

SALUD

HEALTH

Semana Binacional de Salud se centra en inmigrantes de Oregon

Portland, OR — La Semana Binacional de Salud (SBS) regresa del 3 al 15 de octubre para su noveno anual intento de mejorar la salud de los inmigrantes mexicanos y centroamericanos viviendo en los Estados Unidos, Canadá y México.

Este año SBS presentará actividades en 40 estados en los Estados Unidos y tres provincias en Canadá con la participación de la red consular de México, Guatemala, El Salvador, Honduras, Colombia, Ecuador y Perú. Además, durante SBS se implementarán cuatro campañas de SBS para promover la conciencia entre la comunidad latina no servida totalmente: Virus H1N1, Salud/Nutrición, Diabetes y Viviendo Verde.

Las actividades de la Semana Binacional de Salud en Oregon inician el 4 de octubre con una Inauguración de la Feria de Salud de Inauguración en la Secundaria Lincoln (1600 SW Salmon St.) en el centro de Portland. Con un tema de "La salud está en tus manos", el evento gratuito incluirá proyecciones de salud, anuncios educativos, información de recursos de salud y actividades para

toda la familia. La feria iniciará al medio día hasta las 5 p.m. así como el Torneo de la Copa de Fútbol Independencia, también en la secundaria Lincoln. Para mayor información sobre la feria contacta a Ursula Rojas en el 503-274-1450 ext. 25; para el torneo de futbol contacta a Juan Mayoral en el 503-935-6141.

Otros eventos de Oregon incluyen:

- Día de Vacunación Clínica para Familias, el 7 de octubre de 9 a.m. a 1 p.m. en el Consulado Mexicano en Portland (1234 SW Morrison St.). Vacunas gratuitas estarán disponibles de acuerdo al primero en llegar, primero en servir. Revisa el sitio web www.bination-alhealthweekpdx.org para una lista de las vacunas disponibles.

- Película "Causas no naturales: ¿la inequidad nos hace enfermarnos?" el 8 de octubre de 6 p.m. a 9 p.m. en el auditorio del Instituto para Profesionales de la Salud de PCC (1626 SE Water Ave., Portland). Es una proyección gratuita de la versión en español de este documental sobre las determinantes sociales de salud. Para mayor información **SEMANA DE SALUD** página 13

Ecuadorian and U.S. experts team up to reduce breast cancer deaths



PHOTO RICHARD JONES, EL HISPANIC NEWS

North meets South. Left to right: Lourdes Carrera, Marie Dahlstrom, Christine McDonald, Nelly Sarmiento, and Dr. Marie Napolitano. Carrera and Sarmiento are nurses in Ecuador, Dahlstrom is director of research and development for Familias en Acción, McDonald is executive director of Susan G. Komen for the Cure, and Napolitano is on the faculty of the University of Portland's School of Nursing.

Richard Jones
El Hispanic News Writer

Portland, OR — With improved health care in Ecuador, fewer people are dying from diseases such as malaria and dysentery. However, breast cancer is becoming a much greater threat than before.

Conquering the diseases that killed young women allowed more women in Ecuador to live longer. Since breast cancer occurs more frequently in older women, the rate of breast cancer began to rise in Ecuador.

Two nurses from Ecuador visited Portland last week, making stops at OHSU and the downtown offices of Susan G. Komen for the Cure. Lourdes Carrera, RN, MS, and Nelly Sarmiento, RN, MS, both from the School of Nurs-

ing at Pontificia Universidad Católica de Ecuador in Quito, came to share information about their successes and to consult with experts in Oregon.

Ecuadorian women's lack of knowledge about health care options is a large problem, Carrera said. "Breast cancer is increasing in poor people in Ecuador because they don't go for assistance."

Economics inserts its ugly little nose, too. Carrera pointed out that many Ecuadorians are poor, earning low wages when they work. "Sometimes they don't eat," she noted, "and they have many children."

A few decades ago, Carrera said, people died from diarrhea and other infectious diseases. "Now we have hypertension, diabetes, strokes, and pneumonia," she said.

Dr. Marco Antonio Pino, who spoke

to a group at the Komen offices via a live webcast, said, "Less than half of women in any age bracket have had breast exams — both rural and urban [women]." Pino is a doctor at School of Medicine at Pontificia Universidad Católica de Ecuador.

Stressing the importance of regular examinations, Carrera and Sarmiento displayed a poster designed to enlighten Ecuadorian women. "All women can get cancer. Breast cancer can kill, but early detection can save," the poster read.

Ecuador has a wide range of health facilities ranging from the very basic to the very sophisticated. One of the government's programs — the Ecuadorian Institute of Social Security — was created to oversee health, maternity, retirement, old age, and funeral expenses.

"They say everything is free," Carrera said, "but when [people] go into the hospital, they don't have the medicines and [people] have to buy [their own]."

She said the country is working to change that and to provide medicines, including traditional medicines.

One of the Portland coordinators of Carrera and Sarmiento's tour was Marie Dahlstrom, director of research and development for Familias en Acción. Dahlstrom, who has family roots in Ecuador, emphasized the multidisciplinary approach that Ecuadorian health officials and the Komen Foundation are taking.

Dahlstrom explained the program utilizes the talents of experts in health, communications, education, and psychological and religious fields. These

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teams aim to help “people understand their bodies and what the health care system has to offer them.”

She foresees “films and videos to engage the community and getting them to take action.” Women should know how to perform self examinations as well as understanding the benefits from getting mammograms.

The Komen Foundation recommends self breast exams and clinical breast exams for women beginning at age 20. At age 40, the foundation recommends mammograms every year.

“We appreciate how foun-

dations like Komen help with our program,” Carrera said. “This is the first time we’ve worked with an American university in this kind of project.”

“Our role has been to support them,” Dahlstrom said. “This has been a mutual

learning opportunity. We take away enhanced knowledge about what we can do in the U.S.”

After learning what works, Dahlstrom said, “Programs will be replicated in other countries in their native languages.”

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