

TWO BLOCKS FROM THE FUTURE

By Rebecca Bean Otto

When did Padrino Children's Foundation realize it needed to build, not rent? A chance meeting with Padrino board member Nancy Naigle last November gave me, a writer and Padrino donor, the chance to find out for myself.

I hadn't visited Padrino on Cuauhtémoc near Santos Degollado in the San Vicente neighborhood, so I didn't know that Padrino faces itself on this busy dirt road—the clinic on one side and MAKa therapy center on the other. The clinic site opened in early 2019. MAKa moved across the street in 2020. This second rental eased a squeeze, but created a weather problem. During hurricane season, torrential rains divide Padrino from itself.

I look through the window of the tiny MAKa annex, where children with special needs receive therapy, then cross the dirt road, facing an open door. I'm studying Padrino's short hallway, with narrow rooms on each side. Both these rentals total no more than 1,500 square feet, Nancy later tells me.

I'm not expected, but Administrator Edith Salvatierra Ruiz greets me warmly, describing each office as we move toward hers, the last one on the left. She and Claudia Falcon, Padrino's clinical assistant, share cramped quarters—two people, two desks, and four file and storage cabinets. Regular medications for Padrino's young patients fill two file drawers. Where are the temperature-controlled medicines? At the other end of the hall. Dra. Mitzy Cervantes, Padrino's pediatrician, the only one in Todos Santos, keeps them in the mini-frig in her office.

Today Dra. Mitzy and I talk in a tiny refreshment and obvious storage area. Other storage is scattered throughout the building. We pull out folding chairs. She's available to talk because she and Todos Santos' only child psychologist, Jessica Avila, can't see patients today. Two genetic specialists are using their offices right now—one from Mexico City, the other from Hermosillo—giving parents the results of their children's whole genome sequencing tests. Whole genome sequencing is an advanced diagnostic tool that is not yet available for clinical use in Mexico, except through Padrino and the Children's Hospital of the Californias in Tijuana.

Biotech giant Illumina, Inc. of San Diego is offering it through Padrino, at no cost, thanks to Board president Jamie Kelly's husband, Ed MacBean, formerly of Illumina, now at Helix. Already, 108 children have received this generally cost-prohibitive testing through Illumina's *iHope* program. Many of these kids live near us. Others come from all parts of the state – often referred by the CRIT pediatric rehabilitation center in La Paz or non-profit collaborators in Los Cabos.

Dra. María Elena Lerma, Directora General of CRIT, avows: "What's happening with the genetic screening that Padrino already has is amazing, amazing, amazing! We have the most difficult cases in terms of disability and many of these cases are linked to genetics—and in Mexico, it's very difficult to have genetic testing."

Is Padrino keeping pharmaceuticals in two file drawers and a tiny frig, while, at the same time, offering state-of-the-art genetic testing capable of accurately diagnosing the world's rare genetic disorders?

Yes, and take note: Genetic disorders are prevalent in Baja, especially among the poorest 20 percent of children. Extreme poverty brings stigma and discrimination with it, creating tight-knit communities (crowded, stressed, often malnourished) that turn inward out of necessity. That closeness, along with environmental exposure to pesticides, other toxins, and dust (yes, dust), increases the risk that children will be born with life-long medical challenges, especially neurological issues ranging from Down's syndrome and autism spectrum disorders to far more complicated conditions that are difficult to diagnose.

For some children and their parents, Illumina's whole genome sequencing will end what Padrino's Executive Medical Director Dra. Alejandra Peña Salguero, calls an awful 'diagnostic odyssey' that can last months or years. Typically, routine genetic testing assesses one suspected gene, or group of genes, at a time, leading to one test after another—often expensive stabs in the dark. Whole genome sequencing has changed all that, analyzing the patient's entire genome from a single blood sample.

When kids start missing key developmental milestones due to neurological delays, or suffer from cardiac problems, epilepsy, diabetes, or kidney disease, these poorest of families often sink even deeper into poverty and despair. And quickly find that they cannot access many hospitals and clinics because they lack funds or, sometimes, even a birth certificate.

The doors stay open at Padrino—and all who enter with serious financial need will be treated with absolute dignity, no matter what.

From the start, Dra. Alejandra has wanted Padrino to be a safe haven and refuge in what can be an unwelcoming world. It speaks volumes that Padrino kids just drop by sometimes. "They may come just to say hello or use the bathroom," Dra. Alejandra says with a smile, but adds this therapeutic note: "There's one young girl—her parents hardly bring her anymore—who comes by herself. We know that if we 'scratch,' pretty soon we'll find out what's troubling her."

