



CELEBRATING 20 YEARS SERVING THE QUEEN CITY...AND BEYOND

When Dr. Myron and Joyce Glick established Jericho Road Family Practice twenty years ago, they saw a grand total of three patients in their opening week. Today, Jericho Road Community Health Center treats over 16,000 patients a year in Buffalo, provides over 15,000 patient visits a year in Africa, and supports thousands through local community programs.

Whether you've supported Jericho Road since its humble beginnings as a family practice back in 1997 or you're just joining us this year, we bet there are some things about us that you don't know! Here, then, are some "fun facts" about Jericho Road's history. We hope at least a few of them are new to you.

A Message from Our Founder and Chief Medical Officer

Twenty years ago, Jericho Road opened and we saw our very first patient. Those first years were not easy and we definitely had a humble beginning, but we did experience the mercy and faithfulness of God from the very start. It has been a privilege to see Jericho Road grow. How exciting to see Jericho Road expand in Buffalo and venture to places such as Sierra Leone and Congo! I am grateful for each of you and for the many others who have joined in this journey along the way. God has indeed been faithful to Joyce and I and our four children and to so many of you who have given to this work. It has been an honor to partner with you.

Who knows what the next 20 years have in store for Jericho Road? I am optimistic that our work is not yet done and that God will lead and direct Jericho Road in the future to continue to grow and make a real difference, especially in the lives of the most vulnerable here in Buffalo and around the world.

Dr. Myron Glick

1. Jericho Road Family Practice opened on May 5, 1997. That week, the practice saw a total of three patients. Today, our Buffalo-based clinics see 310 patients per day, on average.

2. Though we've been open through 19 winters, Jericho Road has only closed for snow once! That closure occurred for one day during the October Surprise storm of 2006.

3. Before we became a certified replication site of the National Parent-Child Home Program, we had our own in-home early childhood education program called West Side Read and Play. The program started in 2008 with 10 families. Today, PCHP serves approximately 100 families with 18 Early Learning Specialists on staff.

4. The Genesee Street clinic once ran a weight control program called "Why Weight." Several medical staff members became gym instructors and personal trainers.

5. The Polly Project, Jericho Road's maternal health mentoring program for English-speaking women, is named in memory and in honor of Polly Tice. Polly's Corner in the Barton Street clinic's pediatric "wing" is also named for her.

6. Our chief program officer, Dr. Anna Ireland-Mongo, was the Priscilla Project's first doula. Today, there are 29 doulas on staff.

7. Our English as a Second Language program grew rapidly from its inception. In the spring of 2010, the program had 12 students. By the end of its first year, the program was teaching 65 students from eight language groups. Today, ESL serves over 250 students a year through the support of 60 volunteers.

8. Throughout its 33-year history, Vive has provided over 100,000 asylum seekers with food, shelter, and legal assistance.

9. Our first clinic outside of Buffalo was opened in 2015 in Kono District, Sierra Leone. The clinic is called the Adama Martha Memorial Community Health Center and is named in memory of clinic medical director/co-founder Phebian Abdulai's mother and grandmother.

10. Our new clinic in Rokassa, Sierra Leone (Orfonthy Community Health Center) is named after Dean Weaver's adopted son, who is originally from Rokassa. Dean is a co-founder of EduNations, our partner organization in Rokassa, who built our clinic facility there.



Partnership with D'Youville Sends Local Students to Goma Clinic



Emily Anderson, Abigail Grainge, and Kathy Marcotte, Family Nurse Practitioner Students at D'Youville College

On our first day, a one-year-old girl entered the exam room with her mother, frightened and in tears. Her right upper arm was tightly wrapped in a bandage with her forearm and hand severely swollen with blisters. She had previously been treated by a local witch doctor, but her arm had gotten worse. With great concern for

couldn't really help him. The best we could do was to put together enough funds to send three of his children to school.

It is hard to acknowledge that things we see as basic human rights in the United States, like medical care and education, can cost an unattainable amount of money to the citizens of Goma.

