Diverging Models of Care: Evaluating Healthcare Quality and Efficiency in the U.S. and Bolivia

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Universal healthcare systems provide basic health services to their citizens without financial obligation. In the United States, we occupy a mixed healthcare system where both public programs and private insurance are available to residents.

As a former medical scribe, ongoing recipient of healthcare services, and aspiring physician, I have grasped an understanding of what America's healthcare system looks like and how services are delivered to our community. To broaden my perspective on universal healthcare delivery, deepen my understanding of health disparities, and explore how cultural and economic factors influence patient care, I took part in a three-week program organized by Child Family Health International, visiting Tarija, Bolivia.

I learned about the financial and cultural obstacles patients encounter to receive healthcare in Tarija. I shadowed various specialties in different levels of healthcare and learned that Bolivia's lower economic status severely impacts the quality of care residents receive. I observed many surprising differences from sanitation to available resources. I found that many practices physicians apply in health facilities are outdated compared to the United States standards. Additionally, methodology is not as efficient: the delivery of healthcare is slower, which suppresses health progression and improvement.

Being in a new environment allowed me to adapt to a new culture far from my own. This is essential in wanting to work in healthcare as it will help me connect with individuals who come from different backgrounds and allow me to approach my work from a different perspective.