

Celebrate African American History Month!

Source: <https://www.cdc.gov/healthequity/features/african-american-history>

This February celebrate African American History Month. Learn about how heart disease, cancer, and stroke impact African Americans and how to improve your health.

To commemorate and celebrate the contributions to our nation made by people of African descent, American historian Carter G. Woodson established Black History Week. First celebrated in 1926, the week was expanded into Black History Month in 1976 as part of the nation's bicentennial. Each year, the U.S. President proclaims February as National African American History Month. Heart disease, cancer, and stroke are the leading causes of death for African Americans. Learn about these conditions and what you can do for health.



Heart Disease and Stroke

- 1 in 3 deaths in the United States is due to cardiovascular disease. People of all ages, genders, races, and ethnicities are affected. However, certain groups—including African Americans and older individuals, are at higher risk than others.
- Nearly half of all African American adults have some form of cardiovascular disease that includes heart disease and stroke.
- High blood pressure is the leading cause of heart attack and stroke in the United States. About 2 out of every 5 African American adults have high blood pressure, and less than half of them have it under control. African American adults are much more likely to suffer from high blood pressure (hypertension), heart attacks, and stroke deaths than white adults. Individuals living below the federal poverty level are more likely to have high blood pressure compared with those living at the highest level of income.

Cancer

Cancer is the second leading cause of death among black people in the United States. Among men, black men get and die from cancer at higher rates than men of other races and ethnicities. Among women, white women have the highest rates of getting cancer, but black women have the highest rates of dying from cancer.

Breast cancer deaths are going down fastest among white women compared to women of other races and ethnicities. Black women have the highest death rates of all racial and ethnic groups, and are 40% more likely to die of breast cancer than white women. The reasons for this difference result from many factors, including having more aggressive cancers and fewer social and economic resources. To improve this disparity, black women need more timely follow-up and improved access to high-quality treatment.

Prostate cancer is more common in black men. It tends to start at younger ages and grow faster than in men of other racial or ethnic groups, but medical experts do not know why.

Obesity, Nutrition, and Physical Activity

Obesity is a problem in the African American community and is related to conditions like heart disease, stroke, and cancer. Obesity is common, serious, and costly. The estimated annual medical cost of obesity in the U.S. was \$147 billion in 2008.

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February 2023 Calendar

*Black History Month
American Heart Month*

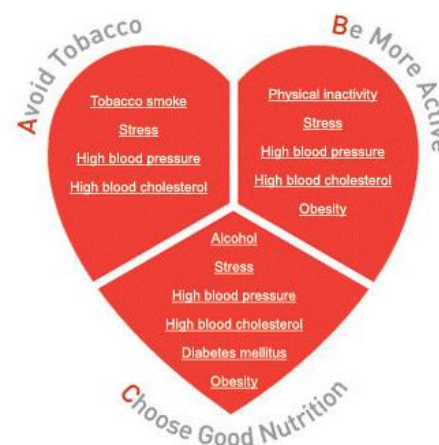
- 1 – National Freedom Day (US)
- 1 – World Hijab Day (International)
- 2 – Rheumatoid Awareness Day (International)
- 4 – World Cancer Day (International)
- 5-11 – Burn Awareness Week (US)
- 7 – National Black HIV/AIDS Awareness Day (US)
- 13 – International Epilepsy Day
- 14 – World Congenital Heart Defect Awareness Day (International)
- 21– Language Day (International)
- 21– Mardi Gras (US)
- 22 – Ash Wednesday (Christianity)
- 26– Black Lives Matter Day (International)
- 27 – Orthodox Lent (Orthodox Christian)

- African Americans are nearly 1.5 times as likely to have obesity as compared to non-Hispanic Whites.
- From 2011-2014, the prevalence of obesity among African Americans was 48% compared to 35% of non-Hispanic Whites.
- African Americans eat fewer vegetables than other racial/ethnic groups but eat similar amounts of fruit as non-Hispanic Whites.
- More than half (56%) of African American adults 18 years of age and older do not meet the aerobic component of the 2008 Physical Activity Guidelines.

