” therefore zigzagging car rides were not uncomment. I don’t think speed limits are set or enforced.

The primary language spoken in Belize is English, however most Belizean also speak Spanish or Creole.

American money is accepted throughout the country. Currently the American dollar is at a $1 US to $2 BZ transaction rate, making money conversions very easy.

**Home Stay**

The family that I stayed with consisted of a married couple and their two sons, ages seven and seventeen. This was my first opportunity staying with a host family, whereas my host family had hosted over 60 students and volunteers before I arrived. My family reported that they have worked for Pro World since it began operating in Belize six years ago. My host mom reported she doesn’t do it for the money, which is approximately $12.50 US per day, but does it because she enjoys the female company and see the experience having a positive influence on her family, especially her youngest son. She contends her sons large vocabulary is directly related to spending time with the volunteers she hosts. During my stay they also were housing a Pro World study abroad student who will be there until the middle of December.
My house was located in town, approximately 15 minutes downhill from my project site. I had my own room, which included a dresser and a fan (which is a must!). I shared the bathroom with the family and student roommate. I was given the option of three home cooked meals a day, but usually ate only breakfast and dinner at home and had lunch at my project site. Belizean breakfast and dinner meals tend to be very large and heavy. Most meals consist of meat, rice, beans, and tortillas (flour or corn). My host mom reported if you are underweight in Belize you are considered to be sick.

Just before my arrival my host family found out they had received a green card from the states. They had lived a short time in Florida about eight years ago and dreamed about going back. My host mom described the states as being “open to every kind of opportunity” and “skies the limits”. I found that my host family watched a lot of American television stations including MTV, Lifetime, and Cartoon Networks. I didn’t realize post traveling that they see all of the states television including commercials. My younger host brother didn’t understand that he couldn’t go to Burger King or Chucky Cheese for his birthday party because it wasn’t in Belize. My host dad said he used to dream of going to Home Depot because of seeing so many commercials.
Project Site

Pro World placed me at Octavia Waight because of my background in occupational therapy. The center is situated on approximately 2 ½ acres just outside the metropolitan area of San Ignacio. Octavia Waight is one of the countries few home for seniors Belizeans. Facilities like Octavia Waight are not common because most Belizean believe it is their role to care for their family member. Octavia’s mission statement is, “to provide the elderly with an environment that enhances dignity, self-esteem, and physical and mental well-being”.

The center accommodates 24 residents and provides meal and medical services to elderly in the community. Operation funding comes from the government, family contributions, individual and organization donations, and fundraising.

At Octavia Waight I worked closely with Dorothee Roth, a retired nurse who has volunteered at the center for the past 12 years. Dorothee provides nursing care and physical therapy three times at week (Monday, Wednesday, Saturday). Dorothee was instrumental in converting Octavia Waight’s garage into a therapy room eight years ago. Her knowledge of physical therapy comes from years of physical and occupational volunteer therapist and students. In addition to managing the medical and physical therapy needs of the residents, Dorothee also provides home visits to any elderly in the community that needs medical assistance. According to Dorothee there is only one physical therapist in the Cayo district and lives about 40 minutes from San Ignacio.
Dorothee reported that the physical therapist $60 BZ per hour fee is too much for most Belizeans to afford.

My daily duties at Octavia Waight included patient care (dressing and feeding), conducting physical therapy activities (upper and lower extremity exercises/walking), engaging the residents in mentally stimulating games and activities, and helping with any low level medical assistance (blood pressure, topical creams, edema care). Other responsibilities at the center consisted of going out into the community to deliver “Meals on Wheels” to seniors in their home, making medical home visits, and helping to manage residents on community outings, such as visiting the local Mayan ruin, Xunantunich.

Pro World allots each volunteer $100 US to spend on project site. Half of the money went to a kitchen mixer, which the director of the facility informed me was a primary need for the center. I chose to spent the rest of the money on objects that could exercise physical and cognitive function. These items included a magnetic white board with magnetic letters and numbers (reaching and ordering task), squeeze balls (strength and hand opening), lego blocks (fine motor and strength), and art supplies.
Safety

I felt safe in all contexts, however I did exercise caution in accordance to locals’ advice. For example my host family reported that it was unsafe to walk alone after 9:30 because people would be starting to go to bed. My first week in San Ignacio I heard a few scary stories about robbery, murder, and rape, however I found that the perception of “safety” was very subjective and varied depending on who I spoke with. Belize City is the most dangerous city in Belize with murders reported daily. Locals I spoke with contend that the criminals in Belize are people who were send back to Belize after spending time in American prisons.

May to November is hurricane season in Belize. I experienced a few topical storms, but luckily did not get the effects of a full hurricane. San Ignacio’s inland location helps protect it from the bulk force of the costal storms.

I did not get sick eating or drinking prepared food in the community, at my home stay, or at Octavia Waight. A local reported that the Cayo district has the cleanest water in all of Belize. I primarily drank purified water, however was not afraid to used tap water to brush teeth and to wash fruits. I did not hear of any volunteers or students that became ill because of the food or water.
There are very few homes, store, or restaurants that are air-conditioned. Most homes have bars on the windows for safety, but lack screens. My host family informed me to keep my windows closed during the day and early evening to help decrease mosquitoes from nesting inside. A few months prior to my arrival the Ministry of Health had issued a warning for dengue fever, which is a sickness transmitted by mosquitoes. A high number of cases were reported in the Cayo district.

