

Webinar Guidelines

- You will be listening to this webinar over your computer speakers. There is no need to call in.
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Chat Box

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- The planners, moderators, and presenters for this webinar series do not have any financial arrangements or affiliations with any commercial entities whose products, research or services may be discussed in this presentation.
- This program is funded by a grant from the New York State Department of Health.
- No commercial funding has been accepted for this activity.

SCHOOL OF PUBLIC HEALTH
UNIVERSITY AT ALBANY State University of New York
Center for Public Health Continuing Education

Welcome to the Latino(a) Structural Competency Series

- This webinar is being presented live on June 30, 2015, and is being recorded and archived for future viewing.
- You can find Frequently Asked Questions on structural competency and additional readings and resources at: www.advancingcc.org

What is Structural Competency?

Structural competency refers to the capacity of practitioners to recognize and respond to the ways in which broad social, political and economic structures contribute to the vulnerability and ill health of the individuals and communities we serve.

The Four “Beats” of this Structural Competency Series

1. Historical frames of oppression
2. Present day sociopolitical barriers and challenges to health
3. Activism and advocacy within the community around health
4. Clinical cases

Webinars in the Latino/a Series

Today's Webinar

Structural Competency and Latino Health in Upstate New York.

Fabrizia Rodriguez, Esq., Centro Civico, Inc. (Amsterdam and Albany) and
Elisa DeJesus, Ibero-American Action League (Rochester)

Other Webinars in the Series

Latin@ Health Disparities: Beyond the *Cultura* Answer.
Edgar Rivera Colón, Columbia University,
and Moises Serrano, El Cambio

Addressing Suburban Structures: Health and Latino Communities on Long Island.
Martine Hackett, Hofstra University

**Being Structurally Vulnerable:
“Deservedness,” Latino Migrant Laborers and Health.**
James Quesada, San Francisco State University
Emiliano Bourgeois-Chacón San Francisco Day Labor Program and Women’s Collective
James Shuford, Dept. of Anthropology, University at Albany, SUNY

Learning Objectives

- ❖ Identify the main health issues and barriers confronted by Latinos in the Amsterdam and Rochester areas of upstate New York.
- ❖ Describe some of the efforts and collaborations that community organizations have undertaken to improve the health of Latinos in upstate New York.
- ❖ Recommend ways to work with key community agencies to address barriers to health in your practice/agency.


Evaluation

We would really appreciate it if you would fill out the very brief evaluation at the end of this webinar.


We value your feedback and are using it in the development of this structural competency series.

URL:
<http://www.ualbanycphp.org/eval/SPHeval.cfm?ID=248>

Today's Presenters



Elisa DeJesus,
Director, Families Services Division,
Ibero-American Action League, Inc.



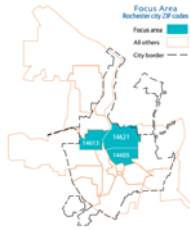
Fabrizia Rodriguez, Esq.,
Director of Community Development Initiative,
Centro Civico, Inc.

Ibero-American Action League – Rochester, NY



Demographics of the Community that Ibero Serves

- ❖ Monroe County is located in western New York, centered on the City of Rochester, with 19 suburban and rural towns.
- ❖ The population of Monroe County is 744,344, with 210,565 City residents.
- ❖ Rochester and Monroe County serve as the hub for a 5-county metropolitan statistical area with a 2010 population of 1,054,323 that share health care and media resources.



Map: Percent of Rochester Residents Living Below the Poverty Line



- ❖ Within the City of Rochester, certain socioeconomically disadvantaged neighborhoods bear the brunt of health disparities.
- ❖ These areas are referred to as the "Crescent" because they form an arc around the center of the City.
- ❖ The population of the Crescent numbers 143,000.

Source: Doherty, Edward, "Special Report: Poverty and the Concentration of Poverty in the Nine-County Greater Rochester Area", Report by the Rochester Area Community Foundation, 2013



❖ Fourteen percent or 107,488 of Monroe County residents are African-American; of those, 78% reside within the City of Rochester.

❖ Of the County's 54,055 Latino citizens, 64% reside in the City of Rochester.

