

# Bebes Dulces Sin Azucar Sweet Babies Without Sugar

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# What is Cultural Competency?

*Congruent behaviors, attitudes and policies that enables effective work in cross-cultural situations.*

- Language
- Thoughts
- Actions
- Customs
- Beliefs
- Values
- Racial
- Ethnic
- Religious
- Social Groups



# Competence

- Having the capacity to function effectively as an individual or organization within the context of the cultural beliefs, behaviors, and needs.



# Culture and Language

## Influences:

- Health, healing and wellness belief systems
- How illness, disease, and their causes are perceived
- Behaviors and compliance of patients and their attitudes toward providers



- Hispanic/Latino health is often shaped by factors such as language/cultural barriers, lack of access to preventive care, and the lack of health insurance.
- Hispanics have the highest uninsured rates of any racial or ethnic group within the United States.



# Community Health Workers

## Promotora de Salud

- Trained on diabetes disease education skills
- Belong to the community in which they serve
- People trust and respect them
- Speak the same language
- (beyond linguist similarities )
- Take responsibilities for promoting health



# Taking care of gestational diabetes of underserved populations

Latinos/Hispanics prevalence of diabetes  
rates varies between ethnic groups

- Mexicans 23.9%
- Cubans 15.8%
- Puerto Ricans 26.1%



# Challenges to Care

- Linguistic barriers
- Cultural believes
- Low literacy in own language
- Knowledge about disease
- Limited or no family support
- Fear of insulin therapy
- Lack of transportation and financial resources
- Immigration Status



# Changing Health Behaviors

## Seven Domains

- Physical activity
- Food choices
- Medication administration
- Monitoring blood glucose
- Problem solving for high and low glucose levels
- Risk reduction activities
- Psychological adaptation



# Gestational Diabetes

- Diabetes education for pregnant Latinas began in March 2003
- Thirty-six women referred in 2006; Thirty-three in 2007; eighty-one in 2008
- Educational sessions include: overview of gestational diabetes; blood glucose monitoring; complications of pregnancy due to diabetes; meal planning; and exercise recommendations.

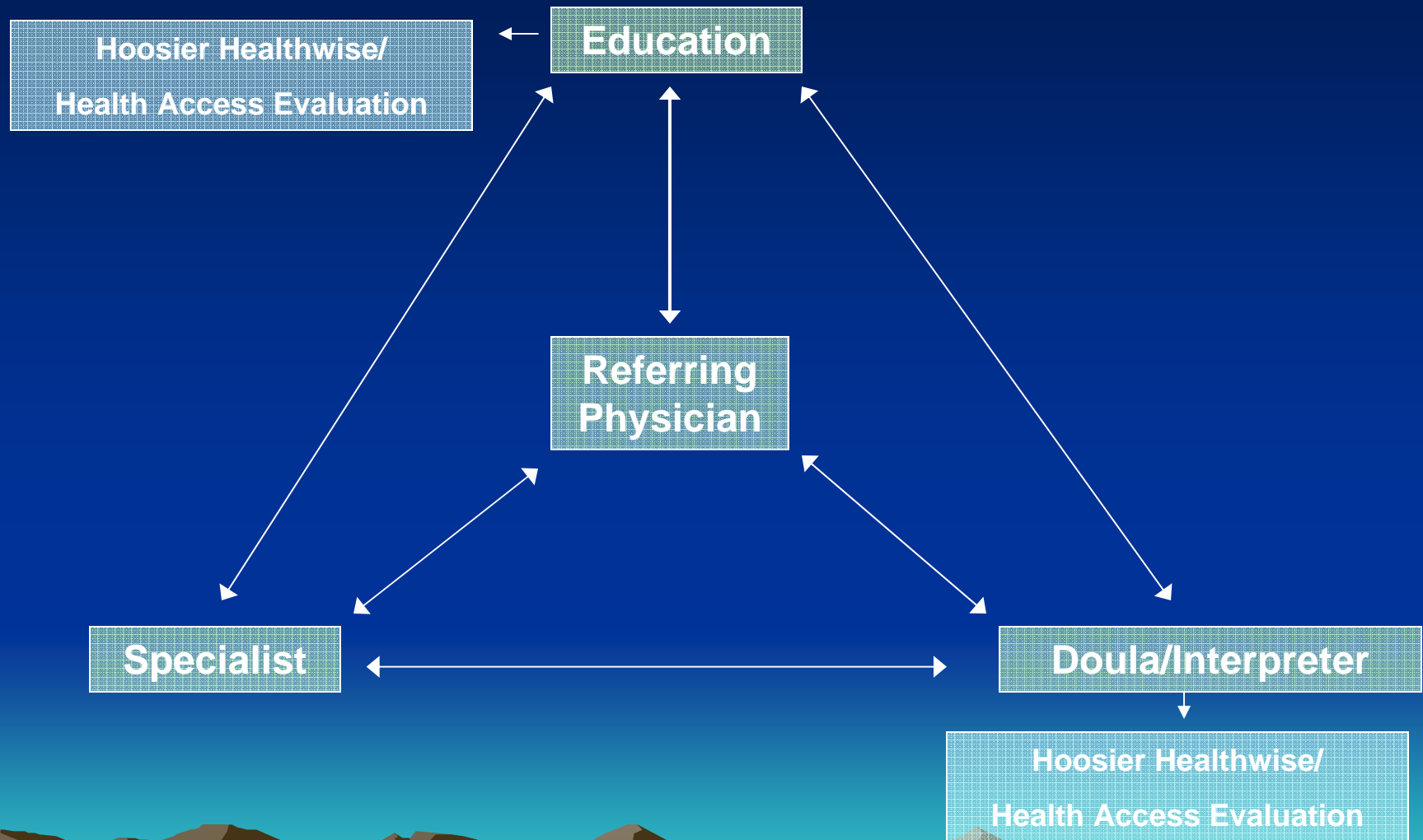


# Gestational Diabetes, *continued*

- Education on “Shaken Baby Syndrome”; lead poisoning; smoking and second-hand smoke;
- Weekly contact to obtain glucose readings; verify compliance with physician orders; and address any concerns, problems, questions or barriers encountered by the client.
- Follow-up continues up to six weeks after delivery
- Referrals to other agencies are done as needed



# Continuum of Care



# Gestational Delivery Report 2008

Gestational Age		
Full – Term 38- 40 Wks.	32-37 wks.	<32 wks.
64	16	2

Birth Weights						
<5	5+	6+	7+	8+	9+	10+
3	6	30	30	10	3	0



# Education Cost-savings

*These examples are actual expenses from gestational clients that had a C-section and have ER Medicaid*

	CBU/MBU/ SCOB	Nursery/ NICU
Mother A 2005 – education	\$9,907	\$1,736
Mother B 2005 – non education	\$24,979	\$116,333
Mother C 2006 - education	\$11,164	\$1,432
Mother B 2006 – non education <i>(same mother as '05)</i>	\$30,250	\$285,491

# Physician Comment on Referral Form:

*“Patient lacking insight about her condition, she is never taking the same dose of insulin, on every visit she mentioned a different dose and is not checking her sugars regularly . . . .”*



And, why do we love  
what we do?



# New Beginnings!

After seven unsuccessful pregnancies . . .



Mrs. G. with her healthy 7 lb. 4 oz. baby girl receiving discharge instructions from the Doula!