I'm trying to wrap my head around Padrino's complexity and serious problems of inner and outer space.

As it turns out, geneticists aren't the only visiting specialists providing critical consultations here. A cardiologist, a neurologist, a specialty pediatrician, and others come to Todos Santos, so families don't have to travel or skip work to see them. Before this centralized care, Padrino's second-largest expense was the cost of transportation—covering the expense of families traveling to consultations. Staff meetings usually squeeze into Dra. Alejandra's lean office, which she recently cut in half to create a needed new room. Important workshops are booked at the spacious Casa de la Cultura on Benito Juárez.

By 2020, Padrino knew no affordable rental property in Todos Santos could relieve the clinic's space problems. So did strong Padrino supporter Andres Ariza, a prominent Los Angeles builder, who also lives in Pescadero and works on projects here.

Andres was the first to say the word "build" out loud: "If you ever want to build, just let me know how I can help," adding, "I have an architect and even a landscape designer in mind." It was a huge offer and a strong nudge, but Padrino had no land to build on—until, quite suddenly, it did. An ideal site was for sale two blocks away, and another very generous donor promptly bought it for Padrino. Soon, \$100,000 in seed money for construction appeared—a grant from the Noll Foundation.

Just like that—but not without time to think—Padrino found itself in the “design and build” stage.

Andres quickly jumped in to help the Board and staff imagine what they hoped for: a sanctuary, even a home away from home, for these neediest of children and their families. This building could become a safe harbor for hope and healing—and would anchor Padrino at last, expressing this community’s steadfast commitment to pediatric care.

In meeting after meeting, the Board and staff spelled out what they hoped for or absolutely needed, which grew into a very long list and numerous piles of paper. It was surprising how much storage they hoped for. They shared pictures of buildings they liked and compared them. No one wanted a boring box of a building. And it couldn’t look too “medical.”

Dra. Alejandra knew where to seek advice and scheduled a visit to Dra. Maria Elena Lerma of CRIT in La Paz. CRIT has built 23 medical facilities in the past 25 years—an astonishing number. (A fun note here: The CRIT in La Paz is built like a giant, radiantly colored starfish.)

Dr. Maria Elena knew that Dra. Alejandra was bringing two Board members. All three women had seen the building before, but never this way. This trip, they would pore over every architectural detail, crawl down into the boiler room, study extensive and crucial IT systems, and see the CRIT’s emergency electrical backup and water system. They would hear what this CRIT had done wrong and needed to fix; and what they’d done very right. Says Dra. Maria Elena: “They toured and saw and heard all our secrets—the foundation of the whole operation of the CRIT. And I want to tell you that these three wonderful ladies, they were really excited about this, and they were seeing every part of CRIT through ‘love eyes.’” Dra. Maria Elena imparts huge meaning to what she calls “love eyes.” Seeing with love eyes means seeing others as you view your own family—seeing a stranger in great need as your brother, your sister, even as your most beloved.

Dr. Maria Elena wanted me to feel the exhilaration they’d felt: “They were very excited about every single part of what we showed them, and they were immediately starting to think about how they were going to make it possible, how they were going to build this. I wish my words could take you to that moment. This is happening. I know it will happen because love is what makes possible big projects like this. When people start seeing a project through ‘love eyes,’ the miracle is going to happen. And thank you, because this is not only going to help Padrino. This is going to help *our* children too. We and Padrino work with many children in common.”

Andres helped these Board members digest all these essentials too, and the long, long lists and piles of paper soon translated into an Excel spreadsheet of detailed building specifications.

When the time came to design the building itself, Andres called his friend Peter Hamilton, an LA architect who’d founded STUDIO Peter Hamilton. They’d worked together on a project here, and he’s one of Peter’s clients.

Peter agreed to help without hesitation, even when it meant working pro bono.

Why? That’s the first question I ask Peter by phone.

Peter’s answer: “When Andres approached me with this project, I was excited because it was a chance to work with him. That he wouldn’t be a contractor was my understanding, but he was already assisting

Padrino, and we had become good friends. Beyond that, my dad is a pediatrician who's led medical missions for more than 20 years setting up weeklong free clinics staffed by maybe 30 nurses, doctors, surgeons, and volunteers particularly in West Africa but also in Latin America. I've accompanied him on a few of those trips. He treated kids pretty recently in Ensenada, Mexico. The places my dad usually does missions are quite literally old warehouses that barely have electricity or running water. So, I definitely thought, wow, what a luxury Padrino is putting forward for doctors who come to serve the community, and how great is it to give kids with serious health issues year-round support, not just help for a day or a week."

