



Global Health Perspective / Opinion

Reflections Serving a Global Patient Population, Locally

By Alec R. Baca, MS4

Ever since hearing about the organization, I had been excited to visit 16th Street Community Health Centers. Their clinics are spread throughout the Milwaukee area, including locations inside various schools, serving a largely immigrant patient population from Latin America. After shadowing at their Chavez Clinic near downtown, I had the opportunity to rotate there for an M4 Family and Community Medicine Elective.

Working at the clinic provided the opportunity for a global health experience without leaving the country. The majority of our patients were Spanish-speaking and actively connected to their home countries, most commonly Mexico and Puerto Rico. Some even returned to Latin America for the winters.

Additionally, many of the staff had similar connections abroad. On one of our teams, both of our medical assistants were physicians in their home countries before immigrating to the states. One of them, a former gynecologist from Venezuela, surely had medical knowledge beyond what one would expect for her position, but she was excited to have the job to work on her English in a clinical setting.

Our patients seemed to deal with many of the common problems that underserved populations in healthcare work through, but with added challenges of language. Since 16th Street is a Federally Qualified Health Center, meds and appointments are charged on a sliding scale. Miscommunication, often related to a language barrier, still comes up when patients pick up meds from their pharmacy. Additionally, cost itself still occasionally comes up as a concern, at times limiting the treatment options a patient can choose from. Nevertheless, patients can generally find solutions to problems that come up and if they have the desire to do what is needed to improve their health.

As one interested in history and current events, I often tie experiences into the past and larger trends in my thinking. I sometimes wonder how the experiences of the patients at 16th Street converge or differ from the experience my own immigrant ancestors had in the early 1900s. Though there are always differences in the geopolitical atmosphere, differences in language

and system seem to be a basic part of most of our lineages at some point, as least in the past ~150 years.

Wisconsin has long-standing multi-cultural urban areas. Additionally, the [2020 U.S. Census](#) documented the rural Midwest had an increase in ethnic diversity larger than any other place in the country since 2010. As the ethnic distribution of our region and nation continues in this direction, unique educational experiences at 16th Street will become even more valuable so future physicians like me gain competency and character to effectively serve diverse patient populations.

Alec Baca is a 4th year medical student at MCW-Milwaukee. He is applying to Family Medicine for residency.