Being a medical care provider in Goma is not easy. Supplying medications or health advice in this place sometimes seems equivalent to putting a Band-Aid on someone who is hemorrhaging. We were grateful to be able to spend two weeks there, but the staff at the Wellness Clinic are there every single day, bringing peace to Goma's most vulnerable. Each member of the team is dedicated to treating overall patient health. They address the infections and diseases that bring patients to the clinic, but they also consider individual home life and mental health. The quality of care they give to their patients is so important and their compassion is overwhelmingly evident. Though their work is difficult and, at times, frustrating, the staff at the Wellness Clinic strive to show their patients hope, love, solace, and respite on a daily basis.

In September, we embarked on a life-changing two-week journey to the Democratic Republic of Congo. The Wellness Clinic, in the city of Goma, sits among the volcanic rock from the towering Nyiragongo Volcano. The road to the clinic is full of rocks, dirt, and giant mud puddles. Occasional bright green tropical foliage emerges from beneath the rock, reflecting the resilience of the people of Goma. The daily trip to and from the clinic takes 30-45 minutes. Our team made the journey crammed tightly in the back of a World Relief truck. The road was so bumpy that we were airborne at times.

During our visit, we treated many cases of typhoid fever, malaria, and uncontrolled chronic diseases, such as high blood pressure, diabetes, heart failure, and kidney disease. We also treated young men and women for sexually transmitted diseases and children for respiratory infections.

While we saw many patients during our time in Goma, two are most memorable:

compartment syndrome and a fracture, the child was sent to the hospital. Later in the week, mother and daughter returned with X-rays in hand and a freshly-casted right arm. Radiology revealed a clean humerus fracture. No more tears were shed as a shy, coy toddler stood peering out from behind her mother's legs.

Another memorable case was that of a 27-year-old man who came to the clinic with a severely enlarged spleen and profound anemia. While our initial instinct was to send him to the hospital for an immediate blood transfusion and possible surgery, we learned that he had been living with this condition for quite some time. We also discovered that the surgeries he needed could not be performed in Goma and would require him to fly to India at a cost of thousands of dollars. We felt quite defeated knowing that we



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Dr. Ethan Gable sits in his office at Jericho Road's West Side clinic, typing up notes from his recent patient visits. His two diplomas from the University at Buffalo are framed and displayed on the wall next to his desk. It's traditional for doctors to hang their degrees in their offices, but, for Dr. Gable, these diplomas represent more than all the hard work and studying of medical school and the sleepless nights of residency. They are also a testament to the support that was given to him as he was growing up on Buffalo's West Side and the investment that Jericho Road and his mentor, Dr. Myron Glick, made in him from a very young age.

"In a lot of ways, I was a typical West Side kid coming in to see Dr. Glick [as a patient]," he remembers. "[My story is] true for a lot of our patients. My grandmother was an alcoholic, so my mom was raised in foster care. After I was born, my dad wasn't around. He left when I was young."

From his vantage point as an adult, Dr. Gable can label the circumstances of his childhood. He says he grew up in the same type of generational poverty that still exists throughout the city today. "We grew up without a car. I know what it's like to take three buses to get where you want to go."

As a child, Ethan didn't have his sights set on medicine. "The main goal was to stay out of trouble," he says. At first, though, he wasn't able to achieve even that goal. "From early on, I got suspended from school a lot. Any time you have the distractions of home...then, classically the kid acts out in school and isn't as attentive."

Over time, though, Dr. Gable became more focused on academics. He remembers seeing the way the challenges of the urban environment affected his sister, four years his senior, and was motivated to take a different path. He saw her get mixed up with disreputable people and start a life-long struggle with drugs. When Ethan was in eighth grade, his sister had a baby that she couldn't care for. "I helped raise him at first with my mom. I think that was a very maturing time for me," he reflects.

During high school, Ethan was behind academically and still running with what he defines as "the wrong crowd."

Dr. Ethan Gable: From Patient to Provider

Knowing that he needed to get out of the damaging environment of his high school, he applied to Charles Grandison Finney High School, a private Christian school that operated out of the now-defunct Buffalo Christian Center. His family, which grew to include his supportive stepfather, buckled down to afford the tuition, while Ethan worked on roofing jobs and at Wegmans to help with the payments.