I probe, and Peter goes on, "I felt excited to be asked to design a project that was not just functional but hopefully beautiful and uplifting. I wanted to give people the feeling that this was a place people had thought deeply about—light, with fresh air and big windows—a safe place, an inviting place, a place suggesting hope and possibility. I was excited on a couple of fronts. It seemed like a natural fit for me to take on, and it's been really a blast. The people at Padrino have been nothing but kind and supportive of the design and very, very easy to work with. It's been great to walk into a project with a big concept and a big idea compared to some of the things I'm asked to do."

I tell him that Dra. Mitzy thinks the new building seems welcoming—like a hug.

"Well, that's great," Peter says. "I'm primarily residential, and lots of little techniques you pick up working in residential architecture can create spaces that feel welcoming but also intimate. There's a very public nature to this building, but there's also a serious need for privacy and confidentiality, medically speaking, so these public and private elements need to be separate from one another. Residential design was definitely bleeding into my layout decisions. And Padrino has been very thoughtful and direct about what they needed. They've learned what works and what doesn't work through trial and error, so they were making all that crystal clear and I think I helped them realize their goals."

Says Peter: "To me, the building's central courtyard sets the tone for the entire space. It's physically central and invites the public in. But I wanted to buffer the medical offices from that public space, by designing a long hallway facing the courtyard. It's important for the medical offices to have this extra level of separation to create a sense of safety and encourage focus."

I think back to what Dra. Mitzy told me: "At staff meetings, everyone got the chance to ask for what they needed. As the pediatrician, I hoped for a little more space, so the kids had room to play and the parents weren't having to say, 'Oh, careful, careful, careful' in my small office. I need parents to be able to concentrate when I'm talking with them and understand all the information that I'm giving them, so I can be sure the treatment will be successful." The less interruptions parents experience, the more they can focus.

Peter saw the layout of the building's long medical arm as a progression. Patients would enter for the first time at one end, receive all kinds of ongoing support to grow up more whole, and come out the other end, at age 18, with a measure of independence and even vocational skills. "Picturing that progression, start to finish, really satisfies me," he asserts.

Peter clearly separated the administrative arm of Padrino from the medical wing, allowing the staff space to concentrate on their work, meet informally, and to rest and regroup. Right now, Padrino's care team has little or no privacy, works almost constantly and risks burning out.

And Padrino wanted a small guest suite to house visiting medical professionals for a night or more, and a large great room and meeting room. Those were set upstairs—along with an elevator and additional storage—leaving room to expand still more someday.

“It takes real nuance to achieve each goal when this program has so many different spaces,” says Peter, noting: “You should see the Excel spreadsheet they gave me, telling me what they needed to be close to what. It was very complex. They wanted the physical therapist to be close to the psychologist, but it couldn’t be close to the bathroom. There were all these little rules and this very big program, so it made it a really fun puzzle, and I think everyone feels like they got what they needed.”

Peter transformed that spreadsheet into a medical clinic with both grace and power. He spelled out his goal: “I wanted to create the look and feeling of a beautiful old Todos Santos building, not a medical facility, and that was very much what the Padrino sought as well. They wanted this building to feel part of the community. And when it comes to the central courtyard—a kind of bonus room beyond 5,000 feet of interior space on two floors—my biggest influence was even older Mexican architecture, which felt very traditional and very fresh at the same time. I pictured a lot of people and a very active place and think it’s an important luxury to have an outdoor space where kids can play or do therapy sessions, or folks can just relax, a place that transforms into an event space for parties or dinners, or a movie night.”

Medical spaces don’t often look this imaginative and creative, which pleases Peter. Here’s what he knows: “Research shows that the physical environment has the power to set an emotional expectation. Design can say this is a generic place—they did it efficiently, and didn’t care much about light, and didn’t care much about the users, but they got the max square footage, and you go see the doctor down the hall, and most people see that and feel that, even though they can’t put words to it. There’s an emotive response to spaces that don’t take the user into account. Then there’s a beautiful building, which I hope ours is, where people say, this is different, this is inspiring. They care. They’re taking advantage of natural light and breezes, and they care about the architecture, and they clearly care about us, and, again, that sets the emotional expectation. I often think about a really great book called *The Architecture of Happiness* by Alain de Botton, who writes: ‘What we search for in a work of architecture is not in the end so far from what we search for in a friend.’”

