

Opening the Doors to Vision Care Access

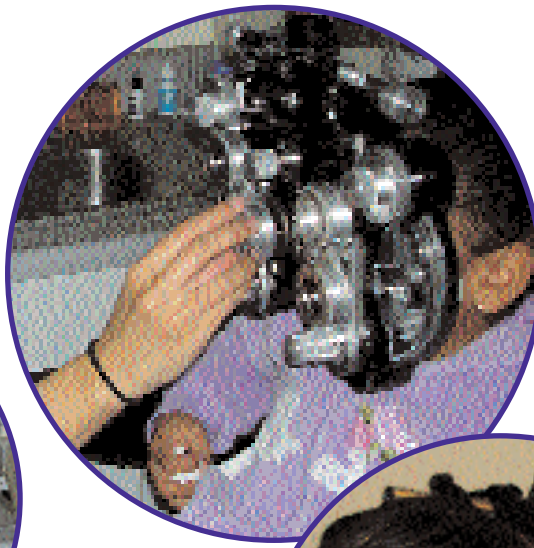


Karen R. Chester, OD – A Community Health Center Optometrist

Karen Chester is a familiar face to a generation of patients at La Clinica de la Raza in Oakland, California. She caught the health center 'bug' as an optometry student in the 1980s. Shortly after graduation from the University of California at Berkeley School of Optometry in 1987, Chester joined the professional staff of La Clinica de la Raza as an optometrist and has been there ever since. She also serves as an adjunct faculty member at the University of California Berkeley and is a newly appointed member of the American Optometric Association's (AOA) Community Health Center Committee.

As director of eye care services, and as a clinical teacher for optometry students on rotation from three optometry schools across the country, Chester knows first-hand how to care for a community. She believes that showing respect and concern for patients is the basis of a trusting doctor-patient relationship and a way to improve the visual health of her patients.

In a recent interview, Dr. Chester shared the following regarding her work at La Clinica de La Raza:



TELL US ABOUT LA CLINICA DE LA RAZA AND HOW THE EYE SERVICE GOT STARTED

La Clinica de la Raza was first developed as a free clinic, started by medical students in 1971 in a storefront in the Fruitvale area of Oakland. Its mission was (and remains) 'to improve the quality of life of the diverse communities we serve by providing culturally appropriate, high quality, and accessible health care for all.' The students at the time hoped to provide medical services to the underserved Latino population in the area. In 1973 the University of California at Berkeley School of Optometry sent a mobile eye clinic to La Clinica weekly to provide free eye examinations. Six months later the clinic administrators decided that eye care service was important and a space was created for eye examinations. I started working in the eye clinic at La Clinica as a student in 1986. I felt right away that it was the perfect fit for me. I chose optometry because I wanted a career that would allow me to help improve the lives of others. La Clinica is an organization dedicated to these ideals, so I was quite happy to take the position of Eye Clinic director.

Today, La Clinica de La Raza has 22 service locations in 3 counties. In 2005 La Clinica provided more than 180,000 patient visits — of which 6,400 were in the eye clinic.

WHAT DEFINES THE WORK YOU DO AND THE UNIQUE CHARACTERISTICS OF YOUR ORGANIZATION?

It is important to me to provide health services in a

culturally-sensitive manner.

Everyone in the eye clinic speaks Spanish and we also provide services in Mandarin and Cantonese. La Clinica provides translators for other languages when needed. Optometrists working in La Clinica eye clinic see a high percentage of ocular disease, and high refractive error leading to low vision and blindness. With our services, we have the opportunity to prevent the loss of vision in patients who otherwise would not have had access to eye care. There are small miracles every day.

When we look at the characteristics of the patients served at La Clinica we find that 66 percent are below poverty level, 80 percent are Latino, 51 percent are children, 59 percent are female, and 48 percent are uninsured. Our patients are primarily low-income, uninsured, Latino women and children. La Clinica provides these patients with comprehensive medical services — including eye care. I am proud to work for an organization that sees all patients, without regard to insurance status or ability to pay.

WHAT ARE YOU PASSIONATE ABOUT IN YOUR WORK?

I like to make the miracles happen. For example, a four-year-old patient needs pediatric contact lenses but his family has no income. I work with the contact lens industry, finding a contact lens company that will offer pediatric contact lenses to low-income patients at no charge for the materials.

When that happens, we are able to provide the family with lenses for their child, something that is vital for the child's vision, learning, confidence, and self-esteem. We also work with organizations that provide free eyeglasses to school children and the La Clinica planning department secures grants for patients who are homeless, in substance abuse recovery programs, or HIV positive to enable us to provide these patients with excellent eye care services and needed glasses. I meet people with incredible stories every day and think to myself, "There, but for fortune, go you or I." I believe that health care and vision care are fundamental rights. I am passionate about that.

WHAT IS THE BIGGEST CHALLENGE YOU FACE IN YOUR WORK AND HOW ARE YOU OVERCOMING IT?

The biggest challenge is finding funding resources to balance the health center budget each year. We provide services to people in their own community and would like to expand services so that people don't need to leave the clinic for specialty services or, worse yet, go without. I would like to be able to add equipment to our clinic to provide retinal photography or other equipment that would allow more treatment options on site. Funding these types of expansion is challenging, but connecting with other optometrists and working with the newly formed American Optometric Association Community Health Center Committee has already given me some ideas on funding sources.

WHAT LEARNED WISDOM WOULD YOU LIKE TO COMMUNICATE TO OTHERS IN THIS FIELD?

Providing health care is a team effort and optometrists are an important part of the team. It is a great advantage for the optometrist and the other medical providers in the clinic to be able to collaborate over patient care. The benefit to the patient is increased access to specialized care and better medical care. Sometimes the eye clinic can be a patient's entry point into the health center's medical system. Systemic disease, such as high blood pressure, may be detected during the eye examination and patients can be referred appropriately in a community clinic such as La Clinica. Undetected high blood pressure may have no symptoms but can be devastating. I am happy to find these patients through eye services and refer them for treatment.

WHAT ADVICE WOULD YOU GIVE TO A STUDENT OR PROFESSIONAL JUST ENTERING THE FIELD?

I would advise students to consider a career in a community health center like La Clinica. The community-based health care model is more interesting and more challenging than most health care environments. It is not unusual to see more challenging patients with a higher number of difficult refractive errors, unusual pathology, and ocular conditions related to many systemic disease processes in the community clinic setting. The referral network will not be limited to medical providers, but will include many support services for patients such as social services, mental health, and health education providers. Practitioners may find that their colleagues will be dedicated health care providers who really care about serving people in need. It's a joy to work with other people who care about improving the quality of life for everyone in the community.

