



UPDATE: Spring 2016

TENTH EDITION

*This is the tenth edition of the EthnoMed newsletter. [Click here](#) to view previous editions.*

**A message from Medical Director, J. Carey Jackson, MD, MA, MPH:**

## **Anti-immigrant Sentiments Affect Immigrant Health**

The rhetoric around immigration has again reached a fever pitch. It did after 9/11, it has repeatedly, and it has again. Migrant children fleeing intolerable gang and domestic violence in Central America have crowded the Southern border. Refugees fleeing Syria are swarming over Eastern Europe and a chronic flow of migrants from East Africa stream north and cross the Mediterranean in precarious flotillas. The West feels under siege and frightened. There are many with distinct political agendas that capitalize on this fear and propagate unwarranted anxiety for their own ends. We see this in national political debates and we see it daily in local politics.

Ironically, anti-immigrant sentiment is not new in this nation of immigrants. In 1880, the Irish were accused of bringing in cholera, Italians of polio, and Chinese immigrants were blamed for bubonic plague. Phil Gingrey, a physician and retired Congressman from Georgia, accused [migrant children](#) of bringing measles, dengue, small pox, and Ebola across the Mexican border. These are completely unfounded claims. The result is to stir up fear in an uninformed population that suspects many immigrants are here illegally and are dangerous.

Muslims in particular face discrimination. The distinctive head scarf or hijab that many Muslim women wear makes them an easy target of jeering and suspicious looks on the street and in stores. Names like Mohammed and Hussein prompt bullying in schools. The attacks by fundamentalist Muslims in Egypt, Mali, Nigeria, France, and in the U.S. promote an atmosphere of hatred and fear. On December 6th, President Obama was forced to call Americans to their founding values of religious tolerance and inclusion.

This is the atmosphere in which many refugee families must attempt to adjust to American life. The stress and isolation families endure compounds the other issues from transportation and language barriers, to depression. This climate makes it important to check in with immigrant families about the impact of events and the national mood on their mental health and feelings of safety. Some of my older patients admit cancelling appointments if they feel it is unsafe to travel on public transportation; this may lead to delays in diagnosis and treatment. Others acknowledge that generalized anxiety has affected social events and added weight to the burden of chronic depression or PTSD. Talking to patients about their families, their plans for communication and safety in the event of someone acting out, about advocacy groups in your area, and about your willingness to engage this discussion will create a safe place to unload these gnawing concerns.

Many of our colleagues and employees are someone else's patient, and it is incumbent on health care facilities and systems to ensure their workforce feels supported, welcomed, and at least safe at work. Reviewing reports of hate crimes in the news and the impact of anti-immigrant and many other discriminatory sentiments and behaviors, regularly with all staff, is the first step toward crafting policy and operational measures to address workplace safety and inclusive institutional culture.

We like to think Medicine is apolitical, a democratic institution that represents the best in our society ....for this to be true it requires not only vigilance but action.

Carey



## OF INTEREST ON ETHNOMED

### Migrant Children and Health: Borders, Boundaries, and Bigotry

Scaremongering about the health of migrant children when there is no significant health threat - why is this a medical issue and what can healthcare professionals and students do to fight against racial stigmas? To raise awareness on the issue of scaremongering among medical professionals and those in training, the Migrant Children and Health Campaign created a video featuring leaders in immigrant and refugee health advocacy. This video introduces the facts about migrant children health, and the continued history of racial and ethnic disease scaremongering in the US. The video was created in partnership with EthnoMed, the Duke University Department of Community and Family Medicine, Duke Program on Global Health and Technology Access, and the UCLA Blum Center on Poverty and Health in Latin America.



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### How Foods Affect Blood Sugar: A Guide for Latino Patients with Diabetes

This presentation (available as PDF and narrated video slideshow) is intended to be used by clinicians during discussion with patients about carbohydrates and blood glucose. It is culturally tailored to reflect foods commonly consumed by Latino Americans and includes photos of foods, meal comparisons, and portion sizes. Also, includes tips for eating healthily during holidays and for cooking. Authored by Elizabeth Hulbrock.



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### What are Mammograms and Breast Cancer - A Guide for Somali Women

This 18-minute video slideshow presentation, narrated in Somali with optional English subtitles, is intended to be used by clinicians during discussion with patients about mammograms and breast cancer. It is culturally tailored to reflect common questions and concerns, with a focus on addressing major barriers to screening. It includes images of the various stages of the mammogram process and signs/symptoms of breast cancer. See also a Provider's Guide with background for providers about the topic and suggestions for using the slideshow.



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## EthnoMed Feedback Survey

We invite feedback to help determine which of our resources are most useful to you and what types of content to develop in the future. Thank you for taking the time to complete this brief survey!

[VIEW SURVEY>>](#)

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### CALENDAR ITEM OF INTEREST

## Open Doors for Multicultural Families - Webinar Series through May 2016

Open Doors for Multicultural Families provides services for diverse families who have family members with developmental/intellectual disabilities and special health care needs to have equal access to culturally and linguistically appropriate information, resources and services. They are hosting a series of free webinars on the 3rd Wednesday of the month (Jan-May 2016) from 3:15-4:15 PST.

## Abiy Tsom 2016 (Ethiopian Orthodox Lent) - March 7-May 1, 2016

The Ethiopian Orthodox Great Holy Lent Fast lasts 55 days, culminating on Easter day. Providers should be aware of medical implications of fasting for some patients.

## 4th U.S. Conference on African Immigrant Health - Save the Date!

This conference will be September 15-18, 2016 in New York City. Sponsored by the the Office of Minority Health, NYC Health and African Services Committee.

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### ABOUT ETHNOMED

EthnoMed was founded in 1994 and is a joint program of the University of Washington Health Sciences Library and Harborview Medical Center in Seattle, Washington. EthnoMed grew out of another hospital program, [Community House Calls](#), which was successfully bridging cultural and language barriers during medical visits, through interpretation, cultural mediation and advocacy with immigrant patients, families and communities. The website was created to reflect and support that experience. In recent years, our content has expanded to reflect many new

communities that have settled in the Seattle area.

EthnoMed aims to address disparities in care through enhancing understanding between the medical culture and the culture of the patient. The program is grounded in relationships established with local ethnic communities and the providers who care for them. Our contributors come from a wide range of disciplines and experiences and include nurses, physicians, nutritionists, psychologists, academic faculty, medical interpreters, librarians, community members, and students. Health care providers and community members review content for clinical accuracy and cultural relevance.

We invite you to share your knowledge and educational materials with the EthnoMed audience. Consider being a content contributor, collaborator or reviewer. [Contact Us](#).

*We hope that every newsletter edition will lead you to something helpful to your work. Please help us spread the word by forwarding this newsletter to a colleague or two, using the button below. Thank you!*

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