


Date: February 24, 2022

To: Thomas B. Modica, City Manager 

From: Kelly Colopy, Director of Health and Human Services 

For: Mayor and Members of the City Council

Subject: **Mi Vida Cuenta COVID-19 Latino Health Initiative Report & Workplan**

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On March 16, 2021, the City Council requested the City Manager to work with appropriate departments and report back to the City Council within 30 days on funding a MI VIDA CUENTA COVID-19 Latino Health Initiative. The City Council requested that this initiative should include sufficient resources for providing continuous health education, equitable vaccine distribution, appropriate food distributions, and mental health care for the Latinx community including undocumented residents. In response to this request, the Health and Human Services Department (DHHS) presents the [Mi Vida Cuenta COVID-19 Latinx Health Initiative Report and Workplan](#).

Building from the work of Councilwoman Zendejas' and Councilmember Roberto Uranga's COVID-19 Latinx Task Force, the DHHS collaborated with the California State University Long Beach (CSULB) Center for Latino Community Health, Evaluation & Leadership Training to create the Mi Vida Cuenta COVID-19 Latinx Health Initiative Report and Workplan (Report).

The Mi Vida Cuenta initiative called for an integrated response to engage community-based organizations and partners to address the disparate impacts of COVID-19 and the economic recovery on the Latinx community. The initial step was to assess the needs of and identify strategic approaches to improve the health and well-being of the Latinx community in Long Beach. The Report presents four key strategies to address existing health and economic disparities.

Mi Vida Cuenta is a collective effort of community residents, Latinx serving organizations, the DHHS, Centro CHA, and the CSULB Center for Latino Community Health. The data for this report was collected during the months of September and October 2021 through community listening sessions and stakeholder/community surveys. During this timeframe, five community listening sessions were facilitated with 64 participants, and bilingual community and stakeholder surveys were administered obtaining 129 and 18 responses, respectively. Community engagement focus areas were informed by four policy areas noted in the 2019 Latino Economic Report Card: economic stability, education, health disparities and experience of undocumented persons.

The analysis of this data informed the recommended workplan with four key strategies:

1. Strengthen the economic and social wellbeing of Latinx Long Beach residents across the lifespan
2. Expand and strengthen opportunities to support Latinx students to improve access and educational attainments
3. Expand and strengthen healthcare services, including prevention and care coordination
4. Strengthen collaborations between City of Long Beach officials and local community-based organizations and stakeholders

The DHHS is currently exploring early implementation steps. These initial steps include the hiring of a Latinx Health Equity Coordinator to facilitate the implementation of the proposed workplan; allocating health equity funds to build the capacity for and support community health worker programs in community based organizations; and aligning Long Beach Recovery Act funding with the workplan recommendations, focusing on as non-profit relief, small business support, food/nutrition access funds, technology access, and early childhood education. Additionally, the DHHS is working with key community organizations to identify a consultant group that will help establish and facilitate an ongoing Latinx Health Equity Collaborative. This collaborative will be a roundtable representative of Latinx serving organizations that will help guide the implementation of the workplan in partnership with City staff.

We look forward to working with community residents, organizations, and civic leaders to implement the workplan. If you have any questions, please contact me at (562) 570-4016.

ATTACHMENT: MI VIDA CUENTA INITIATIVE REPORT

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DEPARTMENT HEADS

# MI VIDA CUENTA

## COVID-19 Latinx Health Initiative



## REPORT & WORK PLAN



*Mi Vida Cuenta* COVID-19 Latinx  
Health Initiative  
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LONG BEACH STATE UNIVERSITY  
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EVALUATION & LEADERSHIP TRAINING

CALIFORNIA STATE UNIVERSITY **LONG BEACH**



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## A. Background

### *Mi Vida Cuenta COVID-19 Latinx Health Initiative*

In March of 2020, during the height of the COVID-19 pandemic, the Long Beach Department of Health and Human Services (LBDHHS) partnered with the Latinos Contra COVID Task Force and other community-based organizations to successfully host various mobile vaccination clinics in impacted neighborhoods and effectively reach the Latinx community in Long Beach. On March 16, 2021, this momentum led to the Latinx initiative titled *Mi Vida Cuenta COVID-19*. The Long Beach City Council requested the City Manager to work with appropriate departments and report back on funding a *Mi Vida Cuenta COVID-19 Latinx Health Initiative*. The City Council requested that the Latinx Health Initiative include sufficient resources to provide continuous health education, equitable vaccine distribution, appropriate food distribution, rental assistance, employment support, mental health, and other supportive services for the Latinx community, including undocumented residents. The LBDHHS was tasked with developing a workplan for the *Mi Vida Cuenta COVID-19 Latinx Health Initiative*. The city contracted with the Center for Latino Community Health, Evaluation and Leadership Training (CLCH) to undertake a community participatory process to develop a workplan. The CLCH worked closely with various community organizations to create the following workplan.

### Center for Latino Community Health, Evaluation, and Leadership Training



The California State University, Long Beach (CSULB) Center for Latino Community Health, Evaluation, and Leadership Training (CLCH) was contracted to inform the initiative. The CLCH was established in 2005 as part of the Department of Health Science in the College of Health and Human Services at CSULB. The CLCH mission is to support and create diverse community health initiatives that increase access to culturally and linguistically relevant health education, prevention, screening, and treatment to improve, promote, and advocate for the health and well-being of diverse Latinx communities. The CLCH has a

successful track record of developing and implementing a variety of multi-year health initiatives in the City of Long Beach in collaboration with numerous stakeholders including community members and non-profit organizations, clinic partners, the Long Beach Unified School District, as well as the LBDHHS. The CLCH proposed an evidenced approach supported by over 15-years of experience conducting community-based participatory research, developing culturally tailored programs and evaluating effectiveness of initiatives addressing Latinx health disparities in the City of Long Beach.



## The Long Beach Department of Health and Human Services

The LBDHHS has been improving the health of the Long Beach community for over a century to create a safe and healthy community for all to live, work, and play. Long Beach is one of only three city-run health departments in California, allowing for better engagement with its people, neighborhoods, businesses and community partners, and a greater understanding of the city's strengths and needs. The Mi Vida Cuenta COVID-19 Latinx Health Initiative is currently housed at the LBDHHS. This effort is part of the City of Long Beach's Racial Equity and Reconciliation Initiative grounded in a vision where race and ethnicity alone do not determine social and economic outcomes for those who live and work in Long Beach.

## Latinx Population in Long Beach

With a population of 466,742, Latinx\* individuals make up 42.6% of the population in the City of Long Beach.<sup>1</sup> Comprised of 11 zip codes, Latinx make up the largest ethnic group in six of those (90802, 90804, 90805, 90806, 90810, and 90813), with the highest in 90813 with 64.8%.<sup>2</sup> It should be noted that zip code 90813 also has the highest percentages of individuals and families living in poverty, with the lowest median household income at \$31,775.<sup>2</sup> Among Latinx age groups, children and youth under the age of 18 make up the largest group at 30.4%, while 64.7% are between the ages of 18-64 years old, and 5% over the age of 65.<sup>3</sup> The vast majority of Latinx individuals are of Mexican origin (82.1%).<sup>3</sup> Income data show the median household income at \$60,433 for Latinx individuals with 15.9% of Latinx families living in poverty.<sup>3</sup>



**LONG BEACH POPULATION: 466,742**

**LONG BEACH LATINX POPULATION: 42.6%**

*Note\*: Latinx is defined as a person of Latin American origin or descent (used as a gender-neutral or nonbinary alternative to Latino or Latina). Latinx will be used in place of Hispanic/Latino where appropriate.*



The *Mi Vida Cuenta* COVID-19 Latinx Health Initiative is a community driven and informed process. The development of the workplan and report was informed through collaboration with Centro CHA, the Long Beach Immigrants' Rights Coalition, YMCA of Greater Long Beach, The Children's Clinic and California State University Long Beach faculty, the Latino Economic Report writing group among other key Latinx stakeholders. Below you will find both a Latinx Health Initiative workplan and a full report detailing the methodology for collecting data, findings and recommended strategies from community members and stakeholders. The proposed Latinx Health Initiative workplan is intended to inform the formation of a Latinx Collaborative that will work closely with city staff on the proposed workplan. The full report provides detail information on the survey findings and can be used to help inform future partnerships to implement the workplan. These findings are also useful information for providers and stakeholders as they continue to forge pathways that improve the social determinants of health for Long Beach residents.

### C. Proposed Latinx Health Initiative Workplan

Based on the *Mi Vida Cuenta* COVID-19 Latinx Health Initiative community engagement findings, an effective and culturally congruent workplan should consist of a collaboration between City of Long Beach departments and local trusted Latinx serving organizations, with the inclusion of Spanish-language materials, services and resources to support all undocumented, including Latinx residents. To effectively address the health and wellness of Latinx in the City of Long Beach, ongoing engagement and input from both community members and diverse community stakeholders must be a priority. The following workplan outlines four key strategic goals and their respective proposed activities. The assigned timeline to undertake this work is based on the assumption that collaborative efforts will be in place to undertake the implementation of this workplan.