❖ The Latino community, mostly of Puerto Rican descent, is the fastest growing segment of the Rochester population with a 100% increase since 1990.

Photo Source: ACT Rochester: Community Indicators for the Greater Rochester Area. Special Report: Poverty and the Concentration of Poverty in the Nine-County Greater Rochester Area, December 2013.

Demographic and select socioeconomic characteristics of community

Demographics	Monroe County	Suburbs of Monroe	City Total	Crescent	Rest of City
% White, Not Latino	76%	89%	42%	28%	75%
% African Amer./Black, Not Latino	14%	4%	38%	50%	14%
% Latino	6%	3%	13%	17%	5%
% of adults with less than a high school diploma	12%	8%	21%	27%	11%
% with income less than 200% of poverty level	29%	19%	54%	60%	39%

Source: American Community Survey, 2005-2009

Poverty status in Monroe County

Poverty Status	Monroe County	City Total	Suburbs of Monroe
% with income below poverty	14%	30%	7%
% White, Not Latino	8%	19%	6%
% African American/Black, Not Latino	32%	37%	14%
% Latino	33%	42%	17%

Source: American Community Survey, 2006-2010



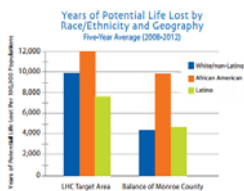
Health Issues, Challenges and Barriers Confronted by Latinos in the Rochester Area

Health Status of Latinos in the Finger Lakes Region and Monroe County

Nuestra Salud 2014 Report, a local report on health disparities commissioned by the Latino Health Coalition in Rochester, researched the following factors to determine the health of the Latino population in the Finger Lakes Region and Monroe County:

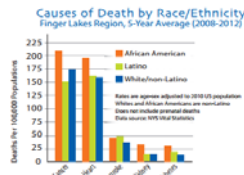
- ❖ Years of Potential Life Lost – any death occurring prior to age 75
- ❖ Self-reported health status
- ❖ Infant mortality
- ❖ Preventable hospitalization rates

Years of Potential Life Lost



- ❖ Latinos in the Finger Lakes region and in Monroe County have a YPLL rate that is higher than Whites living in the same area (12% higher in the region and about 30% higher in Monroe County), but lower than that of African Americans.
- ❖ These rates have seen slight declines over the past 10 years, but the disparities persist.
- ❖ Target Area residents, regardless of race or ethnicity, have twice the rate of YPLL compared to those who live in the balance of Monroe County.

Causes of Death

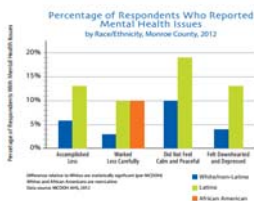


- ❖ Cancer and heart disease are the two top positions of potential life lost for all races.
- ❖ However, homicide is the fourth leading cause of Years of Potential Life Lost for Latinos (third leading cause for African Americans).

Self-Reported Health Status

- ❖ A survey conducted by the Monroe County Department of Health, show that Latinos report higher rates of fair or poor health compared to Whites (20% vs 13%)
- ❖ They also report greater limitations due to physical health relative to Whites in a variety of domains.

Latinos in Monroe County report some of the highest rates of adverse outcomes related to mental health



- ❖ For instance, almost 20% of Latinos reported that they felt calm and peaceful little or none of the time during the past four weeks (compared to 10% of Whites).
- ❖ And 13% reported feeling downhearted or depressed all or most of the time during the previous month (compared to just 4% of Whites).
- ❖ Some communities in the city of Rochester have been designated Mental Health Professional Shortage Areas (HPSAs), indicating a lack of mental health care providers for residents of these geographies.

Infant Mortality (Death of baby before age one)

This is widely used as a measure of population health, because many factors can affect the health of a newborn including:

- ❖ the quality of and access to health care
- ❖ socioeconomic status
- ❖ mother's age
- ❖ lifestyle factors such as smoking, drug use, and diet.

❖ In our community, Latino infants are among the most vulnerable.

