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Feature Story

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**Seeing through Impact**: **A black-owned, small business adjusts through COVID-19**

A chill fills the cream-colored walls of a dim room. A middle-aged man dressed in dark colored T-shirt, brown hoodie, and sweatpants is holding an old pair of dark colored glasses in his hand. He sits in a black leather examination chair with his black, work-style boots planted on a silver foot-pad. Her brown, curly hair is pulled back into a ponytail. She wears black-framed glasses. She sits on a black stool angled in front of her patient, wearing professional attire, donning a white lab coat with a stitched, scripted font that reads, 'Dr. Walker-Adeyemi.'

"Seven or eight," she says. "Seven," he says. "Three compared to four, do they look the same," she says. "Four," he says.

She changes the dial. Click, click. "Four," he says. Click, click. The dial changes again. "Four," he says again. Click, click. She asks him if it's better or worse, he doesn't respond. Click, click. "Better or worse," she says again. "About the same," he says.

He reads off a row of letters. She rolls her stool over to a desk to scribble down some notes with a pen. She stands up, walks to the door and then flicks on the light switch. She walks back towards her patient in the illuminated room holding the ophthalmoscope. She holds the device up to one of his eyes and up to her glasses and moves in closer.

"Well. You have a little bit of a change," she says. He talks about his travel. He's in town from Florida. She tells him to look straight ahead and then finishes up his eye exam.

"Do you have any allergies, dry eyes," she says. "No," he says. "Smoking can damage your vision. Are we talking cigarettes or," she says, then pauses. "Both," he says. "Okay," she says with a smile. "Let me write out your prescription."

As her patient leaves, she thanks him and offers her information for him to call for questions about his eye prescription. Her next patient doesn't arrive for another hour. She excitedly announces that she can take a quick lunch break in her office and asks me to join her to finish our discussion about her practice and being an optometrist.

Dr. Andrea Walker-Adeyemi is an independent optometrist. She opened Family Focus Family Eye Care, one of the few black-owned, female-owned, optometry practices in the country, in 2017.

The average age of an optometrists is 46. She's 33. Seventy-five percent of optometrists are White, according to 2018 data from Optometrists Data USA. In addition, 21.8 percent of optometrists are Asian; and 1.69 percent of optometrists are black. Data shows she stands out as a minority in her career field.

Making the decision to becoming an optometrist with her own practice wasn't an easy one. Dr. Walker-Adeyemi did not like being micromanaged. She wanted a change and her independence. She made the tough decision to become an independent optometrist after the company she worked for was acquired. She had a goal to start her own practice, but where would she begin?

"I didn't feel like I was ready to open a practice cold. I felt like this was a good in between where I could manage the exams and not have to worry about the glasses side, hiring an optician, and keeping stock of glasses. That kind of thing," she says.

She practices now at her own office next to a Wal-mart location. Finally, on her own and treating patients independently as she planned, a hurdle stopped her business in its tracks.

In December 2019, researchers identified something peculiar, which soon caused great disarray to Dr. Walker-Adeyemi's young practice, thousands of lives, businesses and the global world as everyone knew it to be. A virus in Wuhan, China, made its way from country to country and eventually catapulted into an uncontrollable pandemic across the globe bringing mankind and all of its goings to a halt. By March 2020, it would disrupt her practice. But on this day in February 2020, Dr. Walker-Adeyemi is just looking forward to a lunch break.

She walks into her office, invites me in for a seat, and grabs her multi-colored lunch bag to heat up her lunch. The office doubles as a makeshift storage room with rows and rows of contact lenses, stacked in their own tiny cubes on a wall. A light-colored desk is affixed to an adjacent wall near the door, holding a few papers. A calendar with a few personal photos of friends and family are pinned to the wall near her calendar scribbled with written notes and reminders. She talks more about her office locations and how they operate.

"Corporate Walmart leases to a company called National Vision. National Vision is the same company that owns America's Best and Eye Glass World and those kinds of places. So, National Vision rents the space from Corporate Walmart, and they're a completely separate company," she says.

"They get to pick what frames they want and you can either be an employee of one of those. You can be an independent contractor like a 1099 [IRS form]. Or you can do a lease there. And you pretty much would run your business like you normally would like a private practice and then you would pay rent to National Vision."