## Proposed Workplan

*Strategic Goals Timeline: Short (6–12 months) | Mid (12–18 months) | Long (18+ months)*









### Strategic Goal 1: Strengthen the Economic and Social Wellbeing of Latinx Long Beach Residents Across the Lifespan

	Activity	Timeline
	<ol style="list-style-type: none"> <li>1. Increase availability and access to workforce development training and job placement in the city for all Latinx residents regardless of immigration status.               <ol style="list-style-type: none"> <li>a. Establish programs for training and hiring Long Beach residents (i.e., medical assistant training programs)</li> </ol> </li> </ol>	Long
	<ol style="list-style-type: none"> <li>2. Develop opportunities to increase financial literacy among Latinx residents.</li> </ol>	Short
	<ol style="list-style-type: none"> <li>3. Increase availability and access to affordable housing programs for all Latinx residents regardless of immigration status.</li> </ol>	Mid
	<ol style="list-style-type: none"> <li>4. Address unfair rental practices (e.g., lack of contracts, application fee burden) and unresponsive landlords to provide rental documentation to tenants to facilitate applications for assistance programs.</li> </ol>	Long
	<ol style="list-style-type: none"> <li>5. Develop initiatives to provide technical assistance and support (reduced rental fees, loans, grants) for small Latinx-owned businesses.               <ol style="list-style-type: none"> <li>a. Training programs (i.e., business planning)</li> </ol> </li> </ol>	Long
	<ol style="list-style-type: none"> <li>6. Provide support for undocumented persons to identify and secure work opportunities. (i.e., listserv of needed services and supportive organizations)</li> </ol>	Mid

*Strategic Goals Timeline: Short (6–12 months) | Mid (12–18 months) | Long (18+ months)*




**Strategic Goal 2: Expand and strengthen opportunities to support Latinx students to improve access and educational attainments.**

	Activity	Timeline
	<b>1.</b> Increase availability of free or low-cost early education opportunities for Latinx children. <ul style="list-style-type: none"> <li><b>a.</b> Establish early education centers in Latinx neighborhoods</li> <li><b>b.</b> Provide free or low-cost programs for Latinx families in need with a focus on working parents</li> </ul>	Long
	<b>2.</b> Improve current communication strategies (i.e., Parent University) to effectively engage and support Latinx parents to stay up to date on educational requirements, programs (i.e., Long Beach Promise, DACA) and benefits of higher education. <ul style="list-style-type: none"> <li><b>a.</b> Methods of communication should vary (i.e., text vs email)</li> <li><b>b.</b> Spanish-language materials</li> <li><b>c.</b> Parent outreach by trusted organizations</li> <li><b>d.</b> Participation in local community events</li> </ul>	Short
	<b>3.</b> Provide free or low-cost reliable internet access across the City of Long Beach.	Mid
	<b>4.</b> Provide basic needs and referrals for social services at local schools. <ul style="list-style-type: none"> <li><b>a.</b> Establish care coordination protocols and support staffing needs to increase linkage to services</li> </ul>	Long
	<b>5.</b> Develop a strategic collaboration between different local educational institutions (K-12, middle school, high schools, community colleges, and universities) to address low high school graduation rates, college enrollment, readiness for college, and university degrees among Latinx students in Long Beach. <ul style="list-style-type: none"> <li><b>a.</b> Provide educational awareness campaigns and support for Latinx first-generation students</li> <li><b>b.</b> Provide mentoring opportunities for career guidance and planning in high schools</li> </ul> Provide free/low-cost tutoring programs (middle school, high school)	Long
	<b>6.</b> Increase availability of health and wellness services in schools. (i.e., mental health services)	Mid

*Strategic Goals Timeline: Short (6–12 months) | Mid (12–18 months) | Long (18+ months)*



**Strategic Goal 3:**  
Expand and strengthen healthcare services including prevention and care coordination.







	Activity	Timeline
	<b>1.</b> Develop a city-wide bilingual health and wellness campaign implemented by community health workers and trusted community organizations available for Latinxs community through events, partners, and social media. <ul style="list-style-type: none"> <li><b>a.</b> Raise awareness about community events in Latinx neighborhoods</li> <li><b>b.</b> Increase availability of assistance/navigation programs to access services</li> <li><b>c.</b> Increase linkages and care coordination for services</li> </ul>	Short
	<b>2.</b> Develop a city-wide network of service providers to leverage collaborators talents and resources at community events.	Short
	<b>3.</b> Improve access to fresh foods and products at local food pantries and markets.	Short
	<b>4.</b> Increase availability of free/low-cost youth physical activity programming in Latinx neighborhoods.	Mid
	<b>5.</b> Provide opportunities for trusted community health workers to receive trauma informed care training to better serve Latinx residents in Long Beach.	Short
	<b>6.</b> Improve safety, cleanliness, and the condition of facilities at parks throughout the city.	Long
	<b>7.</b> Implement free community events to include screenings, healthcare access, and health promotion activities in Latinx neighborhoods.	Short
	<b>8.</b> Provide technical assistance for Latinxs to access telehealth services and online appointment services to decrease the digital divide.	Mid
	<b>9.</b> Establish a collaboration with local restaurants, markets and transportation providers (taxi, Lyft) to create a donation program for free food delivery system to Latinx families to decrease food insecurity.	Mid
	<b>10.</b> Increase availability of long-term health prevention programs and primary care services for all Latinx residents regardless of immigration status.	Long
	<b>11.</b> Expand school lunch options for children and provide access to fresh foods.	Long



*Strategic Goals Timeline: Short (6–12 months) | Mid (12–18 months) | Long (18+ months)*



**Strategic Goal 4: Strengthen collaborations between City of Long Beach officials and local community-based organizations and stakeholders.**

	Activity	Timeline
	<b>1. Establish a Latinx Collaborative of Latinx serving organizations to provide guidance for the Latinx Health Initiative in the City of Long Beach.</b> <ul style="list-style-type: none"> <li>a. Build trusting relationships</li> <li>b. Establish clear communication</li> <li>c. Develop a voting system to ensure processes are fair and action oriented</li> </ul>	Mid
	<b>2. Obtain input from Latinx service providers to inform city requests for proposals (funding bids) to ensure approach addresses the needs of local Latinx residents.</b>	Short
	<b>3. Include Latinx service providers (Latinx Collaborative) in the establishment of priorities for Latinx initiatives and funding in the City of Long Beach.</b>	Mid
	<b>4. Establish clear processes and user-friendly request for proposal system to ensure small Latinx serving organizations have access and equitable chances to receive funding.</b> <ul style="list-style-type: none"> <li>a. Assessment of Planet Bid system to ensure ease of use or select a different proposal system.</li> </ul>	Mid
	<b>5. Identify and dedicate space for early education centers for low-income Latinx families.</b> <ul style="list-style-type: none"> <li>a. Provide education services</li> <li>b. Provide mental health services</li> </ul>	Long
	<b>6. Identify and dedicate space for direct service delivery to Latinx residents of Long Beach. (i.e., proposed Latinx Cultural Center)</b> <ul style="list-style-type: none"> <li>a. Educational opportunities (tutoring, resources)</li> <li>b. Health promotion (prevention and care)</li> <li>c. Food pantries</li> <li>d. Legal assistance programs</li> <li>e. Workforce development</li> </ul>	Long

Implementing these four key goals will require close partnerships with community stakeholders. Part of the early implementation of this process will include hiring a Latinx Health Equity Coordinator to work closely with the Latinx Collaborative, city departments and residents. Having a dedicated staff member is a step towards ensuring the workplan becomes actionable. The city is currently exploring ways to implement the short-term activities using a community health worker model as proposed by stakeholders. This model will serve as a basis to engage residents directly in the neighborhoods they live, work and play and draw on the talents from the very communities we want to serve.

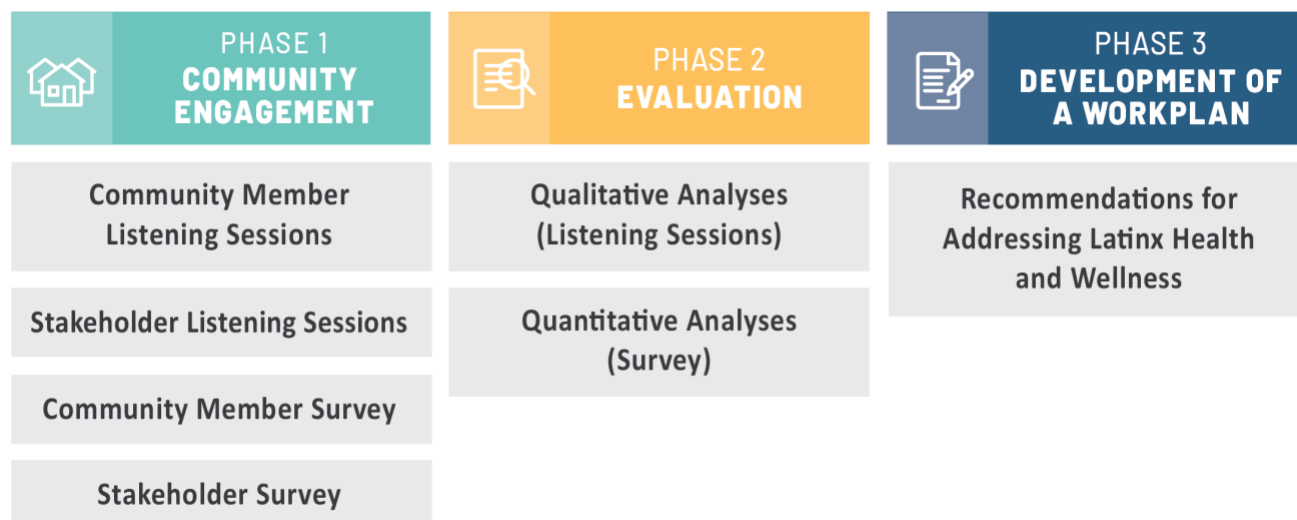
The report provides a detailed account of the methodology, findings from the community surveys and specific findings on strategies identified by stakeholders. The report begins with a description of the methods used to gather information directly from the Latinx community in Long Beach, detailed results (findings) for each of the data points collected in this process and concludes with acknowledgement to the stakeholders who made this information and report possible. The city will continue to engage the community in the Latinx health initiative. The city hired a Latinx Health Equity Coordinator to facilitate early implementation of the work plan.

## D. Methods

A community participatory research approach was used to identify, understand, analyze, and determine factors that impact the Latinx community in Long Beach. The *Mi Vida Cuenta* COVID-19 Latinx Health Initiative focused on assessing the impact of the COVID-19 pandemic as well as the overall health and wellness of the Latinx population, and social determinants of health that may be addressed through Latinx focused initiatives. The CLCH conducted three phases: 1) Community Engagement; 2) Evaluation; and 3) Workplan Development.



Figure 1. *Mi Vida Cuenta* COVID-19 Latinx Health Initiative Phases



### Phase 1: Community Engagement

Community engagement activities included listening sessions and self-report surveys. Listening sessions and survey data collection were conducted to gather insight from Latinx community members and stakeholders in the City of Long Beach. This phase was informed by prior work in the City of Long Beach, meetings with the LBDHHS staff, as well as planning meetings with various community stakeholders. The community engagement focus areas were informed by four policy areas noted in the 2019 Latino Economic Report Card.<sup>4</sup>

Figure 2. Key Focus Areas



### Community Listening Sessions

The community listening sessions were led with a discussion guide consisting of questions related to the impact of COVID-19, socio-economic status, education, health, and the undocumented experience (See Table 2). Community stakeholder listening sessions also focused on identifying ways to better serve the Latinx community in the City of Long Beach. A total of five (5) listening sessions were conducted with 64 participants. Listening sessions lasted approximately one hour and a half and were moderated by



bilingual research staff with assistance from bilingual note-takers from the CLCH. Listening sessions started with an introduction to the *Mi Vida Cuenta* COVID-19 Latinx Initiative followed by breakout groups organized based on participant characteristics and language preference to facilitate discussion (i.e., youth, Spanish speaking adults). Efforts were made to have representation from different subpopulations within the Latinx community through purposive sampling to recruit youth, older adults, undocumented persons and LGBTQ+ individuals with assistance from Latinx-serving community organizations. Four (4) listening sessions were held virtually via Zoom meetings and one (1) listening session was held in person at a YMCA location in Long Beach.

