I frequently quote our organization’s mission statement because it represents who we are and what we do to provide vision and eye health to those who need it most across the world. “VOSH/International believes in the freedom to see... We facilitate the provision and the sustainability of vision care for people who can neither afford nor obtain it... by supporting sustainable eye clinics, optometry schools, and optometric educators in areas lacking sufficient eye care.” These extracts point out two key pillars of our work, humanitarian clinics, and education. It is incredibly rewarding when we can combine both into a teaching clinic.

VOSH/International’s teaching clinics are humanitarian clinics adapted to include a learning process for US and/or international students of optometry. The vast clinical and academic expertise of our volunteer optometrists is matched with the eagerness of the students from our SVOSH chapters to learn while serving those in need. The long-term goal is to have clinically skilled, empathetic, and culturally competent future optometrists across the world.

This time, I wanted to discuss the benefits and challenges of teaching clinics and decided there was no better way than to ask three seasoned experts. Dr. Daniel Twelker, past-president of both VOSH-Arizona and of VOSH/International, recently led a VOSH-Arizona teaching clinic in Hermosillo, Mexico, with students from four SVOSH chapters, Mexican Universidad Autónoma de Aguascalientes, Universidad Autónoma de la Laguna, Universidad Autónoma de Sinaloa and US Midwestern University in Arizona. In March, Dr. Mark Rakoczy, president of VOSH-Pennsylvania and treasurer of VOSH/International, led the second teaching clinic to provide much-needed clinical experience to the Haitian students of the SVOSH chapter at the Université d'Etat d’Haïti. Dr. Hector Santiago, vice-president of VOSH/International and chair of the public health committee of the Latin American Association of Optometry and Optics (ALDOO) led a clinic for the SVOSH chapters at the InterAmerican University of Puerto Rico, and at the Panamanian Universidad Especializada de las Americas in Panama.

Dr. Twelker succinctly sums up the primary benefit of teaching clinics. “No matter how hard I work, how many patients I see in a day or a week... I won’t be able to meaningfully affect eye and vision care in a city, state, or country. If I include optometry students or young optometrists, on the other hand, and teach them new skills or hone previous skills and knowledge, the... beneficial effect will be magnified a hundredfold.”

VOSH teaching clinics involve patients with a wide range of conditions and with presentations from the most minimal to often the most severe. This exposure is as
important to the supervising practitioners as it is to the students. I have expanded my knowledge of many conditions by participating in VOSH clinics. It can be heartbreaking, but important clinically, to see age-related macular degeneration in its most severe form (significantly worse than we would typically see in our daily work) or, for example, in an unexpectedly young patient. Dr. Santiago points out that, if “there is an interesting or unique finding . . . a faculty member will call students to observe”. Many of VOSH’s teaching clinics now incorporate a grand rounds aspect at the end of each day to discuss especially impactful, real-life, clinical cases.

Students and practitioners alike often learn new skills or refine existing skills during a clinic. My retinoscopy efficiency improved dramatically after my first VOSH clinic. I have incorporated methods to estimate refractive error with a direct ophthalmoscope and documentation of the anterior chamber angle with a cell phone picture into my daily practice. VOSH clinics have taught me how to do an exam in sometimes difficult circumstances; no loose wire or burnt-out bulb is going to shut down my office!

There is a benefit of teaching clinics that is easy to overlook and that is particularly rewarding to those of us outside of academia. Dr. Rakoczy says, “I’ve been in private practice almost my whole career” and “for me, it was very rewarding to pass on my experience, especially to this particular group.” He adds that he felt “rejuvenated by the experience.” I have been particularly grateful for the opportunity to precept ICO students in their fourth-year rotations and in working with students on many VOSH clinics. Imparting clinical pearls and best practices while experiencing eye care through a student’s eyes keeps me on my toes and reminds me of the impactful work that we optometrists do.

There are some things to consider when planning a teaching clinic. As Dr. Twelker states, “Teaching takes time, more time than simply seeing the patient by myself. In the short term, the clinical volume must be decreased to allow students to ask questions and learn new skills.” However, educating optometry “students and young optometrists (who) will be providing eye and vision care to their communities their entire working lives”, far outweighs seeing fewer patients.

From experience, Dr. Rakoczy reminds us that a “planning tip would be to have a backup plan, or at least be able to change your plans quickly. That’s not really any different than if you are leading any overseas clinic. There is always something that doesn’t go as planned”. VOSHers always must be prepared to be flexible. This advice might apply even more when students are involved.
Dr. Twelker suggests that “it is best to create a rotation schedule so that each student spends time with varying stations and teachers”. Dr. Santiago concurs and further details that there are stations in the clinic and that “students are assigned based on their skills.” “We rotate students by half days” and “this allows them to practice multiple skills and they don’t get bored.”

Dr. Santiago offers another valuable suggestion. “A week after the clinic, faculty and students evaluate the clinic: what was exciting, what was learned, and what can be improved. After several weeks, typically within 2 - 3 months, the data is analyzed, and the results are shared with the participants”. I would also suggest that we forward a copy of the results as part of our thank you to anyone who contributed time, services, financial support, and/or materials. Adding photos to the summary is a great way to thank our supporters.

Students participating in the teaching clinics this year also appreciate the experience. In the words of a Mexican student, “This was an unforgettable experience. We were part of a great team focused on our patients. During the clinic I developed skills, communicated in another language, worked under pressure, and learned a lot”. Likewise Haitian students said, “This second clinic offered me a deeper insight on how to better diagnose a patient and specifically how to think dynamically to solve the patient’s problems”. “This was a great teaching initiative. After 4 days, I still have the fire to learn and serve my community” and “In the first clinic, I saw what the job of the optometrist is. In the second clinic, I saw what I could do as an optometrist. I carried out exams that I had read about when studying. With the support of the doctors, I learned to be dynamic, understand how theory fits into practice, and trust myself”.

As our experienced supervising clinicians agree, teaching clinics not only benefit the participating optometrists and students, they have far-reaching, long-term benefits for the community as well. Less obvious but as important, patients who see local young professionals able to offer quality and dignified care alongside the visiting optometrists, develop trust and respect for the local professionals, something very important for optometry as a young primary eye health profession in many countries we visit. Teaching clinics contribute to long-term sustainability.

When you are planning a clinic, please reach out to see if you can involve local students of optometry and turn your next clinic into an even more rewarding experience.

Sincerely and Best Regards,

Michael Ciszek, OD, FVI, diplomate ABO
VOSH/International President