California Center for Rural Policy Rural Latino Project Final Report



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CCRP Rural Latino Project Final Report

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The California Center for Rural Policy at Humboldt State University is a research center committed to informing policy, building community, and promoting the health and well-being of people and environments.





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Executive Summary

Introduction:

Latinos are the fastest growing minority group within the Redwood Coast Region (Mendocino, Humboldt and Del Norte counties). This project adopts a place-based perspective of Latinos and the communities in which they reside. Developing a place-based understanding means focusing on rural Latinos within the larger context of resources, environment and space. We employed multiple research methods including: key-informant interviews, content analysis of newspaper articles, field research, and spatial analysis of primary and secondary data.

Methods:

Key-Informant Interviews: Qualitative, key-informant interviews were conducted from March 2006 through September with 54 adults over 18 in three Northern California counties: Humboldt (N = 20), Mendocino (N = 20), and Del Norte (N = 14). Key informants were people who work closely with the Latino community, health and social service providers who serve Latinos, and Latino community leaders from the three counties. The study consisted of face-to-face (72%) and phone interviews (28%). Each interview took approximately 40 minutes to complete. The project employed a snowball sampling approach, a method of non-probability sampling. In this approach at the end of the interview, participants were asked to provide names of two or three people that had knowledge of the subject matter and might be contacted for a possible future interview. Content analysis was used to identify themes within the interviews.

The sample consisted of 54 interviews, consisting of the following ethnicities: Latino (58%), White (19%), more than one ethnicity (16%) and other (7%). The sample consisted of 24.1 % males and 75.9 % females. The report presents a regional analysis of key-informant responses. Responses are also reported by individual county (Mendocino, Humboldt and Del Norte) in Appendix A.

Results:

During the interview, the question was asked, "Are the health needs of the Latino people in your community being met?" Most respondents reported "no" (67.3%) and about one-third of the responses were "yes" (32.7%). The follow up question was asked, "Why are or aren't health needs being met?" Key informants identified Lack of Resources as the most common reason Latino health needs are not being met, followed by Language Barriers and finally Lack of Insurance. To determine the role that distance plays in meeting health needs, interviewees were asked, "How far do the Latino people in your community typically travel in (in time or miles) to meet their health needs?" The most common answer was "5-30 minutes or 5-30 miles," followed by "out of the area/more than 200 miles," and finally "30 minutes to 2 hours/30-80 miles."

Interviewees were asked, "Of the health issues in your area, which do you feel are the most important?" The themes that emerged as the most important health issues were: 1) Obesity/Nutrition, 2) Access, 3) Diabetes. **Factors Affecting Health:** The question was asked, "What are some of the things that affect the health of Latino people in your community?" The themes that emerged as factors that affect the health of Latino community are: 1) Nutrition and Exercise, 2) Economics, 3) Lack of Health Access/Lack Of Health Insurance, 4) Language/Immigration Status.

Language: Language emerged as an issue for Latinos meeting their health needs throughout the region. Informants were asked the question, "Is language an issue for meeting the health needs of the Latino population in your community?" The majority (80%) of responses for the region were "yes" (43/54), language is an issue for Latinos' meeting health needs.

Places Frequented for Medical Care: Interviewees were asked "Where do members of the Latino community most often go to obtain medical care?" The range of responses given to this question were coded into three categories: Clinics, Hospitals, and Private Practice. The most common place Latinos receive medical care was Clinics. As a follow up to the question about places frequented for medical and dental care, the question was asked, "Why do Latino people go to the places they do to meet their health needs?" The top three responses to this question were: 1) Affordability, 2) Spanish Speaking and Bicultural Providers and 3) Accessibility.

Latino Spatial Mobility Patterns: The spatial mobility patterns of Latinos in the Redwood Coast Region were examined to better understand geographically where Latinos go and how to best connect and share information with this population. Mobility patterns related to food services, spiritual and religious activities, and recreation were examined. It is important to identify patterns of mobility for Latinos in order to better meet their needs. Medical outreach can meet Latinos in the places and ranges of mobility they already consider important and frequent, such as church, soccer fields, fiestas, and plazas. An overall view of Latino patterns of mobility indicates that Latinos are willing to travel out of the state of California for food service, recreation and entertainment. Our spatial analysis also highlighted that Latino patterns of mobility often cluster in geographic areas where there is a greater population density of other Latinos.

Meeting Future Health Needs: To determine future policies and actions related to health care for Latinos, the following question was asked, "In your opinion, what are some things that can be done to better meet the health needs of the Latino people in your area?" The top responses across the region were: 1) More Training, Education and Programs, 2) More Bilingual, Bicultural Providers and Staff 3) Increased Health Care Coverage and More Providers.

Best Way to Engage with the Latino Population: To determine steps for future engagement with Latinos in the region, the question was asked, "What would be the best way to hear more on the topic from the Latino people (individually, in a group, surveys, etc.)? What would you recommend?" The top responses were: 1) Community Groups, 2) Meeting Places and 3) Churches.

This project drew on a variety of research methods and examined diverse sources of information related to Latinos and health. There are several patterns and observations that emerge from these analyses:

- Latinos are a diverse group
- Health Access is an issue for Latinos
- Language is a barrier to meeting health needs

- Literacy is a barrier to meeting health needs
- Immigration status is an issue
- Media portrays negative stereotypes of Latinos
- Nutrition, diet, exercise and diabetes are all major Latino health issues
- Lack of health insurance is a major issue for Latinos
- Establishing trust is key to meeting Latinos' health needs
- Cultural sensitivity and education for the community
- Latinos exhibit similar spatial mobility patterns within the region

Newspaper Content Analysis:

A content analysis was conducted of 151 newspaper articles in an effort to understand how Latinos are presented in the North Coast media. Themes that emerged in the newspaper analysis were: 1) immigration, 2) crime and 3) Latinos in the local community and state. Other themes that emerged from the analysis of regional newspaper articles were arts and culture, health, and agriculture/farmworkers. The combination of these media themes together suggests a somewhat biased and stereotypical media portrayal of Latinos in the region.

Policy Suggestions:

Policy suggestions were derived from an interview question that asked how meeting the health needs of Latinos could be improved. Additionally, project results were shared with a local group in the Humboldt County region called LatinoNet that works closely with the Latino population. Feedback received during the presentation also informed our policy suggestions. The following policy suggestions were developed:

- 1. Increase "mobile" medical service to Latinos
- 2. Improve Latino access to health insurance
- 3. Improve bilingual capability
- 4. Build community coalitions to strengthen and empower Latinos
- 5. Encourage regional media to provide a broader view of Latinos

The findings from this project provide baseline data on Latino health issues for the Redwood Coast Region. Addressing Latino health needs using a spatial perspective can facilitate a clearer understanding of how and where providers, policy officials, and community groups can focus their future efforts to better serve the needs of the Latino community.

Abstract

California is a state in which over 75% of the land mass is classified as rural (Wilburn 2002). While Latinos are the fastest growing minority population in California (Bernstein 2006) their health needs are often overlooked, especially in rural areas. Nationally, approximately 18% of all rural residents are of Latino/Hispanic origin compared to the urban Latino/Hispanic population of 20.2% (Behavioral Risk Factor Surveillance System 2003). Little research has been conducted on the health experiences of rural Latinos in the United States, let alone California. This rapidly growing population has expanded into various rural and geographically isolated areas within the state. The CCRP Rural Latino project focuses on the health needs, coping strategies and experiences of Latinos in Del Norte, Humboldt, and Mendocino counties.

Research Team

Principal Investigator

Dr. Sheila Lakshmi Steinberg, Director of Community Research, California Center for Rural Policy (CCRP) and Associate Professor of Sociology at Humboldt State University conducts community based research related to environment and community. A fluent Spanish-speaker, she spent approximately three years in Guatemala as a U.S. Peace Corps volunteer and professor at the University of San Carlos in Guatemala. Dr. Steinberg worked as a professor in rural New Mexico at Western New Mexico University, designated a Hispanic Serving Institution, where 70% of the student body is Latino. In 2000, she joined Humboldt State University where she currently teaches classes on human interactions with the physical environment at the local, national and global levels.

Project Staff

Marian Strong, Research Analyst, CCRP. Conducted qualitative analysis for the project, collected key-informant data, and participated in field research.

Nanette Yandell, Research Analyst, CCRP. Conducted qualitative analysis for the project, collected key-informant data, and participated in field research.

Adriana Guzman, CCRP Intern. Conducted analysis of media themes content.

Rebecca Degagne, Geospatial Analyst, Institute for Spatial Analysis. Analyzed spatial data and created GIS maps.

Dyvonia Burgos, CCRP Intern. Conducted extensive literature review for the project.

Lauren Brinkman, CCRP Research Assistant. Collected key-informant data and participated in field research.

Project Purpose

This project provides a place-based perspective of Latinos in the Redwood Coast Region (Mendocino, Del Norte and Humboldt Counties). Trinity County was not included in this study due to the small percentage of Latinos living in the county (4.0% of the total population). This is an exploratory study of health issues and social context for Latinos in the region. The goal is to assess the health situation for Latinos and provide policy suggestions. The project employed a multi-methods approach to collect data about Latinos in the Redwood Coast Region.

Project Need

Latinos compose an important Redwood Coast Region population that is not well-understood. In 2005, when the California Center for Rural Policy was created, a series of key-informant interviews were conducted with community leaders and health professionals in the region. A main outcome of this study was the desire to know more about Latinos in our region. The CCRP Rural Latino Project was developed to better understand Latinos as the fastest growing minority group in the region (United States Census Bureau 2000).

Objectives

The objectives of this project include:

- Providing an understanding of health needs faced by Latinos in Humboldt, Del Norte and Mendocino counties.
- Producing information useful to health and social service agencies in the region.
- Understanding the social context Latinos face in the region, including the image of Latinos created by local media.

Topic Background

Latino/Hispanic Demographics

Currently, the Latino/Hispanic population in the United States has surpassed 45.5 million, which is more than 15% of the entire U.S. population of 301.6 million (United States Census Bureau 2008). Latinos/Hispanics continue to be both the largest and the fastest-growing minority group in the nation. U.S. Census Bureau statistics also indicate that there are over 16 states in the U.S. with Hispanic populations greater than 500,000, California being the state with the largest number of Hispanics at 13.2 million. This means that California accounts for 29% of the total U.S. Latino population.

National trends indicate that Latinos, with an average (mean) age of 27.6, are younger compared to the average (mean) age of 36.6 for the U.S. population. Latinos have a greater percentage of children under age 18 (34% of Hispanic population) as compared to the total U.S. population (25%) (Bernstein 2008).

Profile of Rural Latino Health Issues

Rural Latinos today in the United States face challenges to meeting their health needs including racism, access to health care, and language barriers. Language/lack of bilingual providers is a barrier for rural Latinos to obtain quality health services or access health care altogether (Stable-Perez 1997) because they often don't trust their providers and fail to receive accurate translations (Bacigalupe et al. 2006; Caesar 2006).

Rural Latinos often fail to access health care because they cannot afford to pay, nor do they have health insurance. Studies have found that Latinos often lack insurance because they can't afford to pay the premiums, don't have a plan available at work, or are born outside the United States and don't have the proper paperwork to quality for insurance (Greenwald et al. 2005; Blankenau et al. 2000). Furthermore, Latino children are at greater risk for poor health due to lack of health coverage (Mendoza 1994). These are all factors that influence Latinos' access to health insurance.

Perceived discrimination is another factor that affects Latinos seeking health care (Jasinskaja et al. 2006; Aguirre 2004). If they are perceived as being "criminal" or "illegal" they are marginalized in the minds of the general public and thus deemed less worthy of health services. When immigrant groups experience discrimination and social isolation due to cultural differences, they experience more stress (Jasinskaja-Lahti et al. 2006). Research has also shown that immigrant Latinos are a very resilient population that express positive perceptions of their lives despite facing discrimination, language barriers, and bad working conditions (Parra-Cardona et al. 2006).

Rurality has also been found to be a contributing factor to disparities in health care for Latinos. Rural Latinos are more likely to be uninsured (Blewett et al. 2005). Furthermore, in rural areas, Hispanics/Latinos have a greater unmet need in healthcare, due to physician shortages that often occur because of low demand. This low demand is often due to cultural differences and practices in terms of health care use and inability to pay for services (Probst et al. 2004; Smith et al. 1996). Unmet health needs may often be high in Latino families, but the demand is low (Smith et al. 1996). Outreach efforts to ethnic communities that use bicultural and bilingual staff are found to have the most effective strategies for Latinos (Snowdden et al 2006). Furthermore, rural communities that have developed mobile health clinics in which the community is involved in the decision-making process have been found to effectively provide services to rural Latinos (Sherril et al. 2005). Another positive contributing factor to Latino health is churches. Churches have been found to play a major role in supporting Latino immigrants in the United States by providing spiritual guidance, clothes, food, money, legal counsel, and a place to sleep and complete paperwork (Menjivar 2006).

Latinos are a resilient and strong force that makes the best of rural living, raising families and being working members of our society (Parra-Cardonna et al. 2006). They are strong contributors to place and community.

This project adopts a place-based perspective of Latinos and the communities in which they reside, with the objective of understanding people, resources, the environment and space. Developing a place-based understanding means focusing on rural Latinos within their larger context. Such a perspective can contribute to meeting Latinos' health needs through documenting what those needs are and where they occur. By knowing different groups' needs and locations, one can accurately develop or re-direct resources to meet specific place-based needs.