What You Can Do for Your Health

Living a healthy lifestyle can help prevent heart disease, cancer, and stroke. Take these steps:

- Eat a healthy diet with fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products. Choose foods low in saturated fats, cholesterol, salt (sodium), and added sugars.
- Exercise regularly. Adults needs 2 hours and 30 minutes (or 150 minutes total) of exercise each week. You can spread your activity out during the week, and can break it up into smaller chunks of time during the day.
- Be smokefree. If you are ready to quit, call 1-800-QUIT-NOW (1-800-784-8669) or 1-855-DÉJELO-YA (1-855-335-3569 for Spanish speakers) for free resources, including free quit coaching, a free quit plan, free educational materials, and referrals to other resources where you live.
- Limit alcohol use, which can lead to long-term health problems, including heart disease and cancer. If you do choose to drink, do so in moderation, which is no more than one drink a day for women and two for men.
- Know your family history. There may be factors that could increase your risk for heart disease and stroke.
- Manage any medical condition you might have. Learn the ABCS of heart health. Keep them in mind every day and especially when you talk to your health provider:
 - A ppropriate aspirin therapy for those who need it
 - B lood pressure control
 - C holesterol management
 - S moking cessation



Why Humor is the Hardest Thing to Translate

Source: <https://www.dynamiclanguage.com/why-humor-is-the-hardest-thing-to-translate/>

What is it that makes us laugh and why? We all need a bit of humor in our lives. But understanding how to get it isn't so simple. It's a difficult question with an array of vague explanations but no single definitive answer. To really underpin the complexity of defining what's funny and what's not, one must examine just how poorly humor often fairs in foreign lands. Here is a step-by-step explanation of why humor is the hardest thing to translate to a different language

Your Cultural Makeup Defines Your Sense of Humor

It's difficult to determine whether it's the weather, the political climate, national history, or any combination of each that leads to cultural norms. But the one thing that's for sure is that these cultural norms tend to imprint themselves onto people's collective sense of humor. Ask your average Englishman his thoughts on American humor and the chances are he'll scoff at its lack of subtlety. Ask the same question to an American of British humor, and he'll say it's too dry and lacks punchlines. Neither the American nor the Englishman can fathom how the other manages to laugh at what seems to them to be unbearably dull and uninteresting jokes. And that's between two countries that both speak English! Now add on a language barrier and try to imagine how many people will be laughing at your favorite jokes.

Language Defines Your Cultural Makeup

Language is far more than just the words we speak. Language is also the way we say those words. It's the inflection and volume of our voices and how we use our bodies in conjunction with what we're saying. And all of this imprints itself onto our respective cultures. Latino languages, and thus, Latino cultures, for example, are demonstratively more physically expressive than most English-speaking cultures. Ask your average South American about his favorite football (soccer) team, and he or she will go off on an elaborate tangent full of animated gesticulation. Ask your average American about his or her favorite American Football team, and you might get a similar degree of yelling but far less use of the

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hands. Similarly, if you look at what kind of humor is prevalent in Latino countries, you'll notice a larger degree of slapstick compared to English speaking countries that depend more on subtlety.

Local History Defines Your Sense of Humor

Humans tend to use humor as a means of making light of controversial topics. Comedians argue that humor is needed to help us move past difficult times. But one cannot enjoy the escape without having experienced the hard times. Without the necessary background on the joke, the audience misses out on the gravity of the punchline and the humor is effectively lost. Moreover, there's always the tension in regard to who has the right to laugh at what. Foreigners laughing at jokes over tragedies that do not involve them can be problematic. These points of tension also blur the lines between what's laughable and what's not. Marketing campaigns that incorporate humor must often be transcreated, so they resonate with the target audience.

Wordplay Is Crucial to Many Jokes

Of course, the most obvious challenge is in the words themselves. Particularly in English, a popular sub-genre of comedy is dry humor, in which there's practically no physical expression, leaving all of the humor of the joke to the actual words, and sometimes the pronunciation of the words. The joke can often be so dependent on the wordplay of the original language that it's just simply impossible to translate. But in many cases, translators have mastered the art of getting around these challenges by tapping into local expressions from the language to which they are translating.

Do you know of any jokes you've heard in movies that didn't translate correctly to other languages, whether it was in the subtitles or a poorly translated dub? Let us know in the comments section below.

New Staff Profile: Shakila Niazi

Shakila is our newest Dari, Farsi, Pashto interpreter joining the UC Davis Health Medical Interpreting team. Shakila was born in Afghanistan and moved to New Jersey at the age of 17, where she started her family. From an early age, Shakila has been keen to interpreting for family and friends. For more than three decades, she has been devoted in aiding individuals who face linguistic barriers, being familiar with the challenges one may face by not knowing the language. For Shakila, helping her community is the most important thing when providing her linguistic skills.

Shakila moved to California in 2002, where she was able to be a full-time mother. Over the course of time, Shakila wanted to return to work to keep herself busy. She began her career in the interpreting field in 2011 when she started interpreting in medical and behavioral health settings, working for various agencies. Shakila decided to join UC Davis Health because of its well-known organizational culture, and high level of professionalism. Shakila is grateful for the opportunity to join the UC Davis Health medical interpreting team, and is excited for what the future will bring.

In her leisure time, Shakila takes pleasure in participating in activities such as reading books, traveling with her daughter, and spending quality time with her family.

Welcome aboard, Shakila! We are glad to have you as a part of our Medical Interpreting team!

