

Culture Brief: The Intersections of Culture, Health, and Systems Within Poder Popular

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INTRODUCTION

This is the first in a series of three briefs discussing overarching themes framing Poder Popular (Poder). The briefs will focus on culture and health, public policy, and initiative management. The purpose of this first brief is to frame and explore examples within Poder of the intersection between culture, health, and systems (Figure 1, page 2). Creating effective health-related interventions by those involved in community building, policy reform, grassroots organizing, and health and social services provision requires an understanding of the interrelationships of cultural and contextual factors. The lessons learned presented in this brief may provide insight to those working with diverse ethnic and socio-economic groups with ties across national boundaries. These factors will become more important as economic and political constructs become increasingly globalized.

It is important to define terms in any discussion. For this brief, the following definitions will be used for culture, system, and health. **Culture**, as used in this context, is created over time through symbolic interactionism as people validate the past, construct the present, and look toward the future. It is because people share perspectives and interact that the continuity of a social group is possible. "The beliefs, values, and prescribed behaviors of a culture are learned through traditions and transmitted from generation to generation" [13].

The use of the term **system** is grounded in the work of Foucault who defines the social apparatus as "a system of relations that can be

established between a heterogeneous ensemble of elements consisting of institutions, laws, administrative measures, scientific statements, and philosophical propositions...a social apparatus is grounded in a particular historical period and responds to an urgent need...thus the apparatus has a strategic function which is related to power" [8]. Navigating the system specifically refers to the ability of individuals and groups to interact with public and private institutions to obtain resources. Finally, as defined by the World Health Organization, "**health** is not only the absence of infirmity and disease but also a state of physical, mental and social well-being" [23].



While considerable research has focused on the influence of cultural factors on individual health seeking behaviors and health outcomes, less has related to the intersection of culture and population health, with a view to system-wide issues [1, 11,16]. For example, the issue of migration and the unique health challenges of immigrant populations highlight the interdependence of health, culture, and political and economic realities at local,

regional, and transnational levels. Examples from the Poder model demonstrate how, with intentionality, culture and health issues can intersect within these larger system-wide factors.

When discussing culture, three important considerations emerge: language as a common symbol, youthfulness of the population, and the importance of creating a sense of belonging [5]. Finally, an example of how these cultural considerations intersect with the larger system is demonstrated through the use of *promotores comunitarios* within the Poder model.

THE FRAMEWORK

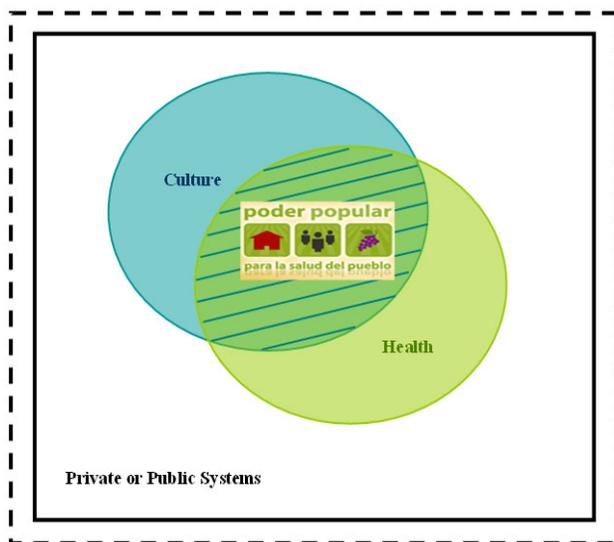


Figure 1 – Intersection of Health, Culture & Systems [5]

In Figure 1, the outer square with the broken line depicts the larger U.S. and cross-border context (the larger political, social, and economic constructs) while the inner square with the solid line represents the system in which Poder is occurring. The “culture” circle represents cultural aspects of the community and the “health” circle represents the health issues/status of the population. The striped area where the circles overlap represents the Poder model. If this figure is viewed on three planes, then cutting through the striped section blends the imperatives of the *Latino* culture (e.g., the centrality of language and sense of

belonging), the healthy communities strategy (e.g. Poder model), interaction with a particular system (e.g., public health department or Farm Bureau), and the larger environmental contexts such as U.S. migration policies and/or economic conditions in Mexico. Shaping and understanding the outcomes of these interventions while incorporating a contextual analysis with the goals of a health-related intervention are crucial.

