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The History of Black Lives Matter Month

Source: https://www.asecondchance-kinship.com/the-history-of-black-lives-matter-month/



The beginning of June marks the start of Black Lives Matter Month, an opportunity for all Americans to make a stand against racism and racially-motivated violence. Originally founded as a hashtag in 2013, Black Lives Matter has grown into thousands of decentralized chapters advocating for equality and justice for the Black community, and protesting against violence against black people at the hands of law enforcement.

Arguably one of the most significant protest movements in the country today, its numbers and influence have swelled as a result of the global

outcry over the killing of African Americans nationwide, which has, in turn, led to serious questions being raised such as whether qualified immunity should be abolished and whether the police should be defunded.

The Black Lives Matter movement began as a social media response to an acquittal in the 2013 shooting death of African American teen Trayvon Martin. The acquittal sparked outrage around the country leading to mass demonstrations against racially motivated injustice and racism among law enforcement.

Initially begun as the hashtag #BlackLivesMatter and circulated by three black community organizers in Los Angeles, Alicia Garza, Patrisse Khan-Cullors, and Opal Tometi, Black Lives Matter has grown into a global movement for racial equality, justice, anti-racism, and anti-violence against black people by law enforcement.

In 2014, the BLM movement organized its first large-scale protest in response to the death of Michael Brown at the hands of a Ferguson, Missouri police officer. The Black Lives Matter Freedom Ride consisted of more than 500 members participating in non-violent demonstrations.

Since that initial protest, the decentralized and largely non-violent civil rights movement has been a central figure in the public responses to the unlawful killing of black people by law enforcement.

How to Observe BLM Month:

- Support the movement through action and aid: The most obvious way to get involved is to join a nonviolent protest, but there are other ways to help the campaign. Support scholarships aimed at African American students or donate to advocacy groups that support positive change such as the NAACP Legal Defense and Education Fund and the Equal Justice Initiative.
- 2. Make your voice heard on election day: Every year in America we have a chance to force change at the ballot box through local, statewide, and national elections. Take that chance and vote. The Black Lives Matter movement is at its most effective when it is calling for positive action. Voting is your Constitutional right to act on the change you believe in.
- 3. Have a difficult conversation: Start a conversation with the people in your life about racism, injustice, violence, and the other ways people are marginalized, no matter how awkward or charged it gets. Do it for those who tragically no longer have a voice.





June 2024 Calendar

Black Lives Matter Month National Caribbean-American Heritage Month National LGBTQ+ Pride Month

- 1 Stand For Children Day (US)
- 4 National Hug Your Cat Day (US)
- 7-13 World Heart Rhythm Week
- 9 Race Unity Day (International)
- 8 World Brain Tumor Day
- 10-16 National Men's Health Week (US)
- 11 Shavuot (Judaism)
- 13 CNA Day (US)
- 15 Day of Arafah (Islam)
- 16 Father's Day (US)
- 18 Autistic Pride Day (US)
- 19 Juneteenth (US)
- 22 Sant Guru Kabir Jayanti (India)
- 23 Pentecost (Orthodox Christianity)
- 25-1 Deafblind Awareness Week

Minority Patients Significantly More Likely to Receive Misdiagnosis, Study Shows

Source:https://www.linkedin.com/pulse/minority-patients-significantly-more-likely-receive-rev3c/?trackingId=SCbHP1V%2BF5g39fd%2Fd9nuXw%3D%3D



Underlying Factors Include Language and Culture

According to a new study, racial and ethnic minorities disproportionately bear the brunt of medical misdiagnosis. The study illustrates a widespread problem affecting 12 million adults annually in the U.S., underscoring the urgent need for language and cultural inclusivity. Research published in JAMA Internal Medicine and BMJ Quality & Safety reveals a grim reality: nearly 1 in 4 hospital patients who suffered harm or died had experienced a diagnostic error, with an estimated 795,000 patients annually dying or becoming permanently disabled due to misdiagnosed. "That's significant and inexcusable," said David Newman-Toker, a professor of neurology at Johns Hopkins School of Medicine and the lead author of the BMJ study. Researchers call misdiagnosis an urgent public health problem. The study found that rates of misdiagnosis range from 1.5% of heart attacks to 17.5% of strokes and 22.5% of lung cancers.

The underlying factors contributing to these disparities are complex, with the most significant being language and culture. While access to insurance and quality healthcare facilities also plays a role, the issue is compounded by unconscious biases and the pressure on healthcare professionals, who, under demanding schedules, may resort to hurried and biased decision-making. Moreover, the lack of representation in medical literature, where diseases are predominantly illustrated through the lens of non-Hispanic whites, further impedes accurate diagnosis for patients of color.

"The vast majority of diagnoses can be made by getting to know the patient's story really well, asking follow-up questions, examining the patient, and ordering basic tests," said Singh, who is also a researcher at Houston's Michael E. DeBakey VA Medical Center. When talking to people who've been misdiagnosed, "one of the things we hear over and over is, 'The doctor didn't listen to me.'"

Maternal mortality for mothers who are racial and ethnic minorities has increased dramatically in recent years. The United States has the highest maternal mortality rate among developed countries. According to the Centers for Disease Control and Prevention, minority mothers are 2.6 times as likely to die as non-Hispanic white moms. More than half of these deaths take place within a year after delivery.

Research shows that minority women with childbirth-related heart failure are typically diagnosed later, said Jennifer Lewey, co-director of the pregnancy and heart disease program at Penn Medicine. That can allow patients to further deteriorate, making them less likely to fully recover and more likely to suffer from weakened hearts for the rest of their lives.

Also, according to the study:

- Minority patients suffering from heart attacks are more likely than others to be discharged without diagnosis or treatment.
- Minorities with depression are more likely than others to be misdiagnosed with schizophrenia.
- Minorities are less likely to be diagnosed early with dementia, depriving them of the opportunities to receive treatments that work best in the early stages of the disease.



New Staff Profile: Teresa Esparza Ochoa

Teresa Esparza Ochoa is the newest addition to the Spanish-language team at Medical Interpreting Services. She was born and raised in Guadalajara Jalisco, Mexico. She moved to California in 1998. At the beginning everything was difficult for her when she didn't speak English. She encountered many people in the same situation not knowing what to do and how to get around, and that's when she decided to go to school and learn English to be able to communicate. Teresa realized that there are many people who don't have the ability to learn English and decided to make a career out helping and supporting them. She became an interpreter in 2017 after she graduated from American River College Healthcare Interpreter program. She also completed the process of attaining national certification from the Certification Commission for Healthcare Interpreters (CCHI) in October of 2022. Teresa worked for private companies before joining the team at UC Davis Health in December of 2023.

Welcome to the UC Davis Health medical interpreting team, Teresa!

