

JANUARY DECK

1/28/2021



CRT LatinX COVID-19 Study Research Project

COMMUNITY RESILIENCE TRUST

ATX



Purpose of this Research

Understand how the Austin Latinx community is being impacted by COVID-19 to uncover priorities and promote better response plans.

Responsible & Responsive Engagement

Statement Of Responsibility

The purpose of this work is to amplify and support the voices of the people who bear the brunt of the inequities caused by systemic racism. This work represents **collaboration from several organizations** and **reflects the direct experience of many of those directly impacted**. But it should not be seen as representing the whole community. We recognize that no one organization can speak for “the community.” and that the vast majority of community members remain underrepresented. We can and must, however, address what we know is missing to the best of our ability.

Responsible & Responsive Engagement

Request For Your Participation

These slides include secondary research, data analysis, surveys, design insights and interviews. Impacted parties were compensated equitably through the support of community sponsors, their privacy was and will be protected, and we intend to move action forward in response to their generous input.

But to fully honor their generous contribution, we must also act on their concerns. **Your active participation is requested.** Please **actively consider** what you in your role can do to improve these outcomes. Please also keep in mind that much of this data reflects in numbers what communities have been trying to say for a very very long time.

Thank You!

Special Thanks to the CRT Design Team and Several Key Community Partners

Las Comadres
Primavera Strategic Planning
Workers Defense Fund
Any Baby Can
El Buen Samaritano
Con Mi Madre
Austin Latino Coalition
LULAC district 12
People's Community Clinic

... and for the generous support from

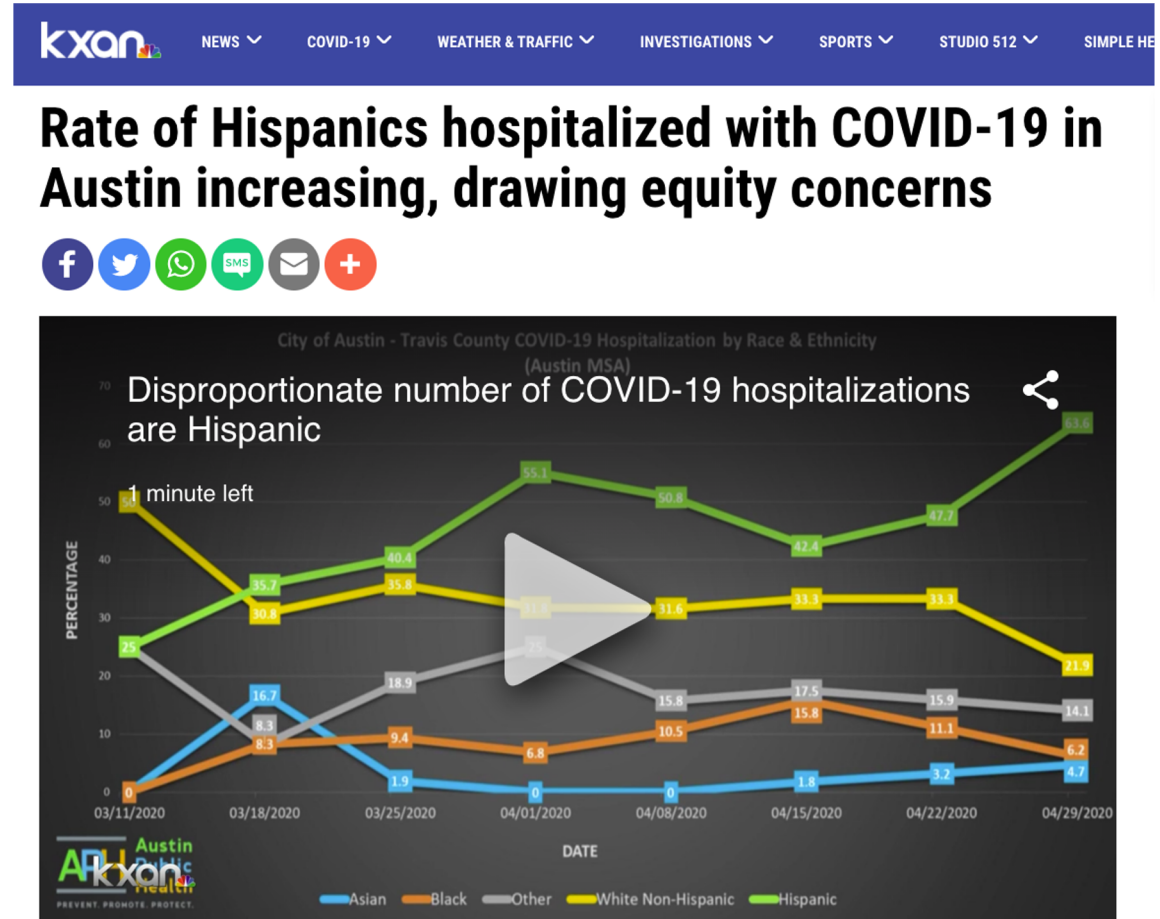
Austin Community College
Austin Community Foundation
Housing Authority of the City of Austin
H-E-B
Univision

The Situation

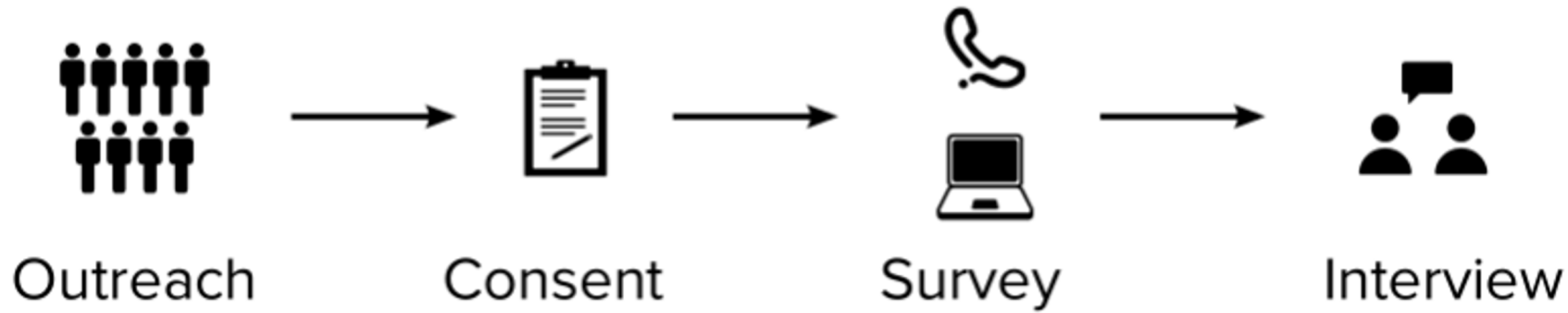
Hispanics/Latinx are disproportionately affected by the virus – more cases, hospitalizations, deaths

Effect most distressing in ...

- East Central Austin
- Among essential workers, underserved and Spanish dominant population



How did we ensure the process was equitable & inclusive?



1. Entire research team signed confidentiality agreements
2. Asked for all participant's consent
3. Focused survey in geographies where the cases were the highest
4. Made survey widely accessible in Spanish & English
5. Administered survey by phone & online
6. Our Bilingual community members conducted phone interviews (notably Las Comadres, Workers Defense Fund)
7. Used secure & private data housing
8. Interview and survey participants were compensated

Methodology & Fieldwork



THE SURVEY

The 15-minute survey was available online and by phone. Both methods were available in English and Spanish.



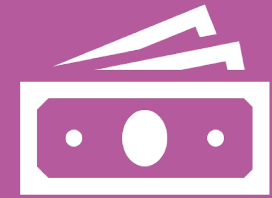
TIMING

Fieldwork began August 19th and ended October 31st, 2020.



DATA COLLECTION

Spanish & English flyers posted at Hispanic small businesses, flyers at Hispanic events, postings on social media, radio broadcast and community organizations & networks.



INCENTIVES & CONFIDENTIALITY

All were given \$10 or more for completing the survey. Incentives raised to \$20 for hard-to-reach sample. Employed strict guidelines ensuring confidentiality. Additional 1-hr long interviews were compensated at \$50/person

After doing our homework, we settled on 3 areas of focus...



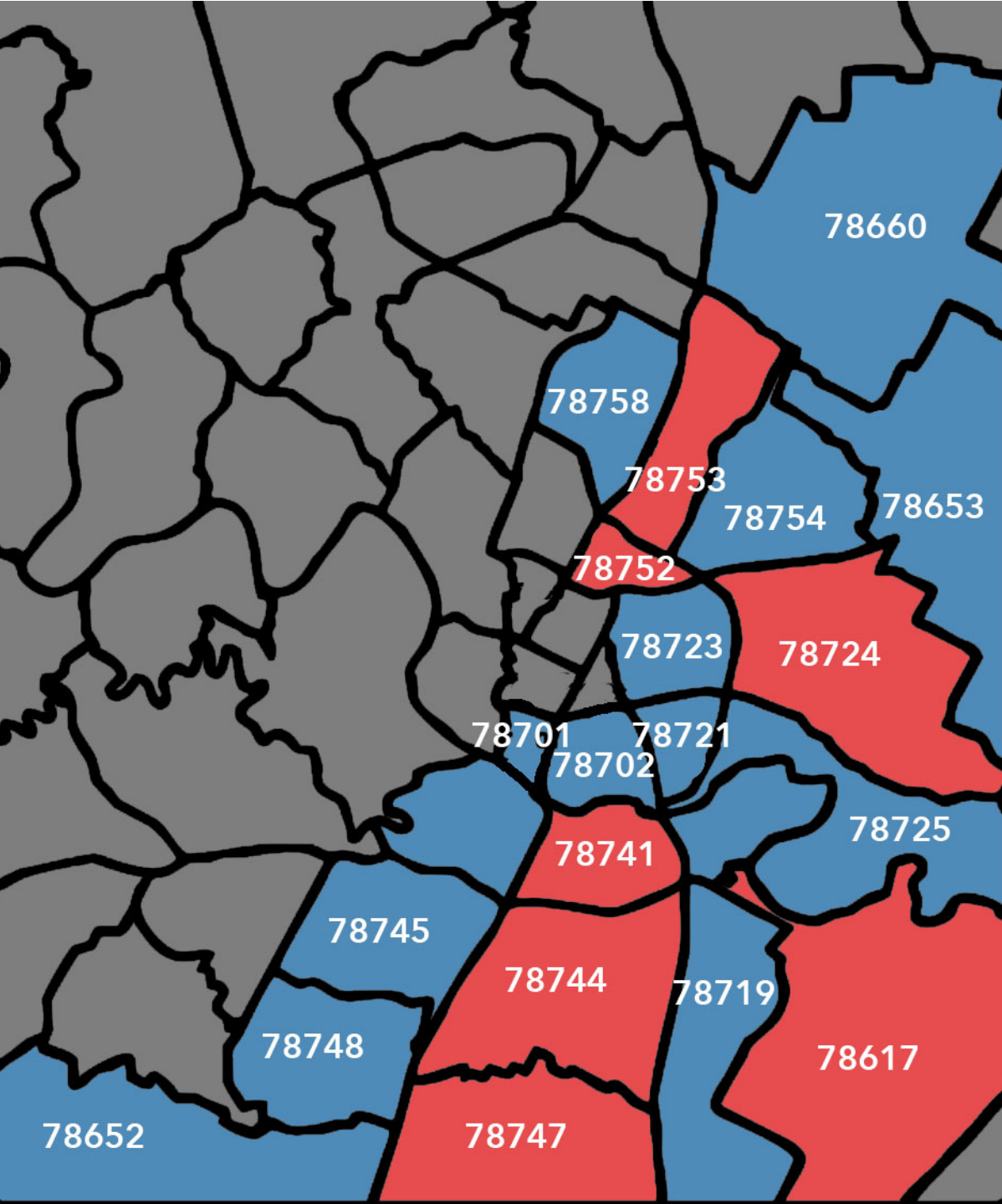
employment



resources



testing



The people represented here are the least heard voices in the highest risk areas of town.

Focus on East Central (EC) Austin Latino Areas Most Affected

- Zip Codes with 2.4X more cases than share of pop**

52% Total sample
62% Latino
78744 78724 78617 78753 78747 78752 78741
- Zip Codes with 1.7X more cases**

38% Total sample
39% Latino
78719 78721 78653 78702 78758 78725 78723
78621 78745 78754 78748 78652 78660 78704
- All findings in this study are representative of EC Austin Latinos**

10% Total sample in remaining zips
22% Latino

177K Austin Latinos need the vaccine most, but will be the last to get it...