LATINOS IN CALIFORNIA

“*Latinos*” is a political term used to designate a heterogeneous Caribbean and Latin American population sharing a historical background and cultural perspectives. In California, Mexicans comprise the largest *Latino* group [1,22]. A shared border, agribusiness expansion, and a sustained political, economic, and social crisis in Mexico all contribute to the growing representation of Mexicans in California. Over 80% of all agricultural workers in California are Mexican immigrant men [3,5].

In the early 1980s, many Central Americans migrated to the United States, primarily from El Salvador and Guatemala [7,10]. The immigrant Mexican farmworker population is becoming increasingly diverse, comprising more young members of indigenous ethnic minorities, such as Zapotec, Mixtec, and Mayan, each of which have unique linguistic and cultural needs [3,7]. Previous studies have discussed the complexities in typifying the *Latino* identity [14,15,21]. First, *Latinos* come from various countries and are the heirs to *mestizaje* or hybrid cultures. In each country, multiple levels of development, wealth, and racial mixtures co-exist and media, tourism, migration, and translocal and transnational networks play a major role in the configuration of *Latinos’* identity(ies).

Second, to define settings as purely urban or rural is difficult because of the multiple, overlapping relationships people establish. Through the use of technology, mass media, and oral histories, urban dimensions are

increasingly brought to remote places, thus diminishing the isolation of rural communities. As well, identity is influenced by gender, class, and life cycle considerations. Finally, patterns of settlement and migration are important to understanding and working with *Latino* communities. In the two Poder intensive sites, Tulare County and Monterey County, California, these factors are mirrored with multiple waves of Mexican migrants from different areas co-existing, many retaining strong ties with their region of origin, Jalisco or Michoacán, and areas like Greenfield in Monterey County experiencing a growing number of indigenous farmworkers, e.g. Triqui and Mixtec with strong ties to Oaxaca.

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Assets and issues co-exist in these communities, and the opportunities and challenges these populations face shape their cultural and lived realities. Many families have strong ties locally and in Mexico, spiritual connections, cohesive cultural practices and have leadership roles in their communities in California and/or country of origin. There have been significant political advances by *Latinos* throughout California. In Monterey County, *Latinos* have become leaders in every venue – mayors, city council members, board of supervisors members, state legislators – leaders in every important political arena. At the same time, the lives of California's migrant farmworkers are shaped by historical racism, anti-migrant sentiment, and the globalization of capital across the U.S.-Mexico border; and, they may suffer from the effects of poverty, violence, and chemical dependency. In some new-migrant communities, e.g. some Salinas Valley communities, neighborhood in- and out-migration reaches 40 percent per year. Yet, existing within these mobile neighborhoods are

structures, sometime invisible to outsiders, spoken, unspoken, formal and informal rules, and culture- and gender-specific imperatives. Within Poder there were many examples of these considerations. For example, an *asamblea* group in the Salinas Valley consisting of women developed many of their own more gender-specific strategies for improving community health. Unfortunately, their integration into the larger mixed gender groupings of the Poder structure was difficult. *Latinos Unidos de América* (LUDA), the umbrella organization for a dozen hometown associations, has been active in Monterey County Poder efforts and brought to the larger Poder table the issues most important to these groups, which represent communities on both sides of the U.S.-Mexico border.

To build on local culture and existing structures, the Poder model incorporated an assets-based approach. Asset-based development aims to focus on the opportunities and resources within a community, as opposed to traditional development models that focus on challenges and deficits. However, the concept of “assets” did not translate well into the local language and culture and initially caused tension within the initiative. A false dichotomy emerged between the concepts of assets (translated into Spanish as physical resources or capital, and lacking the notion of human or non-financial resources) and issues (defined as problems), in which partners were grouped into those focusing on the positive (assets) verses those focusing on the harsh working and living conditions of farmworkers (issues) and organizing for change. This tension was enhanced by the local farmworker organizing history and politics, and eclipsed the reality of co-existence between these two concepts, where the mobilization of resources would be focused on solving community-defined issues. During the second year, with the arrival of the Center for Collaborative Planning (CCP) and the institution of the theory into action model, tensions were reduced and common cause developed with the recognition that co-

existence of assets and issues was the reality for the community. For stakeholders developing strategies to build healthy communities, understanding these co-existing micro and macro contexts is important.

