



Pre-Physician Assistant Internship Program

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Transformation Through Service: Reflective Analysis of My Internship with International Medical Aid

For as long as I can remember, I have felt a deep desire to serve in Africa to contribute to healthcare in a place where the need is great and the impact can be life-changing. However, for many years, I was unsure how to turn that goal into a reality. I didn't know where to begin or what that path would look like. My internship with International Medical Aid (IMA) in Kenya provided me with that long-awaited opportunity. Over the course of five weeks, I was immersed in a healthcare system vastly different from what I had previously known. I transitioned from working in urgent care in America, with unlimited resources and typically facing illnesses like Influenza, Pneumonia, Streptococcus, to Coast General Hospital, where resources were sparse and new diseases that I had never seen before, like Malaria, Cholera, dengue, and tuberculosis. I anticipated I would face malaria due to us interns having to take antimalaria prophylaxis during our stay. Malaria in Kenya is caused by Plasmodium parasites, most commonly Plasmodium falciparum, which are transmitted through the bite of infected female Anopheles mosquitoes. After a bite, the parasites first travel to the liver where they mature and multiply, then enter the bloodstream and infect red blood cells, leading to the onset of symptoms. The disease often begins with flu-like signs such as high fever, intense chills and shivering, headaches, sweating, fatigue, muscle or joint aches, and sometimes nausea, vomiting, or diarrhea. If untreated, malaria can progress to more severe forms, particularly in young children and pregnant women. Severe symptoms include anemia, difficulty breathing, jaundice, seizures, confusion, or even coma due to cerebral malaria. In some cases, multiple organ failure, which can be fatal without medical attention. Malaria is widespread in Kenya, with transmission peaking during the rainy seasons when mosquito breeding increases, and it remains a major health concern across much of the country. "(World Health Organization. 2023). Malaria in the African Region: Kenya. World Health Organization, Regional Office for Africa." This experience challenged me academically and emotionally, exposed me to both the beauty and the hardship of global health, and ultimately helped me discover clarity in my professional and personal journey. This reflection explores the clinical knowledge I gained, the emotional toll of working in an under-resourced environment, the individual healing I experienced, and how it all solidified my commitment to becoming a compassionate and globally-minded Physician Assistant.

One of the most complex and unforgettable experiences of my life happened during this internship: performing CPR on an infant for the first time. Despite our efforts, the baby could not be saved. I was the one who had to tell the mother that her newborn had passed. Moments later, I was handed the lifeless body and told to "place it on the shelf" for the morgue to retrieve later. The nurse tried to

reassure me that the baby had endured asphyxia during birth and that the baby would have not had a good quality life due to brain damage and developing cerebral palsy. That moment shattered something in me. It was cold and deeply unfair and yet, it was a reality for far too many families here. No words can truly capture how it felt to hold that lifeless baby in my arms, or how helpless I felt knowing that in another country, with better access to care, that child might have lived. Cerebral palsy that develops after birth as a result of asphyxia is caused by a lack of oxygen and blood flow to the baby's brain during delivery. This oxygen deprivation, also known as birth asphyxia or hypoxic-ischemic encephalopathy (HIE), damages brain tissue, particularly in areas that control movement, posture, and coordination. The injury is permanent and does not worsen over time, but the effects can vary depending on the severity of oxygen loss and which parts of the brain were most affected (Seattle Children's Hospital, n.d.). The symptoms of cerebral palsy following asphyxia often appear within the first few months or years of life. Common signs include delayed developmental milestones, such as difficulty holding up the head, sitting, or walking. Children may show muscle stiffness or spasticity, making their movements appear rigid, or the opposite, low muscle tone, where their body feels floppy. Other symptoms include poor coordination, involuntary movements, and difficulties with balance and posture. In more severe cases, children may also experience problems with speech, swallowing, vision, or hearing. Seizures and intellectual disabilities can also occur depending on the extent of the brain injury. Overall, cerebral palsy after birth asphyxia results from permanent brain damage due to oxygen deprivation, and the symptoms typically center on motor difficulties and developmental delays that vary in severity from child to child. "(Seattle Children's Hospital. 2025)."

Yet even in the heaviness, there was light. When we visited schools to teach hygiene and promote health, the joy in the children's faces was overwhelming. The young girls looked up to us with wide eyes, fascinated and ecstatic to touch my long blonde hair for the very first time. They danced, laughed, and hugged us as if we had known each other for years. In their embrace, there was no barrier of culture or circumstance, only shared humanity. They clung to us with a sense of trust, finding safety in our presence. For a moment, the weight of poverty, disease, and hardship disappeared, replaced with laughter. It was in those moments that I remembered why I chose this path, not just to heal the body, but to connect, to educate, and to serve with compassion. Their joy reminded me that even in the most challenging environments, hope persists. These children had so little by material standards, their uniforms were often ripped or dirty, yet their capacity for happiness was abundant. They taught me that healing isn't always about medicine or procedures; it is just as much about kindness, presence, and human connection. Walking away from those schools, I carried with me the realization that healthcare is not only about addressing illness, but it is also about empowering communities, instilling knowledge, and creating bonds of trust.

I learned many different things and saw a lot of intriguing things such as the surgery to reverse hydrocephalus: Hydrocephalus is a condition caused by an abnormal buildup of cerebrospinal fluid (CSF) within the ventricles of the brain, leading to increased pressure inside the skull. This occurs when the normal flow or absorption of CSF is disrupted. Common causes include obstructions that block the flow of fluid, such as congenital malformations, tumors, or scarring from injury or infection. In some cases, hydrocephalus develops because the body cannot properly absorb CSF, often due to conditions like meningitis, hemorrhage, or inflammation. Rarely, it results from the overproduction of CSF. The condition may be present at birth due to genetic abnormalities or neural tube defects, but it can also be acquired later in life from brain injuries, strokes, or infections (Mayo Clinic, 2023). The symptoms of hydrocephalus vary depending on age, but they all relate to increased pressure on the brain. Infants may show signs such as an unusually rapid increase in head size, a bulging soft spot, irritability, poor feeding, seizures, or delayed development. "(Mayo Foundation for Medical Education and Research. 2023, September 15)."

This internship has not only solidified my goal of becoming a Physician Assistant, it has reshaped the kind of provider I want to be. I want to be someone who leads with empathy, who is prepared for the weight of difficult moments, and who can navigate both the beauty and the brutality of healthcare. I now understand that medicine is not always about saving lives—it's also about standing with people in their most vulnerable moments and being present, even when there's nothing more to be done.

Kenya taught me how to think critically in low-resource environments, how to deliver care with compassion, and how to see patients as whole people, not just cases. It also taught me about the importance of humility, resilience, and cultural understanding in clinical practice. This experience was not easy. It was raw, emotional, and at times overwhelming—but I wouldn't trade it for anything. I am walking away more grounded, more focused, and more committed than ever to becoming the kind of provider who doesn't flinch in the face of hard moments, but instead honors them. Kenya didn't just teach me how to care for others—it taught me how to carry their stories with grace and never forget why this work matters.

On a personal level, Kenya also helped me heal. Before this journey, I carried the weight of depression and struggled to find light in my own life. But in the middle of such profound hardship and suffering, I found strength, purpose, and hope. The joy of the children, the resilience of the patients, and the bonds I built with others reminded me that life is worth fighting for. I left Kenya not only with new clinical skills and perspective, but with a renewed sense of self—one that is healthier, steadier, and more hopeful than the version of me who arrived.

REFERENCES

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