Climb for a Cause 2019
The altitude of Moshi is 950 meters. We spent the day before our hike driving up old Mosh road with our driver and one of our guides. We visited sites related to the time of German colonization in the mid to late 1800s, including churches and old stone plaques marking gravesites. We also learned about Mangi Meli, the leader of the north of what is now Tanzania, for whom a memorial lies at the foot of the tree from which he was executed in 1900 in front of his people for his role in the rebellion against the German colonial rule.

We walked to the gate of Marangu Route, and made our way slowly up the road, which winds its through corn fields lined with banana trees. Small communities embedded in the hills overlook the verdant valley below. We met children and women carrying loads of wood, even an older villager in his studio, who showed us his instruments and hand-carved wooden and metal artwork. Mitra and Katrin practiced their hiking pole skills, while Majid photographed the eucalyptus trees and colorful evocative flowers. We reached an altitude of roughly 1900 meters before making our way back to the hotel to prepare for Day 1.
Day 1

Our group shared a leisurely breakfast at the hotel while we awaited our guide and team to begin the day. A large vehicle arrived filled with our gear (tents, sleeping mats, food, portable toilet) and all of the members of our team: 3 guides, 24 porters and 1 cook.

We arrived at Machame Gate with an altitude of 1800 meters. While awaiting for our team to arrange for our park permit, we relaxed in an open verandah while observing monkeys fly off branches, preen their young and steal banana peels. We enjoyed a delicious lunch of onion soup and spaghetti. The process of park registration is an involved one. Each porter can carry no more than 20 kilograms. Bags are weighed and contents adjusted accordingly. It was determined that we needed three additional porters, and one of our guides was tasked with the difficult job of selecting them from the large group of hopefuls who had waited since the early morning to be granted the highly coveted work of a porter. While we were the last group to begin the hike, we enjoyed an impromptu yoga class led by Mitra, and a trail all to ourselves.

We spent five hours walking slowly, step by step, deep in conversation with one another, through the rainforest filled with trees hanging thick with moss, dense thickets of fern, and all manner of trees. Occasionally we heard the bay of monkeys nearby.

We reached Machame Camp at 2835 meters shortly after nightfall—over 1000 meters of ascent in 5 hours. The camp has roughly 220 hikers and over 400 porters today. Our team had already set up our tents and prepared dinner. We gathered together in the mess hall, and warmed up with a hot beverage and a fish, vegetable and potato dinner. Two of our
guides then came in to discuss the next day’s plans, and to notate our heart rate and oxygen saturation, and our fluid intake. Everyone is feeling well, and excited about our first day’s hike deep in the rainforest of Kilimanjaro.

We head to Shira Camp in the morning. Now it is time for sleep.
MACHAME CAMP
ELEVATION: 2835M AMSL
VEGETATION ZONE: MOUNTAIN FOREST
FROM MACHAME CAMP TO:
- SHIRA CAVE CAMP: 5KM (6HRS)
- LAVA TOWER CAMP: 12KM (10HRS)
- ARRON GLACIER CAMP: 13KM (10.5HRS)
- BARANCO CAMP: 15KM (12HRS)
- KARANGA CAMP: 21KM (16HRS)
- BARAFU CAMP: 25KM (20HRS)
- Uhuru Peak: 30KM (27HRS)
Day 2

We hiked from Machame camp to Shira cave, a total of 1000 meters altitude gain. It was a beautiful, slow ascent with temperatures in the 60s and intermittently sunny. After the eight-hour hike, we were happy to see our orange tents in the distance. After settling into the camp and registering at the site, we took a short walk to the caves, where porters used to cook and camp. We were told that use of the caves was banned in 1995 as many porters were becoming sick from the fumes and cold. We returned to the camp for the welcome ceremony. Our entire group gathered in a half circle, singing and dancing their songs. Majid joined on their side, and Mitra danced in the middle. At the end, each member of our team stated his name and role, and then we introduced ourselves in turn. During the check in after dinner, our guide Washington described the history of the place-- the site where two local tribes, the Masaii and the Chagga, came together to fight for their cattle.
KILIMANJARO NATIONAL PARK
TANZANIA

