

# **BINATIONAL A COMMUNITY RESPONSE TO HEALTH WEEK: LATINO DISPARITIES IN HEALTH**

## **Latinos in the U.S.: A Growing Population with Unmet Health Needs**

The U.S. Census projects that by the year 2050 there will be over 130 million Latinos in the U.S., comprising 30% of the population. At 15.7% of the population, Latinos already make up the largest minority group in the country. Despite their number, the barriers that limit their access to health care and health insurance still continue to be a serious issue for Latinos. In 2009, the uninsured rate among Latinos was 31.7%, compared to 10.9% among non-Latino Whites and 19.1% among African Americans. Barriers to health care include, among others: a lack of information and knowledge about how and where to access health care services; a shortage of culturally and linguistically competent services; insufficient financial resources to pay for medical expenses; limited opportunities to access employer-provided health insurance, and other socio-economic challenges. On top of that, for Latino immigrants, documentation status and fear of deportation are additional barriers; undocumented immigrants are restricted from enrollment in government-sponsored health programs for low-income populations such as Medicaid and other health insurance programs.

## **The Rise of Alternative Movements to Address Health Disparities**

As a response to health disparities of the U.S. Latino population, alternative social movements like Binational Health Week (BHW) have emerged. BHW calls for a renewed commitment to eliminating inequalities in the social determinants of health, with a focus on access to health services and insurance coverage, and the prevalence of certain chronic and infectious diseases that disproportionately affect this population. First instituted by the Mexican government, BHW has since been joined by the governments of six other Latin American countries: Guatemala, Honduras, Colombia, Ecuador, Peru, and Bolivia. With the

technical support and leadership of the Health Initiative of the Americas (HIA) at the UC Berkeley School of Public Health, BHW has become one of the largest mobilization efforts in the Americas to improve the health and well-being of the underserved Latino population living in the U.S. and Canada.

During BHW, federal and state government agencies, community-based organizations, and thousands of volunteers come together annually in the month of October to conduct education workshops, host health fairs, and provide insurance referrals and medical screenings for the most underserved. Also, during BHW, innovative strategies are implemented to improve the cultural competency of health care providers. As part of the launching events of BHW, every year a Binational Forum on Migration and Health is held, in which advocates and researchers engage policymakers to put reducing health disparities of the Latino immigrant population at the top of the public policy agenda.

Since its inception in 2001, BHW has been a catalyst for sustained collaboration among community and government agencies from the U.S., Mexico, and other Latin American countries. The underlying idea behind this binational approach is that improving Latino health not only benefits the immigrants themselves, but also has larger positive social and economic implications for both the receiving communities and the countries of origin throughout the Americas. The health of a country is also the health of the immigrants.

## Health as a Matter of Social Justice



For more than a decade, Binational Health Week has inspired the construction of a transnational community based on shared responsibility for health. The structure and process of BHW represents an integral approach that promotes health via Latino culture and festivities. This unique approach has provided the global leadership, and at the same time, the feeling of local belonging; has mobilized existing networks, engaged policymakers, as well as integrated Latin culture and festivities with the goal of promoting the health of Latino and to increase the access of health services. The integration of cultural values to promote health in a positive ambience is a unique approach of BHW that finds undoubtedly echoes in the Latin community.

BHW has grown exponentially in terms of its breadth and impact. BHW began as a collaborative effort between the state of California and Mexico; over a decade later this effort has grown to include

partnerships between nine countries: the United States, Canada, Mexico, Guatemala, Honduras, Colombia, Ecuador, Bolivia and Peru. This year alone, 150 participating consulates provided leadership to 174 local task forces throughout the U.S. and three Canadian provinces to make BHW a successful reality. The following table demonstrates the extraordinary growth and impact of BHW.

### Growth of Binational Health Week 2001-2011

Year	2001	2006	2011
Countries	2	5	9
U.S States/Canada	1	31/3	40/3
Number of Activities	98	1,014	3,641
People Reached	18,720	300,000	499,184
Number of Agencies	115	3,000	7,500
Number of Consulates	4	37	150

### Unity Among Many: The Multiple Forces behind Binational Health Week

BHW health promotion activities occur with the support of thousands of agencies and individuals. A unique and critical component of BHW is that it keeps communities and agencies engaged and collaborating year-round. In over a decade a structure and process has organically evolved to institutionalize collaboration across agencies, from consulates to communities, to improve the health of Latino immigrants living in the U.S. and Canada.

### Linking Resources to the Community: The Work of Regional Task Forces

Regional task forces are comprised of diverse organizations that come together throughout the year to plan, prepare, and deliver health promotion activities during BHW. Task force members include consular representatives, community clinics, public health departments, community-based organizations, hometown associations, educational institutions, sports groups, foundations, legislators, and local media representatives. Currently there are 174 regional task forces, each directed by a regional coordinator—typically a consular representative. Even though task forces convene around BHW, the network has become so strong that they often collaborate on other related projects and events, sustaining collective action for the improved health of immigrant populations. For instance, Ventanillas de Salud (health stations) at the consulates have a year-round relationship with these taskforces.