Methods

This project employed a multi-method approach and analysis of both primary and secondary data. Applying different methodological approaches and reviewing data from multiple sources provides a "better more substantive picture of reality" (Berg 2001). The methods employed in this study include:

- a. Content analysis of news media
- b. Spatial mapping of primary and secondary data
- c. Field research
- d. Key-informant interviews

Content Analysis

To gain a comprehensive understanding of the social context within which regional Latinos operate, content analysis was conducted on 151 newspaper articles from main newsprint sources from the three different counties published between March 1st 2006 and September 30th 2007, the same time period as the key-informant interviews. In total, Mendocino – four print media sources, N=72 articles; Humboldt – three print media sources, N=63 articles; Del Norte – 1 print media source, N= 16 articles. Information from newspapers allowed us to analyze what community members in the region were reading about Latinos during the time period of the key-informant interviews.

The main newsprint sources for each county were examined. In Mendocino County four media sources were researched: the Mendocino *Beacon*, the Fort Bragg *Advocate*, the Ukiah *Daily Journal* and the Santa Rosa *Press Democrat*. In Humboldt County three media sources were researched: the *Eureka Reporter*, the *Times-Standard*, and the *North Coast Journal*. In Del Norte County there is only one newspaper serving that local area therefore only one newsprint source for Del Norte was researched, *The Daily Triplicate*.

Articles were researched through online archives found on each newspaper's website. Archive databases were searched using a variety of keywords. Keywords included Latino(s), Mexican(s), Immigration, Latino Health, Hispanic(s), Farm workers, Crime, Immigrants, Racism, Agriculture, Cultural events.

Articles about Latinos included those reporting local news, state-wide or national news, opinions/letters to the editor, and feature pieces. Online archives were searched until all keyword searches had been exhausted. Selected articles were collected and organized by date to create a timeline from March 2006 to September 2007, corresponding with the study period.

To help categorize the topics of each article a list of themes was created. The themes were: Immigration, Crime, Health, Cultural/Arts, Latinos in the Local Community/State, and Agriculture/Farm Workers. Themes were chosen based on our consideration of the most important issues related to Latinos as well as the most common research results. To maintain a clear method of categorization, articles were classified based on the main topic of the article even if the article could fall under more than one category.

Spatial Mapping of Primary and Secondary Data

This study involved spatial mapping with GIS software ArcMap Version 9.2 to map both primary and secondary data. U.S. Census data related to population was the secondary data mapped. Data on population density for the Latino population was collected from U.S. Census Bureau Summary File 1 (2000). This data was used to create a geographic layer of Latino population density for Mendocino, Humboldt and Del Norte Counties. Latino population density data serves as the background in all maps created for this study.

Primary data mapped included answers to key-informant questions on spatial mobility patterns of Latinos and Latino health issues. Primary data generated from the questions were overlaid with secondary data (Latino population density data) from the U.S. Census.

Field Research

This project entailed recording a variety of field observations, including attending local Latino festivals, health fairs, and community network meetings from the beginning of the study in 2006 until after study completion in 2008. Additionally, field researchers kept notes of their experiences collecting key-informant interviews in the study site (Mendocino, Humboldt and Del Norte counties). Field notes were kept on different events attended. This information served to provide a larger contextual understanding of issues faced by, and topics of importance to, the Latino community. Field research involved engaging in non-participant observation and casual conversation with community members in three counties about Latino issues. Formal analysis was not conducted on the field notes. This data was used to create an understanding of issues and context surrounding Latinos in Mendocino, Humboldt and Del Norte counties.

Key-Informant Interviews

During 2006-2007, 54 qualitative key-informant interviews were conducted with people over the age of 18 years old in three Northern California counties: Humboldt (N = 20), Mendocino (N = 20), and Del Norte (N = 14). Key-informant interviews were conducted from March 2006 through September 2007. Informants included people who work closely with the Latino community, health and social service providers who serve Latinos, and Latino community leaders from the three counties. The interview method was selected based on the cultural appropriateness of this methodological technique.

Key-informant interviews consist of qualitative interviews conducted face-to-face or by phone. The majority of interviews in this project were face-to-face (72%) and the rest (28%) were conducted as phone interviews. The interview took approximately 40 minutes to complete.

The goal of a key-informant interview is to collect information from people who are local experts on the particular topic under study (UCLA Center for Health Policy Research 2007; Sherry and Marlow 1999). Key-informant interviews were employed to provide access to information about Latinos in the region. Furthermore, a purposive sampling procedure was utilized, meaning that we purposively sought to interview people who are "experts" on the Latino population. This is an approach used to establish connection with populations that may be difficult to otherwise reach.

A standard process was used in all interviews conducted. Initial contact was made with potential informants using both telephone and email. At the time of contact, informants were asked if they would be willing to participate in a 40 minute interview related to Latinos and health. If the individual agreed, the researcher scheduled a mutually agreed upon time to conduct the full interview. Prior to the interview, participants were provided with an informed consent form that described the project which was signed and returned to CCRP.

During the interview, participants were asked questions relating to Latino health issues, concerns, and mobility patterns. At the end of the interview, participants were asked to provide names of two or three people that had knowledge of the subject matter and might be contacted for a possible future interview. Notes taken during key-informant interviews were transcribed and content analysis was used to identify themes for various topics of relevance to the study. Interviews were analyzed using Atlas TI, version 5.2 to identify thematic answers to questions. Interview responses were coded and put into a database. Answers to some questions were imported into a Geographic Information System (GIS) and mapped using ESRI ArcGIS 9.2.

Snowball Sampling

The project employed a snowball sampling approach, a method of non-probability sampling where each key informant is asked to suggest additional people to speak with at the end of the interview (Babbie 2001). The term snowball is used because it reflects "the process of accumulation as each located subject suggests other subjects" (Babbie 2001:180). Using this technique, once one begins to collect suggested names of additional individuals to interview repeated numerous times, it is clear that a saturated sample has been achieved. A researcher knows that the community of interest has been adequately saturated when the same names to interview begin to surface across the sample.

It is an appropriate sampling approach to use when "members of a special population are difficult to locate, such as homeless individuals, migrant workers, or undocumented immigrants" (Babbie 2001: 180). Snowball sampling was employed because Latinos in the Redwood Coast Region are a difficult to reach population. Furthermore, this sampling approach is used primarily for exploratory purposes. This study is considered exploratory since it is the first step towards understanding health and Latinos in the Redwood Coast Region.

Key-Informant Interview Analysis

Since this study is the first effort at understanding Latinos and health, an approach was chosen that would maximize the understanding of various topics and themes. The analysis involves identifying a variety of themes or categories to interview questions. These themes and patterns are then examined throughout the region. The goal of this exploratory study is to highlight the range of topics related to Latinos and health. Gathering topic breadth in this preliminary study of regional Latinos and health will inform future research efforts that choose a more in-depth approach on a particular topic.

Interviews consisted of both open and close-ended questions. The open-ended questions (not providing pre-determined categories) elicited answers that contained multiple themes or responses which were coded only once per answer. If a respondent mentioned the same theme multiple

times in her or his answer to a question, it was only coded once. Since one respondent can name multiple themes in an answer, the N varies from the number of people interviewed. Themes were quantified by total frequency and percentage for each county (Appendix A) and for the Redwood Coast Region.

The analysis for the key-informant interviews relied upon a grounded theory approach, beginning with the data, and generating themes and categories for each question based upon patterns observed in the data.

Results

The results section consists of: 1) Populations Statistics for Latinos; 2) Content Analysis of Media Themes; and 3) Key-Informant Interviews including GIS-based spatial portrayal of some qualitative data.

Population Statistics for Latinos

Between 1990 and 2000, each of the three counties in the Redwood Coast Region experienced major growth in the Latino population. In this ten-year span, the Humboldt Latino population grew by 64.6%, Mendocino by 72.3%, and Del Norte by 58.6%. In total the population of Latinos in the Redwood Coast Region increased by 67.7% or 10,601 people. The rapid growth rate of this population contributed to the need and desire to better understand local Latinos in the Redwood Coast Region. The data on Latino Population 2000 presented below in Table 1 is mapped in spatial form later in this report. It provides the geographic base layer or backdrop for mapping key-informant interview data.

			Del	
	Humboldt	Mendocino	Norte	Region
Category				
Total Population (1990)	119,118	80,345	23,460	222,923
Total Population (2000)	126,518	86,265	27,507	240,290
Latino Population (1990)	4,989	8,248	2,414	15,651
Latino Population (2000)	8,210	14,213	3,829	26,252
Numeric Change in Latino Population	3,221	5,965	1,415	10,601
Percent Change in Latino Population	64.6%	72.3%	58.6%	67.7%

Table 1: Latino Population Growth (1990-2000) in Redwood Coast Region

Source: U.S. Census Bureau, 1990, 2000, Summary File 1.

Content Analysis of Media Themes

Latino media coverage in the Redwood Coast Region was found to correspond to the following themes (Figure 1).

Articles classified under the Immigration theme reported local and national immigration protests, news about immigration legislation and reform, opposing or supporting viewpoints about immigration in letters to the editor, problems illegal immigrants face, and news about immigration sweeps.

Articles falling under the Crime theme included local and state-wide crime reports in which Latinos were arrested or were the main suspects. Crimes included shootings, stabbings and theft, sexual assault, murder, gang activity, increased Latino meth abuse, increased Latino license citations, and involvement with Mexican drug cartels in large scale marijuana cultivation on public lands.

Articles placed under the category of Health described local or national health programs, health literacy/cultural competency programs, and health education workshops (forums or fairs) geared toward or involving Latino communities. Articles also included reports on health issues including nutritional health and health insurance issues related to the Latino community.

Articles placed under the Cultural/Arts theme included local and state-wide upcoming or past Latino cultural events or artistic expressions. This includes Latino celebrations (Mexican Independence Day, Day of the Dead, Cinco de Mayo, etc.), features about visiting Latino musicians/artists/entertainers, as well as art exhibits and musical events expressing some form of Latino culture.

Under the Latinos in the Local Community/ State theme, articles included features about local Latino businesses, educational services provided for Latinos in local communities, and stories about honors or recognitions for Latino success or contributions made to their communities. Articles placed in the Local Community/State theme also reported the latest Census Bureau and State Department of Finance's Latino population statistics and future Latino population growth estimates, as well as county and state estimates. Many of these articles also included comments about how the projected Latino population growth would affect the economic or social health of society and/or the county.

The Agriculture/Farm Worker theme included articles about agricultural issues related to farm workers or the Latino population. Stories ranged from farm and vineyard owners' concerns about the shortage of farm workers available to harvest crops, to a community's plan to develop more affordable housing for low-income farm workers.



Figure 1: Media Themes Map for Region

Regional Media Themes

Total Redwood Coast Region:

Immigration was the most common theme appearing in the content analysis of articles for the region. Sixty-six out of the 151 articles were about immigration and constituted 43.7% of the total articles (see Appendix A: Table A1). Crime had the second largest regional frequency and percentage. Thirty-two out of the 151 articles were about Crime making up 21.2% of the total articles. Thirty out of 151 articles were in the Latinos in the Local Community/State theme, making this the third most common theme at 19.9% of all the articles. The Arts/Cultural theme appeared in 13 of the 151 articles and made up 8.6% of the total articles. The Health and Agriculture/Farm Workers themes had the lowest frequencies and percentages. Six out of the 151 total articles were about Health making up 4% of all articles. Four out of the 151 articles were about Agriculture/Farm workers making up 2.6% of all articles (Figure 2).

A regional total of 151 articles were analyzed: 16 articles from Del Norte County, 72 articles from Mendocino, and 63 articles from Humboldt County.



Figure 2: Content analysis of media themes (percent of articles for region)

Humboldt County:

A total of 63 articles were found and analyzed for Humboldt County. Of the total Humboldt articles, 58.7% were about Immigration, 15.9% were about Latinos in the Local Community, 11.1% were about Crime and the Arts/Cultural theme, and 3.2% were about Health. None of the articles from Humboldt County were about Agricultural/Farm workers.

Mendocino County:

A total of 72 articles were found and analyzed for Mendocino County. Of the total Mendocino articles, 37.5% were about Immigration, 27.8% were about Crime, 22.2% were about Latinos in the Local Community/State, 5.6% covered the Arts/Cultural theme, 4.2% were about Health, and 2.8% were about Agriculture/Farm Workers.

Del Norte County:

A total of 16 articles were found and analyzed for Del Norte County. Of the total Del Norte articles, 31.3% were about Crime, 25% were about Latinos in the Local Community/State, 12.5% were about Immigration, Arts/Cultural, and Agriculture/Farm workers, and 6.3% were about Health.

Summary of Media Themes Analysis:

Results show that during the timeline of the Rural Latino Project, the top three media themes that the Redwood Coast Region population was most exposed to were Immigration, Crime and Latinos in the Local Community/State. People were exposed to the immigration debates along with a great number of articles on increases in Latino presence/population growth and reports of increases in Latino crime. The combination of these media themes together suggests a somewhat biased media view of Latinos focused mostly on these three main topical areas.