SHIRA CAVE CAMP
ELEVATION: 3750M AMSL
VEGETATION ZONE: MOORLAND
FROM SHIRA CAVE CAMP TO:
• LAVA TOWER CAMP 7KM (4 HRS)
• ARROW GLACIER CAMP: 8KM (4.5 HRS)
• BARANCO CAMP: 10KM (6 HRS)
• KARANGA CAMP: 16KM (10 HRS)
• BARAFU CAMP: 20KM (11 HRS)
• UHURU PEAK: 25KM (21 HRS)
Day 3

Today we began at Shira cave (3850 m) to Lava Tower (4600 m) to Baranco Camp (3900 m). We started the hike expecting similar weather as the previous day, but were blasted by an unfailing wind that blew across desolate-appearing land as the clouds and the Kilimanjaro ravens circled above us, never straying too far away. Our hearts warmed to the hot lunch awaiting us atop the wind-swept Lava Tower after the difficult four-hour hike. The cold had crept even deeper into our bones as we prepared for the final 2-3 hour hike. But the sun peaked out occasionally during our descent from Lava Tower, and the landscape opened up to the Arrow Glacier on our left. We strode through towering Ground Sel plants, feeling lighter, braver and happier.
KILIMANJARO NATIONAL PARK TANZANIA

LAVA TOWER CAMP
ELEVATION: 4600M AMSL
VEGETATION ZONE: ALPINE DESERT
FROM LAVA TOWER CAMP TO:
- ARROW GLACIER CAMP: 1KM (0.5HRS)
- BARANCO CAMP: 3KM (2HRS)
- KARANGA CAMP: 9KM (7HRS)
- BARAFU CAMP: 13KM (7HRS)
- UHURU PEAK: 18KM (8HRS)
Day 4

We started at Baranco Camp, where we relished the experience of waking up to a windless morning. The sun came up over Arrow Glacier, a quiet yet heavy presence behind us. We then started our climb up Baranco Wall with an average 45% grade, awed by the meandering trail carved into the mountain face. At no other place was the porters’ responsibility so visible, so palpable-- each carrying 20 kg on his head or neck, a backpack and additional items stringed on. There we were, scrambling, scurrying, trying to balance ourselves on all kinds of rock edges. We were entirely in the clouds, looking down from various ledges, in the direction from which we came, seeing nothing but rapidly moving clouds. The weather shifted swiftly, unexpectedly, temperamental and bizarre, forcing us to put layers on and off and on again, and yet framing the landscape in alternating austere and rich tones. We crossed three zones in an odd order today, from moorland at Baranco Camp to alpine desert at Baranco Wall, to the heather zone at the Karanga River, finishing once again at alpine at Karanga Camp. It was unusual, thrilling, to find the verdant world around the river caught between alpine zones. On arrival to camp, we found our tents up and hot water ready. The rain came out of the blue, and with it the numbing cold, as we played cards and shared our thoughts on this mountain.
KARANGA CAMP
ELEVATION 3995M
VEGETATION ZONE: ALPINE DESERT
FROM KARANGA CAMP TO:
- BARAFU CAMP: 4KM (4 HRS)
- STELLA POINT: 8.3KM (10 HRS)
- UHURU PEAK: 9KM (11 HRS)
Day 5

It is 12:45 pm on Thursday, August 1st. We just arrived to the final camp. On our way up we passed through the alpine zone and entered the lifeless zone where lichens are one of the few signs of life. We began the day with brilliant sun and everchanging landscape. On our way up, we ran into a 29-year-old man climbing this mountain in memory of his two friends, suffering pulmonary edema. We encouraged him to descend as soon as possible. He was very ill and crying tears of sadness, as he considered his illness a failure. Clouds soon rolled in and enveloped all by the time we reached Barafu.
Day 6

We woke up to the bitter cold of 11 PM, some of us refreshed after a 2-3 hour nap, others tired after tossing and turning in our constrained positions in our sleeping bags. The plan was to get our gear ready, drink a hot beverage and juice with biscuits, and then head up 6 hours (4.3 km/2.67 miles) to Stella Point from our Barafu Camp at 4600 meters (150912 feet) From there we would need to put in another 1.5 hours to scale the 0.7 km (0.4 miles) to Uhuru Peak, our final destination.

