Anatomy of a mission trip cancellation: on the cusp of worldwide calamity 2020



The 45th Annual T. Bob's Student Dental Mission Trip provided a textbook approach as how to handle a mission trip that has to be cancelled, even at the very last minute.



It began with 67 people being signed up for the trip to Guatemala for Spring Break 2020, with the main focus to dedicate and inaugurate the new 21 chair portable dental clinic. To set the stage, the basic installations were complete with only a short time of 1 day needed to finalize the dental equipment portable setup installation. Most of the needed supplies were already on site and the facilities were prepared to house the entire group in newly finished two-bed suites along with the old dorms.

It is timely to report the initiation of this new clinic was secured by a \$10,000 donation from the American Dental Association's 2018 Humanitarian Award, Dr. T. Bob Davis recipient, which was designated to the Awardee's favorite charity! What a humbling honor and practical seed for what turned out to be nearly \$200,000 in costs. A generous lead gift of \$125,000 from Dr. Davis's daughter and sonin-law, Mr. and Mrs. Brad Iles, allowed for the beginning construction. Other gifts from dear friends and colleagues made up the remainder. Those included gifts from our long time trip supporters Pediatric Dentist Colleague Dr. Glen Ginter and wife Melinda, Oral Surgeon teammate Dr. Bob McNeill, teammate Dr. Vic Bradford, and a generous mission minded First Baptist Church of Dallas Sunday School Classthe Pathfinders Class! Generous and loving people make things happen all over the world!!!!





On hearing of the impending world crisis of coronavirus, the limitations of travel began to be imposed in the 2 weeks before travel was to be initiated. The powers that be were beginning to recommend against international travel and one dental school indicated anyone choosing to go international would be quarantined for 2 weeks on return. By that time, one-third of the team indicated that they were dropping out. An appeal to the school to request an exception when travel was to a non-banned travel nation was sent early on. The gracious response from the Dean was to process it through appropriate channels.

Within 1 week of travel, another 15% chose to withdraw, mainly because (at the time) of concern for becoming stranded there and not allowed to return to the USA. This was a very valid concern at that point in time. Nonetheless, one half of the team confirmed their plans to proceed and were excited to be going. Final arrangements were sent out for instructions, connections with photos of group members who would need to meet up at the airports without knowing each other prior, times for pick up, and confirmations of responsibilities were sent.

On Wednesday before the planned travel of the groups starting on Friday and ending on Saturday, the threemember pre-team traveled at noontime from Dallas to Guatemala City with no indication of slow down or challenge. On arrival in the GUA airport, only one of the three was randomly selected at customs for a temperature test. The movement through customs was normal and timely. Being mid-afternoon, the team set about going to the venues that needed tickets and pre-arranged knowledge. They ate at the restaurant where the entire group planned to eat on their middle of the next week recreation day. The trip to San Raymundo some 35 miles away took the normal heavy traffic 2 h. Clearly, there was no panic or slowdown in that city. No person had been diagnosed with COVID-19 in Guatemala as of that day. After dinner, the three-member team of Dr. T. Bob, his youngest son Creth (who is T. Bob's Dallas office Business Manager and has been a vital trip set-up and facilitator volunteer), and our new Trip Director Dr. Stephen Sperry met with our Coordinator on Site from the Hospital, Joy Gring (who is a Nurse and has been the liaison between the USA team and the Guatemala people for the entire 10 years of planning these trips). Another USA citizen volunteer who was working that day at the site, not a member of our team, but who was a businessman from the Dallas-Ft. Worth area, sat in on our deliberations as to the current conditions existing in the world, specifically in the USA government leadership public statements.

Those statements were being setup by the news media to indicate further bans on travel and on quarantines from various countries. Since Guatemala had not had their first case of the virus, it felt safe there, far from the crowds, in a 7500 foot elevation during the dry season, in a hospital compound that is geared to caring for sick patients. The new clinic looked fantastic and the exciting possibilities to see hundreds of needy children were so promising. Plans to buy food and needed supplies had been put on hold for pursuing at the last minute, next day.

With normal bed time near but a decision looming over our leadership, we prayed for wisdom and insights to protect all participants from unpredictable harm. All facets of the trip were laid on the table for discussion. It was agreed that we had most of the information needed to make a decision but we were physically very tired from the long day which had started at 3:00 am for our Trip Director Dr. Stephen Sperry. Being exhausted is not the best time to make a major decision! We agreed to sleep before such a weighty decision.

Early on Thursday morning the leaders gathered and put together latest info from several outlets and sources, including advice from some of the ones awaiting our decision. It was decided in the best interests of all the team who had to travel that the prognosis for being able to make a huge difference in the local needy population was severely diminished by the mix of skills that were left planning to come. The clear message from the USA government was that limited travel and quarantines were in the immediate future, even with the afternoon news conference planned by President Trump weighing the outcome in a balance. Consensus was unanimous to cancel the trip immediately.