Key-Informant Interviews

This section provides a description of results from the 54 key-informant interviews for the Redwood Coast Region. More detailed county-specific (Humboldt, Mendocino and Del Norte) tables are available in Appendix A.

Sample Description

The sample consisted of 54 interviews, consisting of the following ethnicities: Latino (58%), White (19%), more than one ethnicity (16%) and other (7%) (Figure 3) (see Appendix A: Table A2).



Figure 3: Ethnicity of Key-Informants (percent of key-informant responses for region)

The sample consisted of 24.1 % males and 75.9 % females (Figure 4) (see Appendix A: Table A3).



Figure 4: Gender of Key Informants (percent of responses for region)

Interviews were conducted with people from the following occupational areas, organizations and groups, many of which contain leaders from the Latino community:

- Public Health
- Mental Health
- Education
- Health Clinics
- Women, Infants and Children
- First Five
- Youth Outreach Programs
- Nurses
- Counselors
- LatinoNet
- Nuestra Casa
- Paso a Paso
- Community Networks (LatinoNet, Rural Community Health Alliance, North Coast Clinics Network)
- Food Market Owner
- Migrant Education
- Credit Union
- Religious Leaders
- Economic Development Programs

Meeting Health Needs

To gain an understanding of the population being served, the question was asked, "What percent of the population that you serve is Latino?" This was an open-ended question and interviewees gave a wide range of responses, which were coded into six categories: Less than 15%, 15-34%, 35-49%, 50-75%, More than 75%, and Don't Know.

For the region, the most common response to this question was More than 75% which accounted for 38.2% of total responses to this question. The next most common response was Less than 15%, which accounted for 23.5% of total regional responses (Figure 5).



Figure 5: Percent of Population Served that is Latino (percent of responses for region)

Of the Mendocino key informants, one-half (50%) reported that more than 75% of the population they serve is Latino (see Appendix A: Table A4). Of the Humboldt County respondents, over one-third (36.8 %) reported that over 75% of the population they serve is Latino. Of the Del Norte respondents, one-fourth (25%) indicated that more than 75% of the population they serve is Latino. This implies that Mendocino County is serving a greater percentage of Latinos than the other two counties, which is supported by U.S. Census Population Data, indicating that of the three counties in the Redwood Coast Region, Mendocino has the largest Latino population.

Meeting Health Needs of Latinos

The question was asked, "Are the health needs of the Latino people in your community being met?" Answers to this question were either "yes" or "no." For the region, 67.3% reported "no" and about one-third or 32.7% of the responses were "yes" (Figure 6).

In Humboldt County 90 % of responses were "no" health needs are not being met while in Mendocino County 63.2% of responses were "no." Overall, people throughout the region do not feel that Latinos' health needs are being met, except in Del Norte County, where 61.5% of total responses were "yes" health needs are being met (see Appendix A: Table A5).



Figure 6: Are health needs of Latinos being met? (percent of responses for region)

In addition to the "yes/no" responses, individuals also provided additional comments.

"The dental program is very successful in that it accepts new patients and Medi-Cal patients, we have people coming as far as two hours from the south and one hour from the North to us for their dental needs." -Humboldt County

"No, because we are rural we don't have a specialist. Hospital is very limited. Health care services are more intense for Spanish community because of language barriers." -Humboldt County

The lack of specialists was noted by these key informants: *"If Latinos have to seek a specialist then they are stuck in that situation, for example a root canal, most endodontists want money up front and then sometimes they (Latinos) have to let the tooth go. Sometimes they can work things out, but a lot of private practices don't."* -Del Norte County

"The community health clinic itself is trying to meet all the needs. When there is a point of going to a specialist, we don't have any specialist to send them to if needed." -Mendocino County

The lack of health insurance emerged in this comment,

"Not at all, there are a lot of people without insurance, sadly to say... a lot of kids involved lately... I have seen the effort of some agencies to try to reach out to uninsured children and uninsured young ladies who are pregnant, I see a lot of effort to reach out to those people." -Mendocino County

This person noted that needs are being met, "Yeah, they help there as much as they can, really they do. Compared to like 43 years ago, there has been lots of advancement." -Del Norte County

Issues of outreach and transportation as health needs emerged: "No. Not enough outreach. People don't come in…no transportation…stuck in ranches, outreach driving to find people. Happy Camp, Willow Creek, Trinity Lake, Klamath, Ferndale in mountain areas, Garberville." -Humboldt County Answers to the question, "Why are or aren't health needs being met?" were coded into the following six categories: Language Barriers, Lack of Resources, Immigration Issues, Lack of Insurance, Needs Met, and Other (Table 2).

The top three themes regarding why health needs were or were not being met were:

- 1. Lack of Resources
- 2. Language Barriers
- 3. Lack of Insurance

Table 2: Coded description of health issue themes

Health Issue Themes	Coded Description of Themes
Language Barriers	Spanish, translators, language
Lack of Resources	Cost, Inability to pay, lack of services and care, lack of Information, lack of providers, transportation
Immigration Issues	Immigration, cultural awareness, undocumented, discrimination
Lack of Insurance	Access to insurance, cost of insurance
Other	Work, hours at work, don't know
Needs are Met	Indication that needs are met, Cal Kids, medical staff can speak Spanish, clinics provide services

For the region, key informants identified Lack of Resources (28.3%) as the most common reason Latino health needs are not being met. The second most common theme was Language Barriers (21.7%) followed by Lack of Insurance (18.3%) (Figure 7).



Figure 7: Why are or aren't health needs being met (percent of responses for region)

This pattern occurs across all three counties. One notable difference is that for Humboldt County, Immigration Issues accounted for almost one-fourth (23.1%) of all responses to this question (see Appendix A: Table A6). This issue did not emerge in Mendocino or Del Norte counties, so it did not emerge for the Redwood Coast Region as a whole. This data suggests that immigrant issues are thought of as a barrier to meeting health needs for Latinos in Humboldt County.

The following quotes reflect key-informant sentiments on the question of health needs being met and the challenges associated with trying to meet the language needs:

"No funding, can't hire bilingual nurses and staff and offer competitive salary." –Humboldt County

"Sometimes in Eureka there is no one available to speak Spanish so they know they might need to bring someone to help them." -Humboldt County

"There are not translators, we need many translators. Encourage people to go to school, we help them fill out job applications, they are afraid that they won't get in because they are Latino... hesitation to ask for help...some hesitation comes from being afraid of the system-kids getting taken away and people getting deported." -Humboldt County

Key informants note how resources and insurance are important issues affecting health needs of Latino people:

"Because our Latinos are uninsured." - Del Norte County

"Lack of funds, focus for the funds, need for more bilingual health officials at every level." -Mendocino County

"Lack of resources. Policy makers not being aware of those needs." -Humboldt County

"The majority of regular doctors do not take Medi-Cal. When they are Hispanic they have a hard time getting proper care because of the limitation of providers." –Del Norte County

Culture also plays a role in meeting health needs as noted here:

"We saw this here in our clinic...sometimes Latinos can get education. But my culture says that no I can't have two-percent milk because it's water." -Mendocino County

Language

The issue of Language emerged as an issue for Latinos meeting their health needs throughout the region. Informants were asked the question, "Is language an issue for meeting the health needs of the Latino population in your community?" Answers to this question were coded "yes" or "no."

Overall, 80% of the responses were "yes" (43/54), language is an issue for Latinos' meeting their health needs (Figure 8) (see Appendix A: Table A7). This pattern is reflected across Humboldt and Mendocino counties but not in Del Norte County; 95% of Humboldt County responses and 85% of Mendocino County responses reported that "yes" language is an issue for meeting Latino health

needs. In Del Norte County 50% reported "yes" language is an issue and 50% reported "no" language is not an issue for meeting health needs.



Figure 8: Is language an issue for meeting Latino health needs (percent of responses for region)

The issues of trust and fear were captured by the following quotes.

"Yes, absolutely, families don't speak English... don't trust anyone who does... don't have anyone to bridge the divide." -Humboldt County

"I think it [language] is huge, but not the most serious or important variable. Can I trust I will be safe, if I go there will it be safe?" -Mendocino County

"Yes, if there is no one to inform you then you will not have the information... threatened by immigration laws and don't leave homes." -Humboldt County

This key informant points out that all Latinos may not be literate, which affects comprehension of educational materials even if they are in Spanish:

*"Many places rely on written information, though many of the families can't read or write Spanish." -*Mendocino County

"All of our clinics have enough Spanish speaking staff to serve people in their primary language...if we lose Spanish speaking staff everyone has to hustle." -Del Norte County

"Now they take their children in for translation." -Del Norte County

"Public Health now has the highest number of bilingual staff than anyone in the community." – Mendocino County

This quote points out that meeting health needs necessitates understanding culture in addition to speaking the language:

"Language alone is not enough, you have to have an understanding of the culture." -Humboldt County

This quote highlights how some Latinos will travel very far to meet their health needs, even internationally:

"People do get sick and go back to Mexico." - Mendocino County

Distance Traveled to Meet Health Needs

To determine the role that distance plays in meeting health needs, interviewees were asked, "How far do the Latino people in your community typically travel (in time or miles) to meet their health needs?" Answers to this question were coded into six categories: 5 to 30 Minutes/5 to 30 Miles, 30 Minutes to 2 Hours/30 to 80 Miles, Out of Area/More than 200 Miles, 5 Minutes/5 Miles and Under, Other, Depends/Varies.



Figure 9: Distance travelled to meet health needs (percent of responses for region)

For the region, almost one-half (47.4%) of the responses to this question were "5-30 minutes or 5-30 miles." The second most common response (15.8%) was "out of the area/more than 200 miles." The third most common response (13.7%) was "30 minutes to 2 hours/30-80 miles" (Figure 9).

These patterns were reflected in all of the three counties. In Del Norte County, a greater percentage of the responses (22.7%) indicate needing to travel "out of the area of more than 200 miles" to meet their health needs compared to Humboldt (15.8%) and Mendocino (11.4%) counties (see Appendix A: Table A8).

Following are two quotes from key informants in Mendocino County related to the distance travelled question:

"Just depends what part of the county they are coming from. If not here they have to go to the next county, which is about 1 hour away." -Mendocino County

"Willits people come to Ukiah... takes them about 25 minutes. Children to UCSF, 200 mile transportation. Dads have to miss work to take them to UCSF... they have a day less pay on checks for food or rent...see a specialist in Santa Rosa, one hour drive from Ukiah." - Mendocino County

Informants in Del Norte County note the benefit of having the Smith River clinic close by.

"Now that we have the Smith River clinic, it is right there." - Del Norte County

"Smith River is pretty close ... you can walk to it." -Del Norte County

This quote highlights the difficulty addressed in traveling somewhere, possibly far, for health care from key informants in Humboldt County:

"Transportation is complicated, 15 minutes in a car, children taken out of school for visit, last minute emergency calls, walk up to 45 minutes." –Humboldt County

"People in Fortuna go to Arcata for translation. Some students go back to Mexico." -Humboldt County

Health Insurance

Answers to the question "What is the most common type of health insurance among the Latino population (e.g. private, public, no insurance)?" were coded into the following six categories: Medi-Cal, No Insurance, Healthy Families, Cal Kids, Private Insurance, and Other.

For the region, the two most common responses were Medi-Cal (40.9% of responses) and No Insurance (40.9% of responses). Together, these two categories accounted for 81.8% of the total responses (Figure 10). This pattern was also observed across each of the three counties.



Figure 10: Most common health insurance for Latinos (percent of responses for region)

In addition to answering the yes/no question, informants chose to provide additional comments in answer to this question. Topics covered in the additional information related to Medi-Cal, insurance and work, lack of services and need for assistance.

This informant comments on role that Medi-Cal plays in providing health care to people in the region:

"Some kids were not born here and legally weren't able to get Medi-Cal. With one child getting health insurance and the other not for Cal-Kids, it is more than just Latinos, it is other groups as well." -Del Norte County

Latinos who have steady work at certain places, such Sun Valley Farms or agriculture operations in Del Norte, gain access to health insurance. The two informant quotes below note how insurance was tied to occupation and place of work:

"During harvest go to Healthy Families then when no or less income they have nothing or go to Medi-Cal. ... How many people who work for big wineries might have health insurance? Very fluid." -Mendocino County

"This country needs universal health care it's a sin we don't have it. Some clients have health insurance through Sun Valley. Handful have some insurance, usually male. All babies born in U.S have Medi-Cal for first year." -Humboldt County

The next two quotes highlight that lack of services and health insurance are problems for Latinos. Furthermore, they highlight another aspect of the Latino population, that that they are proud and want to be able to pay for services as they go. Latinos often pay cash for services, which can get very expensive, especially when one does not have insurance.

"Lack of services has been huge for adults." -Humboldt County

"...lack of, no such thing, they pay cash or Medi-Cal, but a lot pay cash because they don't like going on any kind of aid so if they need medicine they just go pay cash."-Del Norte County

It should be noted here that throughout the study, Latinos were often referred to in the third person by interviewees, even if the interviewee was himself or herself a Latino. This was a pattern that was noticed throughout the responses.

The following quote emphasizes the importance of having programs and workshops to guide Latinos through the insurance paperwork process and highlight possible insurance options.

