KUMASI, GHANA & PARIS, FRANCE



Tyrel Foster

Program: Global Public Health in Ghana and Paris, Summer 2017

Major: Medicine



Earning the Research Experience Badge:



I worked with a team of mixed Komfo Noche University Teaching Hospital students and U students. The project was led by Dr. Daniel Ansong who is now the dean of KNUST. He has found that respiratory illnesses are often associated with biofuel use in the home and wanted to know what the relationship was here

in Ghana. We went into several communities and surveyed individuals to find out what biofuels, if any, they were using and what respiratory illnesses, if any, they had.

Household air pollution from cook stoves and unprocessed biomass use has been found to increase the risk of acute lower tract respiratory tract infections (ALTI) among children to about 78% and contributes to about half a million mortalities among children. There is a strong correlation between the particulate matter (PM2.5) from smoke of cook stoves and ALTI. ALTI is the leading cause of mortality among children in rural Ghana with Pneumonia being the highest. Very little research work has been done in Ghana to evaluate the knowledge, attitude and practice on household use of biofuel for cooking and the significant burden of acute respiratory tract infections. This study aims to elucidate any correlations specific to Ghana.





I worked with Dr. Daniel Ansong and his protege, Dr. Osei on a respiratory health and biofuel study. They taught me about local customs and how the health care is delivered in Ghana. I also learned about education in the public healthcare system and how one passes it on to the local individuals. There was a part of my research that required us to

gather community members together to have a group discussion. We had to work with two separate individuals in order for this to happen. One was Dr. Osei and the other was a man named Marfo. Marfo had the job to contact the community leaders and communicate what it was that we were going to be doing. Dr. Osei informed him of the size and duration of the group discussions. Marfo informed us that local customs required us to bring some form of drinks for the individuals after the discussion took place. Myself and others in my group never would have been able to get the community chiefs' approval for such meetings to occur, nor did we know about the cultural requirements for drinks. This taught me that working with local people is a necessity when one is working out of his or her own culture.



"Being able to see the evolution of the medical system in France juxtaposed with the experience of the developing country of Ghana's medical system was an invaluable experience. I gained numerous professional contacts and lifetime friendships, as well as the research experience to be a more effective clinician."