My only concern while in Belize involved vehicle transportation. Most roads are not paved, therefore are often uneven and bumpy. Belizeans all agree that you driver on the better section of the road, which usually involved zigzagging back and forth to each side of the road at top speed. Passing on narrow single laned roads is very common.

**Diabetes and Built Environment in Belize**

At Octavia Waight I estimated over 70% of the residents and home-visit patients as being diagnosis with diabetes. Approximately five of the residents I worked with had diabetic conditions that resulted in blindness, amputation, or immobility. On several occasions in the community I heard stories of family members struggling to manage their diabetes. Granted I have not worked with this population before, but the number of cases I encountered shocked me. The nurse I worked with contended that diabetes was so common in Belize because of diets changing from primarily corn based to flour. Although I believe that to be partly true, I think more than just the diets have changed. Contributing factors I observed included heavy evening meals, with high intakes of carbohydrates (sugar), moderate to severe alcohol consumption, high amounts of television (sedentary), primarily vehicle transportation, economical stress, and limited
healthcare education. According to the article, “Built Environments and Diabetes,” type 2 diabetes is greatly influenced by a person’s environment. A build environment is a

termed used to define, ‘environments modified by humans, including homes, schools, workplaces, highways, urban sprawls, accessibility to amenities, leisure, and pollution.’

The article implies that built environment inadvertently contributes to diabetes by producing limited access to physical activity (Pasala, Rao, & Sridhar, 2010). The impedance that built environment plays on physical activity is related to the distance between places, steep slopes, and community safety (Pasala, Rao, Sridhar, 2010). Similar to my observations, Pasala et al note lifestyle and social context also play into the high prevalence of diabetes. Pasala et al states that limited socialization with neighbors is an indicating factor for obesity and diabetes. In relation to that concept was my observation of cell phone use and actual time spend engaging in social activities. Although I did see groups of young people gathered outside, I saw a lot more cell phone use. This suggests to me that there isn’t as much of a need or reason to arrange social meeting outside of the home, especially for adults who can afford to have a cell phone. Similar to the states, cell phones have become a priority in Belize, therefore it is assumed that cell phones hold social status and connection. In addition the “cell phone socialization”, I learned from a local Belizean that the popularity of cable television in every home consequently resulted in the closing of the town’s two movie theaters, thus eliminating another opportunity to socialize outside of the home. Although I did see how built environment factors into an increased incidence for obesity and diabetes I also think there is more of a cultural and behavioral component. For example San Ignacio is a town easily manageable my foot, however I observed few adults to walk. Interestingly, I identified every other car to be a licensed taxi with customers. The one time I did take a taxi I found it to be costly for the amount of time it took me to arrival at my destination ($2.00 US for approximately a 2-5 minute drive). The Pasala et al article cites the NHIS in finding that certain built environmental constructs, such as, sidewalks, streetlights, interconnectivity of streets, and population density helped with physical
activity (Pasala, Rao, Sridhar, 2010). Perhaps the lack of these constructs contributes to what I observed in San Ignacio. I found the lack of interconnectiveness of streets and sidewalks to be very frustrating. I also found it nerve-racking to walk on some roads because of high amount of traffic and [dangerous] style of driving. Despite the finding of Pasala et al, I did not find neighborhood parks to be utilized that frequently. During my walks I encountered three neighborhoods parks and a track that were always vacant during after school hours (3-4 PM). Another observation I made was that women seemed larger in than men. I wondered if this was because women primarily worked at home. When I asked two local men separately if their wife’s worked, both responded, “no, they are lazy and don’t work”. I argued that if they took care of the home than they did a lot of work, however the men did not agree. Most adults I encountered in Belize viewed drinking alcohol as a relaxing evening and weekend activity. Interestingly when I was at a bar I didn’t see that many Belizeans customers.

Lastly, from what I learned from my host mother and the nurse at Octavia, there is little to no preventative care education or facilities in San Ignacio. I saw two billboards encouraging exercise, but one was so faded it was hard to read. Just this past September was the opening of the Belize Diabetes Association in Belize City. The purpose of the association is to inform and educate the public, provide a support group for people living with the disease, and to offer some testing. The association president, Anthony Castillo, reports that 13% of Belize’s adult population is living with diabetes and is not educated about their condition (http://www.lovefm.com/ndisplay.php?nid=12673). According to the article, “Challenges in Diabetes Management with Particular Reference to India,” “patients’ lack of knowledge about diabetes care can impede their ability to manage their disease.” The recent opening of the Diabetes Association is a change in the right directions. The next step in improving the control of diabetes is to reorganize health care services to provide better delivery systems, including improved patient self-management, supporting and educating physicians to make appropriate clinical decisions through
information flow, and by creating a support system between health care provider and organizations that can provide patient care (Venkataraman, Kannan, & Mohan, 2009).

References
