Wellness, medicine, and science news THURSDAY **Inpolitics** EALT FRIDAY Inmoney

Promoting health, wellness

Spanish "promotoras" spread the word in Mexican communities.

By Juliana Schatz INQUIRER STAFF WRITER

he low hum from the ventilation system and the children's voices in the back corner made it difficult to hear, but the 30 people gathered at Annunciation of the Blessed Virgin Mary Parish listened intently to the woman who stood before them brandishing a bottle of salty Adobo seasoning.

"Tonight we are here to tell you, mi gente, about nutrition," said Irma Zamora, 37, in Spanish. "We are consuming too much sodium."

Zamora and her fellow presenters are not doctors or nurses and do not claim to be. They are promotoras volunteer "health promoters" who carry messages of health and wellness to their peers, mostly Spanish-speaking Mexicans in South Philadelphia.

As the minority group least likely to have a primary-care doctor and with nearly half living beneath the poverty line, Latinos, especially recent immigrants, have challenged doctors for decades.

But this simple idea — using people from church or the barrio to encourage preventive care — has produced success noted in medical journals over the last five years.

The U.S. Department of Health and Human Services announced in May an initiative to encourage the use of promotoras for outreach and education about health services and insurance.

"Now that they have been recognized, we want to develop a national database of networks for training and certification," said Jose Velasco, a public health adviser at HHS's Office of Minority

Health.

Philadelphia saw its first promotoras in action three years ago, when Matthew O'Brien, then a medical resident at the University of Pennsylvania, and Steve Larson, his mentor and an associate dean, decided to establish the Puentes de Salud clinic in South Philadelphia in 2006.

"We would talk to people at health fairs and after religious services. We heard about them over and over

again," said O'Brien, who now teaches at Temple medical school. The constant men-

tion of women who visit homes and provide basic care, but were not nurses, prompted O'Brien to bury himself in the public health literature in what he calls his own "remedial M.P.H." He was surprised at how they were able to increase vaccinations and other preventive health measures in developing countries and border states.

The clinic opened

now has six. Despite the praise, some ac-

ademics ask if the *promotoras* - housekeepers, waitresses, nannies — are adequately trained and qualified to teach and guide their patient-peers. O'Brien said they are.

In a 2009 literature review in the American Journal of Preventive Medicine, he described finding his first promotora, Irma Zamora. A leader at another communitybased organization, she was well-known among South Phil-

adelphia Mexicans.

"That's really the skill set of a promotora. Some one who is a natural leader and has an extensive social network," O'Brien said.

He and colleagues selected and trained Zamora and several other women for Puentes' first promotora-led educational intervention on cervical cancer. One of the most important lessons, said O'Brien, was in boundaries and limitations — knowing



MICHAEL S. WIRTZ / Staff Photographer Isabel Garcia, a promotora, demonstates the effects of diabetes on arteries.

with four promotoras and when to bring in a medical ry for children. professional.

Once the promotoras started leading classes, with doctors or nurses in the room, he also had them survey people in the community to see if it was making a difference.

In November 2010, O'Brien reported in the Journal of General Internal Medicine that Pap smear screenings had doubled — but, perhaps more important, general knowledge about the association between regular Pap smears and cervical cancer

rose significantly.

The model is catching on. "They can't diagnose, you know," said Chris Ann Smith, who trains promotoras at Esperanza Health Center in North Philadelphia, "but they can say, 'Hey, your blood pressure is really high and you should go to your doctor.'"

Barbara Schneider, a doctor with Community Health Collaborative, a nonprofit that works to reduce health disparities, specializes in dia-

> betes outreach using three promotoras. She and O'Brien have launched a new diabetes campaign modeled after a California project to target the disease that disproportionately affects Latinos.

A week after their presentation at Annunciation Church, Puentes de Salud began the first class of its diabetes series. The classroom, colorful with tapestries and children's books, also serves as Puentes de Salud's cultural and educational laborato-

It was the first class for promotora Isabel Garcia, who seemed a little nervous.

"You're going to be famous," teased Amarili Lopez, a certified nursing assistant who helped with the training. She pointed at a photographer.

Garcia frowned. "No. I do this because I am helping my people."

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PROMOTING HEALTH AND WELLNESS by Juliana Schatz

I was surprised to find so few Spanish speakers in the newsroom. In fact, I didn't meet any at all. So, from the very start of my internship, it was my goal to report on some of the populations that occasionally get overlooked in the local press. In Philly, that meant using my language skills to step into the burgeoning Mexican community.

Before I even arrived to Philadelphia, I had heard about Puentes de Salud from my editor Karl Stark, and from an acquaintance from graduate school. Puentes seemed like a cool community health center, but that did not necessarily warrant a story.

But after my first visit, it became apparent that Puentes' clinic could be set apart from the rest. Co-founder Dr. Steve Larson, who is rather unorthodox himself (with ripped-up jeans and a goatee), introduced me to his volunteer staff of local women who were taking charge of a series of health education courses in Puentes' modest, but colorful, basement classroom.

That the promotoras were an approach derived organically from the community really caught my attention. Even better, their novel approach had broader trends across the nation. A series of studies published in reputable medical journals about the use of promotoras to decrease health disparities gave my story just the statistical heft it needed to become a solid newspaper article.

It was the first story I reported on, and nearly the last to get published, but reporting on the promotoras fulfilled every aspiration I had for this internship.

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