❖ In Monroe County, Latinos experience three times the infant mortality rate of Whites--12.9 deaths per 1,000 live births, compared to 3.9 deaths per 1,000 births among Whites.

❖ There are also more Latino infants (10%) born with low weight than Whites (7%).



Socioeconomic Status



Latinos experience the highest percentage of poverty in Monroe County, with 46% of this group falling below the Federal Poverty threshold.

Hospitalization Rates

❖Latinos residing both inside and outside the Target area experience higher rates of PQI hospitalizations as compared to Whites in the same geography, which suggests ethnic and geographic differences in access to preventive and primary care services.

❖Research suggests that Latinos, particularly those living in the Target Area, may lack access to this level of care, potentially leading to an increased risk of serious complications requiring hospitalization.

❖For example, Latinos in Monroe County with diabetes are more than twice as likely to be hospitalized for a lower extremity amputation relative to Whites, despite no difference in the reported rates of having been diagnosed with diabetes between these two groups.

Living Environment and Health Behaviors that Influence the Health Outcomes of Latinos in the Rochester Area



Photo source: [RockWiki: The People's Guide to Rochester](#)

A high number of former industrial sites called "brownfields" exist in the Target Area. These often have toxic waste and have been linked to cancer and respiratory diseases, among others.

Higher concentrations of old homes with lead paint, which causes serious physical and cognitive illnesses in children.

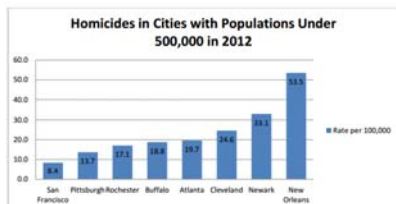


Photo Credit: Chelsea Allinger for the Center for Community Progress



A high number of neighborhood "corner stores" (10 stores per every square mile) that lack fresh fruits, vegetables and other health foods.

Photo source: www.foodexclusion.tumblr.com



Source: Bower, Karen and John Klofas. "Homicide in Rochester, NY 2012. Comparison of Rates for a Selection of United States and International Cities." Working Paper #2013-02. January 25, 2013. Center for Public Safety Initiatives, Rochester Institute of Technology.

A concentration of violence and criminal activity in the city of Rochester.



Photo source: ACT Rochester: Community Indicators for the Greater Rochester Area. Special Report: Poverty and the Concentration of Poverty in the Nine-County Greater Rochester Area, December 2013.

Unhealthy lifestyle choices, such as smoking tobacco, risky sexual behaviors, and substance abuse which may in part be facilitated by a physical environment that impedes healthy living.

Lowest levels of education marked by 44% of Latinos in the Target Area having less than a high school diploma.



Poor diet and lack of exercise which may contribute to Latinos having a higher rate of obesity (41%) compared to Whites (27%).

Obese/Overweight, Adults Ages 18+, 2012 (% of the population)	Monroe County	City	Suburbs	African American	Latino	White
Obese	30	36	27	38*	41**	27
Overweight	36	31*	38	37	23**	38
Obese or Overweight	66	67	66	75*	65	64

*Statistical significance $p < 0.05$, City compared to Suburbs.
 ** Statistical significance $p < 0.05$ African American and Latino compared to White

Source: Monroe County Adult Health Survey, 2012
 Source: Monroe County, NY. "Community Health Assessment and Community Health Improvement Plan, 2014-2012." November, 2013.

Health Insurance Rates

❖ Latino adults under the age of 65 in Monroe County have more than twice the rate of un-insurance than Whites (15% vs. 6% without insurance).

❖ Additionally, Latinos were also more likely to have lacked coverage at some point in the past two years relative to Whites (27% vs. 13%).

❖ Within the Target Area, 19% of working age adults report being uninsured compared to 7% of residents in the balance of Monroe County.

❖ Thirty-five percent of Target Area residents were without coverage at some point in the past two years compared to just 15% of those living in the balance of Monroe County.