Washington’s parting words before we left for our tents: “The problem here is altitude. If you’re not feeling great, tell us now. We’ll take you down to Mweka, a camp in the rainforest. There is plenty of oxygen in rainforest, you will feel at home. Otherwise prepare yourself for a 15 hour day. Don’t push yourself.”

It was not easy getting up, despite the anticipation of the final summit. Our sleeping bags cocooned us in a safe envelope of warmth--unzipping ourselves into the night was almost more than we could bear. But we did, and completed the layering of shirts, jackets, fleece, thermals, ski pants, socks, hats, balaclava. Next the addition of electrolyte tablets to our CamelBaks and water bottles. Then the securing of head lamps and gators, the resizing of our hiking poles. Our three guides looked us over one at a time, fixing and repositioning before the final approval. And then we were ready with our guides and three summit porters.

At the onset, we could look up at the mountain face and see a trail of headlamps lighting the way by those who had started before us. It was daunting to see how far we
had to go. During brief breaks to catch our breaths in the thin air, our heads would roll back and we would lose our breaths again by the wonder of the stars dotting the sky with their luminosity. But it was hard going—even the smallest action (opening the wrapper around a hard candy, unzipping a pocket, re-positioning a strap) felt like a heavy task and left us even more breathless.

Our guides never left our side, suddenly appearing beside us, asking how we were. And so we trudged on, each finding an internal source of strength based on our own motivation at the start of this climb. At one point, a Masaii group of guides and porters began to sing, their voices uplifting us, blowing wind into our sails.

Minute after minute, we walked, crawled, moved further up the mountain. Mitra was struck with migraine, and she and Majid
slowed their pace, with a guide and two porters breaking off with them. The sun rose in layers of color, illuminating the frozen lakes and river at the foot of Arrow Glacier, once so imposing but now dwarfed in size, though not majesty, from our towering heights.

One last switchback and we were finally at Stella Point, gazing deep into the crater, and the elated faces of friends and guides. The next 0.7 km (0.4 miles) felt impossible, but words of encouragement from strangers walking back down propelled us forward in a daze that had begun with the sunrise and was only elevated by the sight of the 22,000-year-old glaciers. Some shouted with joy, others wept out of gratitude and awe, but all were bound heart and soul to the mountain that had taken and yet bared so much in return.

Soon after, still atop the mountain, we were united again as a team with Mitra, Majid and their group. The descent down felt like sand skiing, until we were struck with snowfall and whipping winds (which became heavy rains for Mitra and Majid) by the time we reached our camp. Exhausted and sullen after an anticlimactic finish (we still had five hours to go before we could truly rest), and somehow feeling the drag of altitude, we reluctantly repacked our bags and took off for lower ground.

We passed into the heather zone and finally the rain forest, where our tents were pitched, dinner ready and our hearts (like our lungs) full.
Day 7

On our final day, we woke up feeling stronger than ever before after blissful sleep surrounded by the sounds of the rain forest.

Our 4-5 hour slow descent on muddy trails brought us to the foot of colobus monkey communities, old twisted trees, and a thousand shades of green. We found time to ask questions of our guides, to understand their experiences on Kilimanjaro.

We arrived at the Mweka Gate, and shared lunch at an artists’ studio.

During the Appreciation/ Tipping Ceremony, we sang and danced to thank our porters, guides, cook who had pulled us up to summit.

And then we said goodbye, the mountain still a force connecting us.
What inspired your first hike of Mt. Kilimanjaro and what inspired the latest?

My first climb up Kilimanjaro in 2002 was driven by a desire to experience walking into thin air, seeing the 22,000-year-old glaciers, and appreciating the diversity of life and ecosystems on the roof of Africa. Though the inspiration behind my two most recent climbs has been to gather money and build awareness about global health issues – with last year’s hike raising funds for a microbiology lab in rural Uganda, and this year’s for the global health training of nurses – my time on the mountain is deeply personal. The mountain puts me through trials of bitter cold and restless sleep, pushing me to my last ounce of strength, but it also builds me up. Whatever internal struggles surface, I am able to construct a sense of purpose and preserve it with layers of courage that allow it to survive when I return to reality and away from this life force.

