

Elective placements are one of the most exciting parts of every medical student's degree. It gives us the opportunity to travel the world whilst also exploring specialties that we're interested in. The idea of where to travel for elective is something I thought about ever since I started my degree, and I remember talking about it at length with friends as we started to narrow down where we would like to go. I eventually settled on breaking up the eight-week elective into two four-week blocks. My first four weeks were spent in Darwin, from which I flew directly to Manilla to try and observe another country's medical system. I chose to step outside my comfort zone and go somewhere like the Philippines because I wanted to challenge what I had already learnt about modern medicine and see how practitioners applied evidence-based medicine in a resource-limited environment. I thought I would be prepared for the differences and culture-shock that I was entering myself into, but long-story short, I wasn't.

Immediately after landing in Manilla, my internal flight to Iloilo was delayed by 4 hours, which I soon came to realise was not abnormal for the Philippines. It was a long day of waiting around in an unairconditioned terminal, but eventually I landed in Iloilo and arrived at the accommodation I would be staying at for 4 weeks. It was 11pm but still so humid that I immediately turned the air-conditioner on before hopping into bed, slightly nervous about my first day in the hospital the following day.

I spent the first two weeks shadowing the Paediatrics teams in areas like the Emergency Department, the Neonatal Intensive Care Unit, outpatient clinics, and the general paediatric wards. It was at first a shock to see how overcrowded each area in the hospital was. For example, sometimes there were three babies sharing a single cot due to bed limitations. But I was more taken aback when I learnt about the livelihoods of the Filipino doctors. They would work for 36 hours at a time, and only

get one day off every three weeks. It made me feel extremely bad about ever complaining about the possibility of working nights as an intern in Australia.

My final two weeks were on general medicine where I spent most of my time on the wards, but also got the chance to observe the Intensive Care Unit and Emergency Department. This is where I saw the starkest contrast between the medicine practiced in Australia compared to in the Philippines. I quickly came to realise that it wasn't worthwhile talking about how similar presentations are handled in Australia because they do not have the resources or man-power to execute these things. Trivial things such as when to intubate a patient was different. There was no special GCS number where they would intubate patients, where instead it was utilised as more of a prophylactic measure to prevent a further deterioration in a patient. This early intubation was done and deemed necessary because they didn't have the capacity nor staff to observe if patients declined prior to intubating. Another startling thing to observe was that they didn't sedate patients prior to intubating them.

Whilst the time in hospital was busy, there was no time to rest on weekends because I instead wanted to spend my time exploring the Philippines. Iloilo was well and truly off the beaten path of tourists, so it was nice to be able to explore areas locals would travel to, and they were always very accommodating. Weekends were spent island hopping, canoeing, ziplining, lounging by the beach, and taking advantage of cheap food and beverages all with new friends I made throughout my stay. By the end of my four weeks stint I think my body had had enough though, and I was sick for the 2 weeks after returning back to Australia.

I often compare my experience to friends of mine who spent their elective blocks in Europe, mainly the UK and France. I sometimes wonder if I would have enjoyed my time there more, but always catch myself reflecting on what an incredible opportunity it was to see how medicine is performed in a resource-limited setting.

Who needs fresh croissants from Paris when you have traditional Halo Halo or Banana Lumpia anyway?

I want to finish this report by expressing my extreme gratitude to the family and friends of Dr Carl Richard Jackson for their generosity in continuing his legacy. Their kindness enabled to enjoy the experience of immersing myself fully into the Filipino culture. This experience has further cemented my passion for promoting health equality both in Australia, and worldwide. It is great to know that future students will also have this opportunity thanks to the support provided by the contributors of this Scholarship.