Infant Mortality Rates

Racial and Ethnic Disparities in the Greater Rochester Region
Genesee, Livingston, Monroe, Orleans, Oneida, Seneca, Yates, Warren, Wayne and Yates counties

Indicator	White	Black or African American	Hispanic or Latino	Asian	Source Note
<i>Infant Mortality: number of infant deaths prior to age one for each 1,000 live births</i>					
Total rate per group - Monroe County	4.9	13.2	6.8	NA	1
Rate as a percent of white	NA	+269%	+139%	NA	

Source: www.ACTRochester.org

Efforts and Collaborations to Improve the Health of Latinos in the Rochester Area

Health Promoters Program

- ❖ Targeted uninsured/underinsured Latinos assisting them to enroll in health care insurance, select a medical home, make an initial medical appointment, engage in needed medical treatment.
- ❖ Provided support services such as Spanish language interpretation, transportation to appointments, support groups, health community fairs.

Healthy Start “Comienzo Sano” Program

- ❖ Community outreach to pregnant Latina women and women of childbearing age to assist them to engage in pre-natal care.
- ❖ Education about how to prevent having a low weight birth baby.
- ❖ Provide Spanish language interpretation, transportation to appointments, support groups, items for the baby.



Beacon of Life Program



- ❖ Street outreach in the community to increase the awareness of the HIV/AIDS.
- ❖ HIV Testing
- ❖ Education / presentations about how to prevent HIV/AIDS.
- ❖ Connect individuals with HIV/AIDS to treatment programs in the community.

Diabetes & Hypertension Management Program



- ❖ Provides a weekly support group and nutrition education to Latinos age 60 and older.
- ❖ Monitors participants blood pressure, blood sugar levels and weight.
- ❖ Encourages participation in physical activity.
- ❖ Promotes healthy eating habits.

Diabetes Prevention Program



- ❖ Provides a 16 weeks Diabetes Prevention Training for individuals with pre-diabetes.
- ❖ Monitors individuals weight, encourages participants participation in physical activity.
- ❖ Promotes healthier nutrition.



Health Home Care Management Program



- ❖ Provides health care coordination services to individuals to avoid use of emergency room as the primary source of medical care.
- ❖ Provides social needs coordination services in the areas of housing, medical transportation, income needs, socialization.

Latino Elder Abuse Prevention Program

- ❖ Provides outreach and education to Latino senior and their caregivers in the area of elder abuse prevention.
- ❖ Promotes the awareness of elder abuse services in the community.
- ❖ Assist Latino seniors victims of elder abuse to be safe of abuse.

Partners and Collaborators

- ❖ Regional Primary Care Network
- ❖ Rochester Regional Health
- ❖ Trillium Health
- ❖ Excellus Blue Cross Blue Shield
- ❖ NYS Health Foundation
- ❖ Health Homes of Upstate New York
- ❖ Lifespan of Greater Rochester



How to Work with Community Organizations to Address Health Barriers

- ❖ Collect and share health disparities information with community organizations.

- ❖ Establish connections between the people in the community and the community organizations' leaders.

- ❖ Facilitate the community's participation in health conferences, speak out events, fairs.

- ❖ Train community members to develop leadership skills to educate organizations' leaders about neighborhoods' health needs and build capacity.
- ❖ Offer Latino Culture and Cultural Competence training to community organizations.
- ❖ Actively participate in community health advisory councils and coalitions.



**Navigating
Latino Health Barriers**

Amsterdam, NY



Amsterdam

About 18,500 total population

- 26% Latinos
- <5% other minorities

80% have high school diploma

- < 15% have a bachelors degree

Median Household income \$37, 823

41% Latinos in the school district

- 64% economically disadvantaged

Graduation rate 66%

- Latinos 48%

2010 US Census
NYS Education Department



Selected Health Data – Chronic Conditions

Chronic Condition	Montgomery County		New York State	
	Percent	95% CI	Percent	95% CI
High Blood Pressure	27.2	18.2-36.3	28.3	25.0-31.6
High Cholesterol	34.7	24.3-45.1	40.5	36.2-44.7
Diabetes	16.9	9.3-24.6	9.4	7.4-11.4
Current Asthma	10.5	4.7-16.3	10.0	8.0-12.0
Arthritis	32.9	22.4-43.3	24.2	21.0-27.4

Percent is estimated percentage of adults in county or state with listed condition. 95% CI is 95% confidence interval for estimate.
Source: Expanded Behavioral Risk Factor Surveillance System, 2013-2014 Preliminary (4-Month) Data Report, April-August, 2013.
Source: Montgomery County Public Health Dept. "Montgomery County Community Health Assessment & Community Health Improvement Plan, 2014-2017."

