



Spring 2018 Latino Community Listening Sessions

Report

By:

Niasha A. Fray, MA, MPSH

Denver Jameson, MPH

Angel Romero Ruiz, MA

Yholima Vargas Pedroza

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Introduction

Summary

The Healthy Durham 20/20 Community Engagement Team was tasked with the responsibility to engage and listen to the ideas of community members about ways to help Durham work collectively to achieve the vision of becoming the healthiest county in the nation. The Community Engagement Team is comprised of Niasha Fray (Program Director for Healthy Durham 20/20), Camryn Smith (Asset Based Community Development Facilitator), and Kevin McLeod (Director of Operations & Strategy, Duke Division of Community Health). This team held four community listening sessions at the beginning of October 2017 and throughout November 2017. In the midst of these listening sessions, we learned about the unique lived experiences, perspectives, and health needs of the Latino community in Durham.

According to the 2017 Durham County Community Health Assessment and US Census Bureau 2011-2015 American Community Survey, 13.4% of the Durham County Population is comprised of people who identify themselves as Hispanic or Latino. As such, Niasha Fray and Kevin McLeod collaborated with leaders across Durham who work to improve the health and wellbeing of people in Durham who identify as either Hispanic or Latino. The organizations represented in this collaborative effort included the Duke Well LATCH program, Partnership for a Healthy Durham, Durham County Department of Public Health, Full Circle Interpreting, and the Duke Office of Durham & Regional Affairs.

As a result of this partnership, Healthy Durham 20/20, DukeWell LATCH, and the Partnership for a Healthy Durham hosted two Latino Community Listening Sessions in March of 2018. They were facilitated in Spanish by Angel Romero Ruiz (Population Health Program Coordinator, PHMO – LATCH) and Yholima Vargas Pedroza (Population Health Resource Associate, PHMO – LATCH/DukeWell). These listening sessions yielded a robust conversation amongst 19 community members, stakeholders, and leaders from local organizations who shared their viewpoints with the community engagement team.

Participation

Attendance was a good cross-generational and gender identity mixture from the Latino community in Durham. Although males were underrepresented at both sessions, facilitators ensured all viewpoints were heard by calling on men to participate. Some parents came with their kids and older adults.

Healthy Durham 20/20 Community Listening Session Engagement		
Date	Location	Attendance
March 24, 2018	Holton Career Center and Resource Center	12
March 27, 2018	The Community Family Life & Recreation Center Lyon Park	7

Healthy Durham 20/20 is committed to continuing to host community listening sessions throughout our development in order to improve broad community participation in this movement. This will involve working to reach other parts of Durham, utilizing varied types of venues, as well as targeting the cultural/ethnic diversity of Durham.

Methods

As recommended by the 2017 Durham Health Summit Community Voice (DHSCV) report the primary approach to the community listening session was to draw on the shared and unique experiences, resources, and understanding of the participants. As suggested by the DHSCV actively going into the community to hear voices was the key strategy of the community listening sessions. The Community Engagement Team and partner organizations developed a Latino Community Engagement survey to discern the best dates, days of the week, time of day, and location to host the Latino Community Listening Sessions. The survey was distributed to leaders across Durham who work to improve the health and wellbeing of people in Durham who identify as either Hispanic or Latino. The survey responses helped to guide our plans for planning the Latino Community Listening Sessions. The key outreach strategy used by the partner organizations was through personal invitations to families and individuals that are served by community-specific resources/ organizations. The advertising flier and all of the presentation materials were translated into Spanish and it was advertised as a family friendly event.

Angel Romero Ruiz and Yholima Vargas Pedroza began the Latino Community Listening Sessions with an introduction of the sponsoring organizations: Healthy Durham 20/20 and Partnership for a Healthy Durham. This was followed by the Spanish translation of the short video called "The Tale of Two Zip Codes". Afterward, these listening sessions continued with discussion questions to spark reactions and brainstorming. The team used Asset Based methods of Appreciative Inquiry by posing questions that were open-ended and encouraged deeper discussion and reflection. The team's facilitation of the listening session encouraged the participants to engage in discussion with one another to encourage cross-pollination of ideas, perspectives and to help form connections during each session. The modest number of attendees helped the facilitators to engage each person in a rich discussion.

