

# Health and Wellness for Our Latina Community: The Work of the Latinx Advocacy Team & Interdisciplinary Network for COVID-19 (LATIN-19)

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**The Latinx Advocacy Team & Interdisciplinary Network for COVID-19 (LATIN-19), a multisector coalition, was formed to support the Latina community during the COVID-19 pandemic. Achievements include influencing local and state policies and coordination of efforts by community organizations. The success of this volunteer organization serves as a model for collaboration.**

## Introduction

**T**he Latina community<sup>a</sup> has been disproportionately affected by the 2019 novel coronavirus disease (COVID-19). National data reported by the Centers for Disease Control and Prevention (CDC) show that Hispanic or Latinx individuals (used herein interchangeably) are 1.3 times more likely to become infected, 3.1 times more likely to be hospitalized, and 2.3 times more likely to die as a consequence of COVID-19 in comparisons to their non-Hispanic, White counterparts [1]. Disparities in COVID-19 for the Latina community have been more notable in the Southern United States. For example, in North Carolina, the Latina community represents 9.6% of the population, yet accounts for 21% of the positive COVID-19 cases for which patient ethnicity is known; this is thought to be a conservative estimate [2]. To date, Hispanic/Latinx individuals comprise 12,000 cases per 100,000 residents in North Carolina, in comparison to 5052 cases per 100,000 non-Hispanic residents, making them approximately three times more likely to be infected with the disease [2]. At the initial peak of the pandemic in June 2020, Hispanic/Latinx individuals represented 57% of cases for which patient race and ethnicity was known at the state level [2]. In Durham County, where the Latina community comprises 14% of the population, it represented 75% of cases during this time period [2].

In March 2020, as the first cases of COVID-19 were diagnosed at Duke University Health System, and severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2),

the virus that causes COVID-19, was declared a pandemic by the World Health Organization [3], two clinicians—Drs. Gabriela Maradiaga Panayotti and Viviana Martinez-Bianchi at Duke University School of Medicine—with extensive experience and knowledge working and advocating for the Latina Community convened weekly meetings of multisector stakeholders interested in addressing the community's anticipated needs. The group first met on March 18, 2020. On March 24, Mr. Pablo Friedmann from Durham Public Schools and Ms. Jenice Ramirez, executive director of the Immersion for Spanish Language Acquisition school, invited Drs. Maradiaga Panayotti and Martinez-Bianchi to answer live questions posted on Facebook by the community about COVID-19. The group soon grew to include multiple partners in the community, including public health organizations and the Duke School of Nursing. A few weeks later, the Latinx Advocacy Team & Interdisciplinary Network for COVID-19 (LATIN-19) was formally named and established.

LATIN-19 today is a multisector group of over 770 registered participants representing health and behavioral health professionals, lawyers, and educators in academic institutions; representatives of health care systems, public health departments, public school systems, community-based organizations, government, and faith communities; and researchers, students, professionals, community activists, and unaffiliated individuals. Facilitated meetings allow for speakers both from within the formal health system and from the community to present topics in English and Spanish with simultaneous interpretation provided. Decision makers can hear concerns and stories directly from community members—data are shared, policies are explained, regulations

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<sup>a</sup> English for la comunidad Latina. This is how the local community chooses to identify.

are unpacked, and legal wording is clarified. Participation in the network has grown, and presently an average of 90 people attend each weekly meeting. LATIN-19's mission is to improve the health and wellness of diverse Hispanic/Latinx communities and to bring sustainable solutions through collective leadership and the formation of trusting collaborative partnerships and alliances. The weekly meetings are open to the public, promote a platform that honors all voices, and engage members of a community that has historically been marginalized to share their knowledge and perceptions of multiple aspects of life and health during the pandemic. LATIN-19 strives to amplify the voice of the community. To achieve this goal, the weekly meeting agenda is strategically organized to allow invited guests to speak last. This allows them to listen to community concerns first. By listening to the community first, academic, government, and community leaders have gained a much-needed perspective of the ongoing challenges faced by its members. Participants also find in this forum the opportunity to share valuable information and urgent calls to action with all members of the coalition. This approach has proven to be of significant impact.

Conversations often touch on the mechanisms that disconnect and exclude the Latina community from the health care system and other critical resources. In our meetings we have heard personal accounts and research results about language barriers; challenges associated with lack of insurance; concerns about the immigration implications of accessing health care services, specifically public charge rules that were quite prevalent in the period between 2016 and 2020; fear of deportation; and fear of separation from loved ones at the time of entering the hospital.