"People at Paso o Paso answer better. They deal with insurance stuff probably Medi-Cal Denti-Cal. Cal-Kids. A lot of signing up for that. Paso o Paso have workshops to fill in the gaps about insurance info."-Humboldt County

Important Latino Health Issues

Key informants were asked, "Of the health issues in your area, which do you feel are the most important?" (Figure 11). The answers to this question were coded into 14 categories: Diabetes, Respiratory, Immigrant Status, Obesity/Nutrition, Mental Health, Lack of Insurance, Environmental Health, Education/Preventive Care, Vision, Dental, Cancer, Access, Abuse, and Other.

The top three themes that emerged as the most important health issues are:

- 1. Obesity/Nutrition
- 2. Access
- 3. Diabetes



Figure 11: Most important health issues for Latinos (percent of responses for region)

Of 14 primary health issues facing the Latino Community in the three-county region key informants identified Obesity/Nutrition (17.0%) as the most important health issue (see Appendix A: Table A10) (Figure 11, 12; Table 3). Access (16.3%) was identified as the second most important issue and Diabetes (12.2%) was the third. The category Other (14%) consisted of multiple health issues (Figure 11, 12; Table 3).

Obesity/Nutrition was the most important health issue in Mendocino (20%) and Humboldt (16%) counties and is the second most important health issue in Del Norte County (13%). The category Access also was identified as the most important health issue in Humboldt County (16%),

mentioned as frequently as Obesity/Nutrition. In addition, Access was identified as the second most important health issue in Mendocino (18%) and Del Norte (13%) counties. Within Del Norte County respondents consider Immigrant Status (16%) to be the most important health issue facing the Latino community (see Appendix A: Table A10).

The key informant quotes for this question contribute to understanding the coded topics, through hearing people in their own words describe the major health issues in the region:

"Not right that we don't have insurance for everyone. I feel like people can't get access to health care, they end up in emergency room and that costs everyone way more than basic health care." - Mendocino County

"Nutrition is most important. Cultural characteristics go with diet- high fat, high carbohydrates, lead to hypertension, medical diabetes." - Humboldt County

"With obesity and diabetes because it would take care of many other issues. Tied into lifestyle in America. In Mexico depend on walking and home cooking. Here eat fast food and more food. Because everything ties to it, digestion hypertension, diabetes affects every organ in the body." -Mendocino County

"Diabetes, a lot of our families are not aware of how to eat healthy, what not to do…" -Humboldt County

It is important to culturally contextualize the Latino immigrant experience. Where they are coming from affects how Latinos view weight and food consumption:

"This generation of overweight kids – explode into diabetes. People arrive from Mexico where felt scarcity. Look at overweight children as healthy, not problematic. Due to assimilated U.S diet. Poor nutrition is maybe #1 cause of those problems. Take kids to McDonald's and Taco Bell" - Mendocino County

"Diabetes is most important because people come to this country and they are used to eating entirely different they come here and the food is so different if they work sun up to sun down they get fast food or eat like they are used to eating but are not exercising so much. Which leads to a lot of diseases." -Del Norte County

The issues also expand beyond the top three identified in the codes to include depression and vision:

"Vision has been huge: just our students 30 needing glasses. Most in 30s, 40's never had a vision test and same for dental." -Humboldt County

"They are so isolated. People are actually talking about being depressed and they used to not talk about it in the past. It is a significant change." -Del Norte County



Figure 12: Latino population density with health issues affecting Latinos (percent of responses for region)

Study Definitions for the Top Health Issues of Concern to Key Latino Informants

Health Issue Themes	Coded Description of Themes
Obesity/Nutrition	Diet, obesity, nutrition, inactivity, exercise, lifestyle
Access	Language barriers, transportation, access to care, economics-lack of resources, bilingual services, poverty, hunger
Immigrant Status	Work, documentation, immigrant status, migrant worker
Respiratory	Tuberculosis, asthma, breathing, pneumonia
Diabetes	Diabetes
Mental Health	Culture shock, depression, stress, social isolation
Lack of Insurance	Coverage, lack of access to insurance
Environmental Health	Health, housing, environment, environmental conditions, pesticides
Education/Preventive Care	Education, information, preventive, reproductive health, women's health, birthing, vaccinations for children
Vision	Cataracts, seeing, vision
Dental	Cavities, teeth, dentists, dental
Cancer	Cancer
Abuse	Physical abuse, mental abuse, domestic violence, drug abuse
Other	Heart disease, teen health, family, AIDS/HIV, Hepatitis B and C, Hypertension, Serious Injury, Workmen's Compensation

Table 3: Coded description of most important health issue themes

Factors Affecting Health

The question was asked, "What are some of the things that affect the health of Latino people in your community?" Answers to this question were coded into ten categories: Economics, Language/Immigration Status, Nutrition/Exercise, Lack of Access/Lack of Health Insurance, Pesticides, Drugs/Alcohol, Cultural Isolation/Stress, Education, Dental and Other.

The top four themes that emerged as factors that affect the health of Latino community are:

- 1. Nutrition and Exercise
- 2. Economics
- 3. Lack of Health Access/Lack Of Health Insurance
- 4. Language/Immigration Status


Figure 13: What are things that affect health of Latinos (% of responses for region)

Key informants identified Nutrition and Exercise as the most important factor affecting health of Latinos (14.9%). This was followed by Economics (13.2%) and Lack of Access/Lack of Insurance 13.2%). Language and immigration status was next most common response, consisting of 11.6% of total responses for the region (Figure 13; Table 4).

The patterns observed for the top four responses occurred consistently across all three counties, except the Language/Immigration Status question, which had the largest percentage of withincounty responses in Humboldt County (comprising 16.7% of total responses). The percentage of comments within Humboldt County, 16.7%, is greater than the regional percentage for this same category (11.6 % of total responses) (see Appendix A: Table A11). Responses were coded into the following themes listed in Table 4.

Themes	Coded Description of Themes
Economics	Cost, expense, poverty and finances
Nutrition/exercise	Diet, exercise, obesity, nutrition, diabetes
Language/immigration status	Language barrier, Spanish, immigrant, undocumented
Lack of health access/lack of insurance	Access to care & providers, insurance, transportation
Pesticides	Pesticides related to agricultural work
Drugs/Alcohol	Drugs, alcohol, problems related to drugs and alcohol
Cultural Isolation/Stress	Isolation due to cultural differences, stress and mental health issues
Education	Education, communication
Dental	Dental, teeth
Other	Gangs, walking from Mexico to immigrate, colds, allergies, weather

Table 4: Coded description of important factors affecting Latino health themes

The following quotes focus on diet/nutrition and the challenges associated with exercise:

"Diet. Come from nine months in Mexico. Very thin come here and gains so much weight, then try to starve themselves later. School provides crappy food. That is why eating disorders." -Humboldt County

"Bad diet, bad food choices, too much junk food, not enough physical activity, not enough exercise turns into cultural diabetes big in Latinos, not a lot of people jog, there is a health club need membership, should be more of a health club, membership is expensive people can't afford it." -Mendocino County

"Lack of exercise most people; some like to walk but 8 months out of the year it is raining, children are stuck inside so they don't get much exercise." -Del Norte County

An individual's immigration status affects his or her access to health care:

"Poverty, lack of documents because they're undocumented, can't drive and can't have a bank account. Overall it affects the ability to access health system." -Humboldt County

"Waiting to the last minute until seriously ill, because pay out of pocket, barely have enough money for basic needs, get sick and try to take care of it themselves." -Mendocino County

This next quote highlights how being an immigrant can produce health problems due the immigration process itself:

"[One] of the big issues was foot problems, they had been standing in bad shoes, I don't hear it so much anymore, exposure is an issue for that community because of the work that they do, but I think bulb farms are more careful, some people have walked here and they are beat up, it does not happen much... they have walked from Guatemala." -Del Norte County

Economics emerged as a factor affecting the health of Latino people.

"Economics is key, environment, culture. Southern Humboldt poor economy, little industry. Pot growers don't give basic health needs to their workers." -Humboldt County

"Economics, simple as transportation, finances, lack of education. Down to economics. You don't have the money you skip every other day medicine, or borrow from each other or get medicine from Mexico." -Mendocino County

Latino Health Places and Networks

This section examines the places and people Latinos seek out when they have health needs and/or issues.

Places Frequented for Medical Care

Interviewees were asked "Where do members of the Latino community most often go to obtain medical care?" The range of responses given to this question were coded into three categories: Clinics, Hospitals, and Private Practice.



Figure 14: Where do Latinos go to obtain medical care (percent of responses for region)

For the region, the most common place Latinos receive medical care is in Clinics at 82.1% followed by Hospitals at 16.1% of total responses for the region (Figure 14, 15). This pattern occurs across all three counties. In Humboldt County, 4% of total responses indicate that Latinos go to private practices to receive their medical care. In Del Norte, Humboldt, and Mendocino Counties, Latinos reported using clinics for medical care most frequently. In two of the three counties the clinics are located in areas with a higher population density of Latinos. In Del Norte and Mendocino counties, Latinos did not report using private practices (see Appendix A: Table A12).



Figure 15: Latino population density with places frequented for medical care (percent of responses for region)

Additionally, the question was asked, "Where do members of the Latino community most often go to obtain dental care?" Answers to this question were coded into four categories: Clinics, Hospitals, Private Practice and Mexico.



Figure 16: Places Frequented for Dental Care

The most common place that Latinos in the region obtain dental care is Clinics reported by 80.3% of all regional responses, followed by Private Practice at 16.7% (Figure 16). The pattern of using clinics for dental care occurs across all three counties. However, in Humboldt County, 29% of regional responses indicate that Latinos use private practice to obtain their dental care, which deviates from the regional pattern (see Appendix A: Table A13). In Mendocino 9.1% of regional responses indicate Private Practice, and no one reported Private Practice for dental care in Del Norte County (Figure 17).



Figure 17: Latino population density with where Latinos obtain dental care (percent of responses for region)

Why Do Latinos Go to Certain Places to Meet Health Needs?

As a follow up to the questions about places frequented for medical and dental care, the question was asked, "Why do Latino people go to the places they do to meet their health needs?"

Responses to this question were coded into nine categories: Affordability, Spanish Speaking and Bicultural Providers, Accept Medi-Cal/Healthy Families, Accessible/Limited Options, Uninsured, Emergency, Past History/Comfort Level, Programs and Services, Other (Table 5).

Themes	Coded Description of Themes
Affordability	Low cost, cost, low income, discount, financial
Spanish Speaking & Bicultural Providers	Language, Spanish-speaking staff, bilingual, doctors who speak Spanish, bicultural
Accept Medi-Cal/ Healthy Families	Medi-Cal, Healthy Families
Accessibility	Accessible, location, transportation, proximity, limited options
Uninsured	No health insurance, uninsured
Emergency	Emergency, immediate attention
Past History/Comfort Level	Know people/family members who went there, word of mouth, past history with place, feel comfortable
Programs and Services	Programs, services, educational outreach
Other	Legal status, family planning, hypertension, pediatrician expertise, prevention, information

Table 5: Coded description of why Latinos go to certain places to meet health needs themes

The top three responses to this question were:

- 1. Affordability
- 2. Spanish Speaking and Bicultural Providers
- 3. Accessibility

Within the Redwood Coast Region, the most common reason that Latino people go to these places is Affordability, consisting of 23.5% of total responses for the region. The next most common response was Spanish Speaking and Bicultural Providers at 17.5%, and finally Accessibility, which accounts for 14.8% of all total responses for the region (Figure 18).

The patterns observed for the region are also reflected in the counties for Affordability and Spanish Speaking and Bicultural Providers. There is great variation for the Accessibility theme across counties. In Humboldt County, 26.4% of the total responses mention this theme. However in Del Norte only 10.3% of responses reflect this theme and it drops to 7.5% of the total responses for Mendocino County (see Appendix A: Table A14). In Humboldt County the data show that access is very important for Latino population.



Fig. 18: Why do people go to certain places to meet health needs (percent of responses for region)

When asked, "Why do Latino people go the places they do to meet their health needs?" many of the answers focused on Affordability: *"Affordability, easy to access, location, payment polices, language access"*-Humboldt County

"Because it is a clinic for low income people, they don't refuse service= 50 miles" -Mendocino County

The Open Door Clinics and Mobile Medical Clinic were common answers and popular choices for Latinos; as one Humboldt County informant explained, *"…Mobile Medical because it's mobile."*

"Word of the street, don't care about immigration status, feel safe here" -Humboldt County

"Open Door because it is the biggest community clinic we have, cheap, accepts Medi-Cal, Mobile Medical because it's mobile" -Humboldt County

"They take emergency Medi-Cal and in most Latino communities all they have is emergency Medi-Cal." -Mendocino County

The issue of language was also a very important factor affecting choice: *"We have Spanish speaking employees"* -Del Norte County

"They go there because it is cheaper and language ability; there are Spanish speakers, doctors and staff that speak their language." -Mendocino County

It becomes clear from the answers to this question that word of mouth is very important in directing Latinos toward meeting their health needs.

Who Do Latinos Go to When They Have Health Issues?

To determine the social connections related to meeting health needs, we asked the question, "Within the Latino community, are there particular people that community members go to when they have a health issue?"

Answers to this question expanded beyond specific individuals to include other entities such as groups, organizations and places.

Answers to this question generated seven categories: Specific Community Members, Latino Focused Program/Organizations, Health Clinics, Centers and Hospitals, Primary Care Provider, Churches/Pastor and Healer, Bilingual Providers, and Other (Table 6).