**Table 1. Community & Stakeholder Listening Sessions Questions**

### Community Member & Stakeholders Questions

1. Economic Stability
  - a. How did COVID-19 affect Latino's economic situation/stability?
  - b. What are the major barriers to improving economic stability among Latinos in Long Beach?
  - c. What can the City of Long Beach can do to increase economic stability among Latinos?
  - d. What strengths do Latinos in Long Beach have to help improve economic stability?
2. Education
  - a. How did COVID-19 affect the education of Latinos in Long Beach?
  - b. What are the major barriers that prevent improving high school and college graduation rates?
  - c. What can the City of Long Beach do to improve high school graduation rates among Latinos?
  - d. What strengths do Latinos in Long Beach have to help improve education levels?
3. Health Disparities
  - a. How did COVID-19 affect the health of Latinos in Long Beach?
  - b. What are the major barriers that prevent improving the health of Latinos in Long Beach?
  - c. What do you think the City of Long Beach can do to improve the health and wellness of Latinos?
  - d. What strengths do Latinos in Long Beach have that help their health?
4. Immigrant and Undocumented Persons
  - a. How did COVID-19 affect immigrant/undocumented Latinos in Long Beach?
  - b. What are the major barriers to good health and wellness among Latinos who identify as immigrant/undocumented or mixed status families in Long Beach?
  - c. What do you think the City of Long Beach can do to improve the lives of immigrant/undocumented Latinos in Long Beach?
  - d. What strengths do Latinos in Long Beach have to the address health and wellness among immigrant/undocumented Latinos in Long Beach?

### Additional Stakeholder Questions

5. For local community organizations, what are the barriers to accessing support from local government agencies?
  - a. Funding for programs/services (CARES funding)
  - b. Technical support (navigating Planet Bid system, grant proposals)
6. What recommendations do you have to improve government responsiveness and community engagement?

## Self-report Surveys

### *Community Member Surveys*

A community member survey was developed to assess: 1) the burden of COVID-19; 2) socio-demographic characteristics; and 3) the social determinants of health and wellness that are priority issues to Latinx residents in the City of Long Beach. The survey included questions related to demographics, employment pre- and during- COVID-19 stay-at-home orders, knowledge and access related to COVID-19 testing and vaccinations, and overall health status. The survey also included questions on the issues and resources available related to the social determinants of health that affect Latinx community members, as well as items related to issues and strategies the City of Long Beach should prioritize. The surveys were developed in collaboration with the Latino Economic Report Card writing group. Questions were developed in English, translated to Spanish, and tested for literacy prior to administration. Data collection took place from September 11<sup>th</sup>, 2021, to October 3<sup>rd</sup>, 2021, through recruitment at community outreach events and social media. Survey data was collected in-person by bilingual research assistants from the CLCH and LBDHHS or collected online via Qualtrics, an online surveying tool. To be eligible for the survey, participants had to be 18 years of age or older, self-identify as Latinx/Latino/Hispanic, and be a current resident of the City of Long Beach. All community member participants received a \$25 gift card as compensation for their time. Gift cards were processed electronically or distributed as physical cards at in-person events.

### *Community Stakeholder Surveys*

The community stakeholder survey was developed to assess: 1) perceptions related to the burden of COVID-19 on Latinxs; 2) social determinants of health and wellness that affect Latinxs; and 3) stakeholder perceptions and needs related to working with the City of Long Beach to better serve Latinxs in the city. The survey was developed in English, translated to Spanish, and tested for literacy prior to administration. Data was collected online through Qualtrics. Community stakeholders were recruited via targeted emails to identified individuals through prior work and current collaborations.

	<b>FIVE LISTENING SESSIONS</b>		<b>COMMUNITY SURVEY</b>		<b>STAKEHOLDER SURVEY</b>
64 Participants		129 Community Participants		18 Stakeholder Participants	

## Community Member and Stakeholder Listening Sessions Overview

*Table 2. Community Listening Session Descriptions*

\*Youth= 14-24 years of age; Middle age= 25-64 years old; Older adults= 65 years of age and older

It is important to preface that although listening session participants were asked specifically about the impact of COVID-19 on immigrant and undocumented persons in Long Beach as noted in Table 1, question 4, the undocumented experience was consistently uplifted throughout the listening sessions, not merely when asked specifically about it. Similarly, housing and the home environment were also consistently brought up throughout the listening sessions. Overall, listening session findings highlighted how COVID-19 exacerbated the economic, educational, and health issues prevalent in Latinx households.

[illegible]



### *Impact on Health Status*

Community listening session participants revealed the effects of COVID-19 in their households as well as the complex situations related to accessing healthcare and leading healthy lifestyles. Latinx families disclosed that living in multigenerational and crowded housing created dangerous situations where families contracted COVID-19 at the same time because they could not isolate themselves from one another. Participants voiced living in fear due to living with chronic conditions and not being able to see their medical providers. Regular doctor's appointments were postponed and procedures that were not considered essential were canceled which worsened existing medical conditions. Many noted experiencing discrimination and poor care from the medical system, including pharmacies. Additionally, participants noted gaps in the services and care available to them due to their healthcare plan coverage. Some who engaged in telehealth for doctor's appointments described negative experiences and frustration with digital services such as online appointment systems due to lack of knowledge. Latinxs also experienced increased food insecurity which led to buying cheaper less nutritious food because they could not afford healthier options. Further, those obtaining food from food banks disclosed the majority of options were canned or processed foods which also contributed to diminished health. Both adult and youth participants noted stress and anxiety rose during the safe at home order for various reasons including fear of contracting COVID-19, losing family members, loss of employment, financial instability, and online learning challenges.

### *Impact on Economic Stability*

Community listening session participants revealed the dire situation Latinxs in Long Beach are experiencing due to COVID-19 and in general due to socio-economic instability. Adult participants noted the loss of employment during the safe at home order was particularly harmful for several reasons. Being undocumented was mentioned in all the group listening sessions as the biggest contributor because, without a social security number, persons were unable to obtain the economic assistance available to the general public such as unemployment benefits, federal stimulus checks, and rent relief. For many undocumented persons, fear

“Emotional and financial instability affected us, and continues to affect us, we have not recovered. We were behind on payments, and are now even more behind. We couldn't get the help we needed, because we aren't documented.”

deterred them from seeking rental assistance. For others who sought rental relief, the process was difficult to navigate due to language barriers, the documentation requirements, and uncooperative landlords/property owners. One participant shared:

Additionally, participants shared experiencing harassment from property owners or landlords. Other experiences that impacted economic stability during the height of the COVID-19 pandemic included relying on a single income due to others in the household losing their jobs and not having savings available. Youth participants vividly shared about the need to depend on food programs (i.e., free breakfast and lunch provided by the Long Beach Unified School District (LBUSD)) and pantries and food banks throughout the city.

### *Impact on Education*

Latinxs in Long Beach experience low educational attainments due to complex factors including socio-economic status, immigration status, as well as lack of support for academic success in the Long Beach school system. Youth were especially affected by COVID-19 and continue to experience the repercussions related to learning loss. Latinx children and youth were negatively impacted by the transition to online learning during the safe at home order. Both youth and adult participants described overcrowded home conditions that were not conducive to learning or studying. Additionally, lack of motivation and worsening mental health contributed to loss of learning. Some participants noted that older siblings became the caretakers for the younger children in the family when parents went to work, while some older siblings had to start working to help support the family; particularly in mixed-status families where parents were undocumented and had lost their jobs. Youth noted learning online was particularly hard if they were English Language Learners. For youth who reached out to teachers for support, many did not receive it. Some acknowledged that it was because teachers themselves were also dealing with challenges. Parent participants noted a lack of understanding of home circumstances and lack of preparation from some teachers contributing to the loss of learning. Although LBUSD provided chrome books and hot spots to all students who needed it, many families noted issues with chrome books and unreliable internet using the hot spots.

Additionally, discussions elevated the many aspects that play a role in the low educational attainment of this large segment of the Long Beach population. Educational barriers start in grade school and persist through middle school and high school leading to low enrollment in college and lower graduation rates. Participants reported a lack of information about programs and services among Latinx families. Among families living in poverty there is less of a prioritization to pursue a college degree due to high demands to obtain immediate employment. The length of time to pursue a college degree often translates into loss in wages in the immediate to support the family. Among undocumented and mixed-status families, there is a less motivation to do well in the K-12 systems as undocumented individuals often don't have a full understanding of how to access resources to go to college and don't see a long-term benefit given their undocumented status.



*"Some students do not know how to continue their education because they are undocumented. They do not have the motivation and decide to start working."*

The stakeholders reaffirmed the issues identified by adult and youth community members. Many highlighted the significant impact of the digital divide, language barriers, food insecurity, housing, and the need to simplify assistance program application processes.

### **B. Barriers to improving Latinx economic stability, educational attainments, and health status**

Community listening sessions revealed complex barriers to Latinx health and wellness in the City of Long Beach. Apart from the effects of COVID-19, adult and youth participants noted overarching barriers that impact the three focus areas: economic stability, education, and health. The lack of Spanish language materials across sectors was noted as a major barrier. Specific to housing, participants noted the lack of

rent control (increasing rents in Long Beach) and lack of knowledge of renter rights. Barriers related to education included lack of knowledge regarding high school graduation requirements, college application requirements, FAFSA, and specific programs that aim to help first-generation college students and DACA recipients. Additionally, youth described feeling neglected or outcasted for being an English Language Learner and are therefore hesitant to ask for help. The ability to pay for college was also described as a key barrier for Latinx families. Stakeholders and parents noted the lack of support and guidance from counselors at schools, describing that Latinx students are often discouraged to pursue higher education. In relation to health, participants noted the lack of comfort with and knowledge of technology to schedule appointments online or use telehealth as a major barrier that caused frustration. Additionally, participants noted long wait times at clinics when seeking primary care, lack of insurance or being underinsured, and the high costs of medicines or copays/ coinsurance as significant barriers. Lastly, community members and stakeholders highlighted unsafe and unclean neighborhoods and parks; and the lack of fresh affordable produce as barriers to health.

