

¿Habla usted Español?

For an increasing number of Upstate medical students, the answer is *si*.

Fourteen medical students sit around a long table in a Weiskotten Hall classroom, sharing a lunch of fried plantains, beans and rice, empanadas, and chicken. Latin music plays softly in the background. The room decorated with cultural items brought in by the instructor: a crocheted shawl, an embroidered tablecloth.

The instructor, Maria Lourdes Fallace, leads the lunchtime discussion, which, at first, is a little like show and tell. She passes around an elaborate brass scale. “This was what my grandfather, a doctor in Ecuador, used to weigh medications,” she explains.

The crocheted shawl is 75 years old and was made by her mother. “Handcrafts are a true equalizer in Latin culture. They are the only thing that brings social classes together—employer and employee—because everyone joins together to do handcrafts during break times,” she says.

The elaborate tablecloth, consisting of two dozen individually embroidered squares, was a graduation requirement from her finishing school as a teen, she tells the students. They ask lots of questions—how long did it take? Did everyone’s come out as good as yours?

In Spanish, by the way. The entire class has been conducted in rapid, fluent Spanish.

These students are meeting for their last session of Medical Spanish III, a luncheon, conducted family style as in Latin culture (“Everything we do is authentic,” says Fallace.) The session also marked the end of a year of study—most of them had been meeting weekly since Medical Spanish I, a class conceived by classmates Beth Dawson ’09 and Dani Yerdon ’09.

The two worked together last fall to create an elective for themselves called “Treating Patients from Different Cultures.” Later in the year they were involved in hosting a national conference for med-



Spanish instructor Maria Lourdes Fallace passes around a scale her grandfather, a doctor in Ecuador, used to measure medications.

ical students on cultural competency at Upstate.

“I had done research showing that the Spanish-speaking population of the country was growing and their healthcare needs weren’t being met,” says Dawson. She and Yerdon circulated a petition for interest in a potential class among classmates, which was signed by more than two-thirds of them. Using the petition and current census data, they wrote to Steven Scheinman, MD, dean of the College of Medicine, who responded almost immediately that it was a great idea and he would provide funding.

With the assistance of Lynn Cleary, MD, senior associate dean for education, it was decided that the class would be offered to first-year students who had some knowledge of Spanish, but not fluency.

Finding interested students was not difficult. Most say they were driven by the desire to communicate with Spanish-speaking patients, a population that is increasing demographically.



Medical Spanish III students celebrated their last class with Latin delicacies from a local restaurant.

Asalim Thabet ’09, whose first language is Arabic, says she took the course because she can sympathize with anyone who is not able to speak English. “If I can learn another language to better serve my patients, then why not?” she asks.

Classmate Chris Jones ’09 concurred. “Everyone deserves a fair shake with their medical care,” he says.

Leo Urbinelli ’09 was attracted to the course because he wanted the skills to work with a wider range of patients. “I’ve learned an amazing amount and I love having a break from our other studies,” he says.

Joe Konwinski ’09, known in class as Pepe, says knowing Spanish is “muy importante for doctors in America. It gives you a broader range of patients to interact with,” he says. After medical school, he plans to take a year off to work in a Latin American country.

Finding an instructor was not difficult either. Fallace, a native of Ecuador, works part-time at Syracuse’s Spanish Action League teaching contextualized language and has her own business training bilingual medical interpreters.

“I took whatever little funding they had to get this started because I thought it was so important to see it launched,” she says. “Sending these students to an inner city clinic with no language skills is like sending them without a stethoscope.”

Thanks in part to Senora Fallace’s warmth, patience, and contagious enthusiasm, the course was an immediate hit. A second and third course were

added to the curriculum, and because there was a waiting list, another section of Medical Spanish I was offered this spring. Medical Spanish I is taught primarily in English; Medical Spanish II is half in English and half in Spanish; and Medical Spanish III almost totally in Spanish. The foundation is a series of dialogues between the students or the students and the instructor, in which one portrays a patient and the other, the doctor. In addition, faculty and practicing physicians who come from Hispanic and Latin backgrounds have participated in the course as well.

“They’re learning the appropriate medical terminology as well as cultural sensitivity to people from another background,” says Fallace.

With the Hispanic population being the largest and fastest growing minority population in the United States, it’s unlikely that interest in the course will fade anytime soon.

As the students talk about how much they’ve learned in the last year, there’s little doubt about which of them has already put that knowledge to the best use. Jerry Emmons ’09, who, in addition to his medical studies works as a paramedic in Fulton, has used his medical Spanish on two emergency calls. He treated a Spanish-speaking migrant worker who’d had a heart attack, and another who’d been in a car accident.

“I was able to talk to the patient at the scene about what happened, treat him all the way to the hospital, and because the hospital’s interpreters hadn’t arrived yet I actually accompanied him to x-ray and did the translation, as well as gave him support and reassurance,” Emmons says.

Although he’d taken Spanish in high school, Emmons says he would not have been prepared for these encounters without his medical Spanish training at Upstate. “What you learn in high school and college is essentially conversational Spanish. Medical terms are very specific. I really learned all that here.” ■