Table 6: Coded description of who do Latinos go to when have a health issue themes

Themes	Coded Description of Themes
Specific Community Members	Various community member names
Latino Focused	Adult School, Paso a Paso, Nuestra Casa, family
Programs/Organization	resource centers, social services
Health Clinics, Centers	Open Door Clinics, St. Joseph Hospital, Mobile Medical,
& Hospitals	"A" Street Clinic, Del Norte Community Health Center
Primary Care Provider	Doctors and health care providers
Churches/Pastor and Healer	Church leaders, Curandero/a, healer
Bilingual Providers	Interpreters, bilingual
Other	High School, Mexican Consulate, anywhere, trailer park, Los Angeles

The top three responses to this question were:

- 1. Specific Community Members
- 2. Latino Focused Programs/Organization
- 3. Health Clinics, Centers and Hospitals



Figure 19: Who do Latinos go to with health issues (percent of responses for region)

In the Redwood Coast Region, Specific Community Members accounted for almost one-third (30.1%) of the total responses to this question, with a wide range of responses across counties: 23.5% for Mendocino, 30.4% for Humboldt and 39.4% for Del Norte County (see Appendix A: Table A15). This was followed by about one-fourth (26.8%) of total responses reporting Health Clinics, Centers and Hospitals (Figure 19). This pattern occurs across all three counties as well.

The third most common response for the region was Latino Focused Programs and Organizations which accounted for 16.3 % of total responses for the region. There was wide variation across counties, (with Del Norte 6.1%, Humboldt 15.9% and Mendocino 23.5%). Latinos in Del Norte county appear to be the least likely to go to Latino Focused Programs or Organizations to meet their health needs. However, it should be noted that in Del Norte County, research indicated that most Latinos go to the Smith River Open Door Clinic which officially is not a Latino Focused Program or Organization, but very effectively serves this population.

Answers to this question and who Latinos go to include both people and places:

"There is a trailer park in Redway, an aunt that everyone consults and is the speaker for the community. Lived here for 6 years, we go with questions. Accompanies various young mothers to clinic for services or to find things" -Humboldt County

"Our clients call Paso a Paso not sure what to do – can't communicate." -Humboldt County

"Mobile Medical, Open Door Clinic." -Humboldt County

"Well they usually go to Nuestra Casa more when they are new in the community. Nuestra Casa helps them find the right agencies and the right referrals to their needs. Nuestra Casa doesn't provide health services directly but provides where to go." -Mendocino County

"The clinic, word of mouth referrals, can buy antibiotics, ointments – people provide, go to Chinese man for herbs, acupuncture" -Mendocino County

"Traditional medicine is still active, alive and important. Still go to curanderos." -Mendocino County

"Several people try to help each other. Word of mouth is very important." -Del Norte County

"Office manager for Open Door Clinic. That name comes up a lot. Another site is the school teachers at the elementary school. In general anyone who is bilingual that they can trust, they will ask." -Del Norte County

It is interesting how the "word of mouth" theme emerged here. Quotes that named particular individuals were excluded to protect the privacy of those named. However, during analysis, those names were repeated as the best people to "go to" for health issues. The people chosen in this question appear to have two characteristics: 1) they have some knowledge about health or navigating the health system and 2) they are socially well-connected within the Latino community as well as somehow connected to outside health resources.

Why Do Latinos Go to Certain People for Health Issues?

To follow up on the previous question, the question was asked "Why do community members go to these people when they have a health issue?"

Answers to this question were coded into five separate categories: Language/Cultural Awareness, Trust/Established Relationship, Knowledgeable about Resources and Information, Low-Cost/Accessible and Other (Table 7).

Table 7: Coded description of why do Latinos go to certain people for health issues themes

Themes	Coded Description of Themes
Language/Cultural	Language, speak Spanish, bilingual
Awareness	
Trust/Established	Respect, trust, reliable
Relationship	Respect, trust, reliable
Knowledgeable about	Direct to resources and information
Resources and	
Information	
Low Cost/Accessible	Affordable, low cost, cheaper, finances, access,
	transportation
Other	Leadership, family issues, teenage issues, mental
	health, natural healing

The most common responses to this question were:

- 1. Trust/ Established Relationship
- 2. Language/Cultural Awareness
- 3. Knowledgeable about Resources and Information

The two most common responses for the region were Trust/Established Relationship accounting for 31.9% of total responses, followed by Language/Cultural Awareness at 29.7% of responses. The third most common response for the region was Low Cost/Accessible which accounted for 15.9% of total responses for the region (Figure 20).

The patterns for the individual counties indicate a diverse range of responses for the following top three themes (see Appendix A: Table A16).

Trust/Established Relationship ranged from a low of 26.5% of responses in Humboldt County, 33.3% of responses in Mendocino, to a high of 42.3% of total responses in Del Norte County. This suggests that having a prior social connection with the person is key for the Latino population in Del Norte County when they have a health issue.

The individual county responses for Language/Cultural Awareness also ranged widely across the individual counties: from 24.5% of responses in Humboldt County, 28.6% in Mendocino up to a high of 42.3% responses in Del Norte County. Language and Cultural Awareness are more important for residents in Del Norte County as an explanation for why they go to particular people.

Del Norte County again is different when examining the range across the third most common answer, Low Cost/Accessible, reported by a low of 7.7% of responses in Del Norte County, to 17.5% of responses in Mendocino and a high of 18.4% of responses in Humboldt County.



Figure 20: Why do Latinos go to these people (percent of responses for region)

For many Latinos, hearing from others about a person or place being 'safe' becomes very important and helps to establish trust, another key factor:

"Word-of-mouth, find them as respectable people, tried and true." -Del Norte County

"Trust and because they have been told. There's a network within the Latino community based on trust and experience." -Humboldt County

"Don't have a lot of choices – limited health care people in community are able to communicate with Spanish-speaking population. Heard only one in mental health who's bilingual." -Humboldt County

"Established a relationship and trust with those individuals and people who speak their own language so they feel like they will get heard and if not served at least get a referral. It is important about making sure they are heard." -Mendocino County

"Other families already have trust in us and it is very important, trust. We are assisting them not only because we get paid, but helping own people. I love my job. Filling out forms, translation of letters is confusing with information on forms even if they are in Spanish." -Mendocino County

In addition to trust, being able to advocate for the Latino patient also is key:

"Spanish speaking, track history of helping people get knowledge of the service in community, know how to work the system, and can properly advocate for them." -Del Norte County

Latino Spatial Mobility Patterns

This section examines the spatial mobility patterns of Latinos in the Redwood Coast Region in an effort to better understand more about the Latino population. Data specific to each county (Mendocino, Humboldt and Del Norte) can be found in Appendix A. This project examined the spatial mobility patterns related to food services, spiritual and religious activities, and recreation. The question was asked, "Where do the members of the Latino community most often obtain the following types of goods and services?" (Food/Groceries; Recreation/Entertainment; Religious/Spiritual). Respondents were asked to provide the name of the place/store, town name and county for each particular category.

Places Frequented for Food Services by Latino Community

Figure 21 shows the various places Latinos frequent for food. Answers were coded into five categories: Commercial Grocery Store, Grocery Outlet, Hispanic/Mexican Groceries, Community Food Groups, and Other. For the region, the most common response was Commercial Grocery Stores mentioned in 41% of total responses. The second most common regional response was Grocery Outlet, which accounted for 35.1% of total responses. The third most common response was Hispanic/Mexican Groceries accounting for 16.4% of total responses.

These patterns were reflected by the individual counties as well. The most interesting county-level difference emerged around shopping at commercial grocery stores: Del Norte 65.6%, Mendocino 37%, and Humboldt 30.4% (see Appendix A: Table A17).



Figure 21: Latino population density with places frequented for food services

Places Frequented for Spiritual and Religious Activities by the Latino Community

This question was coded into the following categories: Catholic, Jehovah's Witness, Baptist, and Other Christian. The most common response to the question of where Latinos go for spiritual and religious activities was a Catholic institution, reported in 65.9% of responses (see Figure 22). This was followed by Other Christian that accounted for one-fourth (24.7%) of all responses for the region. These patterns were reflected across the region. Individual county-level data is available in Appendix A: Table A18.



Figure 22: Latino population density with places frequented for religious/spiritual activities

Places Frequented for Recreation and Entertainment by the Latino Community

The answers to this question were coded into the following categories: Nature (rivers and beaches), Parks, Mall, Movies, Soccer, Halls/Community Centers, and Other.

For the region, the most common response was Halls/Community Centers, which accounted for about one-fourth (23.6%) of the overall regional responses. People will often rent a hall to hold a baile, fiesta or Quinciniera (special party for a girl turning 15) or wedding (Figure 23).

The second most common answer was Nature, which accounted for one-fifth (20%) of overall responses. The third most common answer for the region was Parks, which accounted for 19.1% of all responses. The pattern was observed for each county for the Halls/Community Centers category.

Within the counties, some variations were observed in responses for the Nature category (see Appendix A: Table A19). In Humboldt County about one-fourth of the responses for the county or 25% indicated the Nature category, and in Mendocino 22.9% of responses for the county reported Nature in this category. Del Norte only had one person (4.5% of total responses for the county) report this answer. The same pattern was observed for Parks, where no one from Del Norte reported this category but 27.5% of responses from Humboldt and 20.8% of responses from Mendocino reported going to parks for recreation.



Figure 23: Latino population density with places frequented for recreation and entertainment

Overall Range of Places Used by the Latino Community

It is important to identify patterns of mobility for Latinos in order to better meet their needs. Medical outreach can meet Latinos in the places and ranges of mobility they already consider important and frequent, such as church, soccer fields, fiestas, and plazas. An overall view of Latino patterns of mobility indicates that Latinos are willing to travel out of the state of California for food service, recreation and entertainment. Spatial analysis also highlighted that Latino patterns of mobility often cluster in geographic areas where there is a greater population density of other Latinos (Figure 24).



Figure 24: Latino population density with range of places used by Latinos

Meeting Health Needs in the Future

An important part of this study is to try and provide guidance for future actions related to Latinos and health. To determine future policies and actions related to health care for Latinos, the following question was asked, "In your opinion, what are some things that can be done to better meet the health needs of the Latino people in your area?" Answers were coded into eight categories: More Training, Education and Programs, More Latino Community Involvement, More Services, Resources and Funding, Increased Health Care Coverage and More Providers, More Bilingual, Bicultural Providers and Staff, Resolve Immigration Issues, Transportation, and Other (Table 8).

Themes	Coded Description of Themes
More Training,	Training for community members, cultural training for
Education and	providers, education, nutrition education & exercise
Programs	education
More Latino	Community, development, teaching Latinos to be their
Community	own advocates
Involvement	
More Services,	Health counseling, family counselors
Resources and	
Funding	
Increased Health	Health insurance, affordable health coverage, Medi-Cal,
Care Coverage &	more providers
More Providers	
More Bilingual,	Translation, bilingual, bicultural, staff who speak
Bicultural Providers	Spanish
and Staff	
Resolve Immigration	Immigration status and driver's license, undocumented
Issues	
Transportation	Transportation, public transportation
Other	Coordination between various agencies, employers
	review existing health policies, employers and labor
	laws, build trusting relationships

Table 8: Coded description of things that can be done to meet Latino health needs themes

The top three responses across the region are:

- 1. More Training, Education and Programs
- 2. More Bilingual, Bicultural Providers and Staff
- 3. Increased Health Care Coverage and More Providers



Figure 25: How to better meet the health needs of Latinos in the region (percent of responses for region)

The most common response for the region was More Training, Education and Programs (26.7% of total responses). More Bilingual, Bicultural Providers and Staff was the second most common response and accounts for 16.5% of total responses. The third most common response was Increased Health Care Coverage and More Providers, representing 15.8% of all responses for the region (Figure 25).

Individual counties exhibited some slightly different patterns for each theme. 28.8% of Humboldt County responses and 31.3% of Mendocino County responses indicated the need for More Training and Education Programs, while only 13.3 % of responses in Del Norte County focused on this theme (see Appendix A: Table A20 for specific county-level data). This indicates a greater desire for programs, training and education in Humboldt and Mendocino counties.

The theme More Bilingual, Bicultural Providers and Staff received the highest percentage of total responses in Humboldt County (26.9%), compared to 9.4% in Mendocino and 13.3% of individual county responses. A great variation in percentage of total responses also occurs for Increased

Health Care Coverage and More Providers. More than one-fourth (26.6% of total response) in Mendocino County focused on that theme, whereas 13.3% in Del Norte and 3.8% of total responses in Humboldt County identified Increased Health Care Coverage and More Providers as a major concern. Interviewees in Mendocino County significantly desire increased health care coverage and more providers.

Many respondents stated that providing more training, education and programs would be a good way to meet the health needs of Latinos:

"Have more programs- family clinic, that's the ideal. Educate those who hire them and also for them to provide benefits. Ideal will be to have a family clinic done between Mexican consulate and state of California. Dentist from Mobile Medical offices do dental care for free. Only twice a year." -Del Norte County

This quote relays the important role cost plays in meeting health needs:

"Having a free clinic day, people can go and be seen without worrying about cost, once a month or periodic, people falling through the cracks can know. Health fair check for diabetes, dental exam done once a year. A lot of agencies giving out information. If screening is positive they don't come back because it will cost them." -Mendocino County

The issue of literacy and advocacy also emerged as a factor affecting meeting health needs:

"Parents attend kid's school meetings or at doctor's office if they cannot read, their kids read the material for them. They also need to learn and know how to ask questions in these meetings. Need to advocate for themselves because they don't know enough about nutrition or health. Some parents use their kids to communicate to the doctors." –Humboldt County

Perhaps this could be solved by instituting health advocacy programs for Latinos throughout the region.

