# Unbandaged wounds: Why Latinas have difficulty accessing maternal healthcare

Brandi N. Geisinger
Cheryl Davidson
Flor de Maria Romero de Slowing
Jennifer Vazquez

### Introduction

This study will attempt to illustrate, using interviews with Latinas in a Midwestern university town and healthcare service providers and drawing from Critical Race Theory, that Latinas do not have adequate access to maternal healthcare services

## Critical Race Theory

- Racism is endemic in our society
- Expresses skepticism to dominant legal claims of neutrality, objectivity, colorblindness, and meritocracy
- Challenges ahistoricism
- Gives a voice to people of color
- Interdisciplinary
- Active component

#### Latinos in the Midwest

Latinos constitute the fastest growing minority group in the Midwest

Minorities have been hit exceptionally hard by the economic situation in the U.S.

Many of the Latinos interviewed were employed in the construction, restaurant, or hotel industries

- Public Hospital
  - According to an interviewee, an \$100 fee for translation services
  - MAY be able to provide three free days of treatment
  - Translator telephone line
  - Required by law to provide service; very costly!
- County Dental Services
  - No translation services available
  - Proof of income or bank statement required
- County Health Services
  - No translation services available
  - Proof of income or bank statement required
- National Women's Health Services Clinic
  - No translation services available
  - Sliding Scale Fees

- Free Clinic
  - 3 translators on staff (volunteers)
  - Opened one evening a week
  - Interviewed two volunteers, an interpreter and the coordinator
  - No legal documentation required; takes care of minor illnesses and some chronic illnesses; clinic pays for prescriptions on a short-term basis
  - One of the few health services available to people without insurance

#### Free Clinic (Users)

- In 2008, one-third of the patients were Latinos; patients come from Ames and surrounding areas
- 80% of the Latinos request translators (helps them with complex medical terms; more comfortable than asking children to translate)
- Majority of Latinos who go to the clinic bring their children or members of the extended family
- Word-of-mouth advertisement (telling friends about the clinic)
- Trust the clinic; a sense of community develops
- Difficulty getting to the clinic on the night it is open (irregular work hours)
- Chronic health problems due to the nature of their jobs (back and knee problems, carpal tunnel)

#### Free Clinic (Experiences)

- The free clinic is, essentially, the only source of medical care available to Latinos
- Very risky situation since the clinic only works once a week
- Many times patients need to wait many hours for medical attention
- Families with small kids have to use the emergency services, which are extremely expensive
- Latinos are very grateful to have access to the Free Clinic

- Shelter Services for Children
  - Translator on staff
  - Counseling offered to children, families, and adults
- Women's Shelter
  - Translator on staff
  - Forms are in the process of being translated
  - Counseling and shelter services for victims of domestic violence and sexual assault and their children

One woman told a story of going to the hospital because her daughter was very ill, and waiting for several hours. Nervous about attempting to ask the receptionist about the wait due to language barriers, she sat patiently. Finally she asked, and was informed that her doctor was not in and so she could not be seen.

One woman's child had fallen and cut his chin open and she was forced to take him to the hospital to get stitches, even though she could not afford the cost (she also contacted the interviewers at a later date, asking for help finding a place that would remove the stitches more cheaply)

Another woman could not afford birth control, and had not had luck attempting to work with the service providers available. She became pregnant. Deciding that there was no way that they could afford prenatal care and birthing services, she was forced to have an abortion. She still struggles with this decision daily, and has become severely depressed because of it.

- All of the women interviewed were grateful for the services they did have instead of being resentful, but experienced obvious guilt about their lack of ability to properly care for their families
- Many women also stated that transportation could be a problem because their families only had one car which their husband needed for getting to work

Many services require proof of income, which, according to the women interviewed, is problematic because they often do not know how much money their husbands earn and because their husbands are often paid in cash

Non-public services are generally not available to Latinas due to their unique insurance and identification requirements, as well as expense

Many of the women discussed how Latino culture is different from that of U.S. culture, and so their husbands can be reluctant to let them leave the house without them. In addition to the obvious obstacles this creates for Latinas, it also means they may lack the connections necessary to learn what services are better (or worse) at serving Latinas

Many of these service providers, when queried, say simply that they "serve everyone" but, since many services require proof of income and identification and do not have translators readily available, Latinas are being excluded from service

■ This "neutral" and "colorblind" approach being taken by service providers ignores the racism endemic in our society and prevents non-whites, and especially nonwhite Latina women, from being served

# Conclusions and Suggestions

- Latinas are excluded from accessing many necessary healthcare services
- Service providers, instead of claiming neutrality, should recognize the diverse needs of their clients
- There is a need for communities to acknowledge their minority populations and reach out to them