Healthy Durham 20/20 Latino Community Listening Session Discussion Questions	
1. Ask group members to vote on which topic they want to discuss. Only ONE of the following topics will be discussed.	
a. Access to healthcare and health insurance	
b. Affordable housing	
c. Obesity, diabetes and food access	
2. Ask the participant the following three questions.	
a. What would it look like to _____ (example: have access to affordable housing)?	
b. What barriers are preventing you from _____ (example: accessing affordable housing)?	
c. What ideas do you have to address these barriers?	
3. Is this type of meeting the best way for us to reach you and keep you engaged or would some other platform, location, time, etc. better suit you?	
4. What can we do to make sure that your ideas are used to improve the health of our community?	
5. How do we engage the community in sustainable ways? (Additional prompt for clarity if needed: What resources are needed to support work in our neighborhoods that will improve our community health?)	

The facilitators and attendees engaged in a collective group discussion format. Each session was highly interactive and filled with insights from all involved. This approach also allowed participants to share their perceptions of their family members, friends, neighbors, co-workers, etc. who live, work and play in Durham. There were note takers at each session who were assisted by interpreter services to ensure the complete gathering of ideas.

2017 Durham Health Summit Community Voice Integration

In preparation for writing the findings of this report the Community Engagement Team reviewed the 2017 Durham Health Summit Community Voice (DHSCV) report. This report is critical to the development of Healthy Durham 20/20, because it was the first public effort of the convening group to (1) strategize an effective cooperative conversation with the Durham community that empowered them to express their concerns and ideas; and (2) convey cohesive (not exhaustive) assets and needs of the Durham community.

The Executive Summary of the 2017 DHSCV report summarized input from the broad array of community and organizational attendance in the following way:

Community Voice Small Group Discussion Sessions The five, concurrent small group discussions about the inclusion of the voice of the community revealed that:

Definition of Community – dynamic, but should reflect common goals, representativeness, and equity.

Partnering in an Ongoing Manner – go into the community and engage in listening sessions.

Voices Heard – ensure their inclusion, use shared resourcing, and foster ongoing support and accountability.

Sustainably Engaging the Community – leverage existing relationships and validate the underrepresented.

Key recommendations include:

- Increase the capacity of service providers and community members served by leveraging varying resources.
- Build stronger, broader, more efficient and more inclusive collaborations within and between sectors.
- Develop plans for listening sessions, with an emphasis on more vulnerable communities.
- Develop accountability measures to ensure equity is a common goal in supporting community stakeholders.

This report aims to express the efforts of the Healthy Durham 20/20 movement to respond to the 2017 DHSCV report key recommendations and community voice discussion findings.

Findings

Each of the discussion questions yielded unique answers at the community listening sessions, but many of the answers fell into three large categories. The primary topic of discussion was related to affordable, safe, and quality housing options for low-income communities. The discussions also addressed the issue

of access to healthcare and insurance. The last category is providing opportunities for the Latino community to collaborate with community organizations and garner resources to develop community rooted solutions to work toward health equity. In the following sections, you will gain a more detailed insight into these categorized findings with direct quotes from note takers in italics.

Housing

The first point of concern was related to the poor quality of housing that many attendees resided in or knew of as primary places for many Hispanic and Latino residents in Durham. Many of the homes were described as “terrible” because of the lack of maintenance that is done to the residences by the landlords. The maintenance that is done is completed with minimum effort and low-quality materials. Overall attendees said that landlords do not care and living in these conditions with no recourse for improvement is depressing.

- *When you go and rent they want you to pay a deposit. They aren't painted, they are full of cockroaches. They aren't necessarily old. It's not maintenance that the owner does.*

The attendees discussed how they would like to see more rules/ guidelines enforced by local government to landlords to keep them from neglecting maintenance and care of their properties. It seemed clear that residents are burdened with the responsibility to report or litigate the offenses by their landlords, but they often do not have the resources to see it through to resolution.

- *I think to have more strict rules for the property owners, the ones who are renting places. Especially the ones who are really in bad condition.*

This issue of having some legal recourse against landlords who rent poor quality properties was also stressed due to health concerns. Many attendees had experiences where issues of asthma were exasperated due to poor air quality and mold in the property where they lived. Some were concerned for the health of their children because landlords would not replace old, dirty carpet and had to come up with alternative strategies to protect their young children.

