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JOHN MCCUSKER / THE TIMES-PICAYUNE

Nursing student Ashley Magner talks with free clinic client Gordon Peterson at the convention center Tuesday. Peterson said he came to the clinic out of suspicion that he might have high blood pressure or cholesterol levels and also wanted to have his jaw X-rayed.

Two-day free medical clinic draws hundreds

Event helped people without insurance

By Aimee Miles
Staff writer

Desmond Mayfield arrived at the Ernest N. Morial Convention Center at 7:45 Tuesday morning, more than three hours before Hall J opened its doors to the day's first round of patients. He wanted to beat the crowd.

Mayfield was one of hundreds who converged on the center to seek care from volunteer medical personnel, who are staffing a free two-day clinic that continues today.

The makeshift health center, organized by the National Association of Free Clinics, is offering

primary and preventive care to hundreds of uninsured or underinsured individuals, as well as referrals to free and community-based clinics in New Orleans. Available services include blood pressure checks, EKGs, glucose tests for diabetes, urinalysis and HIV tests.

"The need was so overwhelming here," said Nicole Lamoureux, executive director of the NAFC. The organization has hosted free clinic conventions across the United States, and decided to return to New Orleans after a 2009 event drew upwards of 9,000 people.

More than 600 patients shuffled through the convention hall Tuesday, where they were supplied a battery of diagnostic tests as needed. With 76 curtained partitions covering more than 130,000 square feet, the sprawling temporary clinic became the largest of its kind in the U.S., according to the NAFC.

Lamoureux said the free clinic would highlight the needs of those who have fallen through the holes of America's "safety net."

A native of New Orleans, Mayfield left for Tulsa, Okla., after the New Orleans Housing Authority, where he had worked for more than 18 years, slashed its workforce. His job in Tulsa as a maintenance repairman provided him with health insurance, but when Mayfield left the job to move back to New Orleans a few months ago, he lost those benefits.

Now between jobs, Mayfield, 44, has joined the ranks of the 820,000 Louisiana residents, roughly 19 percent of the state's population, who lack health insurance. Less than a year ago, Mayfield's laser-sharp vision began to blur, and he began to feel thirstier than usual.

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19% of state's residents lack health insurance

CLINIC, *from B-1*

Mayfield said he didn't know where to find free clinics in New Orleans before Tuesday. He left the center with a sheet of contacts.

Lamoureux estimates that only 30 percent of patients she has spoken to are aware of those resources. "We have so many people who say, 'I didn't know I could go there,'" she said.

One of the objectives of the clinic is to better educate New Orleans residents about the resources available to them. They're often playing catch-up; many of the patients who sought help at last year's free clinic hadn't seen a physician in years, said Rani Whitfield, a Baton Rouge family practice physician and the medical director of the New Orleans event.

Central City resident Gordon Peterson, who hadn't been to a doctor since March 2006, said he simply didn't have any problems.

"Ninety-eight percent of the time I'm up and running," Peterson said. "That has kept me from going in."

He decided to show up at the free clinic Tuesday out of suspicion that he might have high blood pressure or cholesterol levels, and to have his jaw X-rayed.

Without a primary care physician as a first point of contact, uninsured patients often wait to seek medical treatment until the problem is so severe that they wind up in the emergency room, or seek out specialists for problems that may be relatively simple, Whitfield said.

Almost 60 percent of the patients Tuesday afternoon said they didn't have a primary physician or sought treatment in the emergency room whenever they had an ailment. The most common health issues were diabetes, heart and cholesterol problems, and depression — fairly consistent with the health issues that plague the greater population of Louisiana.

TWO-DAY FREE MEDICAL CLINIC DRAWS HUNDREDS by Aimee Miles

This was a daily that I did toward the end of my internship with the *Times-Picayune*. As you'll see, the piece isn't brimming with rhetorical elegance; it's fairly terse and to-the-point. I selected it not for its scope or style, but for the invaluable experience I gained in the course of reporting the story.

I was asked to cover a free clinic event hosted by the National Association of Free Clinics, which gathers physicians and nurses from across the country to provide free medical consultations to thousands of uninsured individuals in cities like New Orleans. The novelty in this enterprise was its scope—for two days, part of the city's convention center would be converted into an expansive makeshift clinic, with curtained partitions demarcating dozens of offices where patients could receive EKGs, blood pressure checks, diabetes tests, and a host of other services. Then volunteers would pack everything up and host the next event in another city, like a traveling road show.

I arrived at the center before the first appointments were scheduled to begin, while volunteers were still scuttling about and tweaking minute last-minute details. The setup was a remarkable feat of collective human engineering. Designed to accommodate a population with diverse health needs weaving its way through a complex labyrinth of specialized medical "stations," the clinic seemed poised to devolve into a tragic model of New Orleans' own public healthcare system—disordered, poorly integrated, overburdened; a broad-mesh sieve through which most would inevitably slip out of the system.

The clinic defied my expectations—patients cycled through their appointments like clockwork, herded from one station to the next, receiving customized tests and treatment. All of this was happening on such a large scale, and it was overwhelming to think of how I would capture it adequately on paper. Early on, I decided the best thing to do was hone in on individual experiences, and I set out to find a patient to shadow for a few hours. This was remarkably challenging, since every patient had been offered an orange wristband to wear if he or she explicitly wanted to avoid being approached by the media. Most people had chosen to wear the band, and I was hard-pressed to identify any absences of orange as I scanned the wrists of passersby.

This meant that I needed to be uncommonly aggressive in identifying someone who was willing to speak with me, and it forced me to step away from my comfort zone. Finally, one man, Desmond Mayfield, agreed to participate. He was incredibly accommodating as I followed him everywhere, eavesdropping on his private health consultations and prying into the details of his life narrative. It is very rare to cross the threshold of casual, detached conversation with a perfect stranger, as most people can be quite guarded about subjects like their health, careers, and families—it isn't something we talk about openly with people we don't know. That experience reminded me why I love journalism—I get to have conversations with people I wouldn't normally have the opportunity to speak with. Little by little, I am exposed to the full spectrum of human experience.

The story I wrote was brief due to budget constraints, and I could only convey a sliver of what I saw at the clinic that day. I only wish I had had more time and space to cover the story at a deeper level, because I think it merited a more comprehensive treatment than I was able to give in a few hundred words.

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