"Hey, hey, no come in. What's going on?" she says as her husband and an employee walk into her office.

She greets him as he mentions that he's just stopping by to say hello and he's off to complete some Saturday errands. The employee shares some paperwork with Dr. Walker-Adeyemi and asks her a few clarifying questions.

At her Milledgeville location, she works as an independent contractor. National Vision takes care of all of the billing and coding, they take exam fees and they pay her by the day. She sets her own business hours. She works in her Milledgeville office twice a week, on Thursdays and Fridays. In Locust Grove, where we talk this particular Saturday, she works Mondays, Wednesdays and some Saturdays.

**Andrea aka Dr. EA**

In middle school, she tells me, she had a really, really great optometrist.

“I was just sitting in her exam chair one day and I say, you know what? I think I want to do what you do. So, the summer before I went to high school, I started interning with her. She kind of mentored me and it's really been on that path ever since."

" I [completed] another internship at a private practice I used to work at. I interned with them before I started working for them my last year of college. I worked at Pearl Vision like the year before I went to optometry school and pretty much been on that track ever since. That was in 2011. I worked there and I did a little bit of everything. I worked the front desk, checked patients in, checked them out. I did contact lens trainings, I worked up the patients for the doctor and I adjusted glasses."

The middle-schooler grew into the graduate, then as a graduate receiving her Bachelor of Science degree from Georgia College and State University in 2009. With an undergraduate degree, she planned out her next steps to pursue her aspirations. However, those aspirations were almost void just a few years prior.

"I wanted to give up on optometry before I even started. My first year after undergrad, I didn't get into the school I wanted to go to originally because my standardized test scores were a little low, and instead of opening myself up to other schools, I became very defeated and started to question whether or not I wanted to do this," she says.

"Too embarrassed to go back home, I spent a year as a hall director at my alma-mater and taking some post-baccalaureate classes. I ended up going home the following year and working for a retail optical chain. At that point I still had the desire to go to optometry school, and realized that what I was currently doing with my life was not fulfilling. I revamped my studying strategies, applied to other schools I hadn't considered, and God worked out the rest."

She made her way to Indiana University School of Optometry in Bloomington, Indiana, and graduated in 2015 with her optometry degree. But as a black woman, she still faced an uphill battle with classmates who she says she did not quite fit in with. Out of 75 students who graduated in her optometry class, 3 of them were black students.

"It was pretty tough. It wasn't a lot of black people in the class. You felt out of place. My classmates, some of them were pretty nice, but you definitely felt like you were proving yourself. Like, I'm supposed to be here. I mean a lot of people look at you and they would be like, 'Oh, it's Affirmative Action,' or whatever. So, I really had to prove myself," she says.

Even with multiple degrees, accolades, and owning her own business, Dr. Walker-Adeyemi still feels she needs to prove herself.

"When I first started out you got some people who were super excited to see a female or super excited to see someone who was black. And then I got the opposite. People who were like very uncomfortable with me. Even though it's just eye care. There's a lot of males, and like females, who prefer a male doctor whether it's black or white. I had a guy actually walk out on me in the middle of exam for the simple fact of he was like, you're not a real doctor. He just walked out. Or I get comments like, you know, when I heard Dr. Walker-Adeyemi I just assumed it was going to be a man or I never had no lady doctor before like that kind of thing. And so, I mean some people won't come back because of that.

"I can only be me. I can't change my gender or how old I am or that I'm black. Once I really got comfortable with me, I just want people here that want to be here," she says. "You get comfortable with yourself because at first, I really wasn't. I wanted to be like the other people in my practice, which were all white males."

Seeming unscathed by her history of criticism, she reflected back on some of the questions she's gotten. Those questions that were thrashed onto her by people who didn't accept her as an optometrist. "'How old are you?' 'How long have you been doing this?'" she says. "You know, you get those challenging questions. Like, 'Are you, I mean, are you skilled enough to do my eyes,' that kind of thing. I think that's what every doctor gets starting off. I think it's harder for a black female especially when I was in Middle, Georgia, especially in that area," she says.