316K

- Live in Tier 1 or Tier 2 Zips



199K

- Live in households with essential or frontline workers



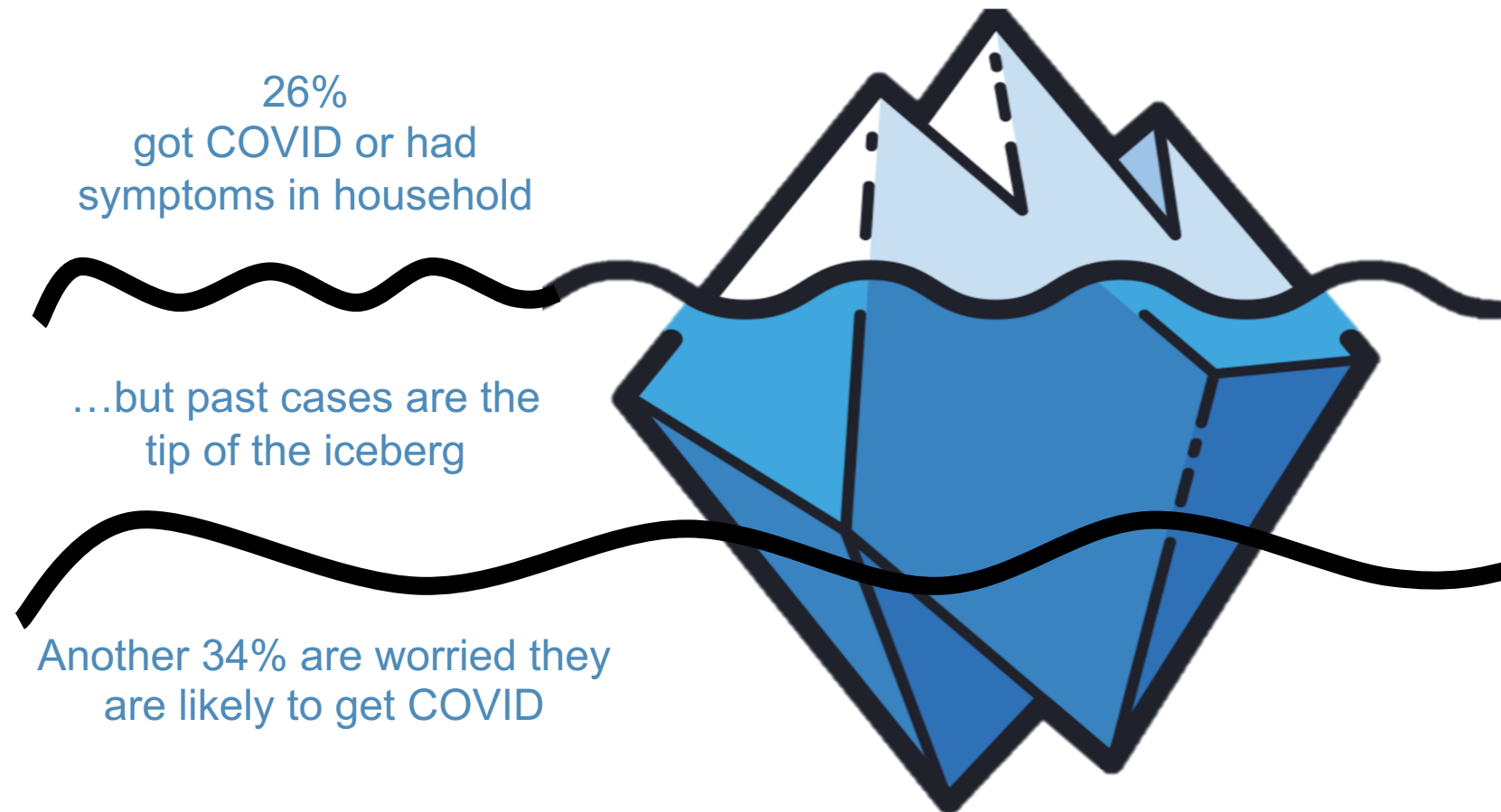
177K

- Have high school education or less

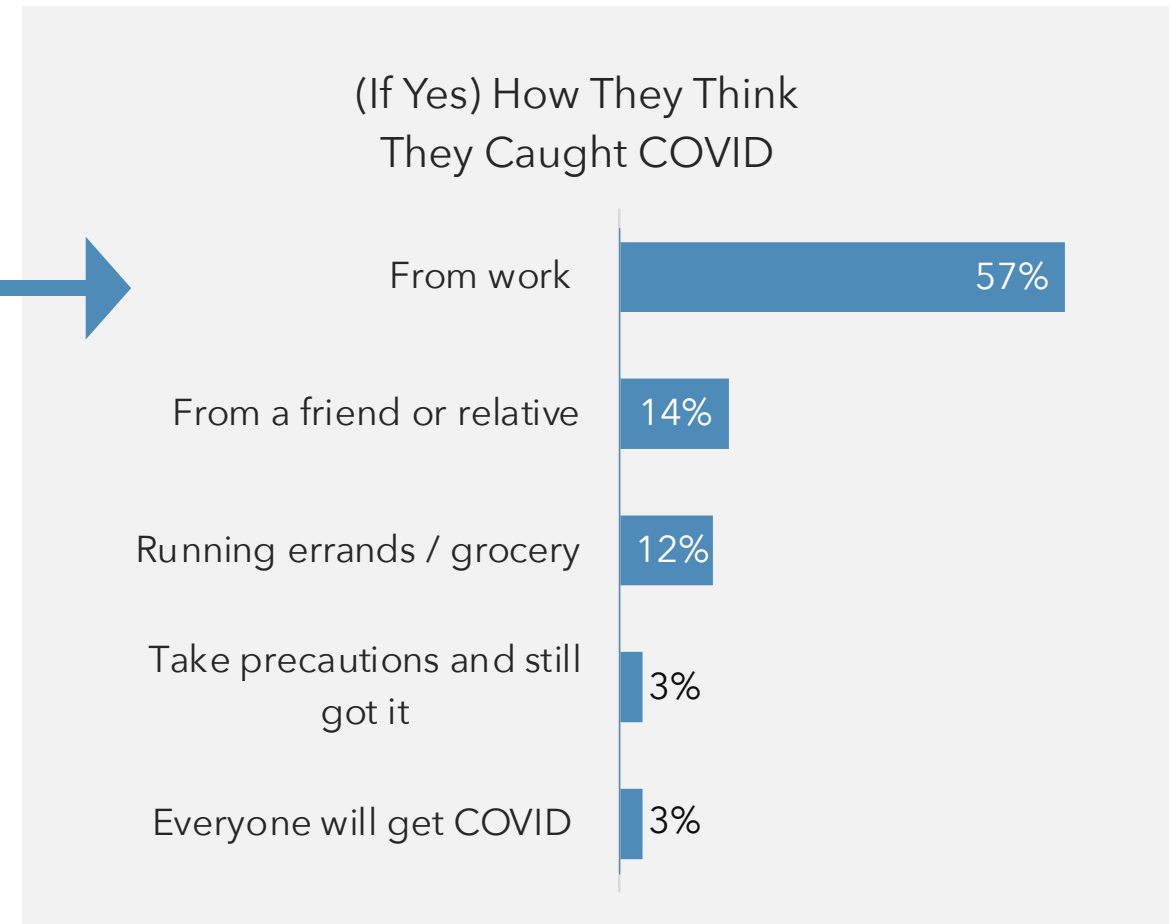
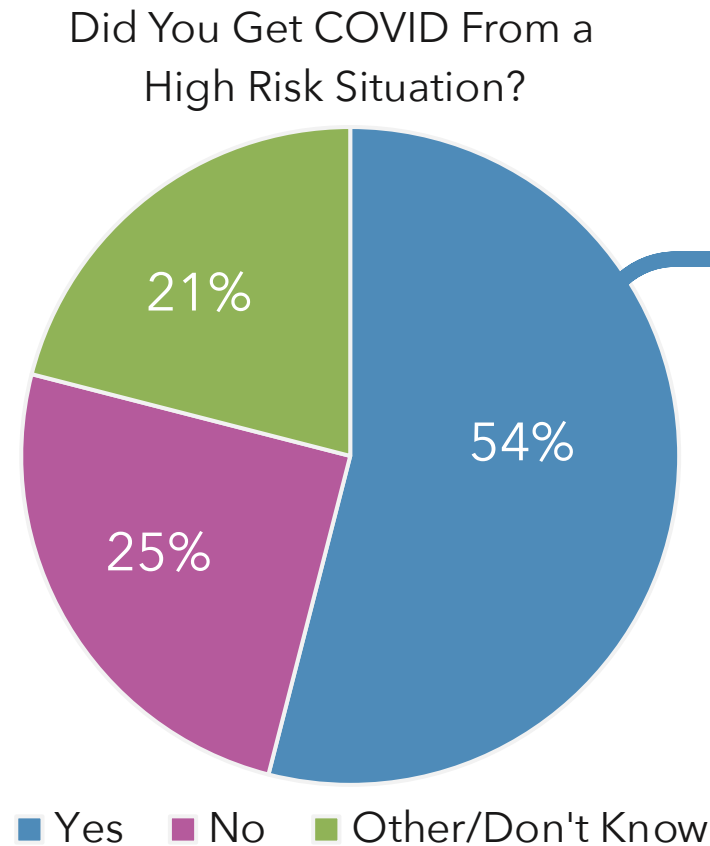


Study Sample	271 Latinos
Field Dates	August 16 to October 31, 2020
Methodology	Conducted the survey by phone or online
Language	50% English Surveys 50% Spanish Surveys
Gender	50% Male 50% Female
Household Income	27% Under 20K 38% 21K to 50K 19% 51K or more
Occupation	63% live in households with essential or frontline workers
Education	56% High school or less 23% Some College, Trade School or Associate 17% Bachelors or higher

6 out of 10 got COVID or think they will get it.



Over half (54%) who got COVID said they caught it in a high-risk situation, and most of those said it was from work.



After healthcare workers, **frontline service workers (cleaning, restaurant, retail)** are most at risk.

of surveyed frontline service households...

1/3

have gotten COVID



8 in 10

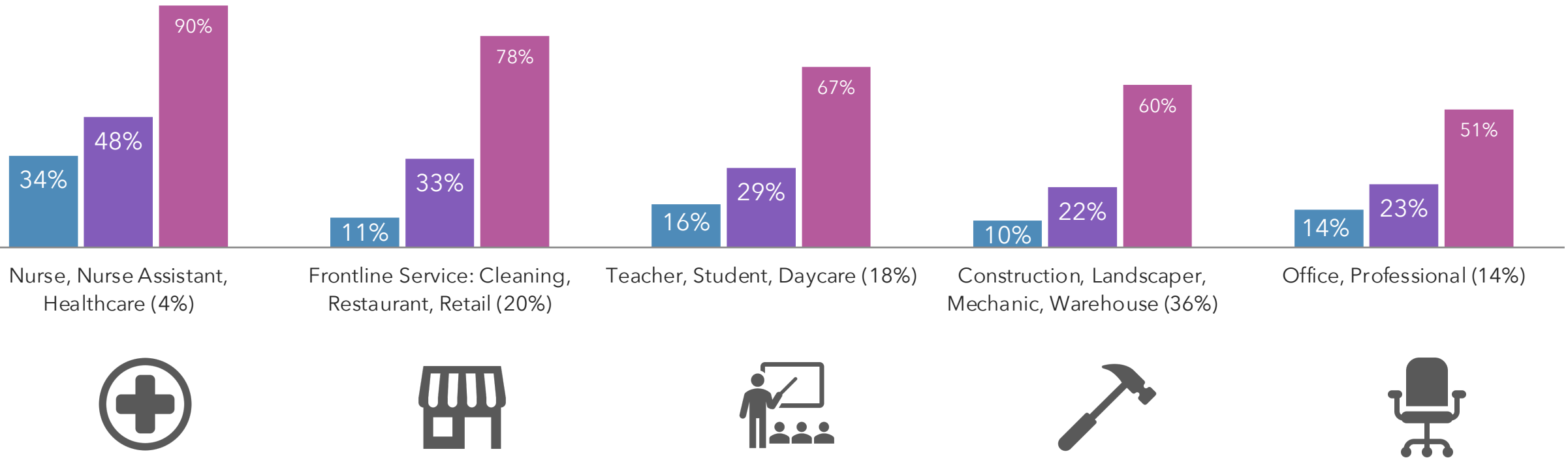
feels at risk

Actual and Perceived Risk are Correlated

■ Confirmed cases in household

■ Confirmed Case or COVID Symptoms Household

■ Feel at Risk

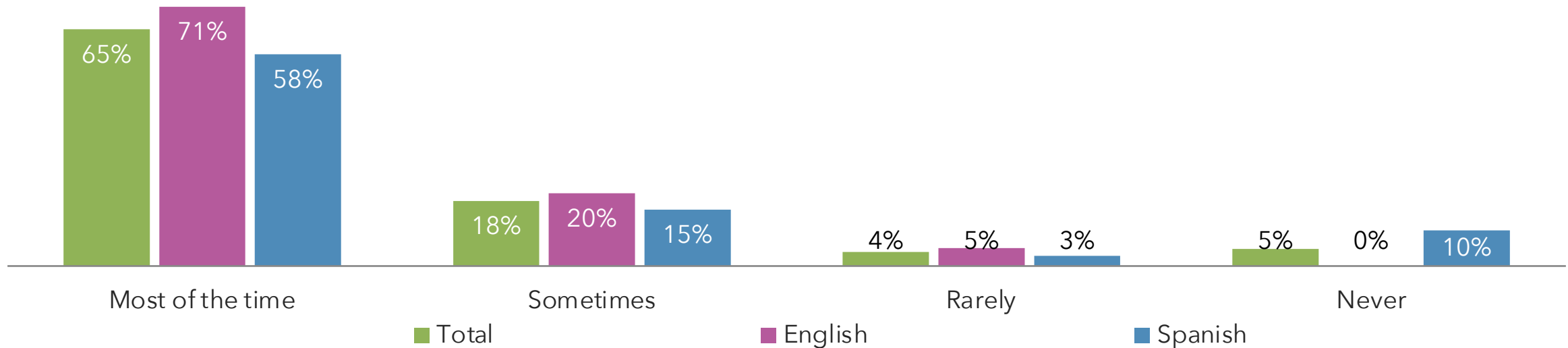


Q05. What do you do for a living? (N=271)

Q06. What is the occupation of the essential worker in your household? (N=65)

Less Employer Protection for Spanish Workers

Does Your Employer Make an Effort to Protect You from COVID?

