

LATIN-19: A grass-roots coalition to mitigate the effect of COVID-19 on the Latinx community in North Carolina

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ABSTRACT

Background: Social inequity is a primary driver of health disparities, creating multiple barriers to good health. These inequities were exacerbated during the COVID pandemic, with Latinx communities suffering more than others. Grassroots collaborations have long existed to address disparities.

Objective: We describe the creation and work of LATIN-19 (the Latinx Advocacy Team and Interdisciplinary Network for COVID-19; <http://latin19.org/>), a multi-sector coalition in North Carolina created to address the unique challenges of COVID-19 in the Latinx community.

Methods: We discuss challenges and solutions that LATIN-19 addressed and the impact of LATIN-19 on community partners and members.

Results: LATIN-19 learned of challenges including, lack of awareness, need for data systems to track disparities, need to increase access to resources, need for policy changes, and need to coordinate services by community organizations.

Conclusion: LATIN-19 represents a grass-roots organization that has had an impact on community and community organizations that spans beyond COVID-19.

KEYWORDS: Community health partnerships, Health disparities, Ethics, Immunization Programs, Community Health Services, COVID-19, Latinx

Social inequity is a primary driver of health disparities, creating multiple barriers to good health.¹ These barriers include poor housing conditions, low health literacy, unstable sources of income, language barriers, inadequate access to resources, among others.² Multisector collaborations that address these challenges can mitigate the negative impact of social inequity on health. While the COVID-19 pandemic has been devastating worldwide, vulnerable groups bear more of the burden of morbidity, mortality, and social consequences than others. The Latinx (used as a gender inclusive term when referring to people who have identified as Hispanic, Latino or Latina) community in the United States has experienced a higher case volume and death rate from COVID-19 (coronavirus disease 2019 caused by SARS-CoV-2) than the non-Latinx white community.^{3, 4} In addition, Latinx individuals have been among those most affected by the socioeconomic consequences of the pandemic, such as losing employment and experiencing food and housing insecurity.^{4, 5} At the same time, segments of the Latinx population were not eligible for emergency economic relief from the federal government to offset these challenges because of residency or immigration status.⁶

Multiple factors contribute to these disparities in COVID-19 risk and incidence. Many in the Latinx community work in essential industries that increase their risk of exposure to the virus, such as food production, agriculture, construction, and housekeeping.⁷⁻¹⁰ Moreover, early on, some employers did not provide adequate personal protective equipment to employees in these industries.¹¹ Many Latinx live in multigeneration, multifamily home dwellings, complicating their ability to socially distance (a known mitigation strategy that prevents the spread of COVID-19). Latinx individuals are more likely than others to be among the working poor and are less likely to have health insurance and a consistent source of healthcare.^{12, 13} Language

barriers affect Latinx individuals with limited English proficiency.¹⁴ Many immigrants feared and continue to fear deportation when entering health facilities and avoid accessing healthcare services to prevent becoming a “public charge.”¹⁵⁻¹⁷ Early in the pandemic, there were disparities in hospitalizations and ICU (intensive care unit) stays, with reports of people accessing emergency services too late in the disease process.¹⁸

In this manuscript, we describe the work and impact of LATIN-19 (the Latinx Advocacy Team and Interdisciplinary Network for COVID-19; <http://latin19.org/>), a multi-sector coalition in North Carolina created to address the unique challenges of COVID-19 in the Latinx community.¹⁹ The authors of this manuscript include members of the LATIN-19 executive committee, others who have been extremely active in the coalition during the pandemic, and some who are developing an evaluation plan we anticipate implementing in the future.

After an overview of LATIN-19, the authors describe how the coalition addressed challenges facing the Latinx community during COVID-19. That section is followed by vignettes of how involvement in LATIN-19 affected three community organizations. These three were chosen because, in the diversity of their size, mission, and history, they illustrate ways in which the coalition benefited a range of organizations. We end with data on the perspectives of individual coalition members, followed by a discussion of the lessons learned on a community, organizational, and individual level.