### C. Recommendations to improve Latinx economic stability, educational attainment, and health status

After discussing the impact of COVID-19 and barriers to improving Latinx health and wellness, participants were asked the following questions:

- What can the City of Long Beach do to increase economic stability among Latinos?
- What can the City of Long Beach do to improve high school graduation rates among Latinos?
- What do you think the City of Long Beach can do to improve the health and wellness of Latinos?
- What do you think the City of Long Beach can do to improve the lives of immigrant/undocumented Latinos in Long Beach?



Recommendations are outlined in Figures 3-5 below. The figures are organized to display community stakeholders and community members for each focus area (i.e., economic stability, education, and health). The experience of undocumented individuals was prominent in all focus areas and therefore there is not a standalone section.

Discussions related to economic stability/poverty indicate the grave conditions in which many Latinxs live in Long Beach and the serious impact the COVID-19 pandemic and stay at home orders has had and continues to have on their lives.



**Figure 3** highlights community member and stakeholder key focus areas regarding the economic stability of Latinxs in Long Beach. Related to economic stability/poverty, community members and stakeholders agreed on many recommendations that may help to improve the lives of Latinxs in Long Beach including opportunities for workforce development and training to prepare Latinxs to acquire better paying job opportunities. Further, there is a call to action from both groups to address the disadvantaged status of undocumented individuals as a city-wide effort that can protect them from unfair rental agreements and practices.



**Figure 3.**  
**Key Focus Areas to Address Economic Stability/Poverty**



#### STAKEHOLDERS

- Increase opportunities for free/low-cost job training programs\*
- Create opportunities to provide technical assistance to Latinx owned small businesses\*\*
- Offer opportunities to increase financial literacy among Latinxs\*\*\*
- Create policies to address rental property management, agreements, and policies that make Latinx families (especially undocumented individuals) vulnerable for homelessness and poverty\*\*\*\*
- Allocate more funding and equitable resources for Latinxs as largest subpopulation in the city
- Increase availability of Spanish language materials related to resources and programs
- Provide more affordable housing and rental assistance programs
- Increase access to assistance programs by providing technical assistance
- Engage local/trusted stakeholders in outreach and implementation of programs (local community and religious organizations)
- Assist *undocumented individuals* with information related to resources available to this population
- Continue Room Key program for homeless individuals
- Collaborate with restaurants and taxi drivers to establish a free food delivery approach to food insecurity in the city



#### COMMUNITY MEMBERS

- Allocate funds to offer job training programs\*
- Provide support and technical training for small business owners\*\*
- Provide financial literacy training to Latinxs\*\*\*
- Create programs to assist *undocumented Latinxs* in Long Beach\*\*\*\*
- Increase availability of rental assistance and affordable housing programs\*\*\*\*
- *Create city policies that allow undocumented individuals to work and earn a living and receive pay stubs*
- Increase availability of English classes to improve proficiency and motivation
- Create job opportunities for Latinxs
- Create policies for equal pay
- Create systems to monitor fair rental agreements and practices
- Create accountability systems for organizations receiving funds for services for Latinxs
- Provide childcare assistance to allow Latinxs to engage in job training and work
- Remove housing applications requirements (social security) for *undocumented individuals*
- Provide legal assistance to *undocumented individuals*
- Develop an emergency plan for future disasters to help vulnerable populations

Notes: Items coded using any number of "\*" represent agreement between community stakeholders and members; Items in *italics* represent items mentioned numerous times throughout group discussions; Mention of undocumented individuals is italicized throughout to show prominence in all focus areas.

**Figure 4** highlights key focus areas related to addressing the educational attainment of Latinxs in Long Beach. Participants expressed the need for educational programs that include mentoring and tutoring at every educational level to create a pipeline of prepared and informed Latinx students in addition to increasing awareness of existing initiatives.



Figure 5 includes key focus areas to address health disparities among Latinx residents in Long Beach. Recommendations to improve the health status of Latinxs encompass different levels of influence including individuals, families, schools, healthcare providers, as well as the built environment, as noted in figure 5. Community and stakeholder participants shared that socio-economic instability plays a big role in the health of Latinx families in Long Beach. Some recommendations for improvement include Spanish-language outreach and programming by trusted community health workers. Other recommendations were to create or improve green space to be safe place for outdoor recreation. One participant shared:

“

*“Recreational places need maintenance and more security, they need to be cleaned, and the bathrooms are dirty.” Another shared “Facilities are still shut down and not accessible to children.”*





**Figure 5.**  
**Key Focus Areas to Health Disparities**



## STAKEHOLDERS

### INDIVIDUALS

- Increase availability of funds for youth physical activity programming to improve health\*
- Increase opportunities for free/low-cost job training programs
- Allocate funds to provide care for *undocumented* individuals
- **FAMILIES**
- *Outreach to Latinx families through trusted community stakeholders (Promotoras, health advocates)*
- Provide family-based prevention and support services\*\*

### SCHOOLS

- Allow the use of space for physical activity programming for Latinx youth

### HEALTHCARE PROVIDERS

- Provide welcoming environments and resources to undocumented individuals
- Provide training to community health workers/Promotoras to provide trauma informed interactions with Latinxs
- Offer free community clinic events to encourage preventive services
- Offer extended business hours and weekend appointments to increase access to working adults

### BUILT ENVIRONMENT

- Improve access to clean/safe green space in Latinx neighborhoods\*\*\*
- *Invest in Latinx-serving community centers to promote health*
- Improve parking availability in Latinx neighborhoods
- Include transportation assistance for participation in community programs
- Hire and train bilingual individuals in community and city settings



## COMMUNITY MEMBERS

### INDIVIDUALS

- Offer health promotion programs for undocumented individuals\*
- *Offer free low-cost programs for children (art, music, exercise)*
- **FAMILIES**
- Provide opportunities to learn how to prepare healthy meals
- Provide prevention programming in Spanish\*\*

### SCHOOLS

- Expand school lunch options for nutritional value
- Offer sports programs within schools

### HEALTHCARE PROVIDERS

- *Provide technical assistance for assessing telehealth appointments and online appointment systems*
- *Provide free COVID-19 testing*
- Increase availability of clinic and pharmacy staff
- Increase availability of bilingual healthcare workers

### BUILT ENVIRONMENT

- Create more safe spaces, parks, places to exercise in Latinx neighborhoods\*\*\*
- Improve safety and cleanliness of city parks not yet functioning after COVID-19 closures\*\*\*
- Offer Spanish language information on websites
- Create health and wellness campaigns tailored for Latinx and available through social media outlets
- Remove homeless from parks to increase access
- Improve access of healthy foods options at food banks
- Provide physical activity program opportunities for youth in parks
- Increase awareness about community events

*Notes: Items coded using any number of "\*" represent agreement between community stakeholders and members; Items in *italics* represent items mentioned numerous times throughout group discussions; Mention of undocumented individuals is italicized throughout to show prominence in all focus areas.*



## Community and Stakeholder Survey Results

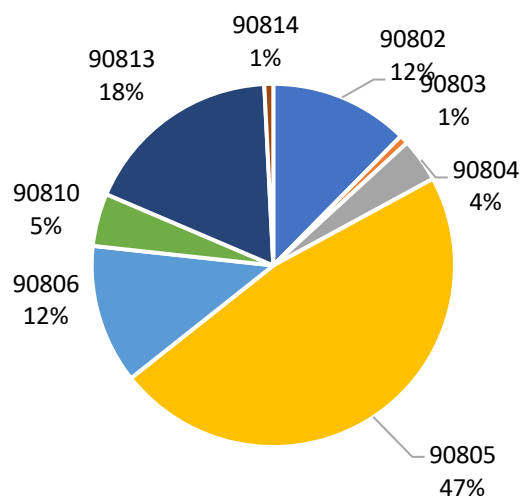
### B.1. Community Member Surveys

#### Participant Characteristics

##### *Socio-demographics*

A total of 135 adults completed the survey and six were removed due to eligibility (not residents of Long Beach). The analytic sample includes 129 Latinx adult residents of the City of Long Beach, the majority from the 90805-zip code. Most participants (47%) resided in the 90805, 90813 (18%), and 90806 (12%) zip codes (See Figure 6). The mean age of participants was 40.7 (SD = 12.4) with ages ranging from 18-80 years old. Most participants were female (67.4%) and were comfortable expressing their thoughts and ideas in Spanish (54.3%), while 23.3% preferred English, and 20.9% reported both English and Spanish equally. A large segment of participants reported being of Mexican origin (81.4%). Other national origins included Honduras (5.4%), El Salvador (3.1%), Peru (1%), and Guatemala (1%); while others preferred not to state (8.1%). Educational attainments varied. The majority (49.6%) reported less than a high school diploma, 15.5% earned a high school diploma, 19.4% completed some college/associates degree, 10.1% earned a bachelor's degree, and 1.6% earned a master's degree. Only 40.3% of participants were U.S. citizens (of those 13.2% were naturalized citizens), 11.6% were legal permanent residents, 31.0% were undocumented, and 17.1% preferred not to state.

**Figure 6. Participant Zip Codes (N=129)**



*"We were not able to get aid which forced many to continue to work. Working from home was not an option, many had to interact with people daily."*

– Community Listening Session Participant

#### *Employment*

Currently, 42.2% reported being unemployed, 18.6% employed part-time, 24.8% employed full-time, and 14.8% preferred not to state. The impact of COVID-19 on employment status was measured by asking "What were your employment conditions during the COVID-19 pandemic?" Only 22.5% reported being fully employed, 49.6% reported being unemployed due to decreases in work availability and closures, and 17.8% reported a

reduction in hours at any time during the pandemic. Missed work hours were also reported out of necessity to taking time off work to care for children or other family members (27.3%), to quarantine after COVID-19 exposure (27.1%), or to recover from COVID-19 (23.4%). Half of survey participants (53.9%) reported being aware of unemployment benefits, 21.9% reported qualifying for unemployment

assistance, and of those that qualified 12.5% reported not being able to receive them. Approximately 25% of survey participants reported having trouble understanding how and where to apply for unemployment benefits and 23.4% had trouble gathering the documentation required to apply.

### Digital Access

Half of participants (51.2%) reported owning a desktop or laptop computer. Of those with children, 66.1% reported that their child had access to a computer during virtual/online learning. Approximately 70% reported having reliable internet access at home. Similarly, 70.3% reported owning a smart phone with the ability to search on the internet.

### Housing Security

Approximately 39% of participants reported experiencing difficulty paying for their mortgage or rent and only 40.2% reported knowing where to get help from rental assistance programs.



