A Glance Into the Nursing Profession

Cathy Hernandez is a nurse who works with the migrant community in Adams County PA. She works with the Lincoln Intermediate Unit during the day, where she gives physicals to migrant students, and keeps records of their past medical history. Cathy works with all the migrant students, not only in Adams County, but in about six other counties as well. On every other Thursday Cathy also volunteers her services at a free health clinic called Mission of Mercy. This clinic is open to anyone who needs medical attention. Everyone who works at Mission of Mercy volunteer their time and energy to help these less fortunate people. AThere are a lot of people in this area, not just migrants, who do not have any type of medical care, so Mission of Mercy is very dear to me personally because it just provides a wonderful service to the community, @ (Cathy Hernandez). Cathy Hernandez is the type of women who gives herself completely to the people who need the most help. She does this, not because she thinks that it is the right thing to do, but because it is a passion inside her. The passion that she has for her job is seen in her eyes when she makes a connection with her patients, the way that she touches the patients to let them know that she cares. The fact is that she dedicates her life to her practice and her clients. One time I saw this passion come alive when she was working with a little boy who was getting a physical. The little boy was nervous, but she looked at him with clear, calming eyes that put the child at ease. A connection was made between the two of them, and from that point on she had gained his complete trust.

Cathy also works at a migrant health clinic on Tuesday nights. This clinic is only for the migrant community. It is at the clinic where I have really seen Cathy=s true side come out. Cathy is so caring and compassionate when she deals with her patients. She wants to make some type of connection between her and the patients. She really tries to get to know her patients in the short time that is available for her to work with the people who come into the clinic. Al do work in the migrant clinic in the evenings and for me that=s one thing I always try to remember, where I have come from and where I am now. So, for me when I=m seeing the patients it (is) real important for me to convey to them that they are important, that their issues are important, I like to touch my patients, I really like to convey to them that I care and that they are important, @ (Cathy Hernandez). Cathy=s job and passion for her work is truly amazing, but the one thing that genuinely impressed me was her life before she was a nurse.

Cathy Hernandez grew up in a family where her health care was not the best in the world, but it was adequate. It was not until Cathy married a man who was a migrant, and became a migrant herself, that she found what some people went through. ANo, as a migrant, back when I was a migrant, heath care was terrible, and I felt like a second class citizen, (a) (Cathy Hernandez). Cathy was able to go through the rigors of having insufficient health care for herself, but it was when she had her children that she knew

things had to change. Cathy would tolerate the harsh treatment that was directed her way, but she would never let her children be apart of that way of life. Al really felt like I was looked down upon and like I was a nonentity, I wasn=t important, and then for me as I had my children, it was one thing to tolerate that kind of treatment for myself, but when I had my children I **wouldn=t** tolerate it,@ (Cathy Hernandez). Cathy did not stand for the way she was treated and actually did something about it. She withdrew herself and her children from the migrant health program, and began to take her children to a private physician. The physician was expensive, Abut rather than being treated that way and humiliated I would have rather taken my kids to a private doctor or even the emergency room, than to have felt the way that I did as a migrant heath participant,@ (Cathy Hernandez). The act of pulling her family out of the migrant health program because she did not want her children to go through the suffering that she went through, shows a lot about her character. It not only shows a great deal of love for her children but an incredible amount of strength and courage.

In 1986, Cathy Hernandez was one of fourteen people who graduated from the Center of Human Services High School Equivalency Program. Cathy earned her G.E.D. and graduated valedictorian from her class, obtaining the highest score on her G.E.D. exam. Cathy went to Shippensburg University and received her nursing certificate. Cathy has just now decided to go back to school to become a resident nurse. Now she spends her days working with the people who are in the place where she once was.

