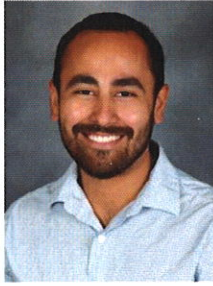


# Student Spotlight: Roberto Lopez Cervera



Roberto Lopez Cervera

**ROBERTO IS** A MS2 in the MSTP who is passionate about social justice and mental health. He is a Co-Vice President of the Student National Medical Association (SNMA), Twin Cities

Chapter and an active member of a medical coalition based out of UMN that seeks to provide medical and mental health relief in humanitarian crises.

## **What got you interested in immigration-related healthcare advocacy?**

**R:** My interest in immigration-related healthcare advocacy came about when I traveled to Tijuana, Mexico in January to provide basic medical relief for refugees from the Honduran caravan. As you may know, these refugees decided to make the 2,000+ mile journey to the southern U.S. border to apply for asylum, a process which is legally recognized by federal law. Through interactions with volunteers who were trained in law, our team found that the U.S. government was only processing about 20 - 30 asylum applications per day while there were thousands of asylum-seekers waiting on the Mexican side of the border. It was not uncommon to find families who had been waiting for months on the streets or in overcrowded shelters. This was concerning to our medical team because the asylum-seekers were being forced to wait in unsafe conditions (physically and mentally). For example, the overcrowded shelters were a nidus for infectious disease. In my short time there I saw outbreaks of chicken pox, scabies, and hand-foot-and-mouth disease. Chronic conditions were also going unmanaged. At one shelter we saw a woman with blood sugar of 600 (3x normal). Mental health issues were also abundant and unaddressed. At the same shelter, there was a young boy with behavioral issues that kept him from making friends. His mother told us that lack of mental health

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continuity limited their ability to make progress with his behavior. On top of this, I heard stories about how refugees were extorted for money and treated inhumanely by U.S. border agents when in their custody. Ultimately, what sparked a sense of duty in me was learning about the cruel and inhumane conditions that these people, who were already running from the threat of death or violence, were being subjected to (whether directly or indirectly) by the U.S. government with zero accountability.

## **During your medical mission trips, what was the most impactful thing you experienced?**

**R:** There were many encounters that impacted me in different ways. I think the most relevant one for this audience would be meeting a Venezuelan man in an overcrowded make-shift tent city inside of a church who had been a medical student before joining the caravan with his partner. Just think of what it must feel like to feel so unsafe that you would leave your home and dreams behind in search of a basic sense of security.

(side note: while the recent caravans originated in Honduras, there are people from other Latin American countries, mainly Guatemala and El Salvador, who join them for similar reasons.)

## **You also attended Spring Lobby Weekend in Washington D.C. recently, what were your takeaways?**

**R:** You can check out my Twitter (@RLopezCe) for a statement I wrote the night after I lobbied on Capitol Hill. My short answer is that I learned how our current immigration system allows for the violation of the human rights of asylum-seekers and undocumented immigrants. Instead, we ought to be pushing for value-based immigration policy, meaning policy that is in line with our nation's collective ethical and moral

beliefs. I also learned that this effort should be multi-disciplinary. In the same way that my team used a medical lens to scrutinize the inhumane treatment of asylum-seekers, I feel that professionals from other fields could use their own lens to find ways in which current policy is doing more harm than good.

## **How can other medical students help with immigration health policy?**

I was the only medical student at Spring Lobby Weekend, so I think more medical/scientific perspectives at these events would probably be appreciated. There is also a plethora of local and international organizations that could use more hands and heads in their fight against human rights abuses.

With respect to medical missions, there are many ways to be helpful. For example, you could work under a physician to make workflow more efficient, help organize trip logistics, act as an interpreter, lead a project, or a million other things. I think one of the most important roles for medical students is "leader-in-training". Hospitals and research institutions do not hire physicians to plan medical missions (yet) and our mentors will not live forever, so it is imperative that the next generation be properly prepared to lead this kind of work.

A more abstract way that MSTP students could help is by approaching these issues the same way you would design a basic science experiment. Get out in the field, make some observations, and think (and write) about them. Unlike natural laws, human laws are sometimes arbitrary and subject to change. So, unlike those antibodies you have been trying to optimize for months, you can actually get the government to work for you and for people who may not be able to advocate for themselves.