## Sponsorship of Participating Countries

Participating Latin American consular networks in BHW play a key role in advocating for their mobile populations in the U.S. by providing resources and mobilizing existing networks to implement BHW activities. Their leadership is evident among regional task forces and the community; their presence at health fairs attracts great numbers of people waiting to speak to their consular representatives. The outstanding roles the consulates play during BHW include, among others:

- Convene periodical meetings with their task forces to plan the calendar of activities
- Facilitate the leverage of financial resources. Some of the governments of participating countries provide an economic contribution to their consulates, these resources are locally duplicated with other economic donations, in-kind contributions, and the numerous hours that volunteers dedicate to the planning and implementation of the events; This year over \$1,465,667.00 was raised
- Serve as a liaison with local authorities, the media, educational institutions, and health providers
- Input the event's information into the web-based master calendar and conduct evaluation strategies
- Create the report of results and acknowledge the work of agencies and volunteers

## The Motor behind the Movement: The Leadership of the Health Initiative of the Americas (HIA)

By relying on collaboration and partners, the Health Initiative of the Americas (HIA), a program of the UC Berkeley School of Public Health, serves as a catalyst and provides technical support for the coordination of BHW. The Initiative's role includes negotiating and coordinating partnerships with all major institutions and agencies; facilitating consensus building from the grassroots to policy levels; developing technical resources, supporting local capacity, and empowering existing networks to make the BHW mission their own.

While encouraging local action and ownership, HIA also helps ensure consistent and accurate dissemination of information nationwide. This is achieved through development of key messages and the production of health promotion materials, media campaigns and kits, national health campaigns tool kits, and the creation of other technical resources

that are locally customized to support stakeholders. In addition, HIA coordinates data collection and analysis to ensure accurate evaluation of BHW is conducted, enabling organizers to determine impact, areas of improvement, and best practices. HIA also provides step-by-step guidance to consulates on how to form a task force, identify and partner with key agencies, define target populations, and identify available resources. It also maintains a directory of community organizations and clinics and provides useful outreach strategies for hard-to-reach Latinos. Further guidance is provided on tools and strategies to request funding support from elected officials, develop an effective media campaign, and conduct local evaluations. (<http://binationalhealthweek.org/>)





## The Preparation: Working Towards a Common Cause

The planning for October’s annual BHW activities tends to initiate in February, when some of the main BHW stakeholders—including federal, state and local agencies—enthusiastically gather at the annual planning meeting to share best practices and develop a vision and strategic plan for the upcoming event. The planning meeting for the 11th BHW provided a special work session on “Your Role as a Community Leader to Prepare the Latino Population in Case of Public Health Emergencies” which was sponsored by the California Department of Public Health. The work plan developed through this initial gathering is monitored through monthly conference calls with consular representatives and task force representatives.

## Capacity Building

One of BHW’s objectives is to promote culturally appropriate and quality healthcare for the underserved Latino population through the provision of training and technical assistance. Capacity building of local health providers, promotores (community outreach workers), and community-based organization staff occurs through trainings, workshops, and various forums that elucidate health and illness from a cultural perspective. Updates on the most salient health issues confronting the underserved Latino population in the U.S. and their countries of origin are complemented with strategies for outreach and health education among Latino populations.

## Delivering Resources & Health Education to the Community

Each year, BHW launches health campaigns concentrating on current health disparities afflicting the Latino community which are designed and implemented at a national level. These campaigns aim to promote and educate the Latino community, health professionals, and other key players. Each year different campaigns are implemented. During BHW 2011 the campaigns were: Women’s Health (Latina immigrant women tend to be younger, with children, low-income, and with little health care access), Mental Health (substance abuse), Infectious Diseases (addressing the high rates of Tuberculosis, Hepatitis, and HIV/AIDS along the U.S. – Mexico border in particular), Chronic Disease (heart disease, cancer, diabetes, and obesity), and Access to Health Care (of which Latinos have the least). (<http://www.binationalhealthweek.org/national-campaigns.html>)

With the hopes of guaranteeing the efficacy of these campaigns; appropriate educational, training, and guidance materials are produced using current research and information from trusted resources such as the Centers for Disease Control and Prevention of the United States, and the Mexican Ministry of Health. Relevant, up-to-date materials ensure the effectiveness of these campaigns in achieving reach and impact. These materials are distributed among coordinators, promotores, and key partners that will carry out the community level health promotion activities, ensuring health messages are delivered through various channels in a culturally and linguistically appropriate manner. (<http://www.binationalhealthweek.org/account/edit-contacts.html>)

## Population by Country

Mexico	290,047
Guatemala	40,795
El Salvador	17,834
Honduras	29,671
Nicaragua	7,380
Columbia	29,173
Ecuador	33,603
Perú	16,354
Bolivia	6,728
Other	9,781
<b>Total 499,184</b>	



## Online Resources

- [www.binationalhealthweek.org](http://www.binationalhealthweek.org)
- [www.semanabinacionaldesalud.org](http://www.semanabinacionaldesalud.org)

The BHW website is a capacity building tool; a resource for community organizations to access year-round. The website has two core components. On the main pages, the general public can read about BHW, get details about the activities in their region and view and download the educational materials of the campaigns.