Having grown up in mountainous Iran, mountains have always felt like home for me, and it had long been a dream of mine to share this love with my children. This dream first manifested over ten years ago when the three of us, along with one of my sons, Keyvan, traveled to Mt. Kenya together. Though I ended up descending on summit day with Mitra when she developed altitude sickness symptoms, the time we all shared together was incredibly meaningful. Given that the best predictor of mountain sickness is a history of having the condition, I was concerned about Mitra making this climb. Meanwhile, my elder daughter Katrin has Raynaud’s disease, a condition in which distal arterioles constrict in the cold. In unfortunate cases, the tips of fingers, toes, nose, and ears may be lost. In light of these concerns, I could not stay home as my daughters ventured on this undertaking. Thus, another motivation was the need to be beside them both to care for them and share Kilimanjaro’s beauty and lessons.

Among the many teachings the mountain gifts us with, and a motivation for each climb, is the reminder that health is a privilege. The last ascent starts at Barafu camp around midnight, and involves fifteen hours of continuous challenge up the steep climb to Uhuru peak first through the dark and then under the embrace of sunrise. During last year’s climb in particular, I struggled through this stretch with chest tightness and pain, severe exhaustion, shortness of breath, and headache, as well as body and joint pain. Undergoing this wide spectrum of discomfort reminded me of the discomfort of patients, be they in the hospital, clinic, or emergency room. I returned home with heightened empathy and care toward patient’s conditions and complaints, and a greater motivation to help ease their discomforts.

Stepping into the dead zone where everything is barren feels like setting foot on the moon. Surrounded by rocks, dust, and lava without any sign of life, the body struggles as the boundary fragile boundary between health and illness is revealed. Furthermore, the transition from the bottom of the mountain that is rife with a miraculous diversity of life...
up into thin air where life barely subsists reminds us of the close tie between life and oxygen supply. It reminds us of the care we owe Mother Nature, and the reality that we rely on other life to survive. I leave the mountain with a renewed commitment to the basic principle of the One Health movement: that the health of the environment, other life forms, and human beings are inextricable.

Finally, the inspiration for every ascent that carries me through to the next climb is the spiritual experience of, along with each step, looking up at the line of headlamps lighting the path like candles to a sacred temple; the tacit solidarity of each individual blending into the group as it makes the pilgrimage to the peak as one unified organism.

What was special about this hike?

Several elements made this hike special. First, our group was comprised of an interesting amalgamation of people-- physicians (infectious disease, emergency medicine, cardiology, anesthesiology), a horticulturist, a computer programmer, and a global health writer and researcher. Our main guide was named Washingtone, a man of great intellect and humanism who had led me up and down Mt. Kilimanjaro in the past, and with whom I had specifically requested Katrin to arrange our trip. Bringing together Washingtone's group of guides and porters together with our group, especially some of the conversations we shared around their lives and dreams, was one of the most memorable aspects of the trip.  

Second, it was truly special that me and my daughters were able to spend quality time together, and during such a momentous experience. I learned of Mitra's resilience. Within the first half hour of our final ascent, she threw herself to the side with dizziness, nausea, and the start of what would be a severe migraine. As I mentioned before, the greatest predictor of mountain sickness is prior mountain sickness, which means Mitra was at risk of experiencing it again. She started this climb knowing she might not summit, as she could not years ago. When I recommended that she descend, she insisted that she wanted to continue. I was concerned the entire ascent, keeping a close eye on her to monitor her health. It is difficult to differentiate between when a migraine, nausea, and vomiting will lead to with severe mountain sickness and when the symptoms can be tolerated without risk. Despite her struggles and a bout of vomiting close to the summit, she ascended with the words "Bodily discomfort is temporary. In the near future, I'll be in a tent with a cup of tea in hand without a migraine, but right now I am embraced by this majestic mountain, fully enjoying it." Kilimanjaro’s beauty was more encouraging than the pain was discouraging.

