TIM HOFF: Welcome to another episode of the Author Interview series from the American Medical Association Journal of Ethics. I’m your host, Tim Hoff. This series provides an alternative format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Wandy Hernández-Gordon, the Director of Business Development and Expansion at HealthConnect One in Chicago, Illinois, where she previously held positions as Community Health Worker Liaison and Bilingual And Bicultural Trainer. She’s here to discuss her article, Why Community Health Workers’ Roles In Latinx Communities Are Essential, in the April 2022 issue of the Journal, Health Equity in Latinx Communities. Wandy, thank you so much for being on the show today. [music fades out]

WANDY HERNÁNDEZ-GORDON: Thank you, Tim, for having me.

HOFF: To begin with, what’s the main ethics point that you’re making in your article?

HERNÁNDEZ-GORDON: The main ethic point here is that there is a lot of folks that really don’t understand what CHWs do.

HOFF: And that’s community health workers, just for clarification.

HERNÁNDEZ-GORDON: Yes. Community health workers, yes. And so, I’m actually providing those with the definition and how it’s actually, you know, how we’re able to transform in different ways that benefits the communities that we’re serving.

A community health worker is a person who actually has a very close relationship and/or lives in the community that they’re going to provide education, link them to different resources, and is a bridge towards any social services that the community is in need of, as well as an advocate on behalf of the community.

HOFF: Mm. And what do you see as the most important thing for health professions students and trainees who especially might not have experience with CHWs to take from your article?

HERNÁNDEZ-GORDON: That a community health worker—which I call CHWs—are actually a very unique role in that the person is usually from the communities being served. And so, the person that is actually from there, the community is the one that decides what type of leadership role, if any, will they have in that particular community. It’s not something that I decided to actually go get myself an education on. It’s something that was granted to me by the community due to the uniqueness of the type of conversations, communications, as well as experience that I had dealing with social determinants of
health, dealing with different discriminations like racism, classism. And so, those type of things, and that’s how I actually I was granted this role within my community.

HOFF: Mmhmm.

HERNÁNDEZ-GORDON: Tim, I started very young. I actually started doing this type of work at the age of eight.

HOFF: Mm, wow.

HERNÁNDEZ-GORDON: And yes, at the age of eight with my grandparents. They didn’t speak English, and so they really needed a translator. And I was their translator in seeking different type of services that they needed. And so, once the community saw that in me, I start doing that for my community as well with other older adults.

HOFF: Hmm.

HERNÁNDEZ-GORDON: I became very active in terms of becoming an advocate because of a situation that occurred with my grandparents and me being present in a service setting where they were actually, I don’t recall exactly what type of services my grandparents needed, but I was there to translate.

HOFF: Mmhmm.

HERNÁNDEZ-GORDON: And the lady was looking at me and looking at my grandparents and stared at me and said, “You know what? This is the problem. You guys are here in the United States, and your grandparents don’t speak English. And that is a problem.” And that really made me, it shocked me, and it actually opened my eyes in terms of, wow, what’s going on here?

HOFF: Hmm.

HERNÁNDEZ-GORDON: You know? And when that veil of innocence came out, that’s when, you know, it just, it was natural at eight to actually look at her and say, “Well, I’m here. That’s why I’m here.”

HOFF: Hmm. Wow. It seems like a bigger issue might be a lack of professional medical translators or even a lack of bilingual clinicians in the first place.

HERNÁNDEZ-GORDON: Right.

HOFF: Finally, if you could add a point to your article that you didn’t feel that you had the time or space to fully explore, what would that be?

HERNÁNDEZ-GORDON: That is that as of now, since I started as a community health worker very young, that as of now, a lot of the community sees me as an advisor, a senior of one. And so, there is a lot of people that are doing, actively doing the type of role that I used to do. And so, you become, you transition from being an active community health worker member to actually being an advisor and a senior of one.

HOFF: Mmhmm.
HERNÁNDEZ-GORDON: In regards to a community health worker who is actively providing that type of service, they come to me. They actually, you know, if they want more in-depth information in regards to their CHW role, I'm able to assist them that way. And if they want to talk to seniors, like an older crowd that is like my age group, they come to me. And since I'm one of the seasoned advisors, they come to me, and I actually assist them in building that gap, right, and promoting and giving them the buy-in that they need to be able to speak to the crowd that I pertain to. So, that's something that I can actually do. [theme music returns]

HOFF: Well, Wandy, thank you so much for your contribution to the Journal this month, for your ongoing work, of course, and for being on the podcast with me today.

HERNÁNDEZ-GORDON: Well, thank you so much. I really appreciate actually being here, Tim, and this was also an honor for me. And I hope everyone enjoys the article.

HOFF: To read the full article, as well as the rest of the April 2022 issue for free, visit our site, JournalofEthics.org. We'll be back soon with more Ethics Talk from the American Medical Association Journal of Ethics.