

Our language of health

Spanish-language health class part of efforts to improve wellness of Hispanics

By Betsy Q. Cliff / *The Bulletin*

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Lucila Godoy's mother recently died from complications of Type 2 diabetes.

The Bend woman, who also has the disease, said she does not want that to be her fate.

She's enrolled in a class through Deschutes County Health Services called Tomando Control de su Salud, a Spanish version of the class Living Well with Chronic Conditions.

This fall, the Spanish-language class was offered for the first time in Deschutes County, though the English-language version has been running for a while.

The county wants "to provide access to this program to anyone who needs it," said Brenda Johnson, coordinator of the programs for Deschutes County Health Services. "Here at the health department we serve a lot of Hispanic families."

Tomando Control de su Salud is one effort of local health care organizations to improve the health of this burgeoning community. The six-week course, which meets on Saturdays, costs \$5 and focuses on ways each individual can manage their health.

Other organizations, notably Mosaic Medical Clinic and Central Oregon Pediatric Associates, have also made efforts to reach out to Latinos. The last three physicians COPA has hired have spoken both English and Spanish, said practice administrator Wade Miller, and the clinic has seen increased use of its Spanish interpretation services.

The Hispanic population in Central Oregon has exploded in recent years. In 2010, there were more than 17,000 people who identified as Hispanic, according to the U.S. Census Bureau, more than double the number of a decade ago.

In Bend and Redmond, about 1 in 10 residents identify as



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Lucila Godoy, here at her Bend home, is a participant in a class that teaches people how to better manage their health. The class, offered through Deschutes County Health Services, is called Tomando Control de

Hispanic, a change from around 5 percent in each city in 2000, according to the U.S. Census. The Central Oregon city with the highest percentage of Hispanics is Madras, where nearly 40 percent of people identify that way.

The state's health department, the Oregon Health Authority, provides training and technical assistance to both the English and Spanish versions of the Living Well with Chronic Conditions program throughout the state. The Spanish version is currently offered in 10 counties, said coordinator Cara Railsback, and the English version of the class is in 29 of 36 Oregon counties.

People like Godoy are grateful for the outreach. "I'm happy the class was here and in my language," she said through a translator. She said she feels better since taking the class, has lost weight and her blood sugar level is better controlled.

She's increased the amount of exercise she gets, often logging 45 minutes a day on a machine at home, and is more conscious about eating fruits and vegetables.

Translating labels

At the beginning of a recent class, instructor Maria O'Neill, passed out boxes from common foods: a couple of cereals, a frozen pizza, corn dogs, doughnuts and ramen noodles.

The class talked about how to read the nutrition labels, using a chart that translated the English words to Spanish. Then, they looked at their foods, noting how much sodium, sugars and carbohydrates were in each serving, and how many servings per box.

Most of the class participants have Type 2 diabetes and all of them know someone with the disease. In Oregon, diabetes is twice as common in Latinos as in the non-Latino white population, according to data from the Oregon Health Authority.

The class is more geared toward diabetes than its English counterpart, though people with any chronic condition can take it.

"Tomando focuses more specifically on nutrition and physical activity," said Railsback. The class includes discussions of menu planning and portion control, she said, where the English-language class does not.

Nutrition, weight management and exercise are critically

su Salud. As a result, she said she exercises more and eats healthier than she did previously.



Rob Kerr / The Bulletin

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important to people with Type 2 diabetes, who must manage their disease, at least in part, with lifestyle changes.

As the class looked at nutrition labels, they found some surprises. The frozen pizza, called a “personal pizza,” was actually two servings, according to its label. That meant, the class discussed, that any calories, fats or carbohydrates on the label would need to be doubled to get an accurate count.

The biggest reaction, however, came when one participant read the label on the ramen noodles. Each package contains about 1,700 grams of sodium, that's 70 percent of the government's recommended daily intake. The class gasped.

“Wow,” said O'Neill.

“Mucho, mucho,” said a student.

Barriers to care

Later on in the class, they switched from a discussion of nutrition to talking about how to deal with depression.

Depression commonly accompanies chronic conditions. Some studies have estimated that those with chronic conditions are at twice the risk of developing depression as the general population.

In talking about this topic, the class became animated. One participant overlapped another, sharing stories and experiences. The discussion moved quickly to some of the unique challenges Hispanics face.

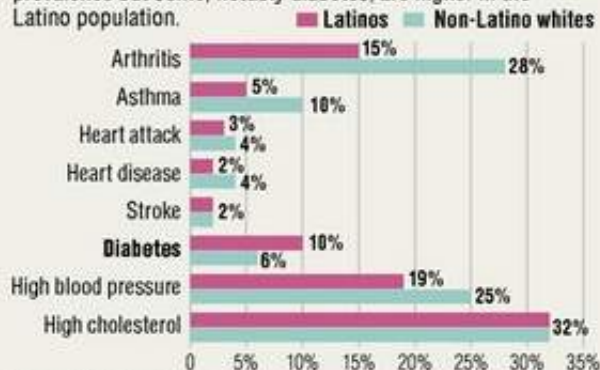
They talked about how it can be hard, in a predominately non-Hispanic culture, to express themselves. Two participants, who are from Mexico and in the same family, talked about being discriminated against when they first moved to Bend in 1990.