While in high school, Ethan developed an interest in medicine and reached out to the one place he really knew about in the medical field: Jericho Road Family Practice. "I never necessarily thought I could be a doctor, but I certainly had interest in medicine and [the person] who I pictured [when I thought of] a physician was Dr. Glick." Ethan started volunteering at the practice weekly during the refugee-intake clinic; at first, assisting with intake paperwork and later learning how to do simple medical assistant tasks. He would continue volunteering at the clinic into college.

"I didn't consider myself the college type. I did poorly on my SATs...academics just wasn't a focus. It got better at Charles Finney, but I was still behind," he acknowledges. Luckily, Ethan was accepted at Buffalo State College. After a year there, he decided to transfer to the University at Buffalo. While preparing to transfer, Ethan got a frantic call from his mother. His sister had been shot in a domestic incident and was in the emergency room at ECMC.

"I remember going to ECMC in the middle of the night and seeing the doctors come in and it was very impactful," he remembers. "[I was] seeing my sister - who was really caught up in bad influences - seeing her

be a product of her environment. It was both appreciating what the doctors were capable of doing and also realizing that I needed to take control of my own life."

Ethan took a step back from his schooling, withdrawing from some of his classes at UB to assist his sister. When he returned as a full-time student at UB, he came back with a renewed sense of purpose and direction.

After graduating from UB, Dr. Gable worked part-time as a medical assistant at the Barton Street clinic and full-time as a researcher at the university for a while. Eventually, he moved down to Florida to spend time with his mother and stepfather who had settled there after retirement. When he was ready to apply to medical school, Ethan knew he wanted to come back up to Buffalo. He sent an email to Dr. Glick letting him know that he was planning to return to the city.

"From that one email, I had both an apartment and a job," Ethan recalls. Dr. Glick promised Ethan an apartment near the Barton Street clinic and rehired him as a member of the front office team. When Ethan was accepted to the University at Buffalo School of Medicine, Dr. Glick bought him his first stethoscope and otoscope, which he still keeps in his office today.

Going into residency, Ethan was convinced that his path would not take him to OBGYN. "The theory is that you take whatever you don't want to do first because you're inexperienced...and you're inevitably not going to do as well,"

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he explains. "So I picked OB and pediatrics because, at the time, those were the two things I thought I wasn't going to do. OB was my first rotation and I ended up loving it."

Given his trajectory, it seems reasonable to assume that Dr. Gable always anticipated returning to Jericho Road after residency, but that path was far from certain.

"First of all, when I left Jericho Road it was still a family practice and I didn't think they would have the capacity to hire an OBGYN," he remarks. "Also, I think what drove me also became a little bit of a negative. I wanted to make sure I wasn't poor like we were growing up and I wanted to provide for my kids and that turned into a selfishness. You know, when you go into medicine you're going to serve, but you can certainly do other specialties and make a lot more money."

After receiving a couple offers from some private practices that would have been extremely lucrative, Ethan decided to turn them down in favor of community medicine.

"Eventually I said to myself, 'That's not why I went into medicine in the first place.' It became clear that God was calling me to work here. When you look at it from these worldly, secular standards, it made sense [to accept a private practice position], but when I thought about it more I realized I couldn't do it. I had had too much experience in the satisfaction of working for something bigger than myself."

When asked to reflect on his new role as a medical provider at Jericho Road, Dr. Gable smiles. "I've really enjoyed the community health aspect," he explains. "Just knowing that we have the Priscilla Project and other extra supports, it makes for less frustration as a physician. Being in a broken [healthcare] system, there's sometimes this level of frustration of not actually contributing long-term. Experiencing the benefit of being a physician in this kind of supportive system has been even better than I thought it would be."

Now, Dr. Gable is Jericho Road's first OBGYN, allowing the clinic to provide even better continuity of care for patients. He recognizes the ways in which Jericho

Road and his mentorship with Dr. Glick have shaped his life for the better and he looks forward to being able to provide similar long-term investment in his own community.

"In reflecting on my life and relationship with Jericho Road and mentorship with Myron, one of the main things that comes to the fore is the constant investment and relationship with the community. You can be a health care center and provide care and you can see your patients for 15-minute appointments, but to actually have significant social change, I think that's done best by building those relationships with the community and having the investment in the community. That has to be done over time.

"There was no magical moment in my life when all of a sudden I was on my way to medical school. It was the constant support and relationships, investments in me to enable me to realize that I could succeed."