*“Entire households got COVID and no one could go to work. Living in small and crowded spaces was hard to isolate.”*

– Community Listening Session Participant

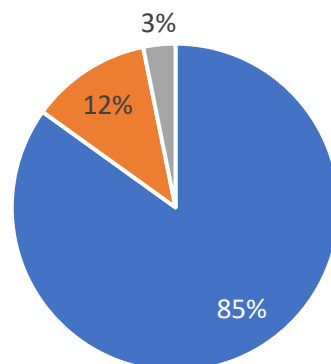
### COVID-19 Testing, Infections, and Vaccinations

The majority (92.9%) reported knowing where to get tested, and 78.7% reported having been tested for COVID-19 at least once. Testing locations included local high schools, Long Beach City College (LBCC), community clinics, drive-thru clinics, and hospitals. Approximately, 38.1% of participants reported a COVID-19 infection, and 16.7% reported suspecting infection but never testing for

COVID-19, and 23.8% reported a family member or someone in their household getting COVID-19. Approximately 22.2% reported a COVID-19 hospitalization in the household and 25.4% reported a death due to COVID-19 in the household.

The majority of participants (84.9%) reported having been vaccinated for COVID-19, 12% reported not having received the vaccine and 3% did not respond (see Figure 7). Of those vaccinated, the participants reported being vaccinated through community clinics (i.e., TCC Family Health, CVS, and Rite Aid), vaccination clinics/events (Centro CHA and Houghton Park), LBCC and CSULB. Among those not vaccinated, participants reported safety concerns, allergies, fear, and not needing the vaccine.

**Figure 7. COVID-19 Vaccination Rates (N=129)**



■ Yes ■ No ■ No answer

### COVID-19 Safety Precautions

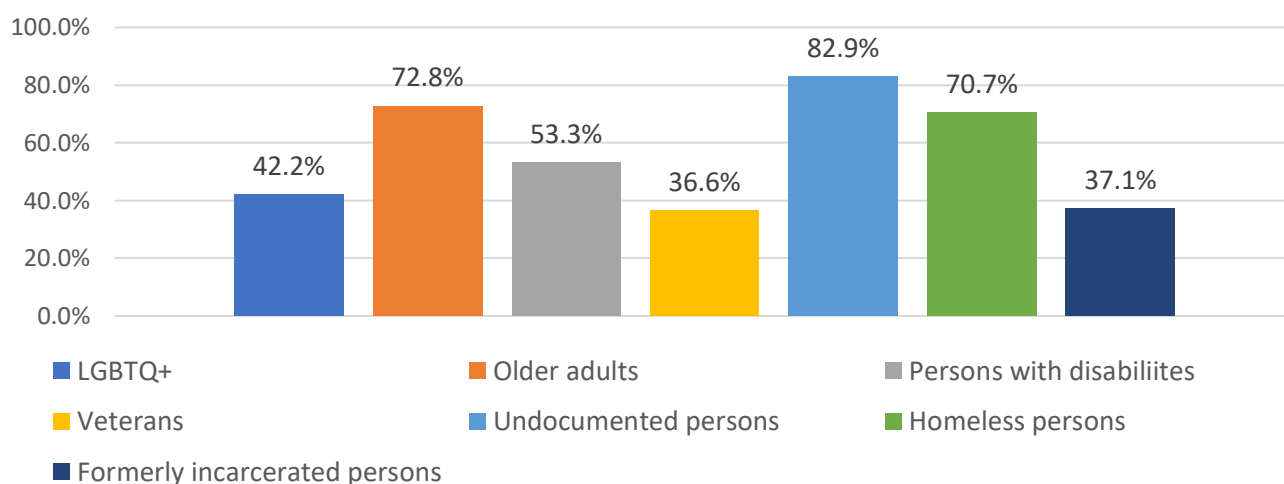
Almost all participants (92.9%) believed that wearing masks are effective in preventing the spread of COVID-19; and 75.4% reported not having any trouble with obtaining masks to protect against COVID-19.

### Perceptions of Health Status, Services, and Gaps in the City of Long Beach

Participants were asked a series of questions related to the health status of different community groups, access to health services, and gaps in services and support that can lead to poor health outcomes among Long Beach residents.

Participants were asked to select up to five community groups most affected by poor health. The top five selected groups in order of highest ranking are undocumented persons, older adults, persons experiencing homelessness, persons with disabilities, and LGBTQ+ (see Figure 8).

**Figure 8. Community Groups Most Affected by Poor Health (N=121)**



### Issues Affecting the Latinx Community

Participants were asked about the social determinants of health that impact Latinx community members in the City of Long Beach. The survey included the following statement “*This issue impacts many people in my community*” and participants were provided a list of issues in alphabetical order and instructed to select response options on a 5-point Likert scale (1=strongly disagree to 5= strongly agree). Issues related to access to healthcare are presented in Figure 9. Participant responses revealed that access to services for undocumented persons is the most pressing issue (69.4% agree/strongly agreed) followed by access to services for the general Latinx population.

**Figure 9. Impact of Access To Healthcare on Latinxs (N=121)**

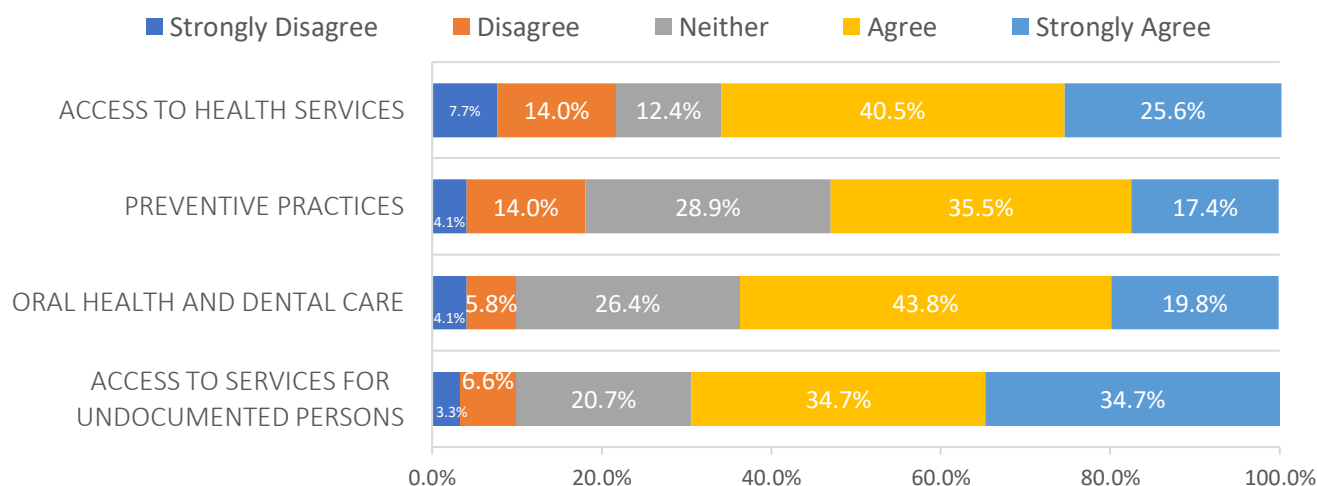


Figure 10 below outlines issues related to health conditions for Latinxs in Long Beach. Participant responses highlight one of the biggest health areas is nutrition and weight, followed by mental health and mental health disorders, and chronic diseases.

**Figure 10. Impact of Health Conditions on Latinxs (n=121)**

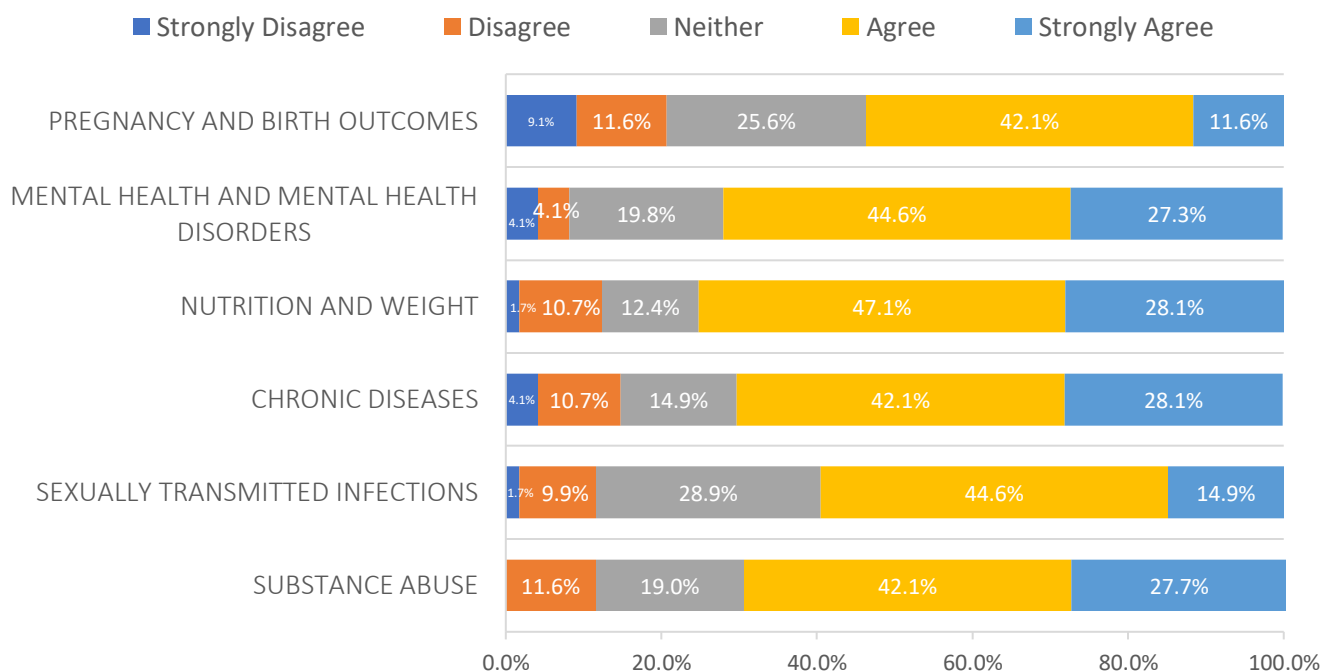


Figure 11 includes areas related to socio-economic status. The most concerning areas are economic insecurity and housing/homelessness followed by food insecurity.