Having providers and staff who speak Spanish can improve the ability to meet Latino people's needs:

"Eureka Pediatrics – totally turned around (hired three bilingual and front office staff, training bilingual assistant)-really very accessible assistance. Hired three people who are bilingual and they are the people in the front desk." -Humboldt County

"...another big thing in health needs- need mental health counseling – no one in community right now. Need family counselors because of domestic violence. We need bilingual people." -Humboldt County

Another way to better meet the health needs is to increase health care coverage and have more providers:

"Require employers to provide health care coverage for their employees and have providers be required to provide interpreters if their patients are monolingual and then they can access services. Increase number of providers who are willing to provide services to uninsured or Medi-Cal coverage." -Mendocino County "Need more dentists." -Humboldt County

"Health insurance for adults that they can afford to pay. More Spanish-speaking doctors and personnel in offices. Here dental doctors don't take Medi-Cal – clinics only. More dentists, optometrists take Medi-Cal patients. Specialists don't take Medi-Cal." -Mendocino County

This person noted the need for greater communication in Spanish with the Latino population as a means to meet their health needs:

"Dispersing information to community. Nothing in radios or newspaper that inform Latino Community. Could use more advocacy in agencies in Eureka." -Humboldt County

Best Way to Engage With Latino Population

To determine steps for future engagement with Latinos in the region, the question was asked, "What would be the best way to hear more on the topic from the Latino people (individually, in a group, surveys, etc.)? What would you recommend?"

This question was coded into eight different categories: Community Groups, Churches, Speak Spanish, Flyers/Survey, Meeting Places, Individually, Talk to Latinos and provide food/childcare, Other (Table 9).

Health Issue Themes	Coded Description of Themes
Community Groups	Paso a Paso, adult schools, Nuestra Casa, Head Start community clinics, community events sponsored by groups
Meeting Places	Specific places Latinos gather, community events
Churches	Churches, mass, pastors
Speak Spanish	Speak Spanish, translators, Spanish radio
Flyers/Survey	Flyers, brochures, survey in Spanish
Talk to Latinos & Provide Food/Childcare	Hold a meeting and provide food, activities for children, toys
Individually	Individually, one-on-one, in person
Other	Soccer, outreach, come together, create a welcome environment

Table 9: Coded Description of Best Way to Engage with Latino Population

The top three responses to this question were:

- 1. Community Groups
- 2. Meeting Places
- 3. Churches



Figure 26: Best Way to Engage with the Latino Population

Within the Redwood Coast Region, the most common response was Community Groups accounting for close to one-third (32.1%) of all responses. This was followed by Meeting Places, representing 17.9 % of total responses. The third most common answer to this question was Churches representing 12.9% of all responses. This was closely followed by the response Speak Spanish that represented 12.1% of all responses.

Some diversity in patterns occurs across the individual counties (see Appendix A: Table A21 for specific county-level data). For example, a much greater percentage in Humboldt County at 40.7% and Mendocino County at 31.1% focused on Community Groups, versus Del Norte County at 16%.

In Del Norte County, responses for the category Meeting Places accounted for 32% of total responses, compared to Mendocino at 18% and Humboldt at 11.1%, which were much less.

What this suggests is that different meeting strategies would be more appropriate and effective in some counties versus others.

Church was not mentioned by anyone in Del Norte County, but was a viable answer representing 16.7% of responses in Humboldt and 14.8% of responses in Mendocino County.

Key informants provided suggestions about connecting with Latinos:

*"Identify community leaders – Spanish radio stations… No-mass survey/ identify community leaders and right people to talk to. Sit down with them. Be innovative" -*Humboldt County

"Groups would be good, just a moms and kids group with incentives that create a conversation like while you're stuffing tamales and prompt the group with a question and sit back and listen." -Humboldt County

"Groups, Spanish speaking is better, sometimes things get lost in translation." -Del Norte County

"...contact business leaders. Find a few key people in Hispanic community who can be your champions. Being in Spanish or having a translator. Latino people involving the church." -Humboldt County

The notion of finding existing gathering spots and existing hubs of social activity and building upon those is a very strong option for future outreach efforts. This is where the churches play a major role, especially in rural areas for Latinos:

"Build up on something that already exists." -Mendocino County

"Like pastors more established in community. Find out from them who to connect with that may be newer. During interview, children will come, be prepared with toys and offer food. Have someone from Latino community who would be child care person (from Paso a Paso). Group meetings better than individuals." -Humboldt County

Latinos' literacy levels, especially amongst newer immigrants, is a factor to be considered when thinking about outreach and further community engagement:

"The literacy levels are not constant there is generally someone in each family with an adequate level of literacy. They are grouping in generally family units and there is someone within the grouping with a good literacy level." -Mendocino County

"Group surveys are difficult due to literacy, should be conducted in English and Spanish" - Del Norte County

Discussion and Conclusion

This project drew on a variety of research methods and examined diverse sources of information related to Latinos and health. There are some clear patterns and observations that emerge from these analyses:

- Latinos are a diverse group
- Health Access is an issue for Latinos
- Language is a barrier to meeting health needs
- Literacy is a barrier to meeting health needs
- Immigration status is an issue
- Media portrays negative stereotypes of Latinos
- Nutrition, diet, exercise and diabetes are all major Latino health issues
- Lack of health insurance is a major issue for Latinos
- Establishing trust is key to meeting Latinos health needs
- Cultural sensitivity and education for the community
- Latinos exhibit similar spatial mobility patterns within the region

Latinos Are a Diverse Group

When considering Latinos, it important to distinguish between the longtime Latino residents who are more integrated into local business community, and the newer Latino immigrants who may not be as well integrated. Not all Latinos are the same; major differences exist between the newcomers and those who have lived in the area for a longer time. Programs and providers should be aware of this as they create outreach efforts for Latinos.

Health Access is an Issue for Latinos

Accessing health care emerged as a major issue in this study. The access issue involves a complex mix of factors, ranging from low income, to lack of insurance, to lack of Spanish speakers in the medical field, and lack of transportation, to fear due to immigration status. A careful consideration of Latino needs is a must for improving health access for Latinos in the region.

Language is a Barrier to Meeting Health Needs

The ability to speak Spanish is the first step towards communicating with Latinos who are not English speakers. It is a means to not only establish understanding but also trust with a population that often experiences discrimination in American society. In the Redwood Coast Region, steps are beginning to be taken towards providing more bilingual speakers in the health professions. Organizations that have done this have observed positive results and greater Latino involvement.

Lack of Health Insurance is a Major Issue for Latinos

This theme emerged consistently throughout the project. Latinos' lack of health insurance impacts their ability to seek and receive medical care. This issue becomes especially crucial in the areas of prevention, since many medical issues could be prevented through regular screening and visits with health care providers. This issue is very critical for Latino children. Without insurance, people end up waiting until they have an emergency and then seek medical care. After one or two experiences with the cost of emergency room care, a further fear of the American health system is created, since people cannot afford to pay. Culturally Latinos are very proud, and want to pay for services they receive.

Literacy is a Barrier to Meeting Health Needs

Simply providing educational materials in Spanish may not be enough, if the population cannot read. The Rural Latino Project highlighted the issue of illiteracy as a major barrier. Newer immigrant Latino families often come to rely on their children who can read and speak English to translate for them. This places undue burden on children. The areas of both Spanish and English literacy are areas that could be improved in our region.

Latino Immigration Status is an Issue

Immigration status is an issue because it affects so many aspects of Latinos' life and experience within the Redwood Coast Region, especially health. Immigration status negatively impacts Latinos' health care access, often because immigrants do not have the appropriate paperwork. Not having the right paperwork can result in people not getting a driver's license (a major form of identification) which is often needed for services. Additionally, there is a fear around deportation that permeates being an immigrant who has not yet achieved permanent immigration status in the United States. This creates major mental stress for families in the region. Some health organization and agencies in the region continue to provide health services to Latinos regardless of immigration status. Latinos in the region know who these groups are, and go to them for services and support.

Media Portrays Negative Stereotypes of Latinos

Our study of regional Redwood Coast uncovers a media portrayal of Latinos that highlights crime, immigration status, and community involvement. The fact that news stories focus on the negative and stereotypical (e.g. show a picture of a Mexican in the newspaper dressed in traditional dress for Cinco de Mayo) does nothing towards improving regional understanding of Latinos. In fact the focus on crime and Latinos moves towards cementing some already held negative stereotypes and fear about this population in the region.

Media portrays negative and stereotypical view of Latinos which does not help their integration into the Redwood Coast Region. There is much room for improvement in the regional media coverage of Latinos that can reflect the positive contributions of this population to the economy and health of the region.

Nutrition, Diet, Exercise and Diabetes are Major Latino Health Issues

Nutrition, diet, exercise and diabetes are issues tied to both culture and economic status. In the past, Latino immigrants may not have had to worry about diet and exercise if they had a more labor intensive job that involved physical exercise. It takes time to be able to exercise, and when people are working three jobs, they may not have that time, thus their health suffers. They also had a greater familial support system around them in home countries that may be absent as newer immigrants in the Redwood Coast Region. Much of the Latino population is pressed for time and money. Therefore, fast food and junk food become easy options and in some ways represent things that are "American." By eating fast food, immigrants are participating in American society in an affordable way.

Establishing Trust is Key to Meeting Latinos Health Needs

Within Latino culture, social interaction is built upon trust. Findings show that Latinos will go to people and places for health care that they trust. Trust is established through positive interaction and the chance for continued interaction over time. There are groups and organizations in various communities throughout the region that have gained the trust of the Latino population. Trust is often established with Latino based networks and Latino focused organizations, and with key people who have proven they are champions of the Latino people. Other organizations and agencies can learn from the groups who have established trust how to best accomplish this goal.

Cultural Sensitivity and Education for the Community

In the Redwood Coast Region and within the health community there is a great need to better understand the culture, values and strengths of the Latino population. It is a group that brings much to the region, but rarely gets recognized for these contributions. There is a need to establish a greater cultural awareness of Latinos and their diverse composition throughout the medical and broader community.

Latinos Exhibit Similar Spatial Mobility Patterns within the Region

This project examined the spatial mobility patterns related to food, medical care, dental care, spiritual and religious activities, food services and recreation. Latino mobility patterns cluster around areas of higher Latino population density.

Groundtruth Data: Latino Community Feedback on Project

On May 9, 2008 the preliminary findings from this report were shared with the members of LatinoNet in a presentation held at their monthly meeting at the Eureka Adult School /Newcomer Center in Eureka, located in Humboldt County, California. Because this location is a hub of activity for the Latino population in Humboldt County, it was chosen as a culturally appropriate venue to premier the research findings in order to receive valuable community feedback.

The Latino Community Provider Network or "LatinoNet" is a community coalition of over 150 members representing over 50 agencies from areas such as health care, social services, education, business and children's services (LatinoNet 2008). The mission of the LatinoNet is "to improve the quality of life for Spanish-speaking families on the North Coast" (LatinoNet 2008). LatinoNet is a network of providers in Humboldt County that serves as a resource, information exchange and Latino community empowerment organization. The members work together to provide assistance and help to Latinos in Humboldt County. Membership in the network consists of both Latinos and non-Latinos who are dedicated to the mission of the organization.

Community feedback was also gathered at the time of the presentation in the form of a community evaluation. All LatinoNet members in attendance completed an evaluation of the presentation (N=19). The following questions were asked in the evaluation:

- 1. Did you learn anything from this presentation?
- 2. What information from the presentation did you find most useful?
- 3. Would you like there to be further research on Latinos in the region?
- 4. What is the one question related to Latinos that you would like to see investigated in the future?
- 5. Who else should we share our CCRP Rural Latino Project research findings with?

This section provides a summary of responses to each question.

Learn

The first question asked was, "Did you learn anything from this presentation?" Nineteen people completed this evaluation form. All nineteen people (100%) who attended the presentation answered "yes," they learned something.

Useful Information

The question was asked, "What information from the presentation did you find most useful?" Answers were coded into five categories, Maps and Statistics, Health Needs of Latinos, Communication with Latinos, Media Perceptions, and Other (Table 10).

The information that people found most useful from the presentation was the information about the Health Needs of Latinos, which accounted for 34.8% of responses. Over one-fourth (26.1%) of responses focused on Maps and Statistics as the most useful information from the presentation. Communication with Latinos (17.4%) was the third most common response.

Table 10: What information from the presentation did you find most useful?

	Ν	%
Categories		
Maps and Statistics	6	26.1
Health Needs of Latinos	8	34.8
Communication with Latinos	4	17.4
Media Perceptions	3	13.0
Other	2	8.7
TOTAL	23	100.0

Other: Quality of presentation, empowerment

Note: In the above table, N refers to the number of responses related to a particular theme. Since one person can name multiple themes, the N can be larger than the number of people surveyed.