PODER POPULAR: A MODEL INTEGRATING CULTURE, HEALTH AND SYSTEMS

From its inception Poder had the vision of integrating culture and context in order to improve the overall health of agricultural communities, and integrated it into the overarching goals related to population health, community health, and systems change. How this vision was executed had mixed results. The following section discusses the three areas defined as central to this intersection of language, youthfulness, and sense of belonging.

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Language as a Common Symbol

Although there are many differences in terms of words stemming from place of origin, class, and education, language is probably the main common symbol among *Latinos* living in California. Hertzler states that "the key and basic symbolism of human beings is language. Language is a culturally constructed and socially established system, in a given society" [12]. Every conceptualization of health or illness (experienced, observed, or perceived) is accomplished through language. Eighty percent of *Latino* households are Spanish-speaking with higher percentages in rural communities [11,16]. This linguistic homogeneity has contributed to the emergence of numerous Spanish communication networks, including hundreds of newspapers and magazines, several television channels, as well as local and national radio stations. Poder partners used opportunities with the printed media to advertise in Spanish language publications,

television, and radio and use these mediums for health education and outreach.

Of special note here are the important contributions of Radio Bilingüe, a Poder strategic partner. Radio Bilingüe produced radio programs with different formats (i.e. short messages, educational, promotional, testimonials, news features, and talk shows)¹ to educate and strengthen *Latino* communities. The variety of programs provided a public forum for farmworkers to discuss their ideas, suggestions, proposals, and aspirations. Further, this medium enabled farmworkers and others in Poder to inform listeners about health promotion efforts and opportunities for participation in a culturally competent way, with a view to amplifying local voices and empowering people to collectively improve the well being of agricultural communities.

The following are two examples illustrating the key role Radio Bilingüe played in the intersection between culture, health, and systems. Radio Bilingüe's La Cultura Cura/Poder Popular Campaign offered a comprehensive approach to providing agricultural workers, community residents, and their families with timely and relevant information on how to navigate the health care system and access health services, as well as information on other relevant services. The monthly modules provided access to occupational health and safety agencies, Binational Health Week activities, and information on environmental health issues, to name a few.

In Monterey County, increased collaboration with Poder partners resulted in the first-ever meeting of farmworkers with the bilingual representative of the Agricultural Commissioner. The event drew in approximately 300 people. Radio Bilingüe recorded the event and later aired the questions and suggestions from the

¹ Examples include Linea Abierta (National), La Hora Mixteca and La Hora Triqui (binational programming)

farmworkers as part of its La Placita Bilingüe series. They also produced and aired a special two-hour live broadcast from the only statewide public hearing held by the Office of Emergency Services (OES) in Tulare County to obtain input from the public on pesticide exposure and emergency response plans. The event was organized in collaboration with OES staff and Poder strategic partners. Radio Bilingüe has been a powerful voice in the *Latino* community for a long time, and their programming is one of the most effective and instrumental example of bridging culture, health, and systems within the Poder initiative.

As alluded to previously, the translation and application of terms including “assets,” “health capitals,” and “deficits” created confusion both with community members and Poder staff. Translation without interpretation often leads to miscommunication.

In other instances, language was not always used in the most effective manner. As alluded to previously, the translation and application of terms including “assets,” “health capitals,” and “deficits” created confusion both with community members and Poder staff. Translation without interpretation often leads to miscommunication [6]. This was not merely an issue of Spanish-English translations but a loss in meaning and context; this was not community language. It took a considerable amount of time to negotiate among the various stakeholders the meaning of these terms. There was also confusion about the model’s civic structure terms like *asamblea* and *concilio*, which had different meanings in Mexico. At the same time, there were examples of culturally and linguistically appropriate use of language that resonated well with community voice in the planning processes. For example, the use of *loteria* images to discuss identification of community resources was well received. Availability of Spanish language translation at city council meetings that had not occurred before Poder was also an accomplishment led

by Poder staff, and provided an important way for community members to engage civically. As a result of one action, the Gonzales City Council in Monterey County decided that in the future both translation equipment and a translator for planning commission and city council meetings would occur.