LATIN-19 Overview

The original mission of LATIN-19 was to reduce the negative impact of COVID-19 on the physical, mental, and social health of Latinx communities. That mission has now expanded to ensure the health and wellness of diverse Latinx communities both now and going forward, post-

pandemic, based on lessons learned throughout the COVID-19 response. To do so, LATIN-19 leverages the strength of pre-existing community partnerships as well as fosters new collaborations that emerged in response to COVID-19.

LATIN-19 strives to be a community-engaged organization that includes a diverse group of members throughout all stages of work. The structure consists of an executive committee of clinicians and researchers from the Duke School of Medicine and School of Nursing, as well as community representatives. There are also several subcommittees (e.g., research) and a Community Advisory Board that support the mission of the group.

Since its initial convening on March 18, 2020, the group continues to meet weekly via a virtual platform. Members of the LATIN-19 executive team attend most meetings. Dr. Viviana Bianchi-Martinez usually leads the meetings with Dr. Gabriela Maradiaga Panayotti serving as back-up. These meetings include an interdisciplinary, multi-sector group representing academic institutions, healthcare systems, public health departments, public school systems, community-based organizations, government, faith-based organizations, non-governmental organizations, and individual community members. The weekly meetings are open to the public, generally draw 80-100 participants per week, and include simultaneous interpretation so members can participate in English or Spanish. Meetings include a broad range of presenters from community organizations, health systems, immigrant and human rights lawyers, public health, education, and concerned individuals. This diverse group can address a variety of issues from different perspectives and share their approaches to learn and collaborate with each other. Many of the meetings are set up as “community listening sessions”. The community listening sessions allow LATIN-19 to intentionally incorporate the community voice by listening to the community’s ongoing concerns and challenges.

In addition to the weekly calls, members of the LATIN-19 group create and disseminate educational materials, coordinate testing, host and lead vaccine clinics, produce public service announcements, and engage with media across multiple platforms. Additionally, they reach out to leadership in local health systems and government to address concerns and create guidelines and strategies regarding unmet health care needs affecting the Latinx community. LATIN-19 representatives are active participants in multiple task forces related to the pandemic.

LATIN-19 has developed strategies to address many challenges at the system and community level. Most of these challenges are identified at the weekly convenings. The minutes from the convenings are recorded weekly and distributed to the participants. Additionally, the convenings are video recorded to allow the executive team to review them as needed. The executive team meets on a weekly basis, and these discussions include a review of important issues brought up during the virtual convenings. These challenges are recorded in a shared document that captures these important data, and we use this dashboard to assess and reassess needs and challenges in an iterative fashion.

The following are examples of these challenges. We as a team identified these challenges from among the larger set because we felt that they had the greatest impact on the health of the community.

Community/Systems Level Challenges and Solutions

Challenge 1: Lack of awareness in the Latinx community, at the onset of the pandemic, regarding COVID-19 symptoms, prevention behaviors, and when to seek care.

Solution 1: Members of LATIN-19 actively engaged with Spanish-language media to provide accurate information about the pandemic. These efforts included collaborations at the local, regional, state, and national level with radio and broadcast stations, newspapers and media

outlets, and community organizations that produce content on social media (e.g., Facebook Live events). Additionally, LATIN-19 produced and disseminated information on its weekly calls and via physical handouts, emails, and public service announcements. As one example, Latinx community members did not understand North Carolina's important safety message regarding prevention (The 3 Ws: **W**ash your hands. **W**ear your mask. **W**ait 6 feet apart). This gap was quickly identified by LATIN-19 members working with the North Carolina Department of Health and Human Services (NC DHHS). The message was translated and disseminated as "Remember your 3 Ms" ("¡Recuerda las 3 Ms! Lavarse las **m**anos. Usar la **m**ascarilla. **M**antener la distancia.")

Challenge 2: Lack of awareness of the disproportionate effect of COVID-19 on the Latinx community. Initially, data on the ethnicity of those affected by COVID-19 was not public.