“The outside is, like, really beautiful,” Dra. Mitzy says with delight, adding, “I’d tried before to imagine how it would look, but when I saw the drawings, I couldn’t believe it. I think it’s beautiful. The building looks like, almost like ‘un contenedor’—a little container—like a hug.”

Dra. Maria Elena’s immediate reaction: “It looks or feels, for me, more like a home.”

Success on paper is a great start. And for landscaping, Andres has brought in Michael Fiore, owner of Fiore Landscape Design in LA, who’s also working pro bono to design dramatic, even playful surroundings for the new building. Michael has two kids of his own, and already envisions creating an irresistible mound for kids to climb!

We may be smaller and distant from the medical centers in La Paz, Los Cabos, and Mexico City, but Padrino already offers more pediatric services than most facilities in BCS, with more ways to treat the

whole child, the whole family, and support the community at large. Today, 90 percent of the services kids need are available right here.

Illumina's genomic testing promises ever more remarkable things to come.

Peter mentions something huge now: "For me, my 5-year-old son is a Type 1 diabetic, and he also has celiac disease, so I know genetic testing is really important and can change lives. It's been a very, very wild ride since 10 months ago when we found out—a really wild year—but we live in a world where's it's never been better to have a disease or a better time in mankind to be sick. That people are investing, giving so much time, energy, and money toward efforts like this made me think this was a very, very small thing I could do to help people who had done so much for me. It's been huge for my wife and me to know we don't have to do this alone, and we have a great community of ongoing support. I hope that Padrino will be that for so many people, and I'm humbled to be part of that."

"That's already happening," I assure him, citing this example: "A 3 ½ year old boy came in who was crying all the time. Padrino realized he was autistic and began early intervention. At 5 ½, he's speaking with the people at the clinic, and he's a whole different kid."

"Incredible," says Peter. "What a great story."

Padrino offers comprehensive pediatric care, assessing kids with a multidisciplinary and holistic approach. All this helps them treat local kids who live in Todos Santos, Pescadero, Elías Calles, and even ranchers' children and migrant families. Padrino coordinates telemedicine calls with specialists from mainland Mexico when needed, or funds travel to distant medical services. Padrino feels bigger, and actually is bigger than what eyes can see, thanks to its many partners and allies in BCS and beyond.

I hadn't told Peter that tears had welled up when I spoke with Dra. Mitzy two weeks before, but he knows now. I'd told Dra. Mitzy how much I wished my own family had had a Padrino intervention. Many years ago, my brother was suffering from severe attention deficit disorder that went undiagnosed. Dad whipped him with a belt and mom yelled at him. They punished him for his inattention, wildness, and frequent outbursts, just because they didn't know better.

I say warmly to Peter: "You designed this new Padrino from a place of great heart."

"My dad's been doing this for a long time," Peter responds. "I just hope in my own way I'm giving back. It's easy for me to get lost in the busyness of work and minutiae and lose track of what's important, even forgetting the joy of design. This is a really cool project. I have so much respect for the people who make this a career and risk doing what they're doing. It's been a really great project, with a different energy and a different spirit about it, and a real respite for me—imagining this special place 1,100 miles away."

I tell Peter that Maria, a mother of three, came to my house today. She knows Padrino well. Not long ago, her nephew received a definitive diagnosis from genomic testing at Padrino, and he's getting psychological help there now. She tapped her heart. I showed her pictures of the building to come and asked her what I should ask you. Maria spoke urgently: "*When will it be finished?*"

"I don't think the architect can answer that," I told her, knowing that Padrino has raised an impressive \$500,000 in gifts and commitments so far, but still needs another \$250,000 to start building.

"It's true. I can't say," Peter admits, but, a second later, he adds: "I'm looking forward to the opening party, when we can all celebrate!"

One more thing, because it's so important... I just met Board President Jamie Kelly, who floored me by asking this question: "Do you see any disabled local people in Todos Santos?" I had to admit, I hadn't. She answers: "We don't because they're hidden away at home. Many never even go to the C.A.M. special-needs school in town. They're practically invisible, but we're working to change that, one child and one family at a time."

Suddenly, I know why Dra. Alejandra loves it when Padrino kids just drop by. These kids are accustomed to being hidden from prying eyes yet feel utterly welcome in Padrino's world. That in itself is worth celebrating, right here, right now.

February 27, 2023