On the other hand, the lack of translators for the indigenous non-Spanish speaking Triqui and Mixtec populations at community and/or Poder meetings did not support their full participation. It is important to note that the use of language has implications with regard to both public and private life. For example, Indigenous parents sometimes have communication issues with their children.

If the parent’s primary language is indigenous, the children’s primary language is English, and they communicate with each other in Spanish, communication problems may ensue. The communication between generations in a language which may be difficult for both, Spanish, leads to further misunderstandings creating distance between generations [7].

This is an example of how communication nuances of language need to be understood to develop culturally appropriate strategies for inclusion of these populations into community building strategies. The use of language and its impact on the public and private realms of different populations and generations is a significant consideration when examining the intersection of culture, health, and systems for health improvement and community change initiatives [5].

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Youthfulness of the Population

One in every two children in California is *Latino*. According to the U.S. Census, 48.9% of children living in California and under the age of 18 are *Latino* [22].

The Poder model at the two intensive sites did not have intentional components focused on youth. The evaluation team, as part of our visual assessment process, created a digital story with youth from Monterey and Tulare Counties. Youth self-identified what they regarded as the strengths in their communities and also identified things they would like to see improved. One young person put it this way, “We need more opportunities to become something in the future...youth are the future...” Another youth said, “...I matter because I’m a human being. A future leader; I’m optimistic, committed...” [18]. They wanted to be seen as making positive contributions to the community. Several volunteered as soccer coaches, advocates for immigrant rights, Boy and Girls Club volunteers, helped women who had experienced domestic violence, and a variety of musical enterprises. They wanted “...adults to respect me – respect me and my dignity...living in a small town is like living in a small box”. They want to be recognized not as social deviants that belong to gangs, use drugs, and engage in violent behavior, though they acknowledged that some of their fellow youth do have those behaviors.

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All agreed that they needed more “fun things to do” and indicated that they have “nothing to do”, “it’s boring,” “a ghost town” and need more places to hang out with friends. They would like empty buildings put to better use. They would like have more cultural events and art displays and would like to help plan such events. The people they turn to the most for support were teachers, family, and friends. Their dreams for the future were having a community that was safe, poverty was reduced, and lots of fun art, music and cultural events – a place where people could come together” [18].

The voice of youth – particularly in these immigrant communities where youth comprise a significant percentage of the population – should be intentionally integrated into community building efforts. Through the visual assessment process, youth were identified as leaders, community participants, and visionaries. Their unique contribution and culture are vital components of the communities they comprise.

Sense of Belonging

As discussed above, language and identity inform sense of belonging. Sense of belonging, in turn, influences one’s desire and/or capacity for civic engagement. This is especially relevant in large immigrant communities where legal status, ethnicity, language, culture, and class are strong influences [9]. Strategies for building healthy *Latino* communities require developing interventions that are grounded in these cultural strengths and at the same time take into consideration the challenges of the larger political and economic context.

The sense of belonging for Mexican immigrants goes beyond the geographic limits of the border. Even though the migratory process interrupts the proximity to their homeland, people find mechanisms to keep connected. The separation imposed by the controlled circulation of individuals across the border (mainly for those who do not have the needed documentation to do so in a regular manner) has created a need to reinvent venues to sustain relationships with their communities of origin.

Cultural resiliency plays a major role in both sides of the migrant stream. People find mechanisms to strengthen their ties, vis a vis adversity, and to confront unfair regulations and restrictive socio-political mechanisms of control. For instance, a recent study conducted by the Mexican Population Council (CONAPO,

for its Spanish acronym)² documents that 56% of Mexican immigrants in the U.S. call their families at least once a week; and 31.7% do this at least every two weeks. Also, the “absentees” make themselves present by substantially contributing to the household and local economies. In 2007, Mexican immigrants sent to Mexico \$27 million in remittances, making this the third source of income to the country.

Linkages between communities of origin and communities of destination exists on many dimensions including continuation of “costumbres” (customs/traditions and practices within a culture), direct linkages across national borders through telecommunications, friends/relatives, or in-out migration of entire families. The complexities are many and varied and this brief will only touch on a few examples.