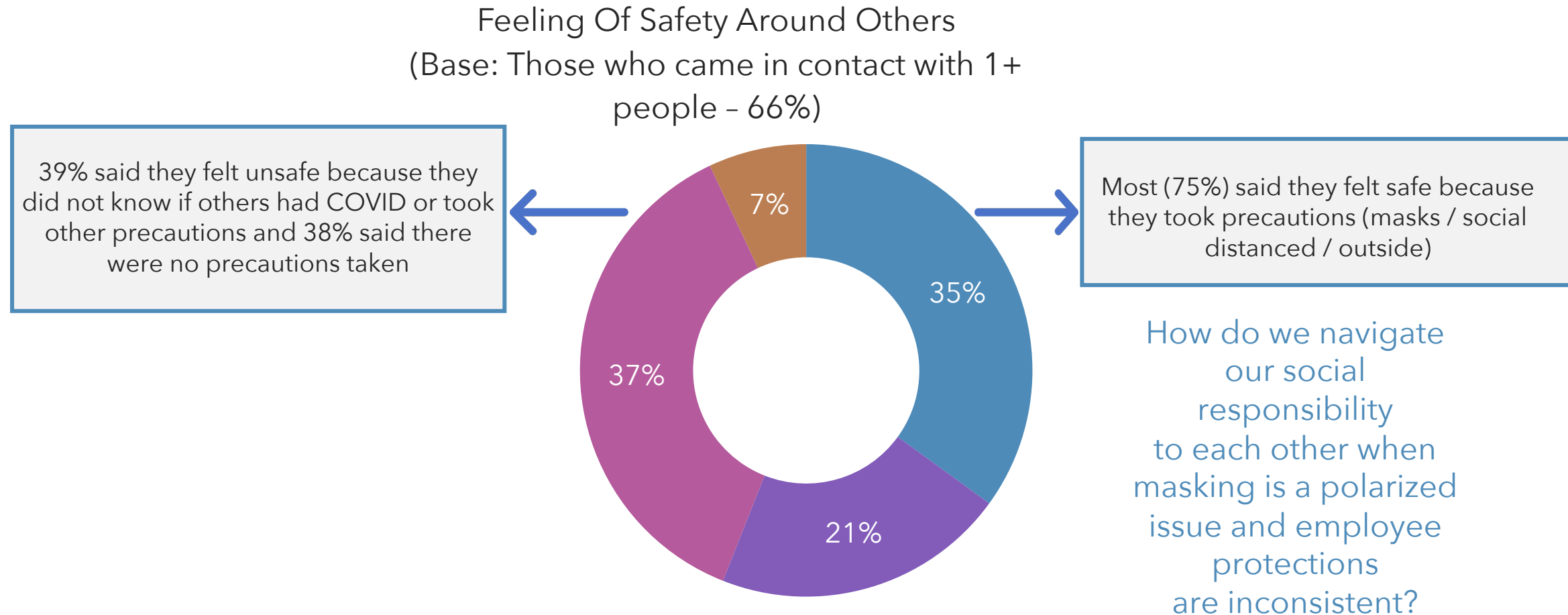


\$Statistically significant at the 90% confidence level, English vs Spanish

Q11. Do you currently work? (N=271)

Q13. Do you feel like your employer makes an effort to protect you from COVID-19? (N=176)

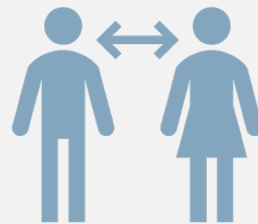
People feel safer when they are empowered to protect themselves, and less safe when others don't take the same precautions.



People report others close to them have different views and safety practices regarding the virus.



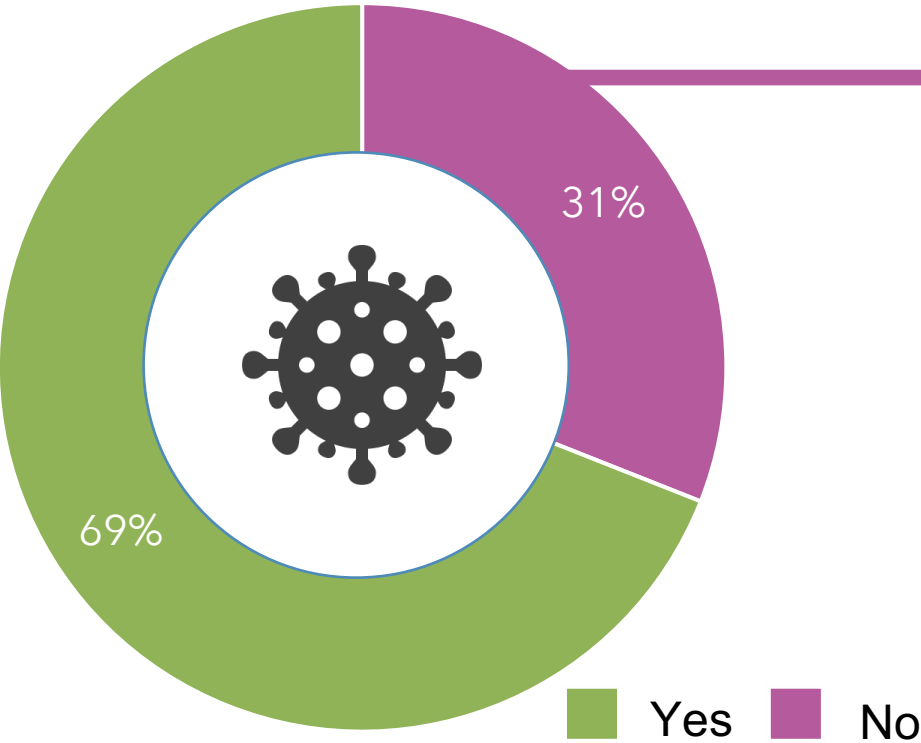
21% say that people close to them do NOT think the virus is dangerous



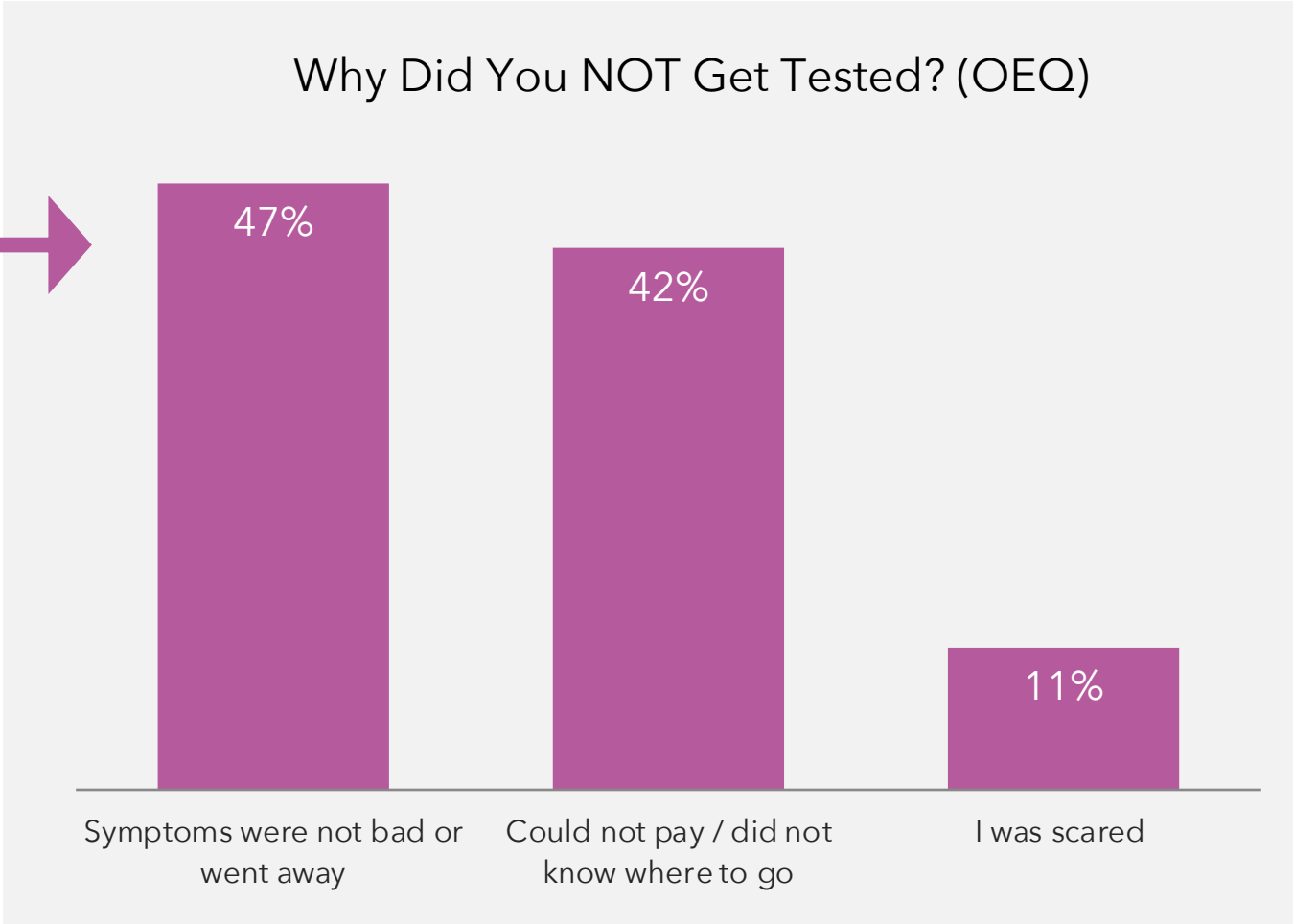
18% say people close to them do NOT wear masks or social distance even when there are many COVID cases

Almost a third (31%) of EC Austin Hispanics who had COVID symptoms did not get tested because their symptoms were not bad enough or because they could not pay or did not know where to go.

Did You Get Tested for COVID?