The other component is for BHW coordinators to use as a structural tool. It hosts materials for task

force coordinators that can easily be accessed and downloaded, including directories of foundations, clinics, community organizations, and hometown organizations from each participating country; strategic planning and fundraising tools; resources for policy advocacy; materials to distribute at events; guidelines for conducting local evaluation and compiling activities reports; and information about all BHW activities and participating agencies. The website is also the site where coordinators input their calendar of activities, which has the double purpose of informing the community about local events, as well as being a tracking tool of events/activities for evaluation purposes.

### From Grassroots to Public Policy and Advocacy

BHW plays a pivotal role in public policy advocacy with the distribution of a publication on current health disparities among the Latino population. BHW partners engage in public policy advocacy to raise awareness about the health challenges afflicting the underserved Latino population and signal these issues as political priorities. Local policymakers participate in BHW activities, receive information about the main health challenges and opportunities related to underserved populations and interact with the community at BHW events. Grassroots public policy advocacy has also been effective as local BHW stakeholders solicit official recognition of BHW through county and city proclamations. The value of these proclamations is not just a matter of endorsement or symbolism (many of them are collected and displayed at the county agencies) but the fact that lay people start to interact directly with the officials that represent them. This relationship with elected officials through BHW has also empowered community members to be more active in civic engagement.



### The Binational Policy Forum on Migration and Global Health



The policy forum is a prominent political platform that translates research into public action. This annual event, which kicks off BHW, presents and analyzes immigrant health issues as a policy priority. The forum presents the opportunity for policymakers, researchers, students, community members, and public health workers to share recent research findings, propose public policy recommendations, and develop international working strategies.

The 11th Annual BHW took place from October 1-16, 2011 in the United States and Canada. According to information granted by local planning committees, it is estimated that 500,000 people benefitted from 3,641 activities realized by 7,500 agencies and 15,000 volunteers, under the leadership of 150 consulates that worked in coordination with 174 planning committees. On top of that, 500 articles were published, spreading the message of health education to millions. Moreover, five national campaigns were implemented, according to current issues that affect the Latino community, which include: Women's Health, Mental Health, Infectious Diseases, Chronic Diseases and Access to Health Care Services. The Inaugural Event and the Binational Policy Forum on Migration and Global Health took place in San Antonio, Texas on October 3rd and 4th. The Closing Ceremony took place on October 17, 2011 in Tijuana, Mexico.

### Work sessions presented during this year's events included:

- Access to Health Care Services (Use of and Enrollment in Health Services, Awareness of Health Services, Health Reform in the U.S)
- Chronic Diseases (Heart Disease, Cancer, Diabetes, and Obesity)
- Infectious Diseases (HIV/AIDS, Tuberculosis, and Hepatitis)
- Women's Health (Breast and Cervical Cancer)
- Mental Health (Depression and Substance Abuse)



Types of Events	
Health Fair	380
Health Care Provider Workshop	128
Inauguration/Closing Events	140
Mobile Health Clinic	138
Training and Educational Workshops	388
Conferences/Seminars	246
Press Conferences/Political Events	16
Other	336

### Publicity, Health Promotion, and Marketing

With the ability to reach millions through television and radio, media is used as a communication tool for health promotion to increase awareness among the hard-to-reach Latino population. Media campaigns are therefore one of the major components for BHW. Goals of the BHW media campaign include publicity of events, promotion of healthy behaviors, marketing of health services available for vulnerable populations, and influencing public policies. Press conferences occur at the beginning and end of each region's BHW events. During the week, radio and television programs and spots on various health issues are aired. This year, HIA with the collaboration of students from the Mexican National University (UNAM for its Spanish acronym) facilitated the development of health educational messages through pre-recorded public service announcements that deliver linguistically and culturally appropriate health information to millions of people during BHW. This year there were at least 56

press conferences covering the inaugural and closing events and there were a total of 418 media hits in all: 129 newspapers and electronic articles covered BHW events including in the USA: San Antonio Express, UTSA Today, UC Health, and Redwood Times. In Mexico: La Jornada, Azteca Noticias and MSN Latino; 205 radio announcements including the extended collaboration of Univision Radio, Radio Ke Buena and radio Bilingue; 84 television announcements and interviews with the active participation of UNIVISION, and local stations.