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The emergence of Hometown Associations (HTAs)³ on this side of the border as a model of binational economic cooperation illustrates cultural resiliency. These philanthropic organizations of Mexican immigrants collaborate to raise money in the U.S. to benefit their communities in Mexico. These associations are based on social networks established by community members from the same localities in Mexico. In Monterey, HTAs have raised money through the organization of dances, beauty pageants, raffles, picnics,

² CONAPO, 2008
<http://www.conapo.gob.mx/publicaciones/migra2.htm>

³ Home Town Associations
http://209.85.173.104/search?q=cache:VNV_hvngvk0J:bcgit.berkeley.edu/alarcon_ppt.ppt+mexican+hometown+associations&hl=en&ct=clnk&cd=3&gl=us

rodeos, membership dues, and private donations.

Usually these HTAs invest in public infrastructure (e.g. construction or renovations of roads, bridges, parks, churches, schools, sport facilities, streets, etc.); and social projects (support of health care clinics, childcare centers, convalescents homes for the elderly, donation of ambulances, medical and school supplies, educational grants, etc.).

Hometown associations in Monterey County are accomplishing many of Poder’s goals by building on the assets and social networks of the organization’s members. For example, in 2007 the umbrella organization for a dozen hometown associations in Monterey County, LUDA, hosted a breakfast for many of the local politicians. The purpose of this breakfast was to discuss developing “sister regions” between Monterey County and the Mexican region of origin of many of the home town association members in order to facilitate economic, political, and cultural exchange between the two sites. Because of their ability to work at various levels and with various social sectors not only within the region but also binationally, hometown associations in Monterey County provided important opportunities for collaboration and learning about culturally competent place-based strategies.

By drawing on the culture, language, and other strengths of diverse Latino communities, Binational Health Week was instrumental in bringing together Poder stakeholders and providing opportunities for collaboration and community building.

Cultural and artistic activities have also provided a path towards greater civic engagement in this initiative. Radio Bilingüe, Arte Está Aquí in Greenfield, and Rinconcito Cultural, an off-shoot of the Salinas asamblea, are good examples of how culture and arts programs can attract community members and involve them in broader community change

efforts. For example in planning Dia del Nino in Gonzalez the chief of police, home town associations, and others came together that had not previously been involved with Poder.

As well, after participating in a cultural event, groups sponsored by the local arts council in the Salinas Valley became more involved in other aspects of Poder.

Binational Health Week, an annual week of health promotion activities throughout North America, intentionally creates a sense of belonging for *Latino* communities as a strategy for increasing access to health and social services. By drawing on the culture, language, and other strengths of diverse *Latino* communities, Binational Health Week was instrumental in bringing together Poder stakeholders and providing opportunities for collaboration and community building.

COMMUNITY CHANGE REQUIRES FLEXIBLE APPROACHES

As California's population expands and diversifies, strongholds of strictly homogenous neighborhoods are becoming scarce, and communities that thrive are those able to deal effectively with changing demographic patterns. Communities in which neighbors know each other well, take care of each other's children, and implicitly trust one another rarely exist today. Just as technology has altered modern life, the demands of an advanced industrial society have changed the time and intensity required for work, and thus reduced the time available for family interaction, recreational pursuits, and participation in civic affairs. The least affluent are required to work longer and harder to meet their basic needs, a fact particularly relevant in low-income agricultural communities.

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In terms of Poder place-based efforts, balancing programmatic objectives with these realities was a challenge. For example, it was often necessary to change the times and number of meetings not only to meet seasonal harvesting requirements but also to adjust to the overall demands on the lives of community members. This sometimes created tensions between the demands of The California Endowment managers for accomplishing particular objectives, e.g. a certain number of meetings or plans, and the reality of the lives of farmworkers. However, related to the intersection of culture, systems, and health, the work of the *asambleas* to teach farmworkers to “navigate the system” was important. Navigating this complex landscape required openness and sophistication on the part of Poder leadership. Providing technical assistance from seasoned community mobilizers would have been useful early on to navigate these complicated place-based issues that were magnified by transnational realities.