During one meeting we learned that due to the fear of being separated from their babies if testing positive for COVID-19, Latina moms had started to avoid delivering their babies at the hospital, and for many these experiences led to significant fear and trauma. In particular, the fear of family separation during admission to the hospital was heightened for this community, especially because restrictions on who could accompany or visit the patient resembled to some the horrific experience of children being separated from their parents at the United States border with Mexico. To address this obstacle, we partnered with our colleagues in obstetrics and gynecology to make sure Latinas knew that coming to deliver at the hospital was safe.

During another LATIN-19 virtual meeting, an internal medicine resident listened to a community member talk about people's experiences during admission to the intensive care unit (ICU). Family members began to describe those admitted to the ICU as "the disappeared" (in Spanish, *desaparecidos*) because they were not allowed to accompany them in the hospital due to social distancing procedures. Together with a LATIN-19 subcommittee, the internal medicine resident worked to raise awareness about this phenomenon and created guidelines for the appropriate use of interpreters to positively impact care provided at the time

of admission. This resident subsequently worked on raising awareness about this phenomenon. Together with a LATIN-19 subcommittee, she created guidelines, including the appropriate use of interpreters to positively impact the care provided at the time of admission.

## Initiatives That Emerged From LATIN-19

### ***Development of Spanish Educational Materials, Public Safety Announcements, and Training***

Throughout 2020 and 2021, LATIN-19 has engaged in broad dissemination of information on COVID-19 prevention and services by developing and sharing culturally appropriate, essential information in Spanish and English to community networks through the weekly meeting space, physical handouts, email, social media, and local and national news outlets. During the early days of the pandemic, members of LATIN-19 developed videos and posters to encourage community members to continue to seek health care as appropriate (e.g., maternity care) and to follow prevention guidelines as laid out by the North Carolina Department of Health and Human Services (NCDHHS)'s "3 Ws" campaign (wear, wait, wash), known as the "3 Ms" campaign in Spanish (*mascarilla, mantener distancia, y manos*). The videos and posters also addressed issues of mistrust and encouraged testing and, more recently, vaccination. These were disseminated rapidly to the community by local health departments and community-based organizations. LATIN-19 leaders participated in the direct training of community health workers (CHWs) in the appropriate use of personal protective equipment (PPE), including donning (putting on) and doffing (taking off) equipment when visiting the homes of people ill with COVID-19. They also led multiple education sessions about COVID-19 prevention, diagnosis, and care, and advocated for the prompt vaccination of CHWs.

### ***Testing Sites: Seeing a Need***

Early in the pandemic, LATIN-19 noted that there were no COVID-19 testing sites in the parts of Durham where the majority of cases were occurring. In fact, testing sites were only in White, affluent neighborhoods (e.g., West Durham), and not accessible to members of the Hispanic/Latinx and Black communities who were overrepresented in COVID-19 cases. Advocacy efforts by members of LATIN-19 and other organizations resulted in the implementation of a testing site at the Holton Clinic in East Durham, run by Lincoln Community Health Center and Duke Family Medicine and Community Health with direct referrals from the Durham Department of Public Health, at a time when the area was a testing desert. Advocacy from LATIN-19 also contributed to the inclusion of new organizations created by the Latina community in a state-funded program that provided PPE and boxes of food to families to sustain them at home for the 10-14 days needed for isolation or quarantine. One of LATIN-19's founders became a co-leader for the Testing Team of the NCDHHS Historically Marginalized Populations

(HMP) Workgroup in September 2020, helping with the deployment of multiple sites in Durham and around the state to increase the number of tests administered to these populations.

### **Policy Change**

LATIN-19 has influenced changes in policies and practices at the organizational, local community, and state levels. Several members of LATIN-19 serve in local and state work groups and task forces, and policy makers participate in the LATIN-19 calls. What is learned during the LATIN-19 calls is translated to advocacy efforts that impact policy. Early in the pandemic, advocacy efforts by LATIN-19 helped ensure that COVID-19 data were collected and published by the local and state health departments. LATIN-19 also informed revision to hospital visitation policies that were keeping Hispanic/Latinx residents from seeking health care in fear of family separation, medical bills, and deportation. Duke MyChart electronic medical record software was also made available in Spanish during this period through the leadership of LATIN-19 to allow monolingual members of the Latina community to more seamlessly participate in the health care system. At the state level, LATIN-19 members have helped inform policies and design programs that promote equity, including those that ensure access to culturally and linguistically educational materials disseminated by the state, promote better protections for meatpacking and poultry plant workers, increase the number of testing sites in critical areas of need, ensure that identification is not required for vaccinations, and fund state strategies that have helped address disparities in the Latina community such as support for community health workers and a health equity initiative.