- *I started looking around and my kid was playing in the carpet all the time and I asked them to take it out, and I had a plan b, and I bought a huge blanket and covered the whole floor so my kid could play. Every week I would take it to the laundromat and take it back so he wouldn't get as sick. In the end, we had to leave. They don't care.*

Others noticed that landlords had not resolved insulation problems or removed lead in their homes. Some people feared that these exposures would place them at increased risk of health problems as serious as cancer.

- *People are always increasing your rent but then won't take that money to improve the apartment for your health.*

Another health risk associated with housing is related to crime and safety. A good deal of discussion related to residents witnessing people using drugs and alcohol near their homes and particularly in close proximity to children. For this reason, many parents do not let their children go outside to play. Even though people felt a regular police presence it didn't stop them from hearing gunshots or a little girl coming up missing in her own neighborhood. One resident described how she found a

job where her housing was provided for her and her kids so that they could be safer and have a nicer place to grow up.

- *If programs are going to help in Durham, we need safety.*

A major barrier to safe quality housing was affordability and discrimination. Participants expressed how they do not have jobs that allow them to afford better housing options. The attendees understood that paying more for rent in a nicer, safer community would mean that they wouldn't be able to afford their other financial responsibilities.

- *We're all creatures of God. God put us here as a mission...all of us have a vision and a desire to become better. You go to high school, you prepare your mind. I'm going to have a girlfriend but I'm also going to study. But when housing becomes more and more expensive, it's hard to achieve those goals.*

Other attendees discussed how they suspected discrimination is also at play when it comes to being able to get a nicer, safer home for themselves. Particularly they pinpointed how legal barriers prevent them from obtaining universally accepted forms of identification, so they could not even apply for certain housing options. Others noticed how some property owners simply would not take their applications to rent in a nicer, safer community.

- *They build houses here but they only rent them, I don't know if this is discriminatory, but they won't rent them to us. They don't take our applications. I don't know why.*

Access to Healthcare and Health Insurance

Community members discussed the paradox of being Hispanic or Latino and needing healthcare. On the one hand, attendees described how expensive healthcare is, while on the other hand, it is essential to thrive. They were able to identify the legal barriers that prevent them from obtaining accepted forms of identification and other documentation which in turn prevents them from being able to access Medicaid and other forms of health insurance. Overall the attendees valued being able to pay for the services that they need to live a healthy life, but are often left in a conundrum.

- *When we go to the doctor or the emergency room, we have a really expensive bill, and for us, we don't have the resources to be able to pay it, but we want to make enough to be able to pay it.*

Fortunately, some community resources in Durham provide a lifeline of support to this vulnerable population.

- *A program like LATCH has helped us a lot as a community. If we didn't have this program, who would listen to our voices? Many of us would die in the streets.*

It was clear that these programs are critical to the health and wellbeing of many Hispanic/Latino residents in Durham due to their fear of having their information given to the government.

- *There are people who aren't coming because they're afraid their info will be given to the government. They'd rather die*

Some people agreed that language affects their ability to access healthcare and other necessary resources that would enable them to thrive. Having staff that speaks fluent Spanish can make or break a needed connection to the Latino community.

- *Maybe you have people that are working for an organization. Some people do not fully speak the language. Who's going to help us out if it's not done in the language?*

For these participants access to health, in general, was a broader issue related to nutrition. There was some consensus on the fact that many people in the community rely on fast food to provide cheap and readily available meals for their family. It's even a challenge for parents when they start out giving their children fruits and vegetables when they're little, but due to social norms, the kids eventually develop an aversion to healthier food options.

- *We give them fruits and vegetables when they're little, and then when they're older they don't want them anymore.*

It was clear that the attendees wanted help improving their nutrition and increasing access to affordable healthy food. Cooperation between the community and health workers was a critical point in terms of realizing how employees of the healthcare workforce can help or hinder the health of those they serve. An attendee clearly expressed the sentiment that if providers/organizations notice certain patients are not improving in their health status and others are, that it might be important to take a critical look at who is serving their patients and make necessary changes for the benefit of the patient's health.

- *Many people need to be able to cooperate and work together better, because sometimes we notice with time, like if you're going through a long health process, you realize which people are doing a good job, people we want to help out, some people helping her out are excellent, but we have also gone through people who don't make us feel good at all...notice which patients are not doing good*

Community Rooted Solutions

These group discussions revealed that the attendees were eager to share their thoughts about how to be more engaged in creating solutions for themselves. They also supported one another by sharing information about resources in the community that could assist them with the challenges they were facing.

