Lessons from War

How a global emergency care program was built from early experiences in Angola

Even as a child, Emilie Calvello-Hynes, MD, the eldest daughter of two Presbyterian ministers in Weymouth, Mass., a blue-collar suburb of Boston, stood out as a leader.

“She was very dedicated to what she did, and not afraid to try new things. Competitive in a very good way,” recalls her father, Richard Brondyke.

Money was tight growing up in a home centered around the rhythms of the church, but Calvello-Hynes’s parents always encouraged her to dream big.

She recalls a woman in their congregation who had graduated from Bryn Mawr College in Pennsylvania. Calvello-Hynes’s parents told her, “If that’s something you want, you should apply.”

A LEAP OF FAITH

Calvello-Hynes went on to enroll at Bryn Mawr, where she was interested in the sciences, especially chemistry. She remembers wrapping up her junior year when her father asked if she had considered a career in medicine.

“I told him the only way I’m ever going to do medicine was if it was global health work,” recalling her half-righteous, half-defiant response. “He answered, ‘funny you should say that. We have one of our missionaries here right now and he works in Angola.’”

He connected her with Steve Duncan, MD, a trauma surgeon and medical missionary supported by the Brondyke’s church. Duncan was back in the states for a short time to gather medical supplies after part of
he worked in the operating room, where she did everything from changing bandages to sterilizing surgical gloves so they could be reused. Exposed to myriad cases — from infectious disease to traumatic injuries caused by landmines — it was a visceral introduction to public and global health challenges.

When it was time to return to the states, she struggled with the abrupt transition. Halfway home, jet-lagged and with the experience fresh in her memories, she recalls breaking down in London’s Heathrow Airport, sobbing for hours.

“I could not make sense of the disparities I had seen in that country and moving so quickly into a location with such relative affluence,” Calvello-Hynes says.

Decision made and with a scholarship from Bryn Mawr funding her flight, she soon arrived in Windhoe, Namibia, where she would await transport to bordering Angola. Her first trip outside the United States, the 19-year-old found herself sitting alone for hours at a Windhoek bus stop wondering if her ride would ever come. Finally on the road and heading to her destination, she remembers seeing United Nations peacekeeping forces making their way out.

“The road up to the Namibian border was littered with burnt-out tanks and destroyed buildings... I could not help but wonder what I had gotten myself into,” she later wrote in an article about her experience.

That summer, she would witness first-hand the suffering of people trapped in the ravages of civil war, deprived of basic resources. While in Angola, Calvello-Hynes assisted in any way she could, working in a local orphanage, preparing food, and playing with the children. In the hospital, she shadowed Duncan as

FINDING HER LIFE’S WORK

“I WAS QUITE NAÏVE. I DIDN’T HAVE A LANGUAGE OR FILTER OR FRAME TO PROCESS WHAT I SAW. WHAT THAT DID FOR ME WAS EMBED THE EXPERIENCE IN A WAY THAT CHANGED MY TRAJECTORY IN LIFE. I DIDN’T DECIDE, ‘I WANT TO BE A DOCTOR.’ I JUST CAME HOME AND NEVER COULD SHAKE WHAT THAT EXPERIENCE HAD BEEN.”
Back on U.S. soil, she moved forward with a degree in chemistry, graduated college and worked for three years as a pharmaceutical researcher at DuPont Pharmaceuticals.

Yet she continued to seek out experiences echoing her time in Angola; most of her vacations were spent in the field serving on other international medical missions. Eventually, she realized the inevitable: she wanted to devote her life to global health work. She applied to Johns Hopkins University School of Medicine and was accepted. She started taking extra classes and volunteering at local emergency departments to prepare herself, all while working full-time at DuPont.

“Emergency medicine would give me a very broad skill set — we treat everyone, from neonates to octogenarians,” Calvello-Hynes says of her decision to pursue the specialty.

While earning her medical degree, she simultaneously earned a Master of Public Health from Johns Hopkins, further readying herself for a career in global health.

“She is one of those people where others within our class have looked forward to seeing what she’s going to accomplish, because we knew she was going to do great things,” says Andy Muck, MD, a classmate from Johns Hopkins.

After Calvello-Hynes finished her emergency medicine residency at Johns Hopkins, a massive humanitarian crisis arose: the 2010 Haiti earthquake. Calvello-Hynes was among the first of her Johns Hopkins colleagues to join the response and would go on to serve as director of emergency services for the International Medical Corps. It was in Haiti where she met Greg Hynes, a flight nurse and fellow volunteer, whom she would later marry.

Over the next several years, Calvello-Hynes would travel the globe, with posts in Liberia, South Africa and the United Arab Emirates before returning to the United States. She was drawn to Denver, because it checked all her boxes: academic medical center, international airport, mountains and nature.

Calvello-Hynes recalls picking up the phone and cold-calling Richard Zane, MD, Chair of the Department of Emergency Medicine at the University of Colorado School of Medicine.

“I WOULD LIKE TO COME TO YOUR INSTITUTION. AND I WOULD LIKE TO BUILD YOUR GLOBAL EMERGENCY CARE PROGRAM. WHAT DO YOU THINK ABOUT THAT?” SHE PROPOSED.

ZANE’S ANSWER? A RESOUNDING YES.