Why Did You NOT Get Tested? (OEQ)

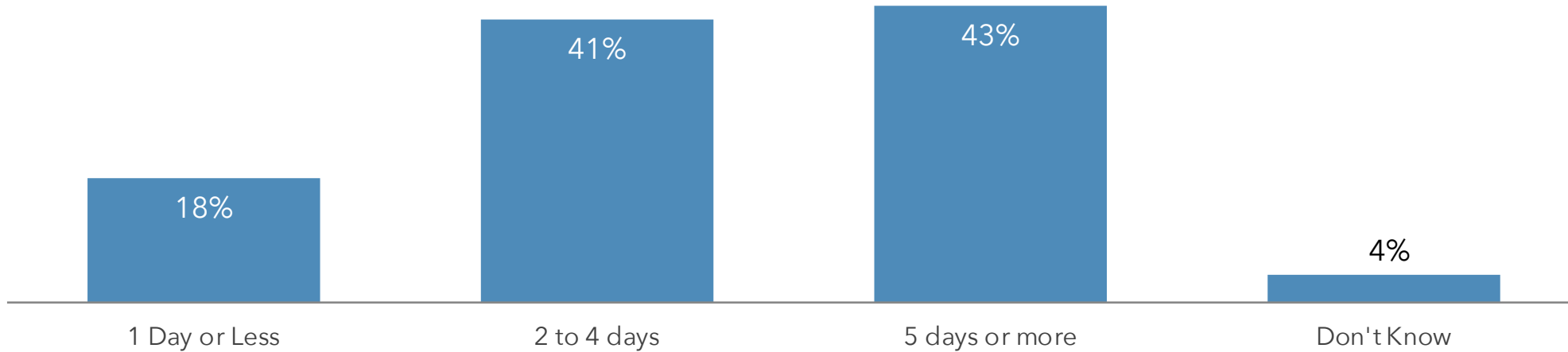


Q4. Did you get tested for coronavirus? (N=49)
Q4C. Why didn't you get tested? (OE) (MR) (N=18) (Base: COVID HHLDS - 26%)



41% of people had to wait 2 to 4 days for test results to return and 43% had to wait 5 days or more

How Long They Waited for COVID Test Results



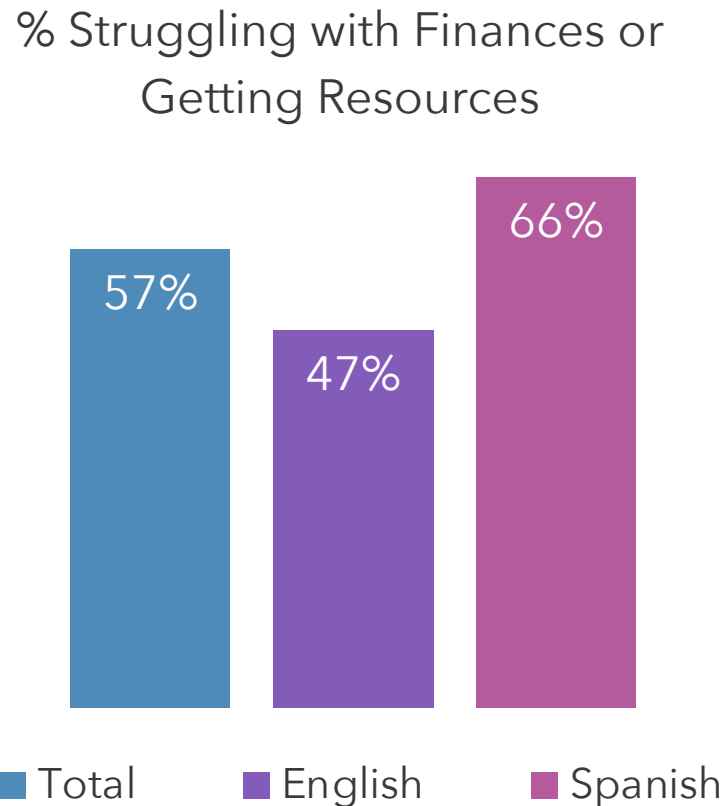
15% had to wait more than 2 weeks!

Most frontline works do not have paid leave to quarantine during this time

**~6% of people got 2 different tests which is why this equals more than 100%*

\$Q04A. How long did it take to get the results? (OE) (MR) (N=32)

57% of survey participants are struggling with finances



Less people take their cars in to get fixed which means I get paid less and that creates a struggle to pay bills for food and debt.



Estuve sin trabajar y no pude pagar las facturas, y los niños están en casa y no puedo trabajar por que tengo que estar con ellos por que estudian en línea.

(Without work, I couldn't pay the bills and the kids were home so I couldn't work)



No perdí el trabajo pero me recortaron el tiempo y tenía que tomar la decisión de pagar renta o comida.

(They cut my hours, so I had to decide between paying rent or food)

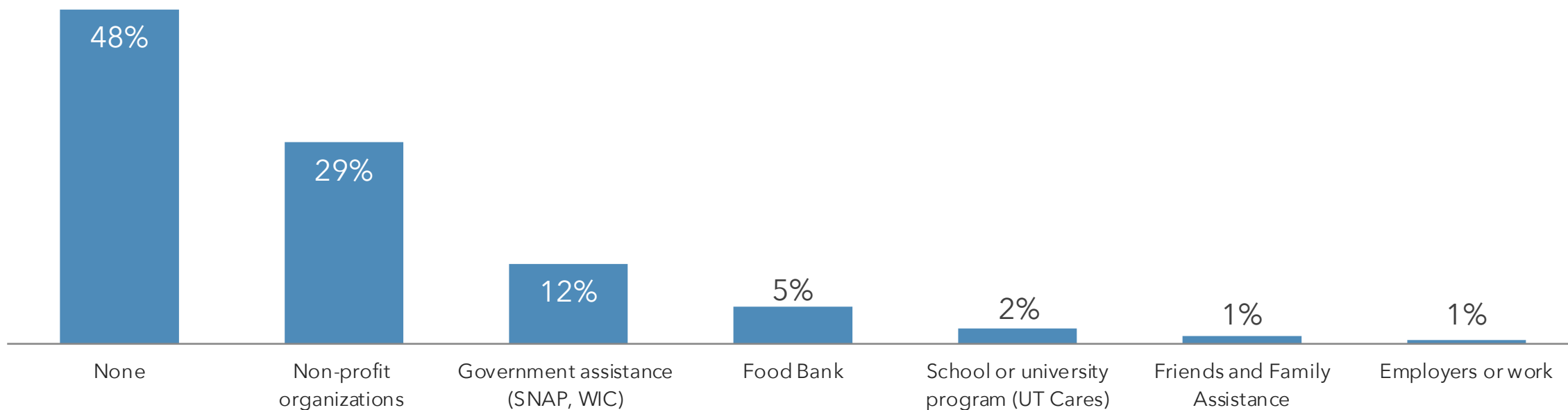
*Statistically significant at the 95% confidence level, English vs Spanish

Q14. Have you struggled with finances or getting other resources because of the coronavirus? (N=271)

Q15. In what ways are you struggling with finances or other resources because of the pandemic? (OE) (MR) (N=152)

Of those struggling with finances, almost half (48%) could not name one place/program that offered assistance.

Places or Programs That Have Offered Assistance (OEQ)



(Base: those who say they are struggling with finances)

Q16. Name any places or programs that have offered assistance helping you to get through difficult times. (OE) (MR) (N=155)

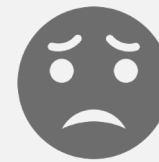
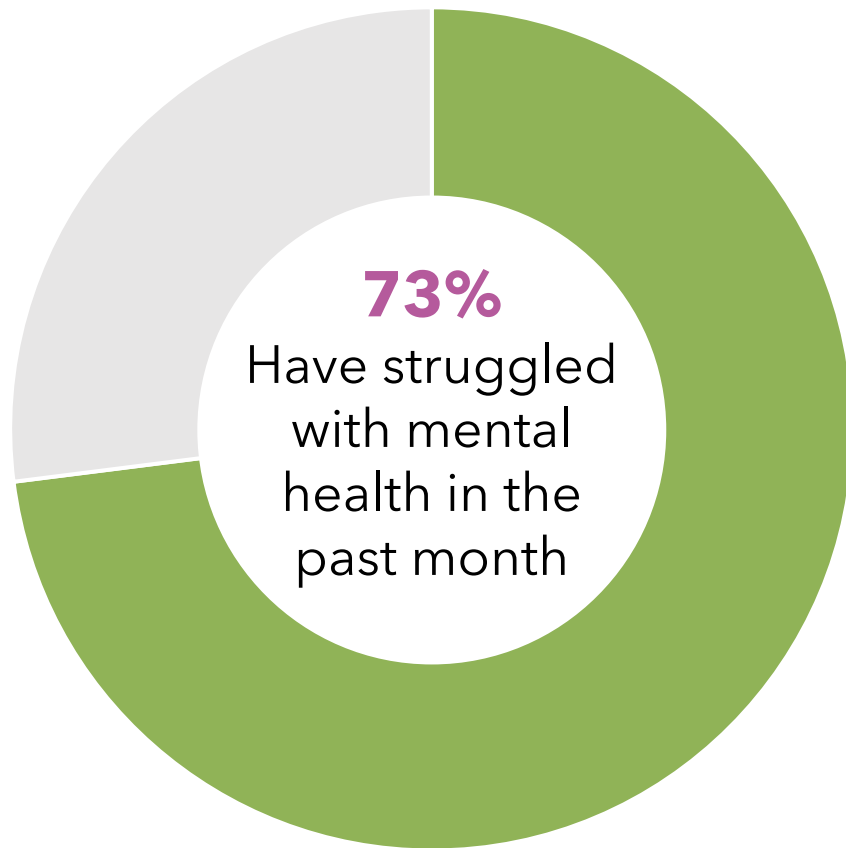


Of the 52% of participants who received assistance, these were the organizations and programs who helped them.

Organizations & Programs Mentioned

- **Workers Defense Fund**
- **Food banks/pantries**
- **Dove Springs Proud**
- **RISE**
- Any Baby Can
- Con Mi Madre
- El Buen Samaritano
- Capital Idea
- People's Community Clinic
- SNAP/Food stamps
- Student Support Services @ Texas State
- UT Emergency Funds Act/Cares Act
- Made a GoFundMe
- CIS
- CCMS for Daycare
- Austin Energy
- Texas Workforce Commission
- HAMM
- Avance
- Austin Diaper Bank
- St Anthony's
- City of Austin
- Communities of Color United
- Grassroots Leadership
- Up Together Assist Prepaid Card

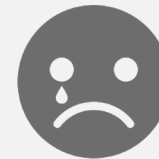
Almost three-quarters (73%) have felt overwhelmed with worry, unable to control their lives, or felt they let themselves or their family down.



63% felt overwhelmed with worry about what will happen to them or their family



33% felt they were unable to control the important things in their lives



27% felt bad that they have let themselves or their family down

Level of Risk & Vulnerability



"No matter what situation the city is in, come rain, thunder, lightning or whatever, we Latinos, will always be responsible for our obligations. And yet I feel that sometimes we are not taken into account."

(Woman, Spanish-dominant, 25 yrs., housewife, husband is a roofer)



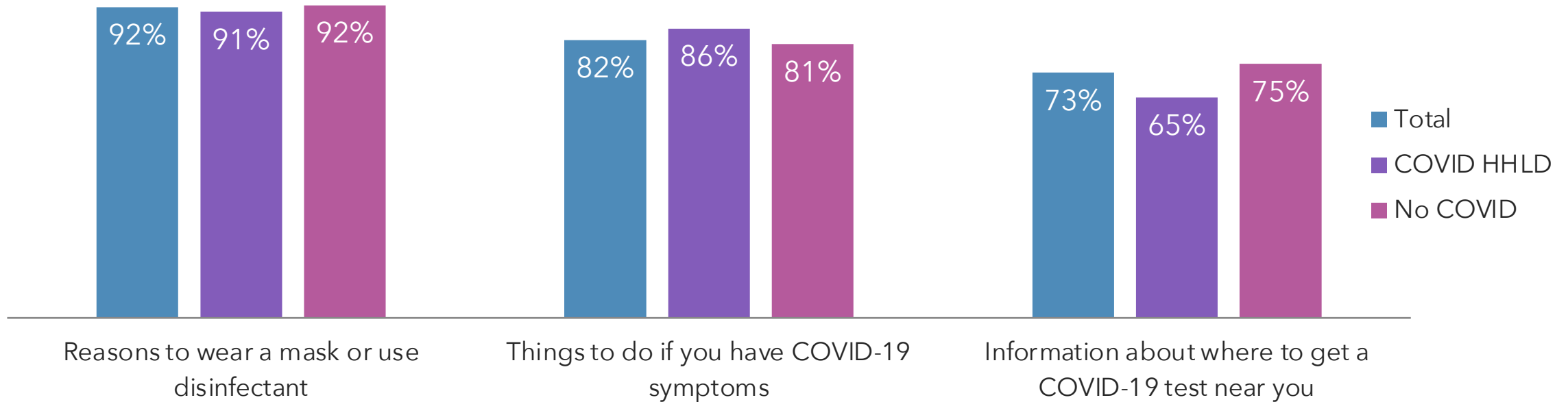
"Almost impossible to get the help I need"



"It's really hard to get information in Spanish."

Basic information is widely understood.