All five participants contributed to the decision and to the wording of the message announcing the cancellation, which was sent by noon, before anyone initiating travel. In our hearts, we knew it was the right decision, one we felt was being made concurrently by those yet to travel. There was no unusual issue nor any negative to the cancellation, all were in total agreement, a remarkable time under the fine leadership of our new trip director, Dr. Stephen Sperry.



Everyone quickly went to work the rest of the day finishing up the needed dental installation, financial considerations, and future plans. Photos from the outside of the old hospital first floor now include the newly remodeled unfinished out second floor where the new dental clinic is ready for operation. The new stairwell allows a third floor exit for safety to reach the new rooftop patio that has been so fun to previous teams! All plans were reviewed and facilitated by our architect friend Ed Rawls of Dallas.

The "L"-shaped new dental clinic features some remarkably innovative components. Note the portable wooden benches for patient chairs whose design was provided by our teammate Dr. Bob Meyer. With 30 of those we can see a good crowd all at one time. With windows on all sides that open and fans that provide air flow, the year round mild subtropical temperatures do not require heat nor air conditioning.

Note the beautiful view of the center courtyard that has been central to the previous use of the ground floor for our portable dental mission using mainly hospital-based working rooms.

Observe the creative use of three portable sink units, designed by T. Bob and Creth, that can be detached and moved to storage with all the portable dental equipment and furniture in a large secure storage room at the end of the long section of the clinic. This permits the large room to be essentially empty for use as a large gathering room for groups who come to serve or for the local community.

Along the walls where there are windows, a one foot deep continuous wooden shelf is connected level with the window base area for use as placement of all instruments, supplies, equipment, and charts that would normally be on a portable cart. Beneath that continuous wooden shelf, a couple inches off the floor for cleaning purposes, is a traceway/raceway/continuous wooden box enclosure that houses the air lines, water lines, and vacuum lines with exit quick connects at each of the 21 stations (operatories). Access to those service stations is through a metal lid spring lift that can be thumb locked when not in use. The depth of the traceway of 10" with good periodic supports from floor makes this another practical place to rest small equipment, supplies, and items needed to service the operatory. This is another of the innovative components designed by T. Bob facilitating safety/security along with practical utility.

The middle portion of the room's large section and the courtyard isle side of the long section serve as location for all portable carts housing the supplies and service materials. All portable carts/service racks are generally stocked for use and can be just rolled from the storage room to their positions and back when finished. This is an innovative way Creth came up with to significantly decrease the pre-trip time for set-up, which often required 2–3 days preparation. All the vacuum and compressor equipment plus electrical panels are in a new room on the ground floor outside attached midway between the front and back of the long section clinic portion. Security locks provide for access to those very expensive and space consuming plus noisy items.

Being a 2 h drive from the airport, we left the compound at 8:00 pm on Thursday for an overnight stay in a hotel across from the entrance to the GUA international airport. All were in agreement that the rapid changes in world travel would be insurmountable within days. It was!



Next morning an early buffet breakfast at the hotel allowed us to meet with our dear colleague and friend Dr. Estuardo Zachrisson, ADI Central America Regent and Dean of Pediatric Dentistry at the University of Francisco Marroquin nearby the airport. He had arranged for over 50 of his students to join us the following week as they learn how to do portable charity dentistry in the remote areas of their country. It was a sad thing to cancel the mission trip but a necessity in light of worldwide conditions. We had planned to visit their outstanding dental school on the following Wednesday, tour the next door Museum of Central American History and the GUA Zoo adjacent to the airport. Those will be rescheduled for next year 2021.



While in the air, it was announced that Guatemala had identified their first coronavirus-positive patient. On arrival on an uneventful flight to DFW airport, we were fortunate to pass quickly without delay through US Customs, unlike the thousands of people the next day that stayed in line for upward of 5 h in that process. Friday, March 13, 2020, the world had changed, overnight! COVID-19 stories will

permeate history alongside stories from WW I, WW II, and the Great Depression!



Leadership is all about surrounding yourself with people of altruistic modus operandi and the selfishness of human nature generally absent in all involved. The world has seen in this first half of 2020 the necessity of worldwide leadership at its best. Those who follow that lead, who take seriously their own future in context of worldwide impact, and who have pure hearts and motives are the ones who must be put in places of top leadership in all organizations. At a time such as this the very nature of civilization is on the edge of collapsing or coalescing. Civilization means being civil, being civic, and being inclusive of values worldwide. Dentistry is poised to provide some of that leadership in their organizations, in national and international organizations, and in the unorganized world who await leaders they can trust.

The opportunities for dental volunteerism abound throughout the world, locally at one's home base, nationally

in community settings, as well as internationally in numerous countries and in highly varied conditions/locations/people groups. It is not for the faint at heart. It is not for the ones overly concerned about creature comforts. It is not for ones who are inflexible. It is not for the ones who want no risk at all in their lives. Living is a risky thing just as giving of one's self is risky. As with all risks the rewards often match the risks, the challenges often bring out the very best in people. The people served and who serve benefit significantly while the joys of altruistic dental service make a huge positive difference in every life.

Just maybe that as you read this your heartstrings will be touched to start on the path to your first dental mission trip/ opportunity or for those already initiated a new resolve to continue.

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