Third, we connected with a young man who was breathing heavily and coughing on the ascent just near base camp. Though we had seen him every day on the trail looking exhausted but well enough, he was noticeably ill this time. We stopped to ask him some questions and do a brief examination. Strongly suspecting that he had developed pulmonary edema, or fluid in the lungs - one of the more severe complications of altitude sickness - we recommended that he descend as quickly as possible under the care of his guide, who had made the same recommendation the previous night. We watched him shed tears right there on the trail as he shared his goal of climbing the mountain to honor two of his closest friends who had died. I held his hand and told him, “Your friends and family want you to be healthy and sound. Your friends whom you honor want you to preserve your own life first. If you were my own son, I
would tell you to come down this mountain.” During our email exchange in the days after the hike, he told me that it was these words that ultimately helped him decide to descend.

Fourth, the sky on the final descent was completely pellucid, the beauty of the stars and galaxies shining courage and gratitude onto us as we put one foot in front of the other in the dark. We could easily stretch our hand to gather a few to store in our hearts for future moments of challenge or distress. The descent was also remarkably beautiful, with the last hour marked by snow, hail, wind, and finally rain. We were absolutely drenched, with our multiple layers clinging to our skin, but it was an absolutely beautiful and cathartic release. One of our guides told us that snow on Kilimanjaro is the mountain’s gift. And it really is a gift.

The last thing that made this climb special was seeing past the mountain’s overwhelming beauty and into the essential roles and sacrifices of the porters and guides. Though I have always sung their praises for their hard work and talent, I have never seen firsthand how caring they can be until I watched them help Mitra on that final ascent. As she massaged her head during one of our breaks, tears rolling down her cheeks as a result of the sheer force of tension, our guide encompassed her head in his fingers and helped push the pain away. When we finally reached the top, he picked her up and lifted her with such sincere excitement and pride. I was truly moved.

Comprised mostly of the Chaga people who reside close to the mountain and the Massai who populate the Tanzania-Kenya border, members of the climbing teams are incredibly hardworking and kind. These porters and guides are some of the most authentic people one can encounter. Nobody that reaches Uhuru peak can do it without their support - in the practical capacity of carrying our gear and providing our meals, the health capacity of monitoring our wellness, or the emotional capacity of encouraging us to continue in times of discouragement. Tragically, many of these climbing staff lack proper gear, which means that some die from hypothermia if caught in the rain. Porters make only 8USD a day, and guides just twice that amount. We are hoping to fundraise to provide gear for these teams so that they can at least be better protected from the elements.

How did your body respond to the first hike versus this latest hike?

Climbing Kilimanjaro is akin to a mother who, after undergoing difficult labor, vows to never give birth again. But as soon as she rocks the baby in her arms, she forgets about the pain. She sees only beauty.

During my first climb, I came down with dysentery - fever and diarrhea - acquired from poor sanitation in the camp sites. I thought I would need to descend, but my condition improved substantially after taking antibiotics. I knew the climb was difficult and cold, but the mountain’s beauty was all I remembered, such that I decided to climb several times more. I experienced claustrophobia and panic attacks from low oxygen during a few of my subsequent climbs, but I didn’t have that problem this time. Though I am now seventeen years older than I was at the time of my first ascent, I don’t think my body responded differently to elevation beyond hiking more slowly, carefully, and thoughtfully. Descending, however, was harder on me because of an injury in my medial meniscus in both knees from years of running.
At 71 years old, many folks are coasting through retirement and relaxing. Where do you get your energy and motivation?

"Without work, all life goes rotten. But when work is soulless, life is stifled and dies." - Albert Camus

My life mission is to be at the service of the underserved. I am fortunate to have the perfect job that renders my work objective parallel to my life objective. I wanted to be a doctor from a young age, and spent my childhood riding a donkey from village to village dispensing medication. Now I am a teacher who travels around the world to learn from people, and do my part in forming meaningful collaborations. I strongly believe that life and work should be conjoined, such that life and work objectives can enrich each other.

Though I hope to retire soon, I do not intend to stay home and "coast." Rather, I plan on continuing my work but on my own, in an independent fashion. As an example, I am working with my family toward starting a nonprofit organization to sponsor academically promising orphan girls around the world.