The creative development of the campaign is based on the following criteria:

- Culturally relevant elements that resonate emotionally
- Easy to understand regardless of educational level
- Strong call to action
- Address factual information



## BHW Mural

Each year BHW is embodied by a commemorative image, the BHW mural. During the inauguration event this image is unveiled and represents the official kick-off of BHW. The mural is also replicated on posters and distributed to the 40 states of US and Mexico through the coordinators and consular networks of the participating countries. This year 5,000 full-colored BHW posters were distributed and conveyed the message “Walk Happily For your Health” “Camina Alegre por tu Salud”. The mural was created by Mexican artist Maya Ramirez (Margarita Ramirez Padilla) an immigrant who has lived in San Diego California for 24 years. Her desire to educate others transfers onto the canvas, which clearly shows in the piece created for this year’s BHW.

## Conclusion

- The health of a population is reflected to a great extent in its access to health services. In the United States, the inequities in the access to health services and the disparities of health between Latinos persist and even increase because of the social and economic disparities associated with variables as ethnic group, migratory status and opportunities of employment, among others.
- BHW, one of the biggest mobilization efforts one of the largest mobilization efforts dedicated to improve the health and well-being of Latinos, has been working for eleven years with numerous federal and state agencies, community-based organizations and volunteers to improve the health of the underserved Latino population in the United States.
- BHW has demonstrated its capacity to mobilize thousands of volunteers and multiple agencies, to work together in order to create an awareness of the challenges of Latino immigrants and respond to this problem by working collaboratively towards a common goal.
- BHW is a catalyst for the efficient and supported collaboration of multiple key players, all working to improve health education, improve the access to quality medical attention and increase the access to health services to populations who have not benefitted from the current healthcare system.
- The impact of BHW goes beyond the official event dates, it also assists the Latino population live a healthy life, regardless of the borders. BHW is a successful model of an alternative social movement that is dedicated to improving the life conditions of most vulnerable immigrant populations.

## Binational Health Week 2011 Estimated Results

Type of Activity	Number of Activities
Access to Health Care Services	537
Infectious Diseases (STDs, HIV/AIDS, TB, Influenza, etc.)	317
Chronic Diseases (Obesity, Nutrition, Diabetes, Cardiovascular, etc.)	430
Women’s Health (Breast and Cervical Cancer, reproductive health, pre-natal care)	461
Mental Health (Depression, including Domestic Violence)	268
Disabilities (autism, etc.)	121
Occupational Health	152
Emergency Preparedness	73
Environmental Health	77
Oral Health	161
Other Cancer	171
Hearing/Vision	142
Other	41
Men’s Health	145
Addiction, including alcoholism and drugs	124
Physical Activities	139
Vaccinations	122
Children’s Health	160
<b>Total Activities</b>	<b>3,641</b>

## BHW 2011 Major National Partners



Breakdown of Location	
Agricultural Field	8
Clinic/Hospital	119
Agency	57
Consulate	412
General Public	19
Prison	6
Religious Institution	75
School/College/University	90
Market, park, street, store, mall	160
Other	529
<b>TOTAL EVENTS*</b>	<b>1395</b>

Events offered by Consulates	
Guatemala	250
Nicaragua	33
Colombia	144
Honduras	125
Peru	90
Ecuador	143
Mexico	787
Bolivia	42
El Salvador	88
Local Taskforces	403

Breakdown of Target Population- Other	
Disabled	203
Parents	355
Inmates	25
Indigenous	166

Breakdown of Participants by Age	
Children (0-12)	335
Adults (18-64)	594
Senior Citizen (65+)	392
Adolescents (13-17)	398
General Audience (all ages)	825

Number of Health Exams	
Blood Pressure	65151
Cholesterol	0
HIV/AIDS	0
Dental Exam	150
Diabetes	16802
Glucose	606
Glaucoma	25
Mammogram	9779
Vision	55
Acupuncture	2
General Checkup	200
Asthma	900
Behavior	10
Blood Donation	35
BMI	415
Drugs	100
Physical Exam	85
Hearing	200
Kidney Disease	500
Massage Therapy	20
Memory Exam	200
PAP test	80
Presence of Lead	200
Pregnancy	100
Prostate Cancer	401
Referrals Screening	20
Various Ultrasounds	270
<b>TOTAL Health Exams</b>	<b>96283</b>

Number of Materials Distributed	
Access to Health	179321
Disabilities and Autism Awareness	0
Obesity and Diabetes	0
Oral Health	0
Prevention of Gang Involvement	14322

Number of Vaccines	
Influenza/H1N1	20523
Hepatitis A/B/C	6707
Tuberculosis	1037
Tetanus	810