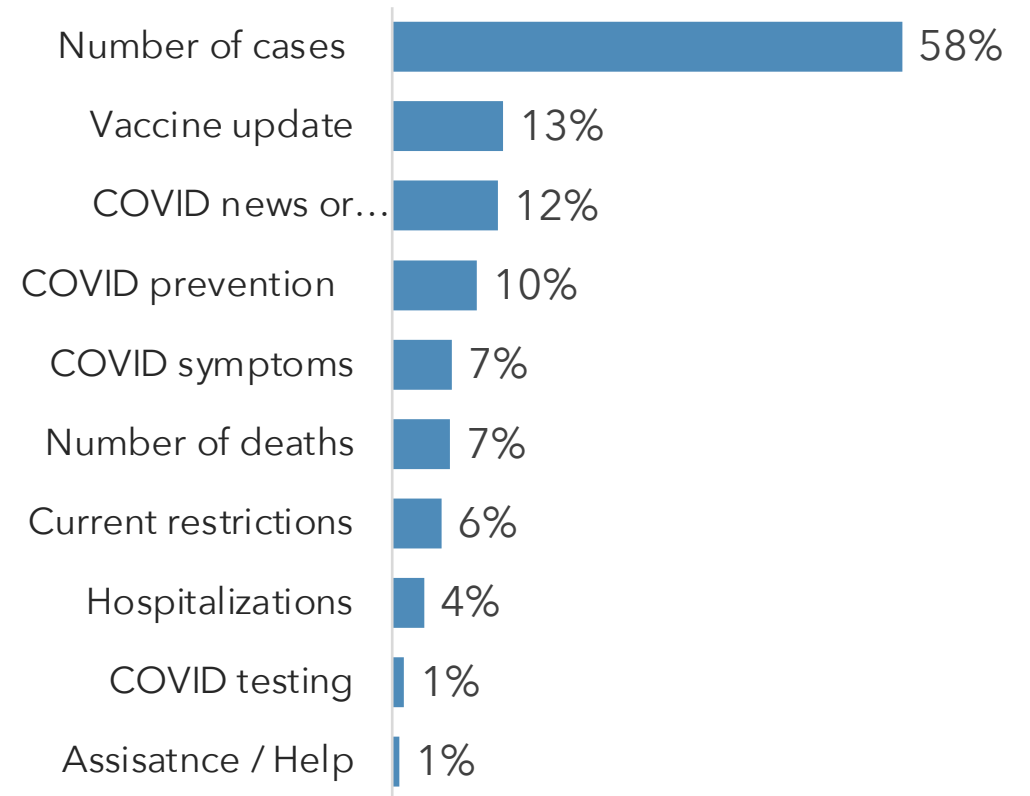
% Who Have Seen the Following...



People are searching for more in-depth and personally, relevant information.

How often do you look for information about COVID?	Total	COVID HHL D	No COVID	English	Spanish
Daily	37%	29%	40%\$	26%	49%*
Weekly	33%	44%*	28%	33%	32%
Less than weekly / Never	30%	27%	31%	41%*	20%

Information Looked For



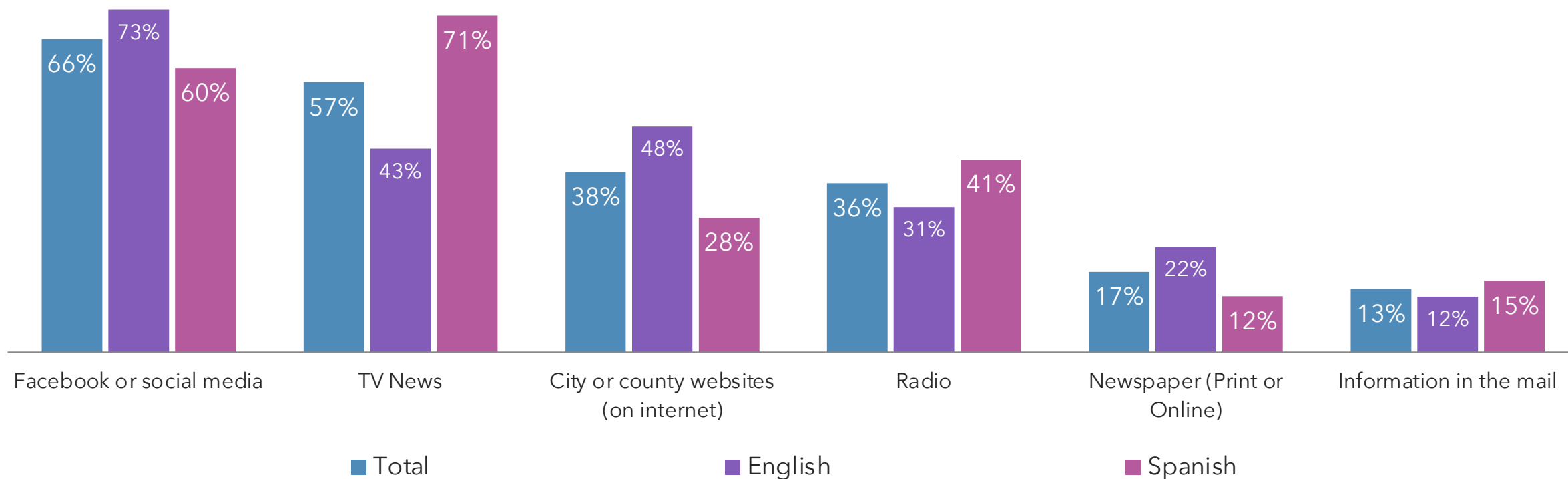
*Statistically significant at the 95% confidence level | \$Statistically significant at the 90% confidence level, COVID HHL D vs No COVID and English vs Spanish

Q22. How often do you search or look for information about COVID-19? (N=269)

Q23. Please describe what specific type of information you look for. (OE= Open ended) (N=267)

They look for information in social media and TV news.







Where They Go for COVID Information



TV news is the most trusted information source.

Do our advertising dollars reflect this?

Information Sources They Trust Most

		Total	English	Spanish
	Local TV / Television	31%	31%	31%
	Social Media	16%	14%	19%
	Government cites (CDC)	16%	21%*	10%
	Radio	10%	7%	13%
	News Papers / Articles / Online Websites (CNN, NYT, etc.)	4%	7%*	1%
	Health care professionals	4%	5%	3%

*Statistically significant at the 95% confidence level, English vs Spanish
 Q21. Which information sources do you trust most? (OE= Open ended) (MR) (N=271)

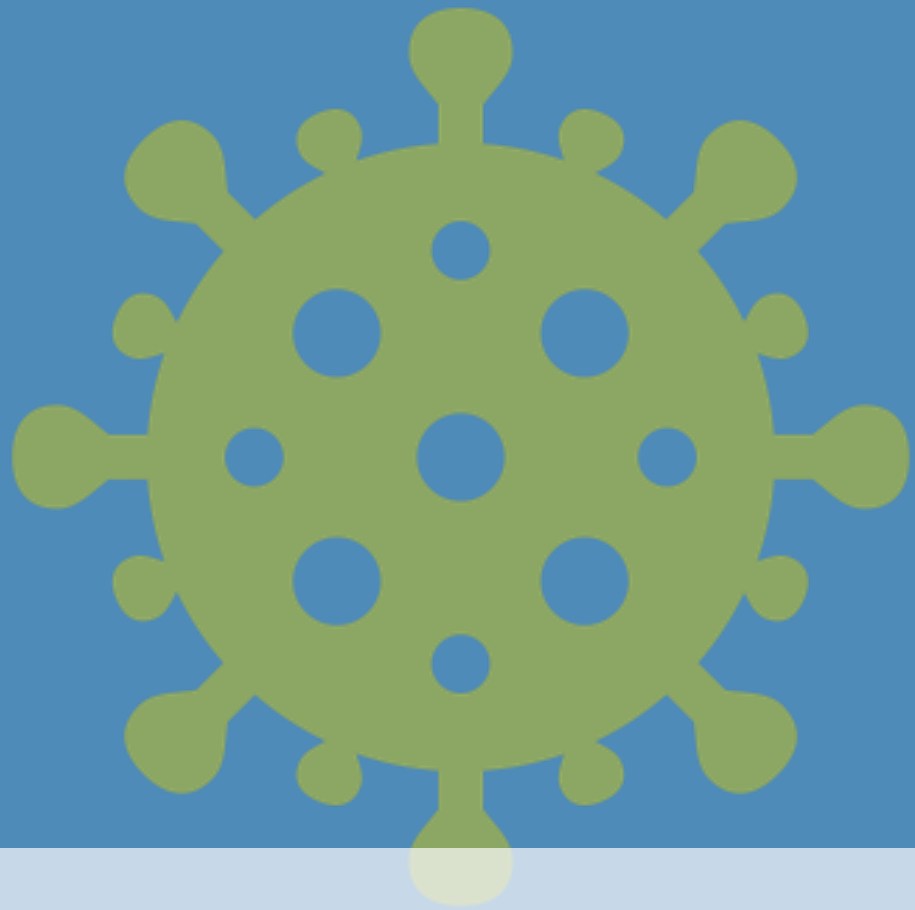
Problems Encountered When Trying to Get Resources

1. Resources are very English dependent, not enough Spanish staff, need language & culturally attuned support staff
2. Do not know where to start – no directory of services
3. Lots of hoops – bureaucratic, confusing requirements, not widely known
4. Ask for a lot of information & end up saying not qualified & unclear why
5. Relies on tech savviness
6. Some programs helpful, but situation is dire & goes beyond the help they got
7. Need access to finances – fair interest rates & terms
8. Different levels of learning & understanding, different literacy levels

Highlights



- 6 in 10 EC Austin Hispanics/Latinx got COVID or think they will get it. Over a quarter of Hispanics (26%) live in a household where someone got COVID or had COVID symptoms. Another 34% are worried they are likely to get COVID.
- Almost a third (31%) of these Hispanics who had COVID symptoms, did not get tested, mainly because their symptoms were not bad or went away.
- Most people who got COVID from a high-risk situation, say they caught it from someone at work.
- After healthcare workers, frontline service workers (cleaning, restaurant, retail) are most at risk. A third of Hispanic frontline service households have gotten COVID and 8 in 10 feel at risk of getting it.
- English workers feel more protected by their employers (71%) vs Spanish dominant workers (58%).
- Two-thirds (66%) of Spanish dominant Hispanics are struggling with finances or getting resources, as are almost half (47%) of English dominant Hispanics. Almost half of Hispanics (48%) struggling were not aware of and did not receive any financial assistance or resources.
- Almost three-quarters (73%) have felt overwhelmed with worry, unable to control their lives or felt they let themselves or their family down.



Supporting Information from the Research Team

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Risk varies depending on several factors. Is messaging oversimplified?

The “6 foot” rule is useful, but antiquated.

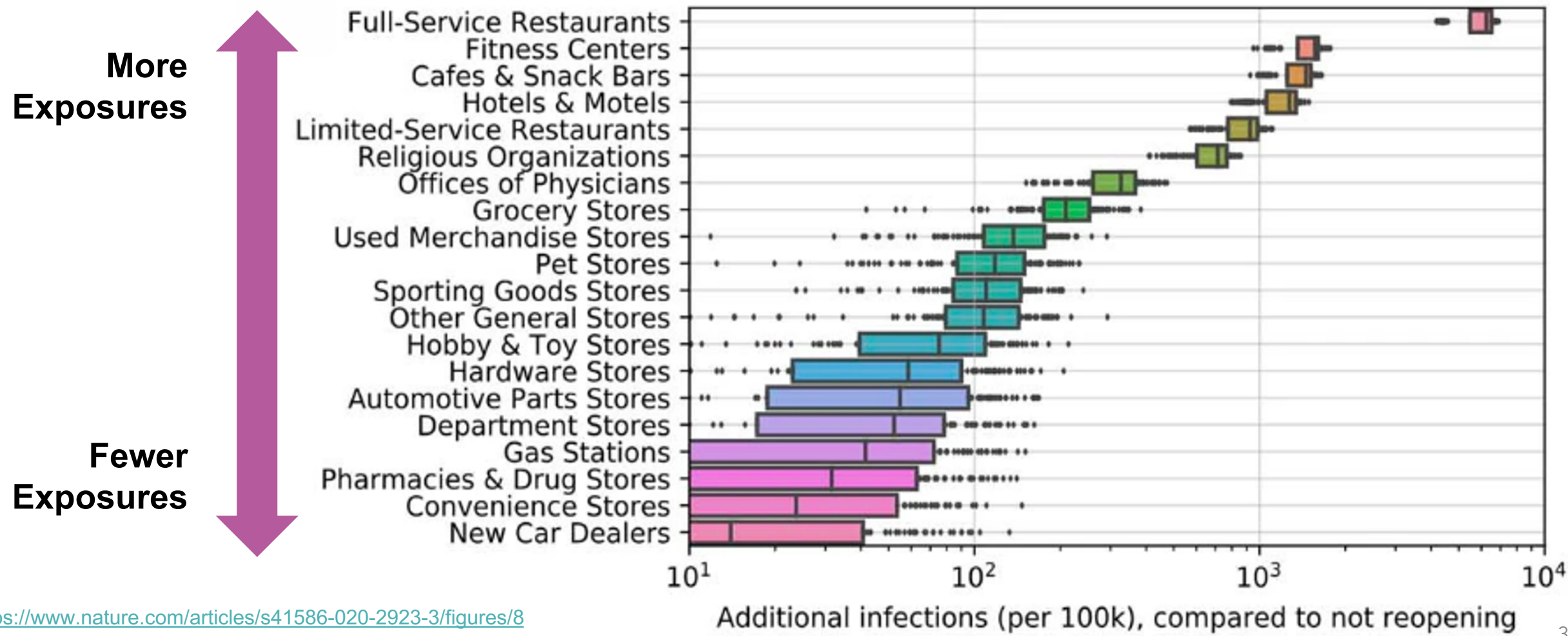
Type and level of group activity	Low occupancy				High occupancy		
	Outdoors and well ventilated	Indoors and well ventilated	Poorly ventilated		Outdoors and well ventilated	Indoors and well ventilated	Poorly ventilated
Wearing face coverings, contact for short time							
Silent	Low	Low	Low		Low	Low	Medium
Speaking	Low	Low	Low		Low	Low	Medium
Shouting, singing	Low	Low	Medium		Medium	Medium	High
Wearing face coverings, contact for prolonged time							
Silent	Low	Low	Medium		Low	Medium	High
Speaking	Low	*	Medium		*	Medium	High
Shouting, singing	Low	Medium	High		Medium	High	High
No face coverings, contact for short time							
Silent	Low	Low	Medium		Medium	Medium	High
Speaking	Low	Medium	Medium		Medium	High	High
Shouting, singing	Medium	Medium	High		High	High	High
No face coverings, contact for prolonged time							
Silent	Low	Medium	High		Medium	High	High
Speaking	Medium	Medium	High		High	High	High
Shouting, singing	Medium	High	High		High	High	High
Risk of transmission							
Low	Low	Medium	High		* Borderline case that is highly dependent on quantitative definitions of distancing, number of individuals, and time of exposure		