Selected Health Data – Access to Fresh Food

Table 17: Percentage of Population with Low-income and Low Access* to a Supermarket or Large Grocery Store – Contiguous Counties in Region 5, Northeastern NY

	Fulton	Montgomery	Chappaqua	Saratoga	Schenectady	Schoharie	Region Total	New York State Total
Percentage	3.2	18.6	9.6	3.9	9.6	2.9	5.7	2.5

*Low access is defined as greater than 1 mile from a supermarket or grocery store in urban areas or greater than 10 miles from a supermarket or grocery store in rural areas.
Source: 2003 US Dept of Agriculture Food Environment Atlas Data as of November, 2002.
Source: Montgomery County Public Health Dept. "Montgomery County Community Health Assessment & Community Health Improvement Plan, 2014-2017."

Selected Health Data – Childhood Obesity Rates

Table 26: Obesity among Children and Adolescents* - Contiguous Counties in Region 5, Northeastern NY

	Fulton	Montgomery	Chesgo	Saratoga	Schenectady	Schoharie	New York State (exclusive of NYC)
Percentage	17.0	21.2	13.9	15.7	15.6	13.4	17.6

*Grades K-12
 Source: 2008-10 Student Weight Status Category Reporting System
 Source: Montgomery County Public Health Dept. "Montgomery County Community Health Assessment & Community Health Improvement Plan, 2014-2017."

STRUCTURAL BARRIERS

TRANSPORTATION

Public transportation run by the city

- By appointment only
- \$2 fare
- Door to door service
- 5am-5pm

Taxi

- About 4-5 companies
- Average fare \$5.50 within the city(2 mile radius)

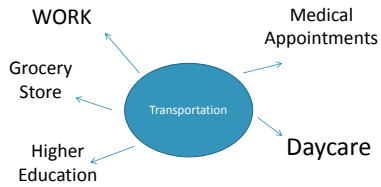
Train

- About 4 stops daily in Amsterdam

Private Transportation

- Contracts by agencies for destination locations
 - Local community college (7am-4pm)
 - General Electric (each shift, 1 bus)
 - Global Foundaries (each shift, 1 bus)

STRUCTURAL BARRIERS



TRANSPORTATION

STRUCTURAL BARRIERS

TRANSPORTATION

- LONG WAITS
- COSTLY FARES
- SHARING RIDES
- VEHICLE OR DRIVER SAFETY UNREGULATED
- LANGUAGE BARRIERS

How do we make it work?

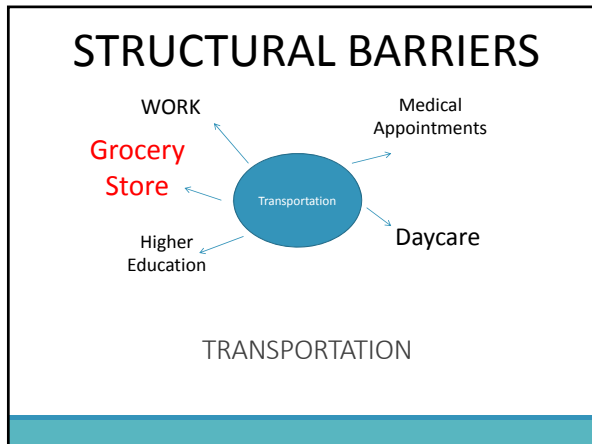
TRANSPORTATION

- LONG WAITS...[shop around](#)
- COSTLY FARES...[Vouchers, Medicaid transportation, Employer-sponsored transportation](#)
- SHARING RIDES...[shop around](#)
- VEHICLE OR DRIVER SAFETY UNREGULATED...[report concerns](#)
- LANGUAGE BARRIERS...[find vendors who address your population](#)

Who can Help?