When I first step up this internship I thought that I would be working with the people everyday, and doing Ahands on@ work, but my first day at Lincoln Intermediate Unit told me that it was not going to be exactly what I thought it would. In the beginning part of my internship I did mostly filing and looking over forms. I did not really understand what Cathy wanted me to do and why I was really there. Then I started having conversations with Cathy and that was when my internship took off. Cathy suggested things for me to do and people to talk to. I started going to a heath clinic every Tuesday night. This clinic was for migrants only, and there were certain qualifications for it. You could not be treated at the migrant clinic if you did not move and when you did move it had to be in order to pick fruit. We saw a lot of people coming into the clinic and saying that they were going to be moving in a month or so, but it was to go back to Mexico to see their families. These people did not qualify. The migrant clinics were interesting to go to because it gave me an idea about who were the type of people who went, what age, and which gender. It really interested me to see that some of the teenagers who came into the clinic alone, were mainly turned away from receiving medical care. That disturbed me because I began to wonder where these children would go for medical attention. They were only seen one time at the clinic and then they would not be seen again because they were not migrants.

The next thing that I started to do was go the Mission of Mercy clinic every other Tuesday. This was also very interesting for me because it was a different aspect of health care than the Tuesday night clinic. The Mission of Mercy was for anyone who could not afford or receive any sort of health care. All types of people came in to the

clinic, but some of the people, I would say about 40%, were Hispanic. There were no forms that the people had to fill out, only a medical history form. They never checked a person to see where they came from or what they did for a living. They just gave them the attention that they needed. I helped people fill out forms and register to see the doctor. I was also able to look at people=s ex-rays and see what exactly was wrong with their teeth. The Mission of Mercy was very good for me to go to, but unfortunately I was only able to go to two of them because the first one that I was going to go to was canceled. This made me really think because there were people who use this health care as their only source of health care. When the clinic was closed some people had to wait another two weeks before they could see a doctor or dentist. I can not imagine if someone had a really painful problem that they were dealing with and they figured that they could handle it until the clinic, but then found out that the clinic was canceled. Everyone who had made an appointment for that week were rescheduled, but still that was two weeks away. What about the people who are walk in patients? Many people believe that the clinic will be open every Thursday and plan on making time out of their day to go and see the doctor and when it is closed they waste their time. If the Mission of Mercy knows how much people depend on them, then it would seem to me that they would try their best to make sure that they were at the places they were supposed to be at every week.

The last thing that I did was to go recruiting for migrant health. This was the most interesting part of my internship for me. Cathy, Bonnie, Mary, Alicia, and I went out into the camps and made people aware of the clinic on Tuesday nights and even treated people who only had minor problems. It was so interesting for me to see how the migrants responded to the nurses who came into the camps, and that the migrants were so interested in knowing if they were in good health. The first time we went recruiting we went to about five or so camps. Most of the injuries were work related. For example, a man had fallen off of a ladder, and another man was waiting to receive eye drops because his eyes were becoming irritated because of the pesticides. I helped the nurses and doctor by passing out forms and trying to find the right drugs that they wanted to give to the patients, although, I have to say, finding the right drugs to pass out was not my forte.

Working with the women at migrant health has taught me a lot about the health care system for migrants and nursing. They have showed me a new type of profession that I had never given much thought. Before I worked under Cathy Hernandez, I took the nursing profession for granted. I did not fully understand what nurses were there to do, and what they have accomplished for themselves. Working under Cathy has also showed me that a women who is very independent and head strong also has a softer side. Cathy cares for people all day long, letting them know that she cares about their problems and taking time to help them because she was not shown that when she was a migrant. She takes care of her family because she does not want them to feel as though they were invisible like she felt she was. Cathy has shown me that it is the little things that you do that make you the person you are, and that is something I never would have thought I would have learned through an internship in migrant health care. I

have also learned about myself. I learned that there is a certain type of woman I would like to strive to be. I want to be the type of woman who respects herself and the career that she has chosen for herself, but I also want to be able to show a softer side. I want to be a caring and nurturing woman, as well as a headstrong and self reliant woman. These were qualities that I saw in the women who I interned under, and I hope that I will be able to carry them with me throughout my life.

Bibliography

Achterberg, Jeanne. Women as Healer. Shambhala, Boston, 1990.

Apple, Rima. Women, Health, and Medicine in America. Garland Publishing, Inc. New York. 1990.

Hernandez, Cathy. Personal Interview. October 8, 1998.

Johnson, Jone E. AFlorence Nightingale. @ May 1996.

Lewenson, Sandra Beth. Taking Charge. Garland Publishing, Inc. New York, 1993.

Melosh, Barbara. The Physician=s Hand. Temple University Press. Philadelphia. 1982.

National League for Nursing. History. New York, 1997.

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