**Figure 11. Impact of Socio-Economic Status on Latinxs (N=121)**

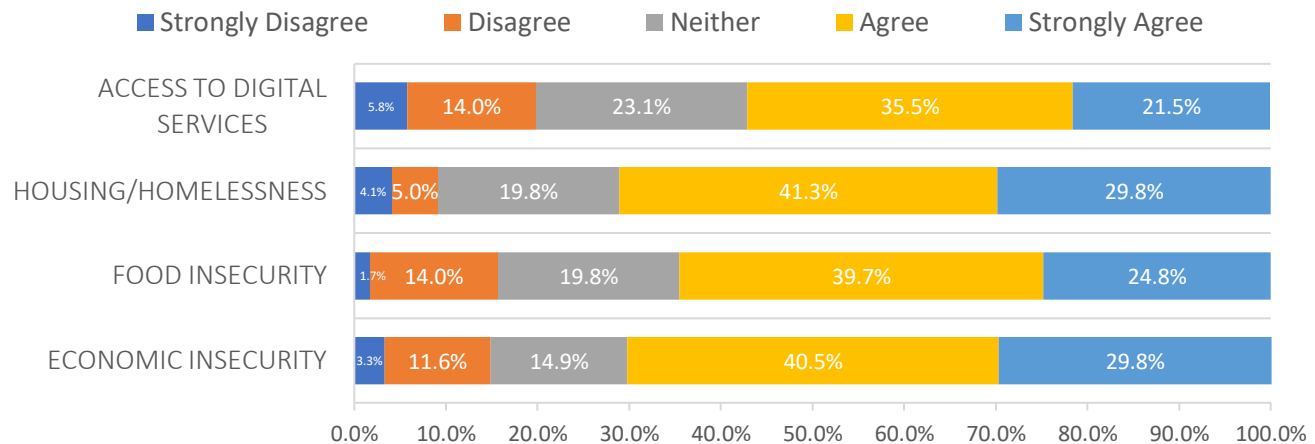


Figure 12 highlights issues related to education. Only two items addressed education. The items include early childhood education and K-12 education. As displayed below, approximately 50% of the sample agreed or strongly agreed that both early childhood education and K-12 are areas that need to be prioritized.

**Figure 12. Impact of Education on Latinxs (N=121)**

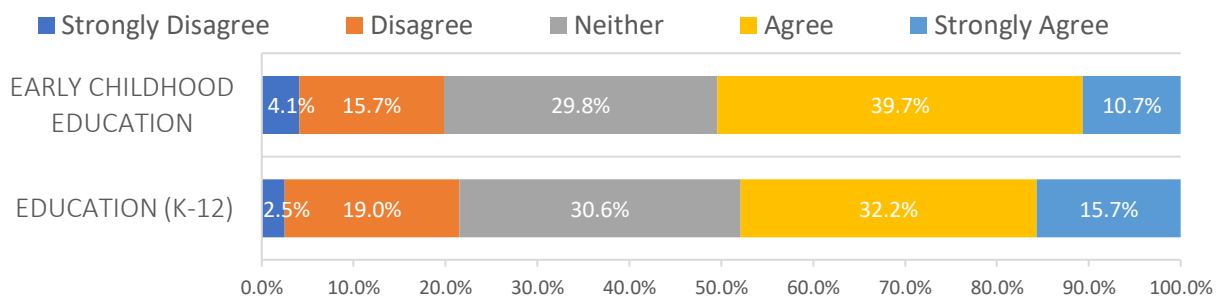
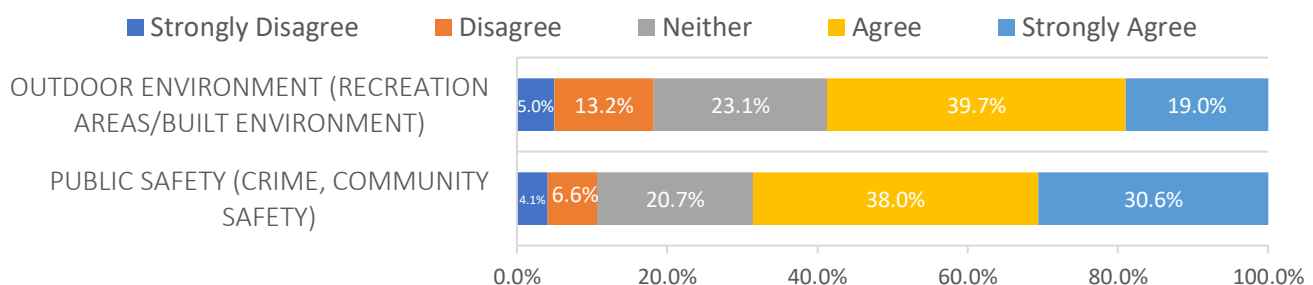


Figure 13 presents issues related to the socio-environment. Most participants (68.6%) reported that public safety such as crime and community safety are major issues for Latinxs in Long Beach.

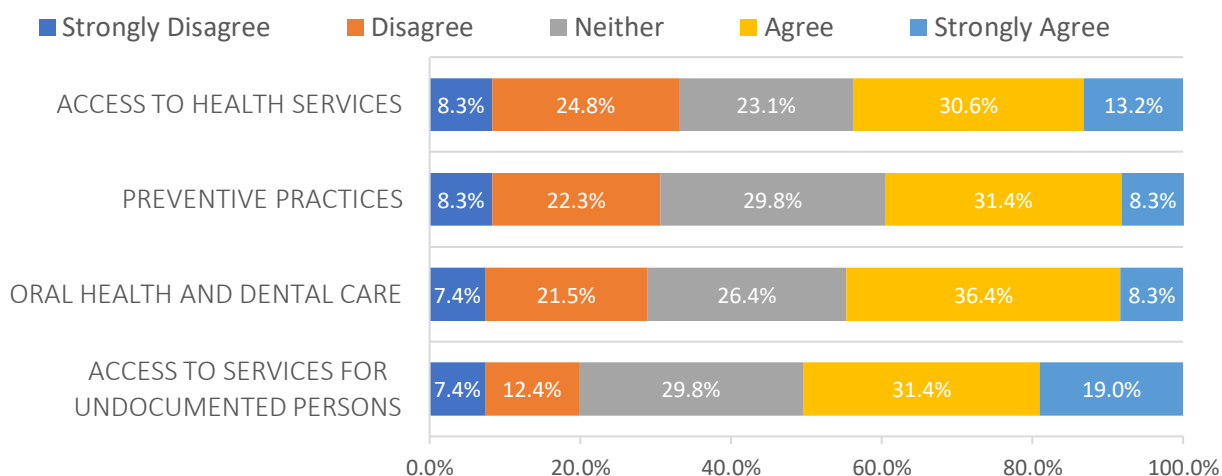
**Figure 13. Impact of Socio-Environment on Latinxs (N=121)**



### Existing Services in the City of Long Beach

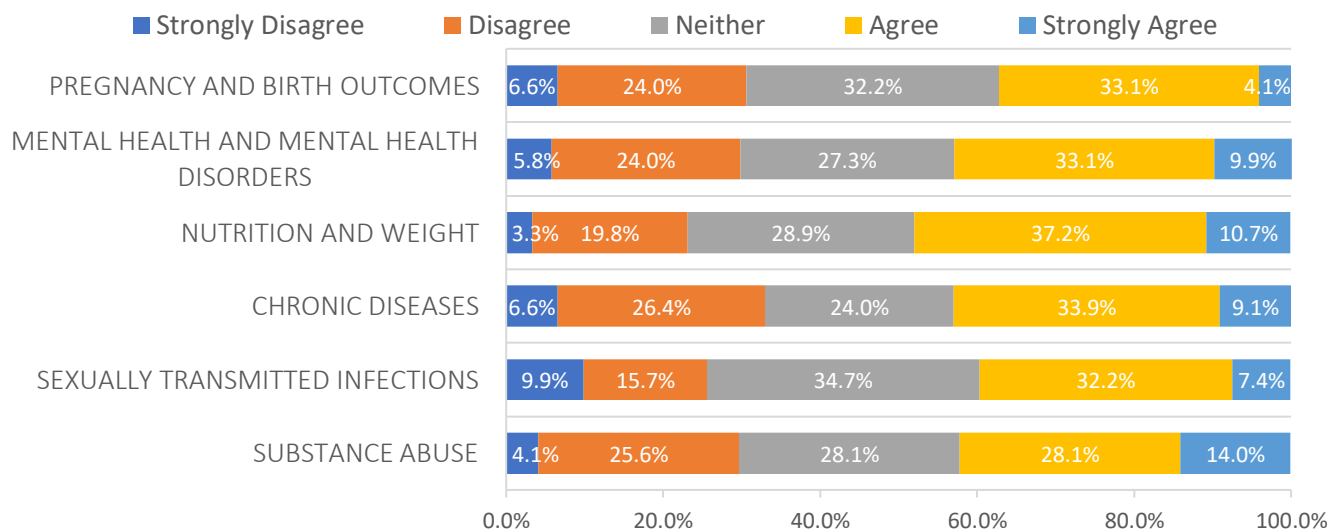
Participants were asked if services and resources exist in Long Beach to address each of the different issues reported above. **Figure 14** presents finding related to perception of existing services related to healthcare. Only 43.8% agreed or strongly agreed that there are existing health services, and 39.7% agreed or strongly agreed there are preventive practices available for Latinxs in Long Beach.

**Figure 14. Perceptions Of Existing Services And Resources For Healthcare (N=121)**



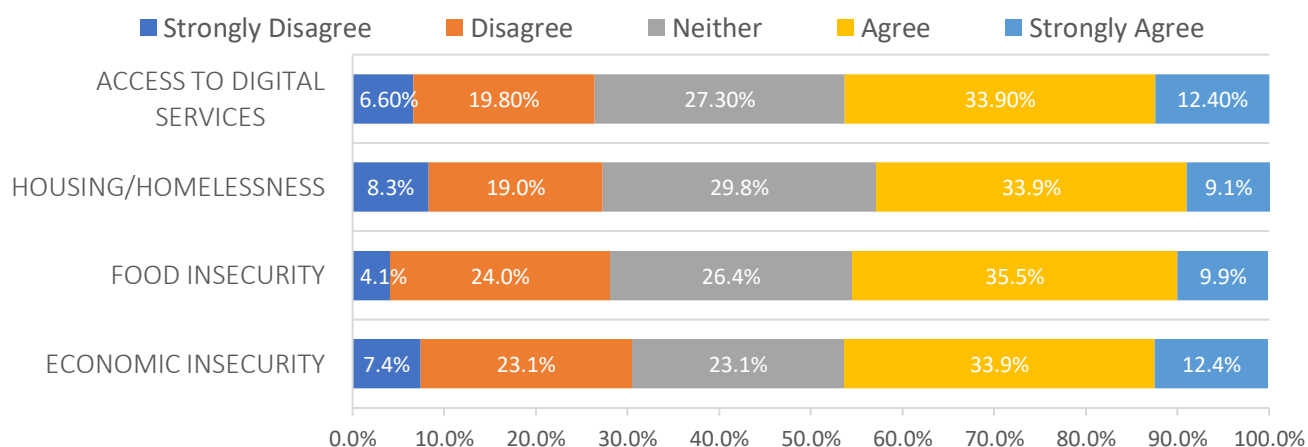
**Figure 15** highlights findings related to perception of existing services and resources to address health conditions. Findings demonstrated that only 37.6% of participants agreed or strongly agreed services currently exist to address pregnancy and birth outcomes, and only 43% agreed or strongly agreed there are existing services to address mental health.

