

COMMUNITY VOICES

An Interview with Lupe Ramos, *promotora* in Fabens, El Paso County, Texas, USA

‘I always felt this was my calling’

Lupe Ramos is a *promotora* with the Community Partnerships Program in El Paso County, Texas. The Community Partnership Program provides longitudinal community-based learning experiences for family practice and nursing students. Health *promotoras* or lay community health workers participate in clinic activities, enhancing the training of the learners by providing a critical link between the health care professionals and community residents—a link which improves health outcomes and allows the learners to be active participants in building a healthy community.

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How long have you been a promotora?

I’ve been working with the Community Partnership Program for ten years. I was the first *promotora*—right when the Kellogg project started.

How did you become interested in health—in community health?

I had been a volunteer at Fabens Independent School District for 25 years. The teachers had written a grant for a liaison to work with the parents. One day at school, a teacher was sick and I took over her classroom. I was giving a math test and this one little boy told me he was too sleepy to take the test. I asked him, “Why are you so sleepy? Why didn’t you go to bed last night?” He told me this long story about waking up when glass was breaking, and his mother’s boyfriend ... and I realized that there are so many things our kids have to deal with ... It’s hard to say to a little boy, “You have to take this math test.”

Were you assigned to Fabens?

No, I’ve lived in Fabens all my life. I raised my kids here—I have teenagers and older ones who are in their thirties now. My grandmother lived her life here—

my family has been here for over 100 years. But population of Fabens can be divided into thirds—one-third ‘hometown,’ who have lived here all their lives, one-third people in search of a ‘fresh start’ on life and one-third recent immigrants. We are right on the [Mexico] border—there’s a lot of back and forth.

Can you describe the promotora program?

Each *promotora* is assigned to one clinic. There are clinics in Montaña Vista, Fabens, San Elizario and Socorro—all small towns in El Paso County. We see patients at the clinic, we do home visits either as clinic follow-up or if we lose track of a patient who we think should come back. We do community presentations at schools and other agencies. And we spend a lot of time getting referrals for people, hooking them up to the help they need.

And what do you do?

As a *promotora*, I work out of the clinic at Fabens. Although I teach CPR, I do a lot of one-on-one education with patients. Patients, especially the new immigrants, will tell us a lot more than they will tell a doctor. We are from the community and they know we will tell them the truth, not just what a doctor would want them to hear. Plus, the patients won’t tell the doctor if they don’t understand what they are being told, but they will tell us.

We also make sure they have all the information they need to make a decision. For instance, if we suggest they need to go to the hospital for something, they will think, ‘Why do that? We can just cross the border [to Mexico] and get some medicine.’ The hospital is very far and very expensive—the border is only six miles.

Plus, you can get so many medications over the counter in Mexico. You can just walk in and say, my doctor told me to take such-and-such for my blood pressure, and you can get just about any anti-hypertensive drug over the counter. Plus many other meds—antibiotics, Valium, Ambien, all sorts of things. You don’t need a prescription or even a diagnosis.

Everyone knows this is not a good health practice. And we reinforce that feeling with information. But it’s hard, there’s a saying here, “You are going to die from something.” I try to turn it around and say, “By going to the doctor, especially after you turn 50, we will try to figure out what you are going to die from, then we can do something about it.” This is how I try to get them to agree to things like blood work.

I also tell them that the doctor has a right to know if what he does works for you. I tell them, “you have to come back”. If it’s not working right, they have to give the doctor a chance to make it work. That often works too, they feel responsible to come back.

My specialty areas are asthma and the drug prevention program for kids 0–18—this is part of our parenting program. But from the very

beginning, I was trained that I have to know a little about everything so that I am always prepared for doing referrals. And a referral is always better when it comes from a community member, it means more to the patient.

A drug prevention program for 0–18? What is that about? Especially for children that young?

Well, the parents need to understand human development—and that starts at birth. They need to understand you don't get a good kid or a bad kid at birth—you have to work at having a good kid, work at being a parent. And even then, life happens to you and you have to be prepared for that, have the knowledge and the resources and the support.

What kind of asthma program do you have?

I give basic information about asthma and other diseases that impact our community—basic information that can be repeated to family members.

Do you engage in community outreach?

Well, yes. We teach classes out in the community. In our community classes, we tell them they have to learn the system. They can't live here [on this side of the border] if they don't know the system. I tell them, "If you don't learn the system, you will become depressed. To live here, you have to know how to work with the schools, you have to know how to go to the doctor. You have to know which door to go in at the Wal-Mart, you know, the door marked ENTER."

But for me, the real outreach is part of my life. I'm very well known in Fabens, because I've lived here all my life, and I spent so long at the school, and I've been a *promotora* for ten years. Last week, I was in town pumping gas and someone came up to me and showed me her varicose veins, and I said, "You've got to come into the clinic, this isn't something you can just find a medicine for." Or I might be coming out of the Wal-Mart store and someone will start telling me a story and I'll take their name and phone number and find them a referral when I get back to the clinic.

Are you involved in community development activities in Fabens?

Yes, I'm involved in community development. Two days a week, I hold women's groups, basically volunteer *promotora* classes. It's a 100-hour program that takes place over three or four months. I train them in the basic skills they need to be *promotoras*. We cover human development, this is very important—and child development, also very important. And they learn about immunizations, childhood illnesses, sexuality, drugs. We also discuss topics such as domestic violence, self-esteem. And I make sure I bring out all the agencies, so they will get used to calling and asking for information, they will know what help is out there.

I also participate in two programs at University of Texas-El Paso. We've got a mother-daughter program for parents who have never had a child graduate from college. And the CATCH Program which is about obesity.

Can you describe the Fabens clinic?

It's a family practice clinic. We try to take care of everything here—we've got a saying, "We see patients from the womb to the tomb." The nearest Emergency Room is 20 miles away in El Paso—and that one is only for people with insurance. If you don't have insurance, it's even farther.

Does the clinic have learners? How do they work together?

We have medical students from Texas Tech Family Practice and nursing students from the College of Nursing and Health Science at the University of Texas-El Paso (UTEP). This is where they learn about community medicine. And they need to know the community, not just be here. We also train volunteer *promotoras* to do outreach for the benefit of their community.

How do you think promotoras have impacted Fabens? El Paso County?

I think that the three biggest impacts have been information, education and outreach. The *promotoras* have been very successful at disseminating information throughout the community. It's our job, but it becomes part of our lives. We are recognized in the community as people who have something to offer and as being committed to making life in Fabens better for everyone.

What would you like to see happen in the future?

I would like to see *promotoras* extend past rural areas like Fabens and serve city and suburban areas. People lack information and education no matter where they live. While these issues are greater for people with lower income, I've come to believe that all communities would be improved with efforts like ours at Community Partnerships.