Risk of transmission

Low ■ Medium ■ High ■

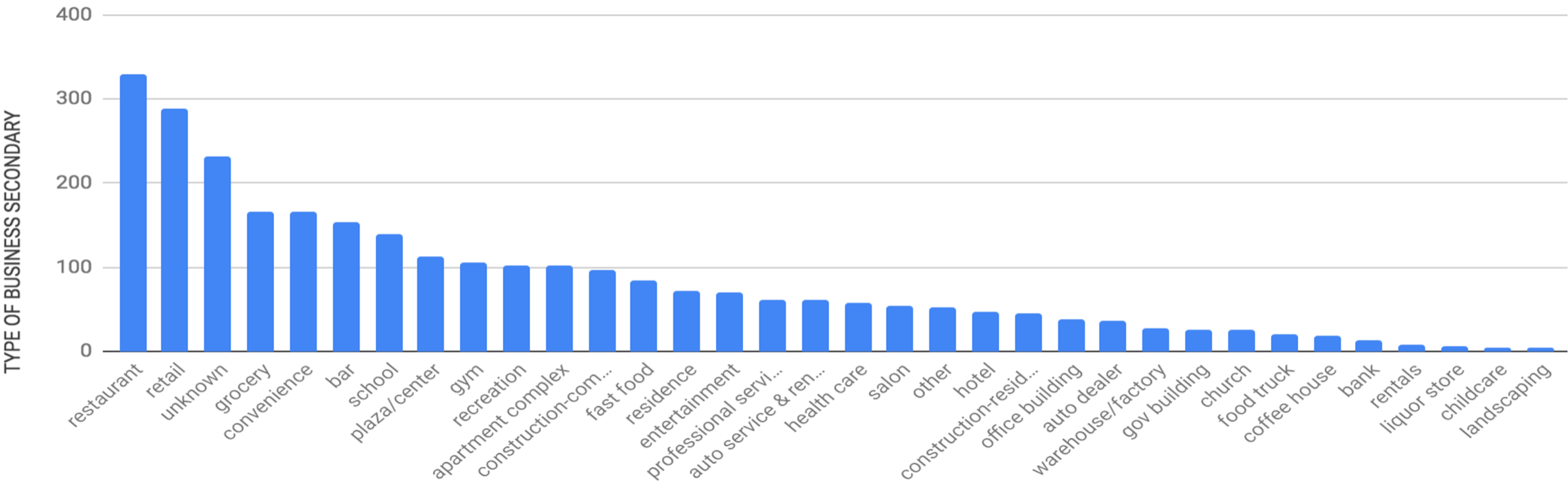
* Borderline case that is highly dependent on quantitative definitions of distancing, number of individuals, and time of exposure

Mobility and COVID case data from 10 MSAs show the impact of reopening by business category. Restaurants ranked highest for risk.



Austin's 311 call data shows restaurants have the highest number of complaints.

TYPE OF BUSINESS SECONDARY vs. What are the Current Categories of Business in the Business Complaints to Date Data?



What are the Current Categories of Business in the Business Complaints to Date Data?

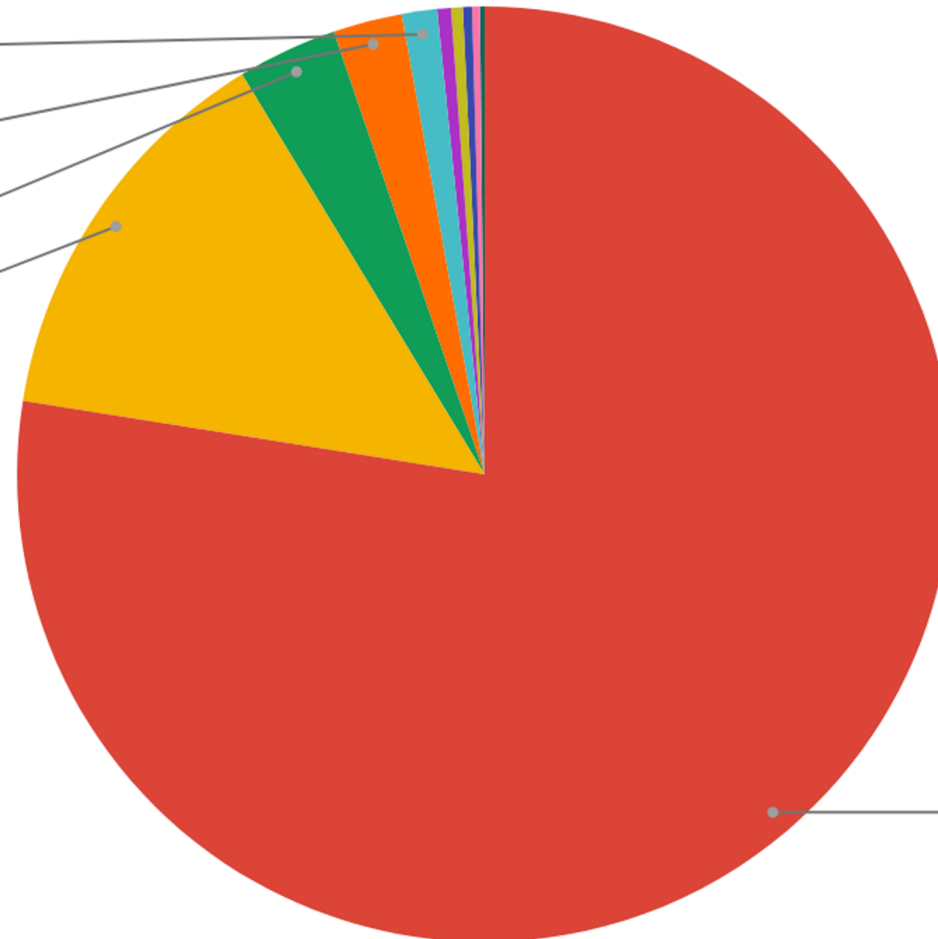
Enforcement is significantly lacking.

Closed due to Administrative Reasons

1.2%
Closed/Duplicate Case
2.4%
Referred to Appropriate Agency
3.5%
COVID-19/Education Provided
13.8%

Resolution to Complaints Construction

Verbal Warning
1.3%
Education
25.3%
No Violation
72.0%

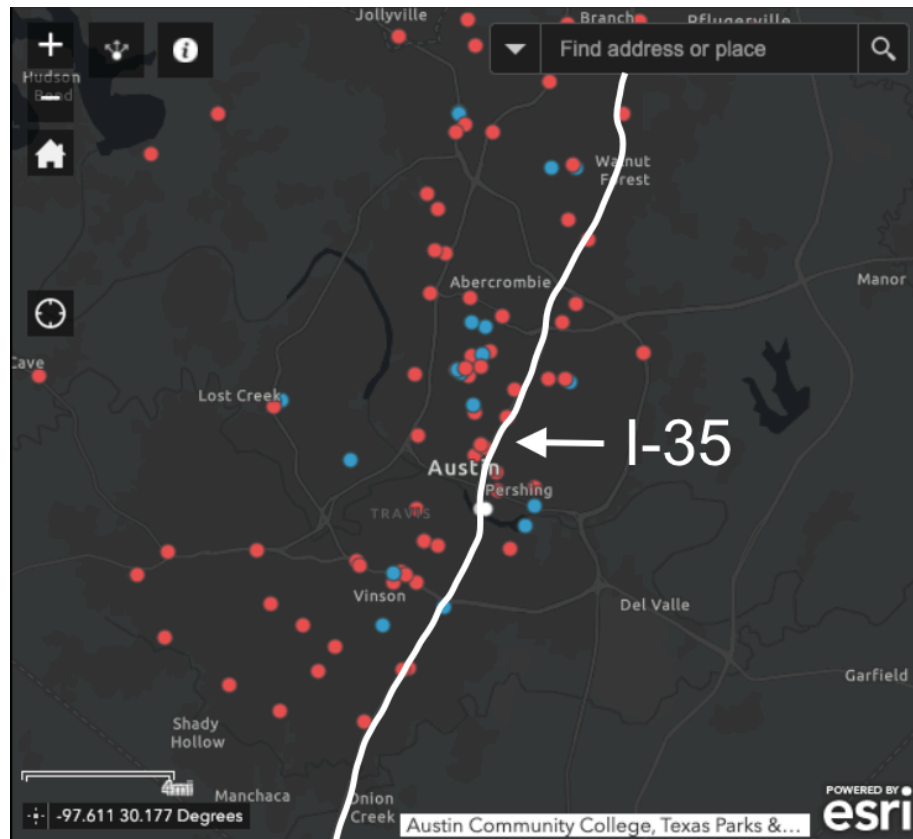


No Violation(s) Found/Inspection Perf...
77.5%

This is based on 311
complaint data through 9/25

Vaccine Distribution Favors Privileged Populations

Total Approved Providers



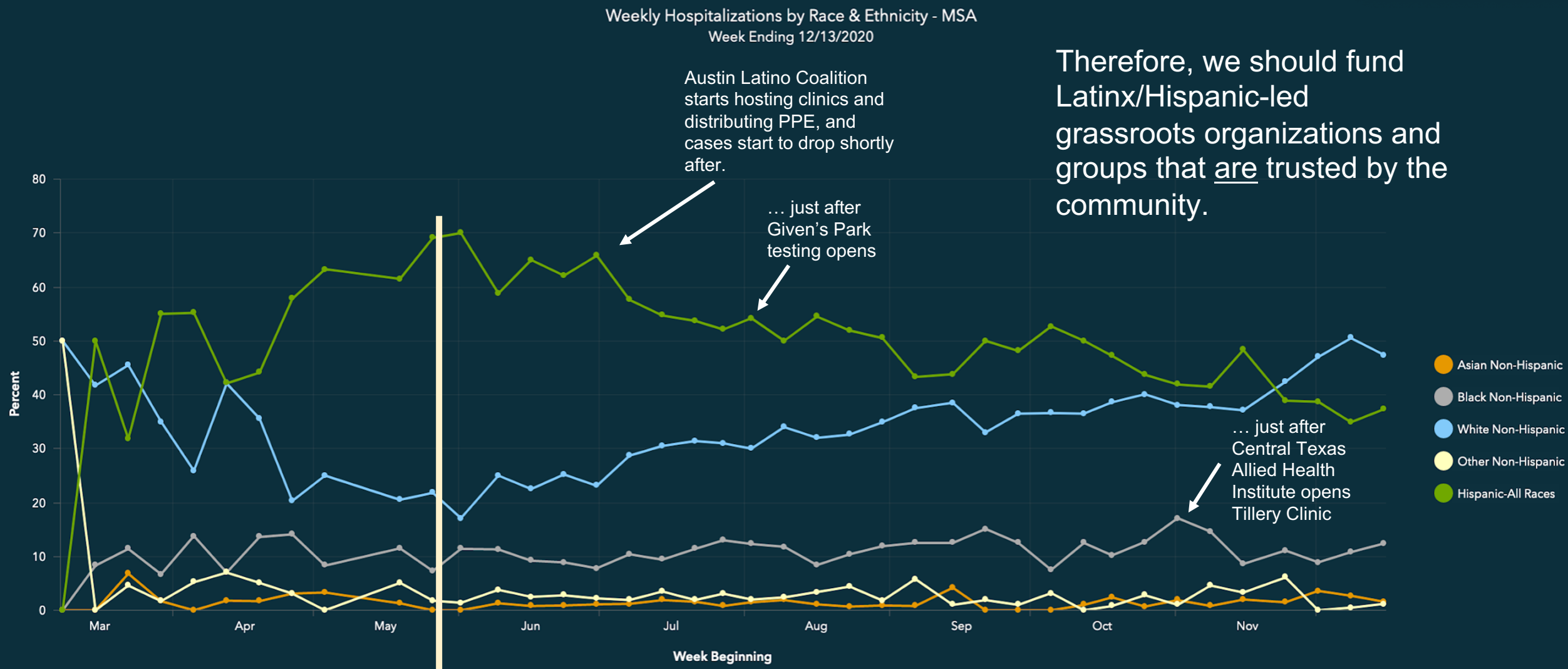
Sites with Available Vaccine (1/25)



Vaccine Readiness and Distribution vs. Hispanic / Latinx Population by Zip Code

Zipcode	Hispanic / Latinx Population	Percent COVID Positive (APH Dec 6 Data)	# of clinics + pharmacies found (CRT)	# Reg w/ DSHS	# Approved	Doses Delivered to Zip Code	# of Active Sites (have received vaccine)	% Hispanic / Latinx
78702	15260	9.4	17	12	7	13800	6	67.72
78744	21838	13.6	13	7	3	200	2	64.79
78742	358	25	0	0	0	0	0	57.28
78719	992	no data (testing desert)	0	0	0	0	0	56.2
78752	9837	9.9	10	5	5	500	3	54.56
78741	20965	8.6	14	8	4	1600	2	51.56
78721	5138	5.6	4	2	0	0	0	50.75
78617	3585	19.9	4	4	2	0	0	48.52
78724	6699	20.7	3	2	1	0	0	43.42
78723	12731	8.5	24	17	8	5050	5	42.28
78745	21382	7.4	31	19	8	1300	7	40.31
78753	17034	12.9	18	14	6	200	2	38.53
78747	1801	9.7	2	1	0	0	0	35.45
78725	633	8.6	1	1	0	0	0	34.47
78704	14700	10	25	18	11	3550	8	33.99
78758	13758	10.7	31	21	8	5750	4	32.13
78748	7695	10.6	15	11	6	200	2	30.34
78653	4932	14.4	6	5	3	500	1	30.12
78660	1580	9.2	26	16	9	1500	5	21.42
78722	1300	4.5	3	2	2	300	2	20.42
78754	1069	16.9	6	1	0	0	4	19.71
78701	710	6.2	9	5	2	2750	2	18.41

Given the lack of trust for government and health professionals, we need to work with, and fund trusted grassroots organizations.





