

Twin Falls Times News, Sunday, Aug. 2, 2009 – by Melissa Davlin (2 pages)

## What hurts?

### *Getting Latino patients' message across to the doctor*

Frank Arevalos spends most of his working day sorting and delivering medical supplies at Cassia Regional Medical Center. But as soon as he gets the call, he leaves his post and assists doctors in helping patients and saving lives.

The Burley hospital recently received a certificate of appreciation from Idaho Community Action Network for its efforts in reaching out to Latino patients with limited English.

Three years ago, the hospital started an in-depth training program for its interpreters, most of whom are bilingual employees of the hospital who work other jobs. The interpreters help doctors communicate with patients and help patients fill out forms or apply for assistance.

Cassia Regional has 13 employed Spanish interpreters, including Arevalos, and three volunteers. Interpreters go through a two-day training that teaches cultural differences and specific medical terms, said Keri Perrigot, assistant administrator in the human resources department.

For patients who speak languages other than Spanish, the hospital uses Language Line, a phone-in service that has interpreters for 170 languages. Hospital administrators prefer face-to-face interpretation, though, Perrigot said.

Before the training, Arevalos interpreted for doctors but didn't always know the best way to convey the doctors' messages. He would sometimes summarize what the doctor was saying, or wouldn't use the same emotion or inflection in his voice as the doctor. And although Arevalos grew up with Spanish as his secondary language his father is from Mexico and doesn't speak English, he didn't know all of the specific medical terms.

Another issue: Many interpreters aren't aware of cultural differences, even if they're fluent in the language, said Adan Ramirez of Idaho Community Action Network. Doctors ran into this problem a few years ago when a woman came to Cassia Regional Medical Center holding her head, Ramirez said.

"So they gave her a pain pill. But it was her appendix that was really bothering her," he said. An interpreter familiar with Mexican culture would know that the patient's head wasn't necessarily the problem.

"When something hurts in your body, you hold your head," said Ramirez, who is also from Mexico. "We go, 'Oh my God, I'm sick,' and we put our hand on our head, even if it's something wrong with our stomach."

Now, Cassia Regional interpreters know to ask the doctor if they are unclear on medical terms and to use the same tone in their voices when speaking to the patient. Books and online study materials help them with medical vocabulary. Instead of inserting themselves in the conversation, they stay in the background, allowing the doctor and patient to speak directly to each other, Perrigot said even if they're not speaking the same language. "We're just the voice," Arevalos said.

*Language 1*

## Latino health care

On July 23, Health Care for America Now released a report scrutinizing health care accessibility for minorities in Idaho. Here is what it said:

- 34 percent of Idaho Latinos are uninsured, compared with 15 percent of other white Idahoans.
- 42 percent of Latina women in Idaho received no early prenatal care, compared with 26 percent of other white Idahoans.
- 21 percent of Idaho Latinos are enrolled in Medicaid, compared with 10 percent of other white Idahoans.

Statistics from “Unequal Lives: Health Care Discrimination Harms Communities of Color in Idaho.”  
Information: [www.healthcareforamericanow.com](http://www.healthcareforamericanow.com).