Figure 27: What was most useful from presentation (percent of responses)

Comments were made in relation to the following health needs: nutrition, health care access and diabetes. One person appreciated *"that there is an effort being made to inform ourselves and our community about the needs of our Latinos."* Another person noted, *"Information is a great resource to develop prevention/health promotion activities."*

In reference to the maps theme, one person wrote, "The maps and some stats can help us with data to include in our grant writing to funders." This highlights the usefulness of what CCRP has produced to others in the larger community. Another person commented, "Very powerful, useful and functional information on maps."

The audience seemed to appreciate that our project highlighted suggestions for communication and engagement with the Latino community. One person noted she appreciated the "best way to

hear from Latinos." Another noted that our presentation *"identified means of communicating with Latinos.*" LatinoNet members were able to take away something usable and concrete from the May 9, 2008 presentation.

One of the interesting Other comments related to the theme of empowerment, *"The knowledge that this research center exists to, as you said, 'empower' our community."* This highlights the need for community-driven research that can serve to strengthen the rural area through applied research.

Future Research with Latinos

The question was asked, "Would you like there to be further research on Latinos in the region?" The majority (89.5%) of the community members answered "yes," one person (5.3%) answered "no," one person did not provide an answer (Table 11).



Figure 28: Desire for future research on Latinos in the region (percent of responses)

Table 11: Would you like there to be further research on Latinos in the region?

Categories	Ν	%
Yes	17	89.5
No	1	5.3
No Answer	1	5.3
TOTAL	19	100.0

Note: In the above table, N refers to the number of responses related to a particular theme. Since one person can name multiple themes, the N can be larger than the number of people surveyed.

Future Investigation Responses

To guide future research efforts on Latinos in the region, the survey asked, "What is one question related to Latinos that you would like to see investigated in the future?" The answers to this question were coded into six categories: Health Topics, Integrate and Empower Latinos, Differences between New and Established Latinos, Education, Communicating/Reaching Out to Latinos, and Other (Table 12).

The most common questions people would like to see investigated relate to Health Topics which accounted for 34.8% of responses. The next most common theme was Integrate and Empower Latinos that accounted for 17.4% of responses.

Table 12: Questions for future investigation

	Ν	%
Categories		
Health Topics	8	34.8
Integrate and Empower Latinos	4	17.4
Differences between New & Established		
Latinos	3	13.0
Education	2	8.7
Communicating/Reaching Out to Latinos	3	13.0
Other	3	13.0
TOTAL	23	100.0

Note: In the above table, N refers to the number of responses related to a particular theme. Since one person can name multiple themes, the N can be larger than the number of people surveyed.



Figure 29: Topics for Future Research (percent of responses)

The Health Topics questions for future investigation ranged from "prevalence of dental problems and access to dental care and problems faced" to, "Do folks negotiate fees for health care, e.g. are some providers willing to charge less for the uninsured?" Another person noted, "I would like to deepen my understanding of how immigration status influences their physical and mental health."

LatinoNet attendees also were interested in questions related to Integration and Empowerment for Latinos. One person asks, "What do Latinos need to feel more included in the wider community? How can community groups help?" Another person noted, "In general more questions directly to Latinos. Expand the voice of Latinos. Like idea presented in the discussion."

It was interesting that some LatinoNet attendees want to see a research project in which newcomer Latinos are compared with Latinos who have lived in the area for a longer period of time (13.0% of responses). One person noted, "I would like to see this study done with just Latinos, but two groups: Newcomers to the area and established members of our community (Latinos)."

The theme Communicating/Reaching Out to Latinos focused mostly on how to use radio to reach Latino population. One person noted, "How to reach the community with information, what form, be it radio, television, etc." Another person noted the "value of radio messages, brochures in Spanish."

Sharing Project Findings

To understand how to better proceed in sharing our research findings with the community, the following question was asked, "What else should we share our CCRP Rural Latino Project research findings with?" Answers to this question were categorized into six themes: Media, Public Health/County Agencies, Schools/Educators and Youth, Board of Supervisors/Local Government, Medical Providers, and Other (Table 13).

Table 13: Who else should we share our CCRP Rural Latino Project research findings with?

Categories	Ν	%
Media	7	35.0
Public Health/County Agencies	4	20.0
Schools/educators/youth	3	15.0
Board of Supervisors/Local Government	3	15.0
Medical Providers	1	5.0
Other	2	10.0
TOTAL	20	100.0

Other: Spanish speaking only community, Humboldt Council of the Blind

Note: In the above table, N refers to the number of responses related to a particular theme. Since one person can name multiple themes, the N can be larger than the number of people surveyed.


Figure 30: Who else should CCRP share this information with (percent of responses)

The most common answer was to share information with the Media which accounted for 35% of responses. The second most common answer was Public Health and County Agencies, accounting for one-fifth (20%) of all responses. People also felt that our information should be shared with Schools/Educators and Youth (15% of responses) and Board of Supervisors and Local Government (15% of responses). It was also suggested that we share our information with the "Spanish speaking only community" and the "Humboldt Council of the Blind," who felt that they could benefit from "tactile maps."

Study Limitations

This study faced several limitations. The project was limited by the number of key-informant interviews (N=54). Also, this study involved a mix of both Latinos and non-Latinos, and therefore presented a mixed ethnic view of Latino issues. Ideally, future research on this topic would focus on the Latino community alone and account for the diversity within the Latino population. This notion was supported in the community groundtruth session that we held in Humboldt County with members of the LatinoNet group and general interested community members.

Future research efforts could explore the following issues:

- 1. A more in-depth examination of Latino health issues in the region, considering limited economics and transportation issues faced by rural Latinos.
- 2. Develop a research project to examine issues faced by both new and established Latinos in the region.
- 3. Groundtruth (gather community input) on the findings from this study with communities in both Mendocino and Del Norte Counties.

Policy Suggestions

This section presents some policy recommendations that came from an overall analysis of all the data considered in the CCRP Rural Latino Project. Additionally, they involve ideas generated from the Community Groundtruth session in Humboldt County.

- 1. Increase "mobile" medical service to Latinos
- 2. Improve Latino access to health insurance
- 3. Improve bilingual capability
- 4. Build community coalitions to strengthen and empower Latinos
- 5. Encourage regional media to provide a broader view of Latinos

Increase Mobile Medical Service to Latinos

One way to improve Latinos access to health care and services is to bring it to them. In rural areas, people often have to travel far distances to receive health care. Transportation is an issue for many Latino families, and the increasing price of gas as well limits many people's abilities to travel to receive health care. The mobile medical model, currently employed in Humboldt County through the Mobile Medical Clinic, is a model that could be replicated and expanded throughout the region. One idea might be to bring mobile medical care to places where Latinos already frequent and gather, such as churches, fiestas and places where Latinos purchase food. This approach would build upon already existing patterns of mobility within the community and would make it easier to reach Latinos by tapping in to places where they already go on a regular basis.

Improve Latino Access to Health Insurance

Health insurance has been a consistent challenge for Latinos in the region. A solution needs to be found that expands beyond the traditional Medi-Cal safety net that is sustaining so many of the Latino immigrant families in the region. The more that Latinos can receive health insurance through their employment, the better it is for this population. Perhaps this would be an issue that Latino oriented groups and networks could focus on, working with employers and the business community in the region to find a solution to the health insurance dilemma for Latinos. Furthermore, regional efforts to work towards establishing universal health care coverage for all children are to be applauded and supported.

Improve Bilingual Capability

Health provider, organizations and social service agencies that have hired bilingual staff have seen very positive results in terms of Latino use of their services. Having staff, providers and doctors who speak Spanish is key to meeting the health needs of the Latino population. Many organizations within the Redwood Coast Region have begun to do this, and should be supported to continue these efforts into the future.

Build Community Coalitions to Empower Latinos

In each of the three counties, there exist community groups and organizations that are effectively working with Latinos. The goal now will be to expand the networks of these groups throughout individual counties and the region to strengthen the support system for rural Latinos. These community groups and organizations best understand how to communicate with Latinos and have gained their trust. Medical organizations that have not yet effectively integrated Latinos can work with these Latino-oriented community networks and groups to create the most effective and appropriate outreach efforts and services to Latinos. Additionally, perhaps these coalitions could provide education and cultural awareness for the larger community about Latinos because they are not well understood by the non-Latino population.

Encourage Regional Media to Provide a Broader View of Latinos

This project's analysis of regional portrayal of Latinos highlighted the need for broader and more diverse media coverage of Latino people in the region. This could be accomplished by hiring culturally appropriate staff at the newspapers and existing newspapers working with Latino based coalitions and organizations in the community who are aware and already connected to regional Latino populations. Instead of being limited to stereotypes of Latinos, the media can highlight the diversity of the Latino community and recognize the contributions that this group brings to the Redwood Coast Region.

Final Thoughts

The findings in the Rural Latino Project provide baseline data on Latino health issues for the region. Addressing Latino health needs using a spatial perspective facilitates a clear understanding of how and where providers, policy officials, and community groups can work to better serve Latino needs. Top issues of concern to Redwood Coast rural Latino communities are very similar to those of Latinos in other rural areas throughout the nation – particularly in the Midwestern states. Research from rural lowa, Kansas, Nebraska, & Minnesota illustrates a growing Latino population concerned with health issues such as access and immigrant status, like the populations of rural Northern California (Blewett et al. 2003). Furthermore, similar to other studies, we found that Latinos face limited access to health care due to inability to pay (Probst et al. 2004; Smith et al. 1996), lack of insurance (Greenwald et al. 2005; Blankenau et al. 2000), and difficulty receiving bilingual services in a rural area (Snowden et al 2006; Stable Perez 1997). Similar to other studies, this project found that Latinos are also most likely to receive their health care through community clinics (Greenwald et al 2004).

Finally, mapping technology such as that used in the Rural Latino Project is beginning to be adopted in social and health sciences, and is effective in displaying patterns of people and place. Sociospatial research can provide a better understanding of people and their context within place. Sociospatial means giving an active consideration to space, place and social indicators in a holistic fashion (Steinberg and Steinberg 2008). It can also serve as a strategic means for targeting health care strategies to address critical issues for growing populations in particular geographic areas (Gesler et al. 2004). The key to meeting the health needs of rural Latinos is to take time to first understand who they are as a people, and how they live in a particular place. The next step is to take this information and move forward in place-based coalitions sharing resources, ideas and strategies for action and improving health needs for Latinos in the Redwood Coast Region.

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Appendix A

Humboldt Mendocino **Del Norte** Region THEMES Ν % Ν % Ν % Ν % 37 58.7 2 Immigration 27 37.5 12.5 66 43.7 Crime 7 11.1 20 27.8 5 31.3 32 21.2 Latinos In Local Community/State 10 15.9 22.2 25.0 30 19.9 16 4 Arts/Cultural 7 2 11.1 4 5.6 12.5 13 8.6 Health 2 3.2 3 4.2 1 6.3 6 4.0 Agriculture/Farmworkers 2 2 4 2.6 0 0.0 2.8 12.5 TOTAL 63 100.0 72 100.0 16 100.0 **151 100.0**

Table A1: Content Analysis of Media Themes

Table A2: Ethnicity of Interviewees

	Reg	gion
Category	Ν	%
Latino	31	58
White	10	19
Multiple Ethnicities	9	16
Other	4	7
TOTAL	54	100

Table A3: Gender of Interviewees

		Region
Category	Ν	%
Male	13	24.1
Female	41	75.9
TOTAL	54	100.0

	Hum	boldt	Mende	ocino	Del N	lorte	Region	
Category Less than 15	Ν	%	Ν	%	Ν	%	Ν	%
Percent	7	36.8	1	5.0	5	31.3	13	23.6
15-34 Percent	2	10.5	1	5.0	1	6.3	4	7.3
35-49 Percent	0	0.0	4	20.0	2	12.5	6	10.9
50-75 Percent More than 75	0	0.0	4	20.0	3	18.8	7	12.7
Percent	7	36.8	10	50.0	4	25.0	21	38.2
Don't Know TOTAL	3	15.8	0	0.0	1	6.3	4	7.3
RESPONSES	19	100.0	20	100.0	16	100.0	55	100.0

Note: Informants could provide multiple answers to this question

Table A5: Are the health needs of the Latino people in your community being met?

	Hum	oldt	Mendo	cino	Del N	lorte	Re	gion
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Yes	2	10.0	7	36.8	8	61.5	17	32.7
No	18	90.0	12	63.2	5	38.5	35	67.3
TOTAL RESPONSES	20	100.0	19	100.0	13	100.0	52	100.0

Table A6: Why are or aren't health needs being met?

	Hum	boldt	Mendoo	cino	De	Norte	Region	
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Language barriers	6	23.1	3	15.0	4	28.6	13	21.7
Lack of resources	8	30.8	8	40.0	1	7.1	17	28.3
Immigration issues	6	23.1	0	0.0	1	7.1	7	11.7
Lack of insurance	2	7.7	6	30.0	3	21.4	11	18.3
Other	2	7.7	2	10.0	1	7.1	5	8.3
Needs met	2	7.7	1	5.0	4	28.6	7	11.7
TOTAL								
RESPONSES	26	100.0	20	100.0	14	100.0	60	100.0

	Humboldt		Mendo	ocino	Del N	lorte	Region	
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Yes	19	95.0	17	85.0	7	50.0	43	80.0
No	1	5.0	3	15.0	7	50.0	11	20.0
TOTAL	20	100.0	20	100.0	14	100.0	54	100.0

Table A7: Is Language an Issue for Latinos' Meeting Health Needs?