Human-Centered Design Insights and Recommendations

COMMUNITY RESILIENCE TRUST

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Qualitative research: What we heard



61-year-old
Hispanic male

Miguel* | Restaurant employee

- Works in a restaurant keeping things clean
- Lives in a multigenerational household
- Wants to protect his family from getting sick
- Learned of Pfizer vaccine from family in Mexico

"We need to know what is going on [with vaccines] and be able to share that info: how much, when, if the government is going to make it available... I heard \$80! In Mexico, it will be free, medicine is free - but here... it's expensive."

Problem: Essential workers have a vital need for information about COVID like testing, vaccines, availability, and cost.

Opportunity: How might we make information easily accessible for the people who need it most?

**Pseudonym used to protect confidentiality*

Observations

Misinformation about vaccine - locations, cost, safety, privacy, etc.

Insights

Communication around COVID-19 treatment and vaccines must prioritize patient confidentiality.

Recommendations

1. Host open dialogue re: vaccine to transparently inform + empower community
2. Attendees of informational meetings are offered vaccines blessed by religious organization, such as a local priest.

Considerations

- Latinx community members may hesitate to sign up for events / email lists (if undocumented) for fear of giving information to ICE
- Text first approach allows time for screening but requires continuous follow up and time
- Consider the different levels of Spanish literacy in the community



Recommendations – Group 1

Observations

Wants more information about the vaccine.

Insights

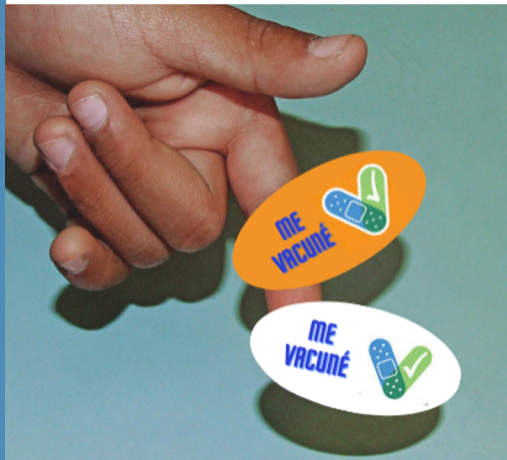
COVID-19 messaging must be amplified by and delivered through trusted organizations to ensure buy-in.

Recommendations

1. Provide digital media kit to nonprofits whom Latinx community trusts (El Buen Samaritano, Any Baby Can, Interfaith/iACT, etc.).
2. Distribute "me vacuné" stickers (like "yo voté") to give people after they get vaccinated.

Considerations

- Individuals may have religious reasons to not get vaccinated.
- Curanderas/os are a trusted source vs. a doctor.



Recommendations - Group 1

Observations

Frustrated some aren't taking COVID seriously

Insights

COVID-19 messaging and outreach that speaks to Latinx community values.

Recommendations

1. Collective responsibility PR campaign framing public-health measures that speaks to Latinx values

Considerations

- Communicate via popular mediums: Facebook, text, Whatsapp, Spanish news channels, etc.
- Speak to the family and cultural norms (i.e interacting in large gatherings at home, church, etc..)
- Age specific content by & for 15-25 years old



Observations

Leadership doesn't always reflect Latinx community

Insights

Illustrate positive community resilience to COVID-19 by telling the stories and intersections of the pandemic

Recommendations

1. Stories from the Community: families share memories of leaders lost to COVID + share short clips via social
2. Latino leadership campaign: Taking the vaccine and sharing how to do it

Considerations

- Consider the diversity among Latino communities, know your audience



How might the Latinx community prevent the spread of COVID in multi-generational households?

1

11
interviews.

2

Analyze the
unexpected
– the twist.

3

Build concepts based
on the unexpected –
the twist.



This is Gabriel*:

Spanish dominant household.

Dedicated family man.

Both parents work in person, outside the household in high risk environments

Lost job, could not pay bills and groceries, went to food pantries throughout 2020 to get basic needs met.

** Not his real name. He gave his permission to use his video.*

We were surprised to notice how much the COVID environment has affected his stress levels.

The Unexpected:

Valentina

Gaining COVID compliance in the home with extended family members.

community	campaign	education	Gov't + Regulatory	new org	product
Covid emergency preparedness magazine that uses schemas as backdrops	let her know the schema exists & explain ways to use it	curriculum by nonprofit to educate individuals	there was an impetus outside of the schema that mandated/ made mask wearing the norm	Network + org of heads of households	Coffee table book that educates about schemas
Catholic church services include messages about respecting heads of households	protect your family members and friends	let her know that the schema exists & explain ways to avoid	provide incentive to lower spread risk	like las comadres?	consider a platform that builds networks of heads of households
food & cultural storytelling events	change the schema so that mask wearing is not threatening	protect your family members and friends	Travis county could sponsor regulations for employee protection	Use existing orgs as a network to educate heads of households	create a documentary on the importance of heads of households
create a Head of Household Day	are your neighborhood heads of household known?	change the schema so that mask wearing is not threatening	When service providers rollout standards for Covid safety, include HC design	incubator (?)	Local TV programming by and of...
Include heads of household as guests of honor at events	Major Brand Supporting Heads of Household	distributing messages to adults through kids in school	Gov't funded HC Design compliance for Covid safety	Head of household 5K run / walk	Head of household workshops

Gabriel

Job loss, food and housing insecurity leading to significant stress to mental health.

Easy access to mental & other healthcare	Receives unemployment benefits & file or will lose their job (regardless of documentation status)	Vaccine Food Trucks	Stress Finder	workforce stability ecosystem. If laid off, ecosystem has job lined up immediately	unemployment checks are tied to your last job. Instead of TWC
wearable sensors that capture vitals and warn of elevated levels	Mutual aid marketplace: donation, barter, trade	There were sufficient supplies of food for the community	Don't allow evictions during Covid	Orgs to supply employers with PPE for hi-risk workers	He had better information on "COVID safe" activities to feel more normal
fear reduction device	emergency resource dashboard: give a little, have a little, see what is needed around the community	employer provides full PPE for frontline workers	He can take his family on outings (e.g. swim at river, etc.) to feel "normal"	Reassurance that there's a light at the end of the tunnel	Has priority & easy access to COVID vaccine
fear reduction service	Friend on your shoulder	A garden in backyard to grow family's own food	partial rent goes toward community garden	Coupons when you move into a new place for chicken coop garden materials	local taxes support local community
what if he had a personal stress reliever?	neighborhood mental health services	what if pharmacies had mental health booths	What if neighborhoods were equipped to soothe each other?	Austin Public Health free app with mental health providers on demand	What if we created NO STRESS zones?
what if ice cream trucks had mental health services?	general counseling services available	Some way for him to get positive feedback that he is managing Covid well	Community based communication and organization around disbursement of critical household items	What if SUPPORT ANIMALS ran in packs?	what would "Uber Zen" look like?
Physical Exercise to help with mental stress	Community dialogue-sharing experiences with others in his community	Neighborhood "community fridge" (similar to east Austin)	what if mental health training was avail in k-12?	what if healthcare orgs adopted neighborhoods?	What if an annual mental fitness test was mandatory every year?
Neighborhood "little library" with resources: community food boxes, mental health resources, emergency kit, etc.	What if employers were required to provide easy/free access to mental health resources	What if there is a law giving fines to people that don't follow the rules	Mayor declares that no one in Austin will go hungry or sleep outside	What if police officers were also life-coaches?	what if wi-fi was free for mental health calls

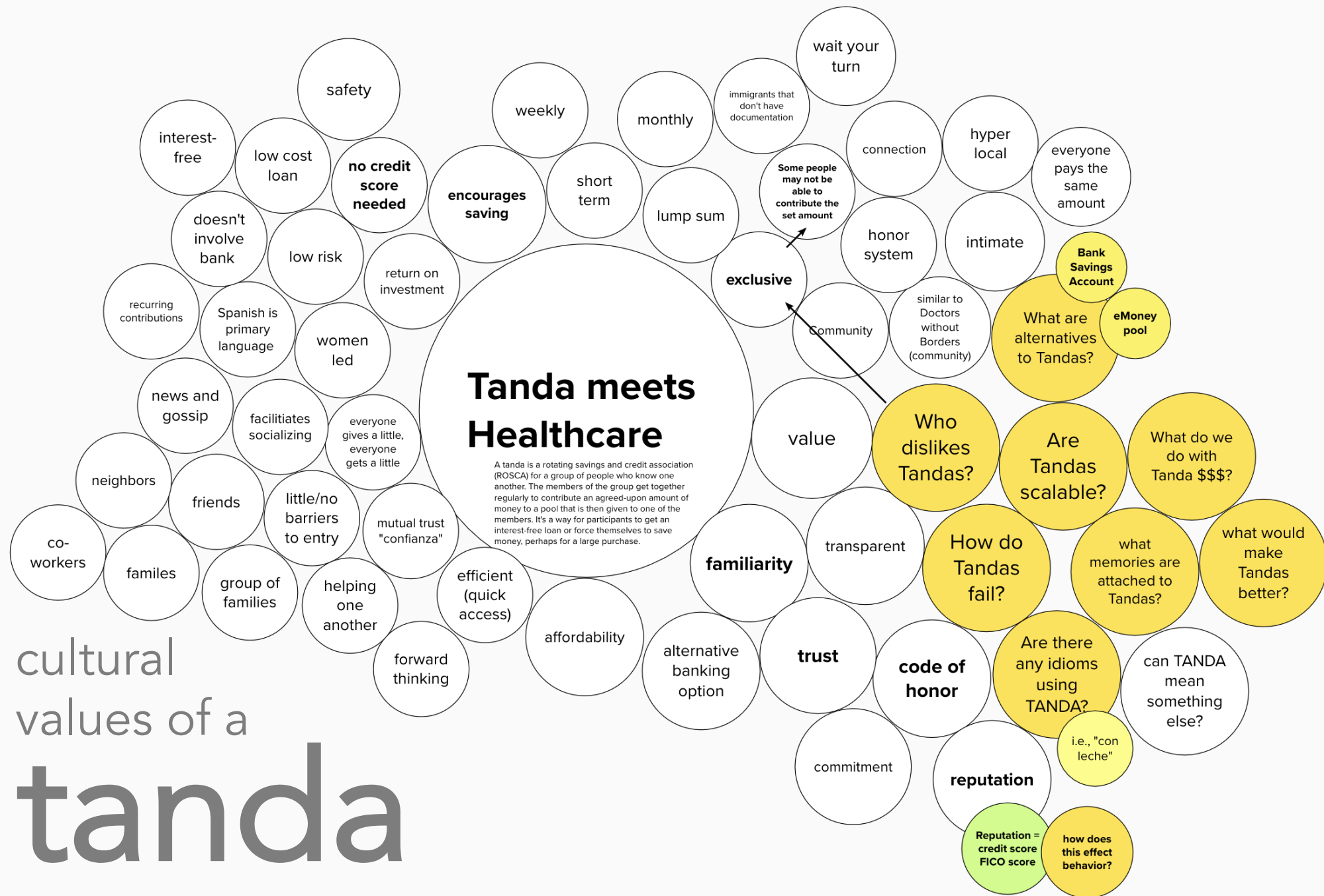
Natalia

Experiencing multiple, extremely poor healthcare service experiences in Austin area.