- Community Organizations
- Local schools and colleges
- Municipalities
- Medicaid transportation

TRANSPORTATION





How do we manage?

Farmers Markets

- EBT and vouchers accepted?

Food Pantries

FOOD OPTIONS

How Can I Help?

- Advertise the farmers markets
- Research what health food options your "Bodega" or gas station has
 - ADVERTISE IT!
- Encourage business owners to stock healthy food options
- Provide Healthy options in your waiting room/lobbies
- Refer to Nutritionists
 - Contact Nutritionist about these barriers

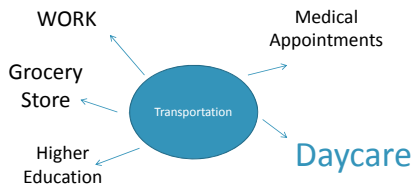
FOOD OPTIONS

Who Can Help?

- Community Organizations
- Local schools and colleges
- Municipalities
- Business owners

FOOD OPTIONS

STRUCTURAL BARRIERS



TRANSPORTATION

STRUCTURAL BARRIERS

- Not within walking distances
- Waiting lists for financial state assistance
 - Note: only during school or work hours
- Limited daycare centers/limited hours
- Culturally frowned upon

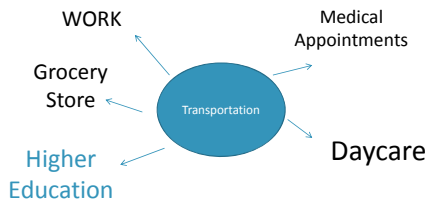
DAYCARE

How Can I Help?

- Encourage your clients to get on waiting list
- Have daycare contact list available
- Have waiting rooms with children toys/activity books
- Be mindful of barrier throughout your services

DAYCARE

STRUCTURAL BARRIERS



TRANSPORTATION

STRUCTURAL BARRIERS

Not within walking distances

Lack of Adult Education programs

- GED/High School Equivalency
- Certificate programs

HIGHER EDUCATION

How Can I Help?

Have higher education information available in your waiting rooms/lobbies

When possible have conversations of the positive effects on higher education

HIGHER EDUCATION

Effects of Language Barriers

Lack of self and child advocacy

Inability to be self-sufficient

- Filling out applications
- Ordering medication, ordering a taxi, making appointments, buying a car, legal process

Lack of information dissemination

- Understanding test results, event details, instructions

Double the work=frustrations


Lack of Privacy

LANGUAGE



STRUCTURAL BARRIERS

Common Practices
 Family Interpreters
 Handouts
 Language Lines




LANGUAGE

STRUCTURAL BARRIERS

BEST Practices

Bilingual/Bicultural staff
 ◦ Professional staff included!
 Staff from within the community
 Learn common phrases



LANGUAGE

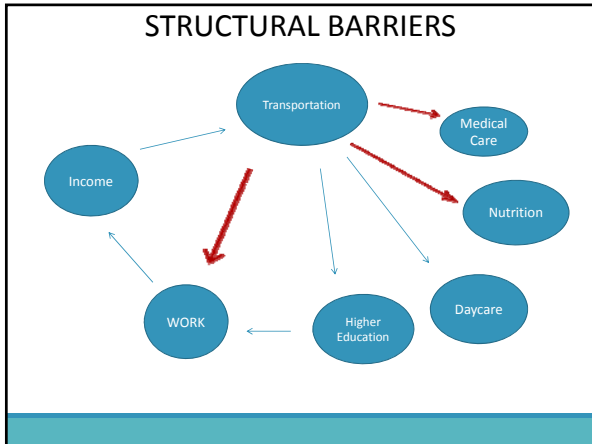
How Can I Help?

Locate key personnel and businesses who are helpful. REFER YOUR CUSTOMERS TO THEM

- Bilingual
- Culturally sensitive



LANGUAGE



Practical Tips

- Cultural Sensitivity
 - Include magazines, artwork, music, holidays within your agency
- Recruit Bicultural/Bilingual Staff
- Build relations with Agencies who serve your population
- Participate in community events, join coalitions
- Participate in Latino workshops



LANGUAGE



SOMOS
el Futuro

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References

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