- *If there is a problem, you can go and complain. There is a government office and you can go and complain, like when they painted your car, and they will make sure they paid you.*
- *So if you call NIS [City of Durham Neighborhood Improvement Services Department], they'll take a complaint, and if in 30 days that abandoned car hasn't been removed, they'll come and remove it. So it is important to call if you can.*

It was also clear that this group was interested in being proactive about maintaining or improving their health and opposed to waiting to address their health once a health crisis occurred. It was important to them that they could develop community relationships so that connections can be made to effectively develop solutions to their problems.

- *As Hispanics, we open our mind to a lot here. The more you hear, the more you learn...find out about different things. For me, it's important ...we should also have the capacity to form a group as well. So for example, I work in construction, and he's a carpenter [points to someone else in the room], and if there were a group that would back us up, then we could group together and build homes for our community.*

The attendees were encouraged to continue these conversations and to encourage more people to attend, so they offered several suggestions on how to bring more people from the Latino community to the table to dialogue and work together.

- *Having posters in places where Hispanic and Latino communities are at is helpful.*
- *Use Lincoln and the Health Department because people are already taking their kids to the doctor.*
- *Give the information where people are coming out of mass, either before or after. Set up tables there.*
- *Socialize with the community.*
- *Make cards and advertise there. Community members may be willing to help pass out materials.*
- *Reach men where they are employed.*
- *Find people to disseminate the information who are respected in the community.*
- *Use word of mouth.*
- *Radio*

Suggested Next Steps

Based on the insights and feedback provided by the Healthy Durham 20/20 Spring 2018 Latino Community Listening Sessions we should strongly consider moving forward with the following steps:

- **Renter's Rights Forums:** A meeting where residents who rent their homes can share their experiences with city and county leaders while also learning about their rights as renters and resources to help them improve their opportunities for better quality housing options.
- **Expand programs like the Durham Affordable Housing Preservation Fund** and more aggressively invest in the Durham Community Land Trusts to accommodate both low and moderate income people/families.
- **Provide training and financial incentives to landlords** who are low resourced and may not be able to afford the maintenance of their rental property.
- **Develop or expand healthy home environment assessments and housing rehabilitation loan & grant programs** through corporate, government, and nonprofit partnerships in order to provide extermination, insulation, HVAC, flooring, air, and water purification systems, and other home maintenance to low and moderate income residents and elderly/disabled homeowners.
- **Commit to Land Banking practices** in Durham city and the broader county in order to avoid or divert predatory real estate practices and ensure the negotiation of property transfers that address community needs.

- Employ fair housing advocates in the community who can advise residents on low cost or free resources to help them resolve disputes with their landlords before eviction becomes an issue.
 - Expand the Eviction Diversion program by providing more funding for emergency rent assistance, community coordinators, as well as legal staff.
 - Community agencies meant to mediate housing and safety issues for Durham residence provide scheduled visits as a way to follow up on complaints and assure repairs have been done sufficiently and if not follow up with fines to the landlord or rent abatement to the tenant.
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- Commit to Community Wealth Building.
 - Increase the minimum wage to a living wage that matches the growing housing market and commit to building a local workforce that will be able to afford at least a two bedroom apartment.
 - Foster more opportunities in low and moderate income communities to connect to resources that would allow them to be considered for employment with higher pay and comprehensive benefits, resources to help them develop/grow their entrepreneurial skills, and/or apply for free or low cost technical/ trade certifications or apprenticeships.
 - Increase the Bilingual workforce in healthcare and education to be sure that people who speak English as a second language are able to fully understand their rights, options, and resources available to them.
 - Increase the number of grocery stores, food co-ops, farmer's markets, and food pantries in low and moderate income communities that sale low-cost or donate free nutrition dense foods.
 - Encourage entrepreneurial ventures where people provide convenient healthy prepared meals delivered to the homes of people living with children, elderly and those with a disability.
 - Expand programs like LATCH who provide bilingual community health workers, health educators and social workers to serve a broader population to prevent high-cost ER and hospital visits.
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- Revise local policies that create strict barriers that prevent people from receiving healthcare, obtaining proper housing, jobs, banking, and education opportunities, such as identification requirements that hinder undocumented immigrants from securing their basic needs.
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- Continue hosting community listening sessions to keep the lines of communication open with the community.