**Figure 15. Perception Of Existing Services And Resources To Address Health Conditions (N=121)**



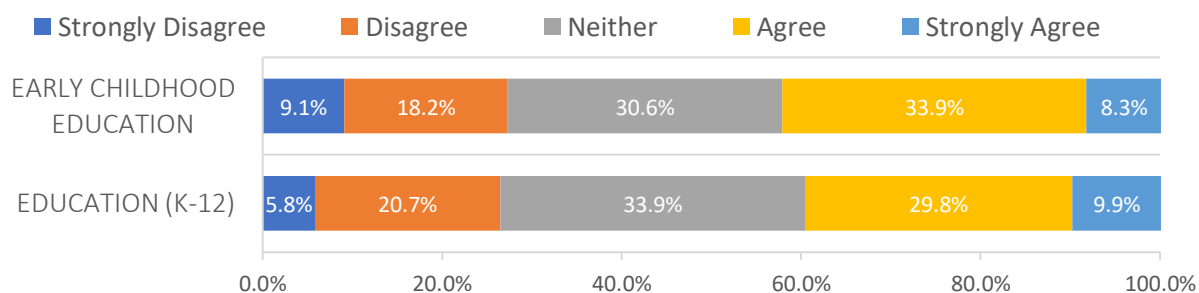
**Figure 16** presents perceptions of existing services and resources to address issues related to Latinx socio-economic status. Findings highlight that approximately 30.5% of participants strongly disagreed or disagreed services or resources exist to address the economic insecurity of Latinxs in Long Beach. Further, 28.1% strongly disagreed or agreed that there are existing services and resources to address food insecurity.

**Figure 16. Perceptions of Existing Services or Resources to Address Socio-Economic Status (N=121)**



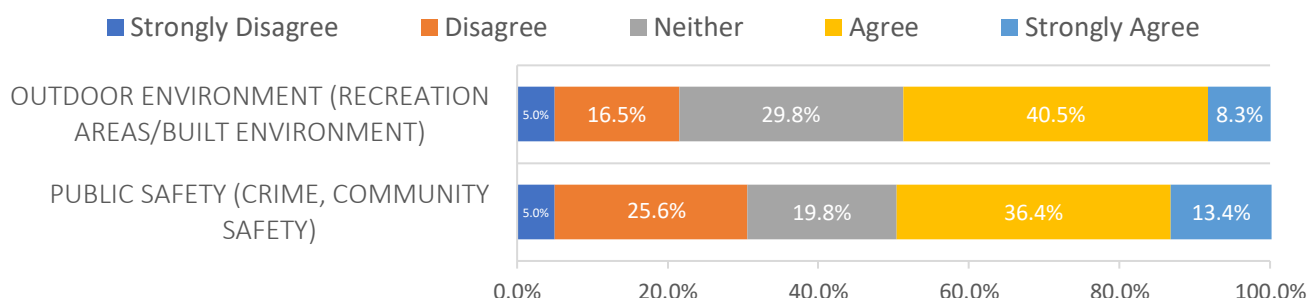
**Figure 17** presents findings related to perceptions of existing services and resources for education. Results showed that only 42.2% of participants agreed or strongly agreed that are services and resources for early childhood education.

**Figure 17. Perceptions of Existing Services and Resources for Education (N=121)**



**Figure 18** presents findings for perceptions of existing services and resources to address the socio-environment. Only 48.8% of participants strongly agreed or agreed that there existing services and resources in the outdoor environment such as recreation areas. As for public safety perceptions, only 49.8% of participants strongly agreed or agreed that there are existing services and resources to address public safety.

**Figure 18. Perceptions of Existing Services And Resources to Address the Socio-Environment (N=121)**



*Perceptions of Insufficient or Adequate Services in the City of Long Beach*

Participants were also asked about the adequacy of existing services related to healthcare, health conditions, education, socio-environment, and socio-economic status. Findings are reported in Figures 19-23.

Figure 19 shows that 47.0% of participants strongly agreed or agreed that resources for health care are insufficient or inadequate.

**Figure 19. Perceptions of Insufficient or Adequate Resources For Healthcare (N=121)**

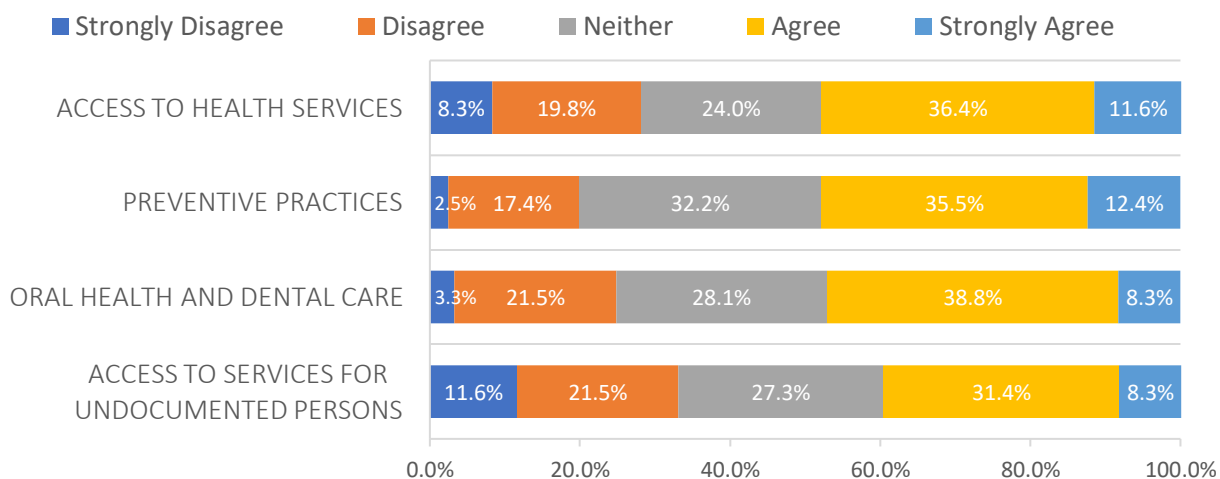


Figure 20 highlights perceptions related to insufficient or adequate services to address different health conditions. The results demonstrate that approximately 50% of participants strongly agreed or agreed that there are insufficient or inadequate resources to address pregnancy and birth outcomes, mental health, nutrition and weight, chronic disease, sexually transmitted infections or substance abuse.



**Figure 20. Perception of Insufficient or Adequate Resources To Address Related to Health Conditions (N=121)**

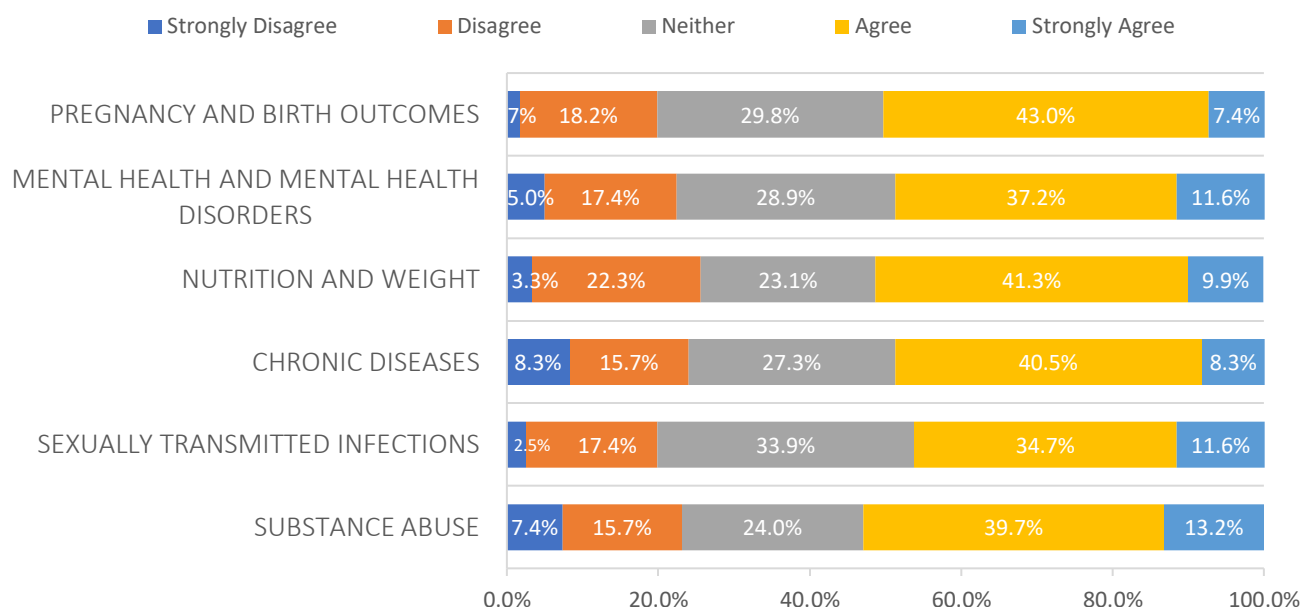
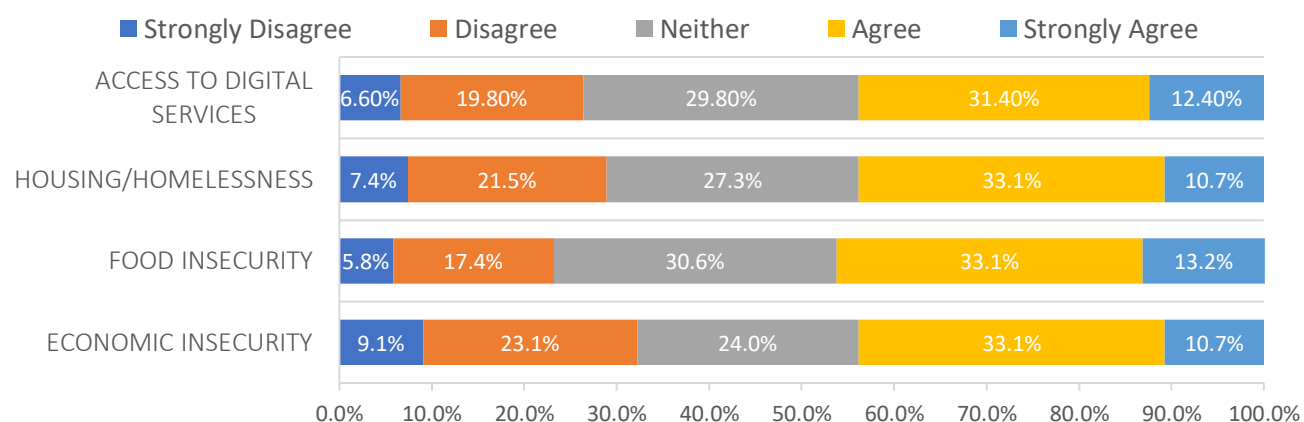