**The Pandemic**

There's a new unpredictable future for Dr. Walker-Adeyemi, which doesn't discriminate. The COVID-19 pandemic forced her offices to close for a few weeks. However, wavering executive orders in Georgia allowed her practice to reopen as officials deemed it as an essential business.

Though she's open for business again, new health guidance and mandated rules have changed how Dr. Walker-Adeyemi practices with her patients.

"I am only taking appointments, no walk-ins, which is certainly tough for the majority of my patients. I'd say 20% of my business comes from walk-ins. When a patient calls, they are screened to make sure this is an urgent enough appointment, and those that are non-urgent are asked to wait or we try and settle their issues remotely," she says.

In the office, there are notable changes too. The optical area with the glasses for purchase includes a now roped off area so patients can maintain a safe distance from staff. Masks are required with all patient interactions. Patients are only welcomed in for an eye exam one or two at a time and they must also wait behind a rope to avoid overcrowding the space. A glass shield now divides staff from patients at the checkout counter.

Every frame, and any equipment that touches a patient's face must be sanitized before and after use. All contact lens orders are shipped to the patient's home, and new glasses orders are limited to only those who are in urgent need.

Before the start of every day, the patient rooms, front desk, and phones are all wiped down with anti-fungal/viral/bacterial wipes. The patient must sanitize or wash their hands before touching anything in the office. Dr. Walker-Adeyemi says most of these are current practices, but include new update procedures.

"Most of the patients I've had recently have been new to me, so they have to follow this procedure before touching a pen or clipboard to fill out their new patient paperwork. They are then escorted to the pre-testing room, and we always open and close doors for them so that they are not touching handles. Everything is wiped down with alcohol and allowed to dry for a least 2 minutes before use to ensure proper disinfection, but this is something that we have done even pre-COVID-19," she says.

"As a provider I wear a mask since I am unable to adhere to the six-foot rule while providing care. Most patients have a mask on as well, but I have not yet required it since I don't have enough PPE (personal protection equipment) to cover both myself, the staff, and the patient. I also have a breath shield for my slit lamp (a sort of microscope used to observe the health of the eye) since I have to be in very close proximity (about six inches) to the patient for that portion of the exam. I also sanitize my hands before and after touching the patient's face, but again that is also a pre-COVID19 practice I already had set in place. I also will clean the equipment again in front of the patient if they request it."

Dr. Walker-Adeyemi says she feels good with the measures in place, as she can still see patients safely patients for their needs. However, her office is not at its normal volume, which is causing a huge issue.

"It is pushing patient appointments out, so they are having to wait longer time periods for their appointments. The employees are frustrated from that standpoint because there have been several patients that have been rude over things that they can't control," she says. "I have also noticed a heightened sense of concern over whether or not they are going to catch this virus because they are having to come in contact with so many different people. We don't know our customer's hygiene habits, where they have been, and who they have come in contact with. Although we have a COVID-19 screener for the patients, they could be deceptive, or they may not know they have contracted the virus because they aren't displaying any symptoms. That's the scary part for the staff, and as a provider, although I want to pay the bills, that doesn't trump their safety or mine. The business would be in a much worse place if we all get sick, so helping the patients to understand this is key."

**Seeing through**

Though Dr. Walker-Adeyemi keeps a positive outlook on the future of her business, the fact remains that she and so many other small businesses have not received any financial relief or aid, even though the U.S. President and lawmakers approved the $2 trillion the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which included a $349 billion Paycheck Protection Program (PPP) for small businesses.

Dr. Walker-Adeyemi planned ahead. Funds once set aside for additional medical equipment, now covers basic operating expenses.

"I am definitely not getting the financial relief that I was expecting, and after talking to others in my profession, they are in the same boat. I would say over 50% of the other small business owners I know did not get the federal relief funds they were expecting, and I can't depend on those funds to come at a later time, although I hope they do. All you can really do is plan for the worst, and hope for the best," Dr. Walker-Adeyemi says.

"The reality of what this will do to my business I don't think has not yet been realized," she says. "From a fiscal standpoint, I am still in the black, but say restrictions on routine care linger for 2 to even 3 more months, I would certainly be much more concerned about my long-term financial well-being. The brighter side is that I have a great network of colleagues, and I have an employment opportunity lined up if I fall on hard times."