LATIN-19 influenced direct referrals from the Durham Health Department's Spanish-speaking contact tracers to respiratory centers for people who, at the time of the contact by the tracers, were heard struggling to breathe on the phone. Many of these patients did not have an established primary care clinician or trusted source of health care, and the direct referral avoided delays in access to needed care.

### **Vaccination Events**

LATIN-19 has collaborated with hospital systems; health departments; community and faith-based organizations; and businesses to host vaccination events targeting the Latina community and to allow community health workers to directly register people at established vaccination clinics. Events are tailored to the unique needs and preferences of this diverse community and hosted in places trusted by the community, such as churches or trusted businesses, with all members of the team, including vaccinators, being bilingual or seated next to an interpreter. These events also include a welcoming cultural feel, such as the inclusion of Latin American music by a DJ.

At some events, community organizations provide bags of masks and sanitizing solutions and boxes of food con-

taining vegetables, eggs, dairy, and frozen meats. LATIN-19 has collaborated with the communications departments of NCDHHS and Duke Health to create name tags and signage to identify resources in Spanish and facilitate the presence of Spanish-speaking volunteers at vaccination events. At each site we ensure there is a sign that reminds the public that identification is not needed to receive a vaccine.

As of mid-May, LATIN-19 had coordinated the provision of more than 10,000 vaccinations through facilitation of registration at established vaccination sites and special vaccination clinics. On April 17, LATIN-19 co-led a mass vaccination event in collaboration with the Catholic Diocese of Raleigh, WakeMed, St. Joseph Primary Care, Wake County Department of Public Health, Duke Health, UNC Rex Hospital, Urban Ministries, City Pharmacy, Alignment Health, and the Cooperativa Latina Credit Union in Raleigh to provide 2075 vaccinations to the Latina community as a "catch-up" strategy addressing the underrepresentation of Hispanic/Latinx residents in vaccination coverage. At the follow-up event for the second vaccine, other primary preventive services were also deployed, such as fecal occult blood kits; cholesterol, diabetes, and hypertension checks; and oral and vision screenings.

### **Research**

LATIN-19 has supported and led research initiatives aligned with its mission and principles of community-engaged research [4]. The research subcommittee includes clinicians, researchers, and community members who identify research priorities; provide guidance on relevant research projects; vet research proposals; and explore strategic opportunities for research funding. Research projects supported or led by LATIN-19 include National Institutes of Health proposals addressing COVID-19 disparities in acquisition, testing, and vaccination; partnerships with schools and health care systems to address the social needs of Hispanic/Latinx children; and multiple student-engaged projects addressing the political climate, food insecurity, testing, and vaccinations.

### **Our Impact**

Since March 2020, LATIN-19 has served a critical role in advising and promoting the interests of the community in task forces and on committees focused on COVID-19 response, health equity, and needs of immigrant and refugee communities. We have collaborated with a variety of organizations including the Duke Pandemic Response Network; NCDHHS (including the HMP Workgroup and the North Carolina COVID-19 Vaccine Advisory Committee); the Andrea Harris Social, Economic, Environmental, and Health Equity Task Force; the Durham Recovery & Renewal Task Force; the Duke Health Quality of Care Committee; the Duke Vaccine Equity Advisory Committee; Resilient American Communities; and the African American COVID-19 Taskforce (AACT+). Local and state leaders have recognized the important role

LATIN-19 played in decreasing the rates of COVID-19 in the Latina community and increasing vaccination rates as well.

## Conclusion

LATIN-19 grew out of a collective passion for bringing together key stakeholders and organizations in the Latina community to address the deep inequities facing this population that have been exacerbated by the COVID-19 pandemic. Despite starting as a pandemic response team, LATIN-19 has evolved to be more than that. There is now wider recognition across the state of the structural factors that initially led to inequities affecting vulnerable communities, and we continue to see initiatives to target those inequities. We hope LATIN-19 can serve as a model for other teams with similar missions, with the overarching goal of reaching health equity in North Carolina and across the globe. *NCMJ*

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