

Recognition of Distinction in Global Health

University of Alabama at Birmingham Heersink School of Medicine

Clinical Elective: Dominican Republic

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My international clinical elective experience in the Dominican Republic (DR) was an incredibly transformative experience. The 4 weeks I spent in the DR exposed me to the realities of health care in urban and rural settings and the importance of cross-cultural communication and community driven initiatives.

Upon preparation for this experience, I didn't really know what to expect. I understood that myself along with four other classmates would be traveling to urban and rural clinics in the DR but wasn't fully aware of how clinically immersive the work would be. This was first realized as our group made our way to Baní, our home for the first two weeks of the elective. Baní was the rural aspect of our trip, being a small town nearly two hours from the main city, but still boasting a large population full of culture, and most famously, it's mangoes. While in Baní I had the chance to work in the Santa Rosa Clinic, alongside students from INTEC, who fully ran the clinic as part of their summer program.



The Santa Rosa Clinic was one of few primary care centers in Baní, catering to a large Dominican and Haitian population. Patients would often come for wellness visits, immunizations, and general checkups at the minimum before being referred to more specialized centers for advanced issues the clinic couldn't accommodate. Services at this clinic were free, and served as a necessary health center for the needs of the community. Each day, myself and two other UAB elective students would come to the clinic and perform tasks under supervision such as blood pressure measurements, immunizations, child health metrics and taking patient histories. While language was a barrier while interacting with patients, it was fun trying my best with my limited Spanish and using gestures, with the INTEC students also translating when needed.



What became increasingly more evident as I worked in the clinic was how resource limited it was. The clinic was entirely government funded, and often faced care limitations when it came to medication supply, space to accommodate patients on busy days, and the language barrier with non-Spanish

speaking Haitian patients. The disparity was made even more clear on one day where a large food truck was parked in front of the clinic. This was something both we and the INTEC students were unaware of, but later found out that the Baní senator sponsored free meals for the community. It was so surprising to see the large number of people lining up for a free meal, with some of them also opting to get free medical care while in front of the clinic. Overall, I was able to see just how vital free services like these are in under-resourced settings and the need for greater health infrastructure.

Following our time in Baní, we then traveled to Santo Domingo, where I spent two weeks at Hospital Marcelino Velez, doing rotations in the OB-GYN and Surgery departments. This was a completely different environment to what I experienced in Bani, as the hospital was larger with several departments and opened sharply at 7am to herds of patients waiting outside since 5 am. During my OBGYN rotation, the different health care approaches of the DR became more apparent, as on clinic shadowing days, two doctors would share the same room to see separate OB and GYN patients, and even had patients call in the next patients as they left. I also learned that C-sections were the most common child delivery format in the DR, as opposed to vaginal births in the U.S., mostly due to perceptions of it as safer and also because of the financial incentive for the hospital. It was very interesting to see these different approaches in health care and also contrast them with what I've seen in the U.S..

From a clinical perspective, my OB-GYN rotation was the most immersive aspect of the trip, allowing me to observe countless C-section procedures, including a twin c-section, tubal ligations, vaginal births and other procedures. In the U.S., I've been able to shadow in the OB-GYN unit and see one vaginal birth, but due to the larger obstetric patient population in the DR, there was more to see on a daily basis in the hospital. The Surgery department was just as eventful, as I was able to see patients lining up for diabetic foot treatments, went on rounds, and watched several surgeries, including an appendectomy, gastric bypass and circumcision.



While at Marcelino Velez, it was also wonderful to see how collaborative and student focused the hospital was, as INTEC students and doctors would lead rounds and also perform different maneuvers, including Leopold maneuvers in OBGYN, which we were also taught. The clinical experiences I had during my time in Santo Domingo expanded my perspectives of cross cultural health care and will also be carried with me as I continue in my medical education.

On days where I wasn't in the clinic or hospital, I heavily engaged with the Dominican culture. In Baní, our group spent off days at beaches and my favorite part, the mango festival. Baní is known for their mangos and at this festival I was able to try countless varieties and mango-based treats, while also doing some shopping for local Dominican souvenirs. The sightseeing didn't stop in Santo Domingo, as our group often visited the colonial zone, tried local restaurants and booked a rainforest hike and sand sledding excursion.

Overall, my clinical elective in the DR was incredibly memorable and imparted on me several clinical and personal lessons that I will take with me through the rest of my medical education and beyond. I would like to give my thanks to the amazing students at INTEC who supported us while in the DR as well as to UAB IME for their planning and support of this elective.