Here, said O'Neill, is where the benefits of a class geared to Spanish speakers are most apparent. “You can better express yourself in your native language,” she said. Being around people who speak the same language and may have had similar experiences, she said, “you are more open to share what your feelings are because of the disease or chronic condition you have.”

The language barrier can be a big one, even when clinics use an interpreter. Alejandra Talavera, another instructor in

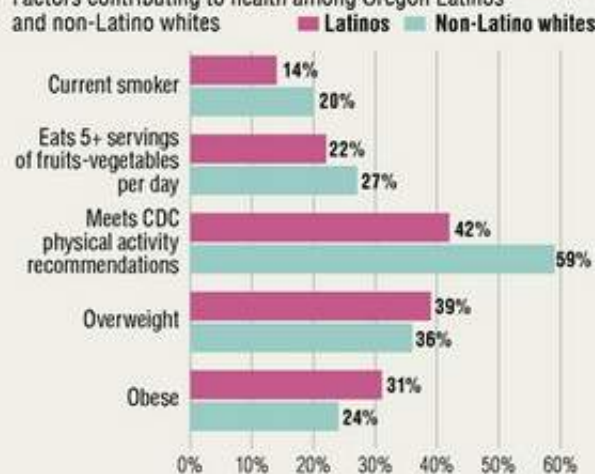
Chronic conditions

Percent of Oregon Latinos and non-Latino whites with various chronic conditions. For many conditions, Latinos have a lower prevalence but some, notably diabetes, are higher in the Latino population.



Health factors

Factors contributing to health among Oregon Latinos and non-Latino whites



Source: BRFSS Race/Ethnicity August 2004-05

Greg Cross / The Bulletin



Ryan Brennecke / The Bulletin

Instructor Maria O'Neill, standing, discusses a nutrition label with Lucila Godoy during the Tomando Control de su Salud/Living Well With Chronic Conditions class at the Deschutes County Health Building.

Learn about Deschutes

the Tomando class, has worked as a medical interpreter and said patients would often ask her questions they should be asking a physician. They sometimes don't feel comfortable, she said, questioning their physicians because of the language or cultural barriers.

Or, if they have follow-up needs, it may be hard to get through without knowing English. Some clinics have Spanish-speaking operators or messages but others do not. "It's hard," Talavera said. "A lot of them give up and don't go back."

"A lot of the jobs Hispanics have do not offer health insurance," said Elva Lopez, an outreach program coordinator for Mosaic.

Many end up at Mosaic, which as a federally qualified health center, gets money to help take care of uninsured patients; or at Volunteers in Medicine Clinic of the Cascades, another nonprofit with the express mission of taking care of uninsured patients.

Sometimes the issue is one of trust. Johnson said that many Hispanics, particularly if they are undocumented or have a family member without papers, do not want to give out personal information for fear it will be passed on to immigration authorities.

For mental health, the problem is worse.

"There's a very limited supply of people (in Central Oregon) who are bilingual who offer behavioral health services," said Megan Haase, CEO of Mosaic. She said there are a few in Jefferson County, and possibly one in Deschutes.

Because of the importance of communication in behavioral health, Haase said, "it is really important to have it in your preferred language."

Community need

Jefferson County, where a larger percentage of the residents are Hispanic, has been a few steps ahead of its southern neighbor in addressing the health needs of Latinos. "All (health department) services have a Latino component to them," said Tom Machala, the public health director for the county. "We've had to deal with this for quite some time because the majority of our clientele are Hispanic."

He cited school programs to help parents of school-aged children learn English and a tri-county effort to prevent teenage pregnancy in Latino girls.

The ultimate goal of all these programs, as in most public health programs, is a healthier population. In that respect, Tomando Control de su Salud and its English counterpart have some impressive numbers.

A study by Oregon State University compared the hospitalizations and emergency department usage of participants in both the English and Spanish language programs statewide. Over five years, it found, participants in the programs were hospitalized less and used the emergency room less than people in similar situations who had not attended. The drop in usage amounted to approximately \$7 million in savings statewide, the study found.

The students in the Deschutes County class appeared to be on the path to better health.

County Health Services' classes on living well

For more information about Living Well with Chronic Conditions or Tomando Control de su Salud call Brenda Johnson at Deschutes County Health Services, 541-322-7430.

Godoy, the student whose mother died from complications of diabetes, said she's cut out bread and is now eating smaller portions. She hopes to decrease the medications she takes to manage her disease.

Another student, O'Neill said, was motivated to find a walking partner and now exercises more than she did before.

Still, local experts acknowledged there is still room for improvement. "We have a large number of people who don't have access to care," Haase said.

Johnson, at Deschutes County Health Services, said that the department had tried to offer this class for about a year before this fall. "We didn't get the number of people we needed."

Latinos who work on farms put in long hours during growing season, she said, and others often have family obligations that keep them from being able to get to the class.

Johnson said the first time they tried to run the class, 21 people were called personally to invite them to take the class. Two showed up.

"We know there's a need," said Johnson. "It's complicated."

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