Solution 2: LATIN-19 worked with the Durham County Health Department and the North Carolina Department of Health and Human Services to publish race and ethnicity data for COVID-19.

Challenge 3: Latinx people had difficulty accessing COVID-19-related health services.

Solution 3: LATIN-19 advised local health systems, community health centers, health department professionals, and state officials on how to facilitate access for Latinx individuals to testing sites, contact tracing, vaccinations, and referrals to respiratory care centers when needed. To date, more than 15,000 vaccines have been given at LATIN-19 co-sponsored events. Spanish-speaking community health workers from two local community organizations, La Semilla and El Centro Hispano, in a partnership with the local health system facilitated by LATIN-19, have participated as patient navigators in clinics that vaccinated over 40,000 people.

Challenge 4: Policies in the health system were not meeting the needs of Latinx patients.

Solution 4: LATIN-19 learned of multiple challenges Latinx patients and families experienced when accessing the largest local health system. These included adapting to new visitor restrictions, understanding point-of-contact designations, addressing language barriers, and recognizing inadequate medical updates to families. To address these issues, LATIN-19:

- a. Provided space on the LATIN-19 weekly call for patients and advocates to share their experiences directly with health system's leaders.
- b. Worked closely with the Chief Quality Officer for the local health system to obtain and review its equity data.
- c. Highlighted the lack of Spanish-language signage in a local hospital, which resulted in some improved signage.
- d. Made leadership aware that inappropriate billing of patients who had accessed COVID-19 testing at the local health system was leading to decreased willingness by community members to get tested.
- e. Facilitated greater understanding by the health system's birthing center and pediatric service line leadership on why restrictive visitor policies were alienating for a community often traumatized by family separation.
- f. Spearheaded efforts to implement the Spanish-language version of the electronic patient portal (MyChart).
- g. Worked with International Patient Services and medical directors to improve capacity and usage of interpreter services.
- h. Supported testing sites with Spanish speaking staff and hosted vaccination clinics in familiar and welcoming spaces, such a community credit unions and churches.

Challenge 5: Community organizations were duplicating efforts.

Solution 5: LATIN-19 includes numerous community organizations that had previously been working in silos towards similar goals. Through the LATIN-19 virtual meeting space, these organizations were able to identify shared interests and priorities, share resources and information, synergize efforts, and develop strategic advocacy plans to create needed change.

Impact of LATIN-19 on community partners

The authors of this manuscript reviewed the multiple activities and events that were led or co-sponsored by LATIN-19 and determined the following organizations were among the most frequent collaborators at these events. We surveyed leaders of these groups to provide comments about the impact that LATIN-19 had on their work. Their reflections and observations are described below.

El Centro Hispano

El Centro Hispano is a Latinx non-profit organization formed in 1992 that is dedicated to strengthening the community, building bridges, and advocating for equity and inclusion.²⁰ Started in one county, El Centro is now in three and saw a significant expansion during COVID. El Centro has a long history of partnering with teams from local health systems. By participating in LATIN-19, El Centro has learned, shared, connected and collaborated with other organizations/entities and groups about a wide range of services for the community not only related with the pandemic, but also in other areas of need, as well from education and training, and vaccination distribution efforts.

El Futuro

El Futuro, established in 2004, is a non-profit, community-based, outpatient mental health and substance use treatment center providing bilingual psychiatry, therapy, group treatment, and case management to low-resource Latino families from Central North Carolina.²¹

COVID-19 resulted in a three-fold increase in the number of people seeking services at El Futuro. Through LATIN-19, El Futuro has been able to stay current with developments at the local and state levels, which they quickly communicate back to their 50-person staff and active patient population of over 1,700 people. El Futuro also participated in LATIN-19 activities, helping with the distribution of masks, food, and other resources. Lastly, with the support and advocacy of LATIN-19, El Futuro recently secured funding from the local university's Office of Durham and Community Affairs to expand their services.