A CROSS-BORDER LENS: *PROMOTORES* COMUNITARIOS

For decades, the *promotores* model for community health outreach has been successfully implemented in many Latin American countries [17,19]. This model, replicated and adapted in the United States, is based on a holistic conception of health, placing personal health within an economic, cultural, and political context. It focuses on a person-to-person approach: home visits or community events are conducted by *promotores*, who share with their peers similar socio-economic characteristics and cultural norms. It has been well-documented that *Latinos* prefer personal contacts rather than impersonal interaction [20]. Among the U.S. *Latino* population, *promotores* projects have been identified as a particularly effective outreach method in rural areas [2].

In a sense, *promotores* are community health advocates, as well as community health outreach workers. Some are volunteers and

others are the paid staff of clinics, public programs, or community-based organizations. However, despite adopting this culturally grounded approach to community outreach, there remain significant system barriers that *promotores* efforts cannot address alone

An example of the intersection of *promotores* work and public systems is illustrated by the work of the Center for Community Advocacy (CCA) in Monterey County. CCA had a resident based model for *promotores* work that existed prior to Poder. They translated this housing-based organizing model into one with a health promotion lens for Poder. This modified formation of *promotores* was folded into the existing CCA organizing model and continues to be refined with new leadership and new programmatic goals. CCA was able to both meet the requirements of their strategic partner grant to train *promotores* and make presentations, and also train members of *Lideres Campesinas* and LUPE (both Poder strategic partners) to be *promotores*.

While *promotores* are an established model for bridging community, culture, and health, their ability to intersect with larger system-wide issues that impact health and well-being their impact needs more research.

CCA had a system-level success reforming a process within the public health system related to the use of *promotores*. The Behavioral Health Division of the Monterey Public Health Department approached them to improve, utilizing *promotores*, the mental health outreach and referral services provided to farmworkers and their families. One of the systemic improvements that has occurred is that CCA agreed to make referrals only if the Health Department agreed to designate a particular person within the agency, a contact person, when individuals were referred to be sure they received appropriate services. CCA was also able to get provider agencies to train farmworker leaders related to mental health

services issues so that they, in turn, could educate their peers (when they made presentations in neighborhoods).

Another example of the intersection of *promotores* efforts with system-wide factors relates to an effort of the Health Initiative of the Americas (HIA). Since its inception in 2004, HIA Binational *Promotores* Exchange Program has enrolled over 120 *promotores*. This project offers U.S. and Mexican-based outreach workers who want to increase their knowledge about health care systems (within the U.S. and Mexico) opportunities to learn how to provide culturally responsive health outreach to migrant populations. These exchanges have occurred in the two Poder intensive sites, Monterey and Tulare counties. HIA's community organizing efforts for coordinating its Exchange Program can be viewed through the lens of Social Systems Theory, which "explores how organizations in a community interact with each other and the outside world" to achieve a common purpose [4]. A recent evaluation of this HIA effort indicates that "...for HIA, this common purpose consists of mobilizing *promotores* from the U.S. and Mexico in order to sensitize them to the cultural context of migrants, fostering communication and collaboration opportunities among Mexican and U.S. *promotores*, and teaching them how best to serve this transient and vulnerable population..." [4].

In Tulare County, HIA has built a strong relationship with Family Health Care Network. Their relationship has resulted in continuous success with Binational Health Week, as well as the *promotores* exchange with Mexico. Meanwhile, HIA's achievements in Monterey County stems from their ability to work with key organizations to establish the Binational Community Health Partnership.

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TOWARDS THE FUTURE

This brief demonstrates the importance of linking cultural perspectives and community health strategies to a contextual analyses. Further, the growing migration of groups across national borders and the globalization of economic and political constructs, point to the importance of structuring a global perspective into these interventions. Particularly for *Latino* communities in the United States, the recognition of language as a common symbol,

the growing proportion of the population who are children and youth, and the importance of a sense of belonging also should provide strategic framing for interventions both large-scale and small. The active involvement of community members in the implementation of health promotion and advocacy efforts is the essence of community health. However, to authentically and intentionally engage community stakeholders requires consideration and integration of culture, health, and systems to meet the challenges and fulfill the opportunities for healthy communities in California.

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