Describe the Global Health Program at your hospital and the impact it has on the world?

The unique features of the Global Health Program at Western Connecticut Health Network are bidirectionality, sustainability, immersion, and capacity building of human resources. Medical, nursing, physician assistant students, and residents return from the global health elective transformed into compassionate physicians who are careful in their clinical judgement, conscientious about resource utilization, and invested in patient stories. Meanwhile, greater numbers of faculty from international institutions come to the United States for training and return home to become instruments of change in their institutions and communities. Lastly, our relationships are built in personal friendships and trust, qualities that make our program run deeper and more enriching than a business model ever could.
How do you manage to care for people around the world and in Connecticut?

My work with the Global Health Program is founded on the concept of global relatedness - that we are all connected, whether in Connecticut, East Africa, Southeast Asia, or central America. Trusting friendships allows for a continual exchange of culture, knowledge, ideas, skills, and worldviews between our home institutions in Connecticut and Vermont and our international partners around the world in Botswana, China, the Dominican Republic, India, Thailand, Russia, Uganda, Vietnam, and Zimbabwe. We are currently moving toward inter-networking among our global health sites around the world, led by the principle that we can augment our impact and effectiveness as a unified force. With the belief that we are all connected, caring for people around the world and in Connecticut comes naturally, as we all live on the same planet and share the same air.

What is the value of a global health nursing program and how will it impact people?

Nurses are crucial to healthcare delivery in all arenas, with their dedication to health often extending well beyond the immediate community in which they serve. My experience in Liberia during the 2014 Ebola epidemic showed me firsthand the incredible talent, skills, and essential role that nurses play. In contrast with doctors who often have disjointed relationships with patients in the hospital, nurses have a greater continuity of care that allows them to better understand and connect with patients. They perform a myriad of tasks, often serving as the primary patient advocate and voice as well as the caregiver and attendant of patient/family strife and vulnerability. They also often run hospitals and clinics in resource-limited settings. With 1:12 ratio of physicians to nurses and other healthcare workers in Subsaharan Africa, physicians comprise only a miniscule portion of global health personnel. Thus, capacity building of nurses, nurse assistants, and other healthcare providers is critical to any healthcare setting.

To cite an example, the African Community Center for Social Sustainability, one of our partners in rural Uganda, recently opened a new nursing school with an overwhelming number of its students orphaned and coming from underserved communities. Impacting their education will substantially impact patient care and family wellness in their communities, as they are the driving force of the healthcare system. By building a global health nursing program, nurses can further build on their skills and competencies while bringing their sense of generosity and advocacy to play in the larger, united global health arena.

What was it like having your daughters with you on this latest hike?

Having my daughters with me on this climb meant that I was more careful as a father, an experienced Kilimanjaro climber, and doctor who knows about potential illnesses on the mountain. Though our guides are incredibly knowledgeable and reliable, I couldn’t help but be concerned about Katrin’s Reynaud’s condition and Mitra’s history of mountain sickness. I was grateful for the quality time we were able to spend together, experiencing the mountain while learning new things about each other. It is a truly unique experience to share together as a family.
What advice do you give to people who are in their 60s or 70s and want to remain active?

Though many view climbing a mountain as requiring physical prowess, neither age nor weight impact one's ability to ascend Mt. Kilimanjaro. Children as young as seven and elderly as old as 89 have accomplished this feat. Motivation, mental drive, perseverance, and pacing are much more important than anything. The challenge is mainly in dealing with elevation and mountain sickness, which is out of anyone's control and can occur regardless of physical shape.

My advice to people who want to remain active is to take initiative in building a healthy life by discovering what you love. I enjoy the mountain because of the social aspect of connecting with people, and delving into learning about its ecosystemic and geological history. Try to integrate the same concept into your day-to-day: Find an activity you care about, learn everything you can about it to motivate you through your pursuit, and share it with your friends and family. There is an endlessly beautiful world to explore within and outside oneself, and nobody can make the decision to do so other than you.
To learn how you can support the Nuvance Health Global Health Program, please contact the Foundation office at (203) 739-7227 or e-mail foundation@wchn.org.