La Semilla

Iglesia La Semilla is a co-vocational faith community of the North Carolina Conference of the United Methodist Church. Focused on its vocation as a Latinx-led grassroots non-profit organization, it had little connection with the local health system prior to COVID-19.²² LATIN-19 has provided valuable trainings for their community health workers since September of 2020. Iglesia La Semilla has worked closely with LATIN-19, coordinating and providing testing, hosting information sessions, and supporting vaccination events with information, and food distribution.

Impact of LATIN-19 on LATIN-19 members

During one of the weekly LATIN-19 calls where about 80 participants were present, we asked members how LATIN-19 had impacted them. Members of the LATIN-19 Executive Team took notes and reviewed the virtual recording to obtain a representative sample of comments. Of the 80 participants, about 20 spoke or put comments in the chat box regarding feeling emotional support by being surrounded by others who are passionate about the needs of Latinx communities. Other members, who are not Latinx themselves, reported they felt “more alike than different” from the other LATIN-19 members. Others reported that LATIN-19 was their “North

Star” that served as a weekly reminder of what is important. Some said coming together for LATIN-19 did not feel like their other meetings because the hour flew by and uplifted them rather than drained them. Many said it was the most important meeting they attended each week. They found LATIN-19 inspirational and a source of hope and optimism. Clearly, LATIN-19 represented more than just talking about the plight of the Latinx communities. Seeing problems solved had a significant impact on members and kept them coming back week after week.

Discussion

Among the many lessons learned through the work of LATIN-19, five are critical.

Lesson 1: Including decision-makers accelerates progress: When a grass-roots organization brings community members and decision-makers (e.g., healthcare, government, etc.) together and community members express needs and share personal experiences, decision-makers listen, and most importantly *act to address the problem*. Testimonials often drive change more than reports or statistics.

Lesson 2: Virtual calls increase participation: Having virtual meetings allows for a diverse group of members, including the community voice, to join regularly, which is a catalyst for true engagement. Additionally, people from all over North Carolina and other states are able to join and learn how LATIN-19 operates, and this in turn allows for replication of this model if desired.

Lesson 3: Collaboration is more than addition: LATIN-19 convenes members from many different sectors and allows for quick and efficient communication among groups addressing COVID-19. As an example, one of the founders serves on the North Carolina Governor’s Andrea Harris Social, Economic, Environmental, and Health Equity Task Force. She is able to take what she learns through LATIN-19 directly to state government leaders. Similarly, several members of LATIN-19 serve on the NC-DHHS Historically Marginalized Populations’ pandemic response

team and provide public health leadership with ongoing feedback about challenges in the community.

Lesson 4: Create a space where every voice is heard. LATIN-19 created an open, collaborative, and respectful environment where community members and leaders could hear each other. Meetings are planned to allow for all voices to be heard, including those of small community organizations and individuals as well as those of health care and government leaders. This intentional effort creates a level playing field and helps foster a sense of community among the group.

Lesson 5: Valuable work should be valued in both time and money. During the initial phase of LATIN-19's work, many people came together with energy and zeal. As the pandemic droned on, the commitment of the group remained strong, but the reality of balancing the work of LATIN-19, which was and remains for the most part volunteer work, with other personal and professional commitments was difficult. This unanticipated challenge forced the group to re-evaluate some of the activities in which LATIN-19 was engaged and dedicate some time to securing funding through grants, private donations, and other sources. As a process, this was an important lesson: ensuring that important work can be sustained by securing an investment that will appropriately compensate those involved.

Future directions

LATIN-19 is a robust multi-stakeholder coalition with a proven track record of addressing health inequities and disparities in the Latinx community. LATIN-19 will continue to work towards promoting health equity beyond the COVID-19 pandemic by internationally focusing on the health and wellness of the Latinx communities, with a special emphasis on putting community voices first. The team is working to create a sustainable and permanent

infrastructure for LATIN-19 which will focus on excellence for Latinx health and wellness. The initiative will continue to engage multiple stakeholders to address the health and social needs of Latinx communities.

With rigorous research, the impact of LATIN-19 on population health and social outcomes can be more clearly quantified and detailed. These data would inform how the model LATIN-19 created could be replicated and adapted to benefit other communities.

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