Table A8: How far do Latino people in your community typically travel (time/miles) to meet their health needs?

					Del			
	Humboldt	%	Mendocino	%	Norte	%	Region	%
Category Name	N	%	N	%	Ν	%	N	%
5 Minutes/5 Miles and Under	3	7.9	0	0.0	0	0.0	3	3.2
5 to 30 Minutes/5 to 30 Miles 30 Minutes to 2 Hours/ 30 to 80	17	44.7	18	51.4	10	45.5	45	47.4
Miles Out of Area/ More than 200	6	15.8	5	14.3	2	9.1	13	13.7
Miles	6	15.8	4	11.4	5	22.7	15	15.8
Other	5	13.2	3	8.6	2	9.1	10	10.5
Depends/ Varies	1	2.6	5	14.3	3	13.6	9	9.5
TOTAL	38	100.0	35	100.0	22	100.0	95	100.0

Table A9: What is the most common type of health insurance among the Latino Population?

	Hum	nboldt	Mend	ocino	Del I	Norte	Reg	gion
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Medi-Cal	12	41.4	9	40.9	6	40.0	27	40.9
No insurance	12	41.4	7	31.8	8	53.3	27	40.9
Healthy Families	2	6.9	3	13.6	0	0.0	5	7.6
Cal Kids	2	6.9	0	0.0	0	0.0	2	3.0
Private Insurance	0	0.0	3	13.6	1	6.7	4	6.1
Other	1	3.4	0	0.0	0	0.0	1	1.5
TOTAL	29	100.0	22	100.0	15	100.0	66	100.0

	Humb	oldt	Mendo	cino	Del N	lorte	Reg	gion
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Diabetes	7	14.0	8	12.1	3	9.7	18	12.2
Respiratory	2	4.0	3	4.5	0	0.0	5	3.4
Immigrant Status	3	6.0	0	0.0	5	16.1	8	5.4
Obesity/ Nutrition	8	16.0	13	19.7	4	12.9	25	17.0
Mental Health	4	8.0	3	4.5	3	9.7	10	6.8
Lack of Insurance	1	2.0	3	4.5	2	6.5	6	4.1
Environmental Health	3	6.0	1	1.5	2	6.5	6	4.1
Education/Preventive	3	6.0	3	4.5	3	9.7	9	6.1
Vision	1	2.0	0	0.0	0	0.0	1	0.7
Dental	0	0.0	2	3.0	1	3.2	3	2.0
Cancer	0	0.0	2	3.0	0	0.0	2	1.4
Access	8	16.0	12	18.2	4	12.9	24	16.3
Abuse	5	10.0	4	6.1	1	3.2	10	6.8
Other	5	10.0	12	18.2	3	9.7	20	13.6
TOTAL RESPONSES	50	100.0	66	100.0	31	100.0	147	100.0

Table A10: Of the health issues, which do you feel are most important?

Note: Informants could provide multiple answers to this question

Table A11: What are some of the things that affect health of Latino people in your community?

	Hum	boldt	Mend	ocino	Del	Norte	Re	gion
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Economics	7	13.0	7	16.7	2	8.0	16	13.2
Language/immigration status	9	16.7	2	4.8	3	12.0	14	11.6
Nutrition/exercise Lack of access/lack of health	8	14.8	6	14.3	4	16.0	18	14.9
insurance	7	13.0	7	16.7	2	8.0	16	13.2
Pesticides	3	5.6	5	11.9	4	16.0	12	9.9
Drugs/Alcohol	6	11.1	3	7.1	0	0.0	9	7.4
Cultural Isolation/Stress	6	11.1	3	7.1	3	12.0	12	9.9
Education	1	1.9	6	14.3	4	16.0	11	9.1
Dental	5	9.3	1	2.4	0	0.0	6	5.0
Other	2	3.7	2	4.8	3	12.0	7	5.8
TOTAL RESPONSES	54	100.0	42	100.0	25	100.0	121	100.0

	Hu	mboldt	Mer	ndocinc) De	Norte	Re	gion
Category	N	%	Ν	%	Ν	%	Ν	%
Clinics	40	80.0	33	82.5	19	86.4	92	82.1
Hospitals	8	16.0	7	17.5	3	13.6	18	16.1
Private Practice	2	4.0	0	0.0	0	0.0	2	1.8
TOTAL RESPONSES	50	100.0	40	100.0	22	100.0	112	100.0

Note: Informants could provide multiple answers to this question

Table A13: Where do Latinos most often go to obtain dental care?

	Hum	boldt	Men	docino	D	el Norte	Re	gion
Category	Ν	%	Ν	%	Ν	%	Ν	- %
Clinics	22	71.0	20	90.9	11	84.6	53	80.3
Hospitals	0	0.0	0	0.0	1	7.7	1	1.5
Private Practice	9	29.0	2	9.1	0	0.0	11	16.7
Mexico	0	0.0	0	0.0	1	7.7	1	1.5
TOTAL								
RESPONSES	31	100.0	22	100.0	13	100.0	66	100.0

Note: Informants could provide multiple answers to this question

Table A14: Why do Latino people go the places they do to meet their health needs?

	Hur	nboldt	Mer	ndocino	De	I Norte	Re	gion
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Affordability	13	24.5	16	23.9	6	20.7	35	23.5
Spanish Speaking & Bicultural Providers	8	15.1	12	17.9	6	20.7	26	17.4
Accept Medi- Cal/Healthy Families	1	1.9	10	14.9	5	17.2	16	10.7
Accessible/Limited Options	14	26.4	5	7.5	3	10.3	22	14.8
Uninsured	0	0.0	4	6.0	0	0.0	4	2.7
Emergency	1	1.9	2	3.0	2	6.9	5	3.4
Past History/Comfort Level	7	13.2	2	3.0	4	13.8	13	8.7
Programs and Services	3	5.7	6	9.0	1	3.4	10	6.7
Other	6	11.3	10	14.9	2	6.9	18	12.1
TOTAL	53	100.0	67	100.0	29	100.0	149	100.0

Table A15: Within the Latino community, who do Latinos go to when they have a health issue?

	Humboldt		Mendocino		Del Norte		Reç	gion
	Ν	%	Ν	%	Ν	%	Ν	%
Category Name								
Specific Community Members Latino Focused	21	30.4	12	23.5	13	39.4	46	30.1
Programs/Organizations Health Clinics, Centers and	11	15.9	12	23.5	2	6.1	25	16.3
Hospitals	21	30.4	10	19.6	10	30.3	41	26.8
Primary Care Provider	3	4.3	4	7.8	3	9.1	10	6.5
Churches/Pastor & Healer	4	5.8	2	3.9	0	0.0	6	3.9
Bi-Lingual Providers	3	4.3	7	13.7	3	9.1	13	8.5
Other	6	8.7	4	7.8	2	6.1	12	7.8
TOTAL RESPONSES	69	100.0	51	100.0	33	100.0	153	100.0

Note: Informants could provide multiple answers to this question

Table A16: Why do Latinos go to particular people when they have a health issue?

	Humboldt		Mendocino		Del Norte		Reg	ion
	Ν	%	Ν	%	Ν	%	Ν	%
Category Name Language/Cultural								
Awareness	12	24.5	18	28.6	11	42.3	41	29.7
Trust/Established Relationship	13	26.5	21	33.3	10	38.5	44	31.9
Knowledgeable about								
Resources/ Information	8	16.3	6	9.5	2	7.7	16	11.0
Low Cost/Accessible	9	18.4	11	17.5	2	7.7	22	15.9
Other	7	14.3	7	11.1	1	3.8	15	10.
TOTAL RESPONSES	49	100.0	63	100.0	26	100.0	138	100.

Table A17: Places frequented by Latinos for Food Services

	Humb	oldt	Meno	docino	Del	Norte	Regi	on
Category Name	Ν	%	Ν	%	Ν	%	Ν	%
Grocery Outlets	21	37.5	21	45.7	5	15.6	47	35.1
Commercial Grocery Stores	17	30.4	17	37.0	21	65.6	55	41.0
Hispanic/Mexican Groceries	11	19.6	6	13.0	5	15.6	22	16.4
Community Food Groups	7	12.5	0	0.0	1	3.1	8	6.0
Other	0	0.0	2	4.3	0	0.0	2	1.5
TOTAL RESPONSES	56	100.0	46	100.0	32	100.0	134	100.0

Note: Informants could provide multiple answers to this question

Table A18: Places frequented for Religious/Spiritual by Latinos

	Humboldt Mendocino		Del	Norte	Region			
Category	Ν	%	Ν	%	Ν	%	Ν	%
Catholic	25	73.5	19	51.4	12	85.7	56	65.9
Jehovah Witness	1	2.9	4	10.8	0	0.0	5	5.9
Baptist	2	5.9	1	2.7	0	0.0	3	3.5
Other Christian	6	17.6	13	35.1	2	14.3	21	24.7
TOTAL RESPONSES	34	100.0	37	100.0	14	100.0	85	100.0

Note: Informants could provide multiple answers to this question

Table A19: Places frequented for Recreation by Latinos

	Humb	oldt	Men	docino	Del	Norte	Regio	on
Category	Ν	%	Ν	%	Ν	%	Ν	%
Nature-rivers and beaches	10	25.0	11	22.9	1	4.5	22	20.0
Parks	11	27.5	10	20.8	0	0.0	21	19.1
Mall	4	10.0	2	4.2	0	0.0	6	5.5
Movies	5	12.5	3	6.3	3	13.6	11	10.0
Soccer	2	5.0	9	18.8	6	27.3	17	15.5
Halls/Community Centers	8	20.0	12	25.0	6	27.3	26	23.6
Other	0	0.0	1	2.1	6	27.3	7	6.4
TOTAL RESPONSES	40	100.0	48	100.0	22	100.0	110	100.0

Table A20: How to better meet the health needs of the Latino people in your area?

	Humboldt		Mendocino		Del Norte		Rec	gion
	N	%	N	%	N	%	N	%
Category Name								
More Training, Education & Programs	15	28.8	20	31.3	4	13.3	39	26.7
More Latino Community Involvement	6	11.5	3	4.7	7	23.3	16	11.0
More Services, Resources and Funding	5	9.6	3	4.7	2	6.7	10	6.8
Increased Health Care Coverage & More Providers More Bilingual, Bicultural	2	3.8	17	26.6	4	13.3	23	15.8
Providers and Staff	14	26.9	6	9.4	4	13.3	24	16.4
Resolve Immigration Issues	3	5.8	3	4.7	5	16.7	11	7.5
Transportation	1	1.9	3	4.7	2	6.7	6	4.1
Other	6	11.5	9	14.1	2	6.7	17	11.6
TOTAL RESPONSES	52	100.0	64	100.0	30	100.0	146	100.0

Note: Informants could provide multiple answers to this question

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		0/	Mandaaina	0/	Del	0/	Dee	
	Humboldt	%	Mendocino	%	Norte	%	Reç	gion
Category Name Community	Ν	%	Ν	%	Ν	%	Ν	%
Groups	22	40.7	19	31.1	4	16.0	45	32.1
Churches	9	16.7	9	14.8	0	0.0	18	12.9
Speak Spanish	6	11.1	6	9.8	5	20.0	17	12.1
Flyers/Survey	2	3.7	4	6.6	4	16.0	10	7.1
Meeting Places	6	11.1	11	18.0	8	32.0	25	17.9
Individually	4	7.4	2	3.3	1	4.0	7	5.0
Talk to Latinos & provide								
food/childcare	4	7.4	3	4.9	3	12.0	10	7.1
Other	1	1.9	7	11.5	0	0.0	8	5.7
TOTAL	54	100.0	61	100.0	25	100.0	140	100.0

Table A21: What are the best ways to hear more from the Latino people?

Table A22: What information from the presentation did you find most useful?

	Ν	%
Categories		
Maps and Statistics	6	26.1
Health Needs of Latinos	8	34.8
Communication with Latinos	4	17.4
Media Perceptions	3	13.0
Other*	2	8.7
TOTAL RESPONSES	23	100.0

*Other (Quality of presentation, perceptions)

Note: Informants could provide multiple answers to this question

Table A23: Would you like there to be further research on Latinos in the region?

Categories	N	%
Yes	17	89.5
No	1	5.3
No Answer	1	5.3
TOTAL RESPONSES	19	100.0

Table A24: What is one question related to Latinos that you would like to see investigated?

	Ν	%
Categories		
Health Topics	8	34.8
Integrate and Empower Latinos	4	17.4
Differences between New & Establish Latinos	3	13.0
Education	2	8.7
Communicating/Reaching out to Latinos	3	13.0
Other*	3	13.0
TOTAL	23	100.0

*Other (leadership, assistance with court system &child custody, just focus on Latinos only)

Table A25: Who else should we share our CCRP Rural Latino Project research findings with?

	Ν	%
Categories		
Media	7	35.0
Public Health/County Agencies	4	20.0
Schools/educators/youth	3	15.0
Board of Supervisors/Local Government	3	15.0
Medical Providers	1	5.0
Other*	2	10.0
TOTAL RESPONSES	20	100.0

*Other (Spanish speaking only community, Humboldt Council of the Blind) Note: Informants could provide multiple answers to this question