Follow up questions are handled with integrity	House calls	Natalia's previous provider could instantly share her records with new provider	HC insurance that matches price with level of service	Global pride in USA HC system
Clear instructions about how to administer medication	Preventative Care calls	Healthcare Consumer Genie	Purchase medical insurance in the lobby before care	Uber Doctor
Healthcare providers were more human-centered	Personal touch service	Healthcare Smart Home	Outcome based, community healthcare plan (rather than symptoms/disease)	Healthcare Passport, add to your IDs
Patient Reviews	Meet you anywhere for care	Vitals are connected to Healthcare System	Health Care Service Tsar / watchdog org	What if patients could rate doctors?
Multi-lingual in every patient interaction	Health Care On Demand	Med Link: App connects your med accounts + history	HealthCare TV Channel	Healthcare consultation when you move to a new city between old & new provider
New job description: Chief Patient Standards Officer	HealthCare Clubs	Med Dosage Meter	Amazon HealthCare	Build an empathetic culture inside healthcare org

Popular concepts and the categories they effect

Valentina	compliance	Provide incentive to lower Covid spread	Consider a platform that builds networks of heads of household	Create radio show of heads of households	
Gabriel	mental health	He had better information on "COVID safe" activities to feel more normal	What if neighborhoods could create a Design Task Force to address Covid?	What if we could work off existing debt with our talents?	Don't allow evictions during Covid
Natalia	healthcare quality	Healthcare Tanda	Healthcare consultation when you move to a new city between old & new provider	consistent Multi lingual in every patient interaction	





Community Advocates' Insights and Priorities

Community Advocates' Insights & Priorities



Correct the Flow of Funding



Correct the Language & Communication Network



Provide Better & More Relevant Information



Correct The Lack of Access to Healthcare



Protect Employees



Correct the Flow of Funding – Short Term

Hire the community (NPOs, CBOs) to provide services to the community.

Simplify requirements to receive financial resources based on the most vulnerable: no citizenship status required, zip codes prioritized, etc. Provide financial resources with other reasonable requirements.



Correct the Flow of Funding – Long Term

We need an independent equity audit of COA and County COVID funding.

Provide more cash support, and partner with NPOs to distribute direct cash assistance.



Correct The Language & Communication Network – Short Term

- Pay for advertisements in trusted news outlets. Rather than PSA's, contract Latinx media producers and graphic designers to develop ads that are a match for the targeted community. (Some departments including APH are doing this as of 1/26/21)
- Always include Spanish communications simultaneously if possible
- Work with churches, schools, nonprofits, and community leaders to reach the community through social media and find a way to compensate them.
- Explore use (by the city) of wide-reaching call systems like AISD robocall system.
- Have an interpreter at every vaccine site.
- Visual, social media, video (YouTube), radio, grassroots events, WhatsApp most important - less text & copy heavy
 - Encourage Pass-along





Correct The Language & Communication Network – Mid Term / Long Term

- Visual, social media, video (YouTube), radio, grass roots events, WhatsApp most important - less text & copy heavy
 - Make digital information mobile first & accessible many do not have computers or broadband
 - Grass roots health & community events and community organizations critical to building trust
- Work with the community to create messages that target specific segments of the population.
- City/County-wide strategy and funding to address Language Access across healthcare and social service systems. Hire the necessary translators and interpreters to get that done.
- Build a communications network of community organizations for trusted two-way public communication.





Provide Better & More Relevant Information – Short Term

- Good information about the need & safety of vaccines, no ID requirements, free or low-cost
- Vaccine details – when is it available, how much, do they have to have ID, is their privacy protected, how can they get access
- Access to testing, information and resources about what to do after a positive test
- Clarify guidelines by occupation: modifications needed in different occupations (many need to keep working), and when multiple adults work outside the home (entering & exiting the home).
- How to quarantine in positive COVID HH (mask wearing at home, ventilation in home, resources to help those households, cleaning practices, monitoring blood oxygen levels...)





Provide Better & More Relevant Information – Mid/Long Term

- Easy-to-find access to healthcare, a nursing line, 24/7, in Spanish
- Stimulate sales for independent contractors whose work opportunities have been cut short b/c of COVID
- Financial help and navigating applications
- Employee assistance programs for those at risk of losing jobs or who lost jobs





Correct The Lack of Access to Healthcare – Short Term

- (In progress as of 1/26/21, continue) Work with the community to prioritize the Hispanic/Latinx community for vaccinations. Develop and implement a vaccination education plan.
- Vaccine accessibility should be high on the priority list. Information on where to get it, in Spanish, no ID required. People are interested in getting the vaccine.
- Get vaccines quickly to frontline restaurant/retail/construction and other high-risk workers.
- Prioritize testing locations and vaccines in Latinx COVID-19 high case areas.
- Spanish staffing & language information & outreach.
- Fund a community-led vaccine education campaign





Correct The Lack of Access to Healthcare – Mid/Long Term

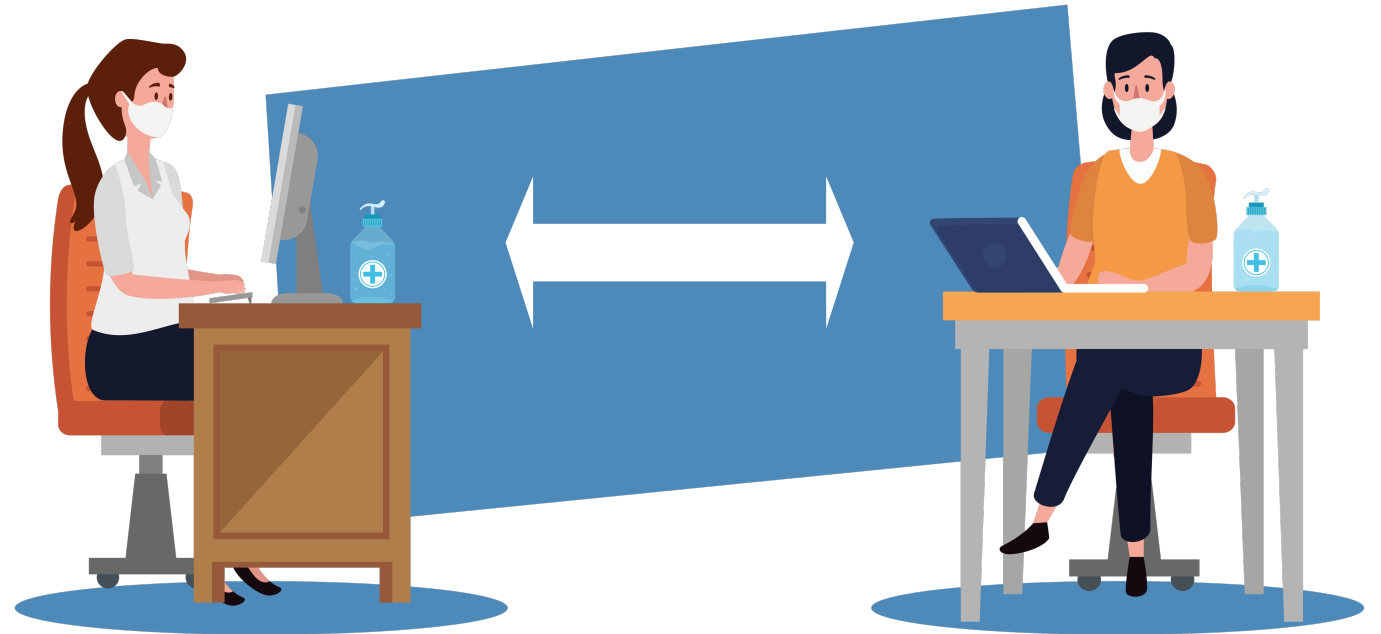
- Correct long wait times for test results.
- Mobilize a coordinated and agile community action team that's focused on meeting people where they are and connecting them to healthcare access.
- Work with a task force when funding and resources are allocated "for the community."
- Ensure language access across healthcare system - paid bilingual staff and materials.
- Include a focus on young adults in multi-generational families who can influence their parents and grandparents.





Protect Employees - Short Term

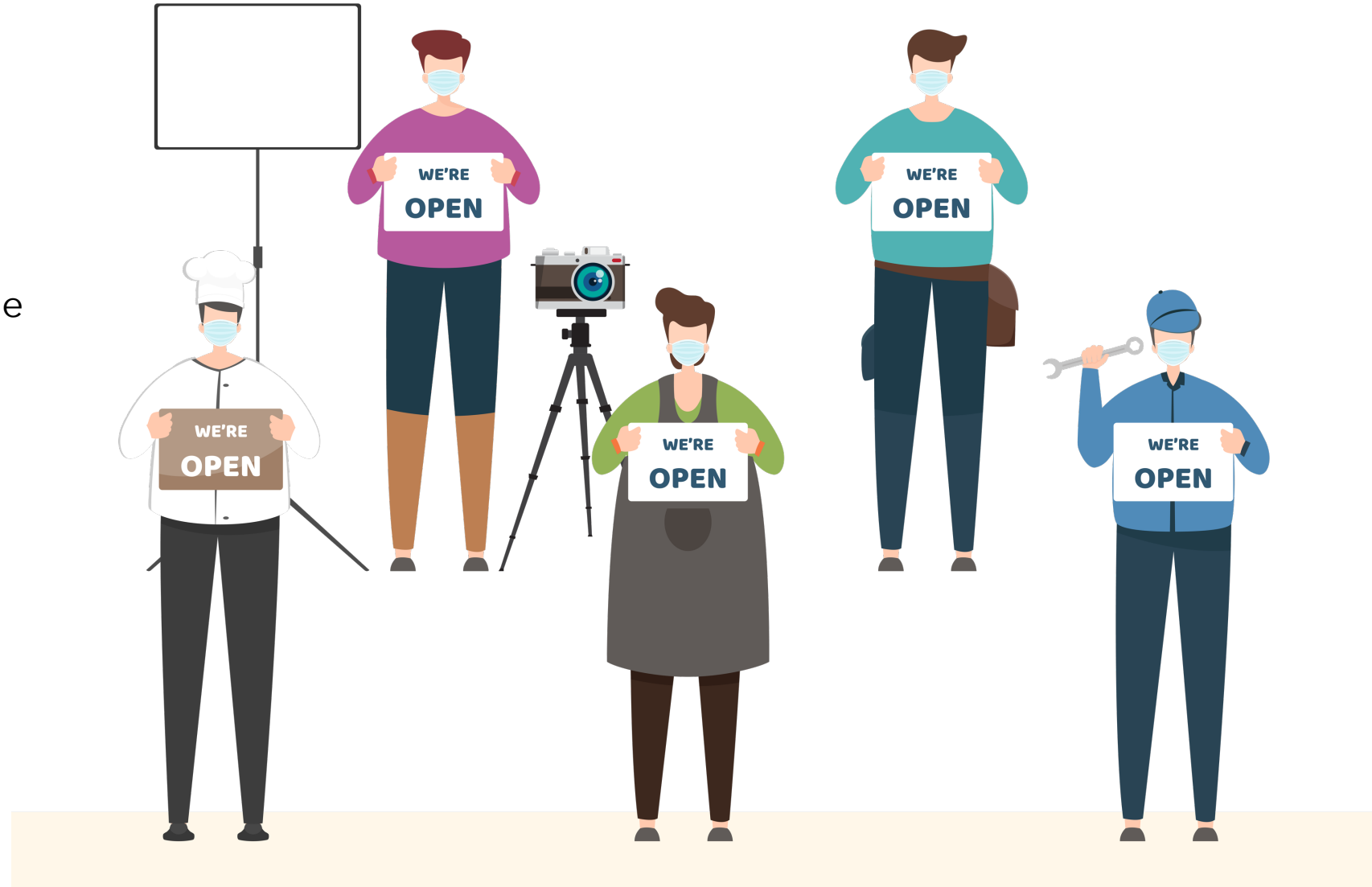
- Communications should stop solely focusing on individuals' distancing and masking. We are being put at risk by our employers.
- Give information that helps employees know how to better protect ourselves in at-risk jobs, our rights as employees. Focus especially on construction and restaurant service jobs, and other specific job risks and roles.
- Create an information campaign toward businesses about protecting employees.





Protect Employees – Long Term

- Create employee assistance program(s).
- Target employers and work groups as information disseminators, including those with large and small Latino work forces, mom & pop shops and independent contractors
- Work with chambers and associations to promote industry-specific safety strategies.



Community Advocates' Insights & Priorities

Link to full document
[here](https://bit.ly/2KlaB49)

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Correct the Flow of Funding



Correct the Language & Communication Network



Provide Better & More Relevant Information



Correct The Lack of Access to Healthcare



Protect Employees

Thank you!



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CRT LatinX COVID-19 Study Research Project

COMMUNITY RESILIENCE TRUST

ATX