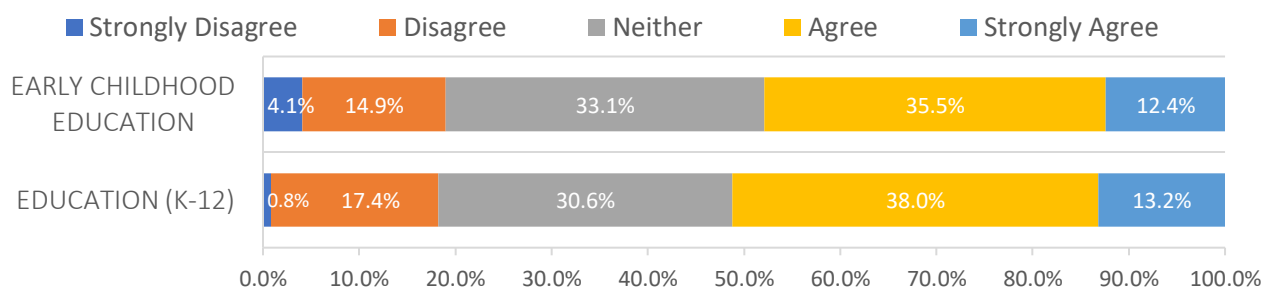
Figure 21 includes perceptions of insufficient or adequate resources to address socio-economic status. More than half of participants (52.9%) strongly agreed or agreed that there are insufficient resources to address substance abuse. Approximately 46.3% strongly agreed or agreed that there are insufficient resources to address food insecurity.

**Figure 21. Perceptions of Insufficient or Adequate Resources Related to Socio-Economic Status (N=121)**



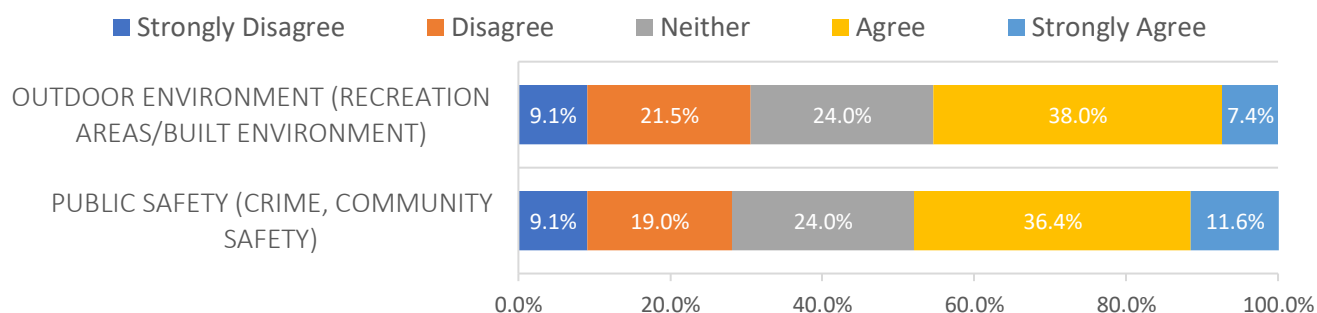
**Figure 22** examines perceptions of insufficient or adequate resources to address education. Almost 50% of participants strongly agreed or agreed that there are insufficient resources to address early childhood education and K-12 education.

**Figure 22. Perceptions of Insufficient or Adequate Resources to Address Education (N=121)**



**Figure 23** presents findings related to perceptions of insufficient or adequate resources related to the socio-environment. Findings are similar to the above, approximately 44.2% of participants strongly agreed or agreed that there are insufficient resources for the outdoor environment.

**Figure 23. Perceptions of Insufficient or Adequate Resources Related to Socio-Environment (N=121)**



#### *Level of Importance to Addressing Different Issues*

Participants were asked to rank the level of importance that should be given towards addressing the above-mentioned issues. Response options included a 4-point Likert scale (0=Not important to 4= Very important). Results are presented below in Figures 24-28. The issues with highest percentages for “Very Important” are the following: access to services for undocumented persons (76%), K-12 education (75.2%), and housing/homelessness (69.4%).

**Figure 24** presents findings on the importance of addressing topics related to access to health services. Approximately, 93% of community members ranked access to services for undocumented person as either very important or important to address in the Latinx community. Preventative services and access to health services followed with 90% and 89.3% respectively.

**Figure 24. Importance of Addressing Access to Health Services (N=121)**

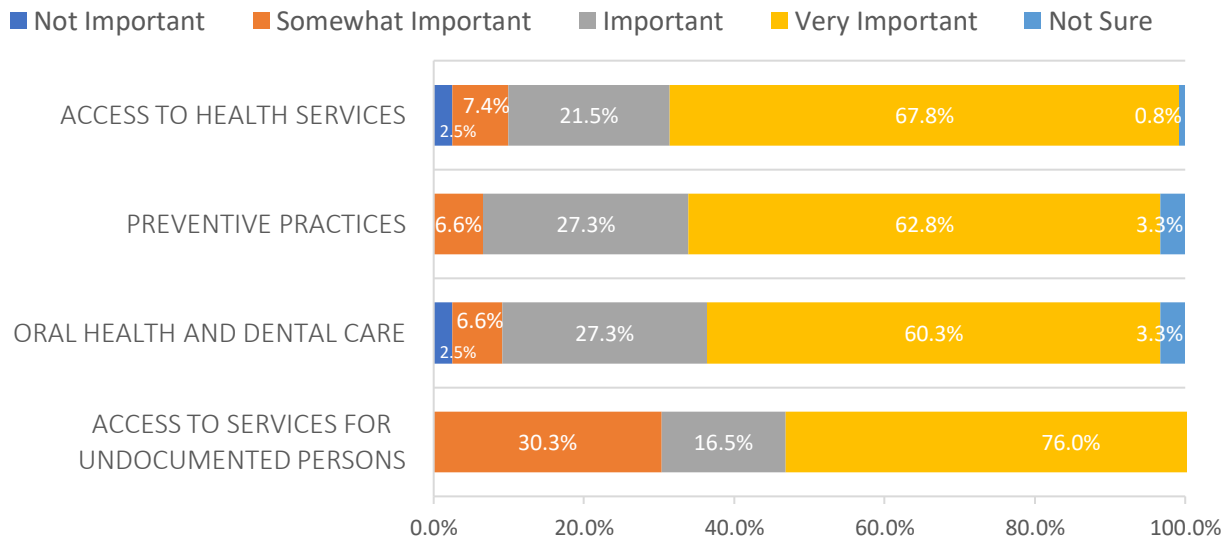
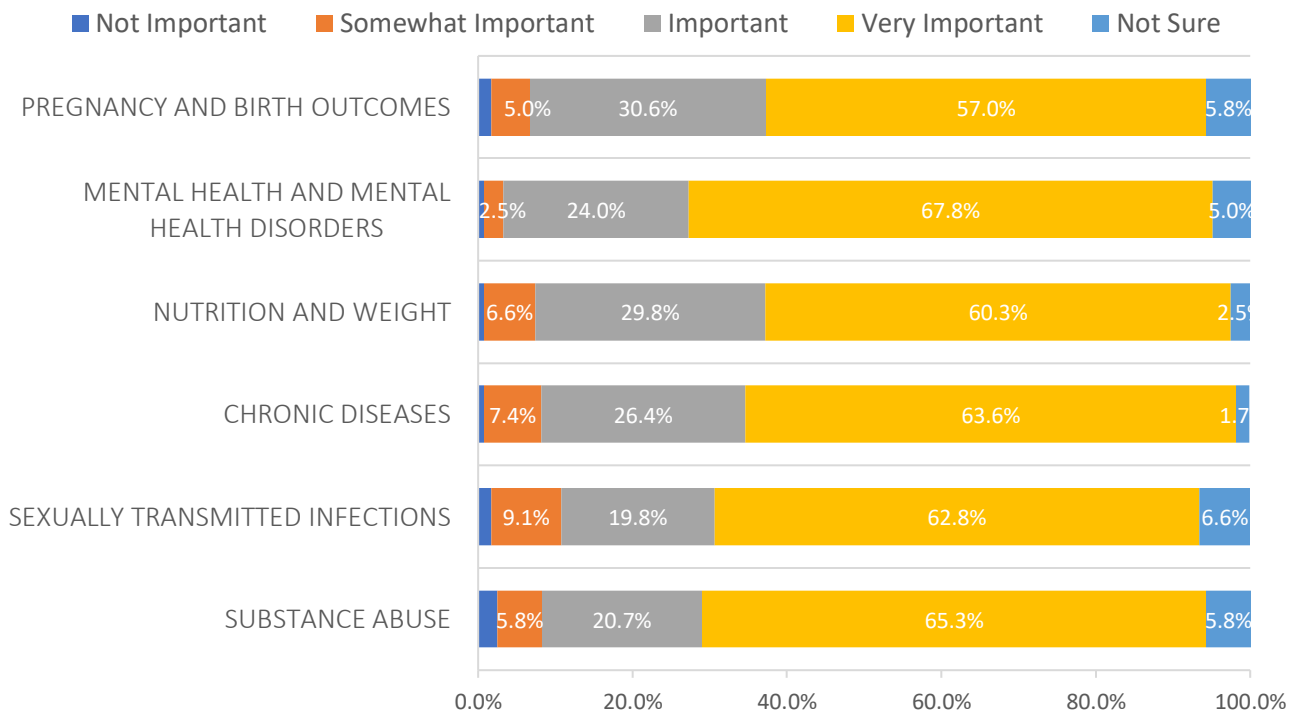


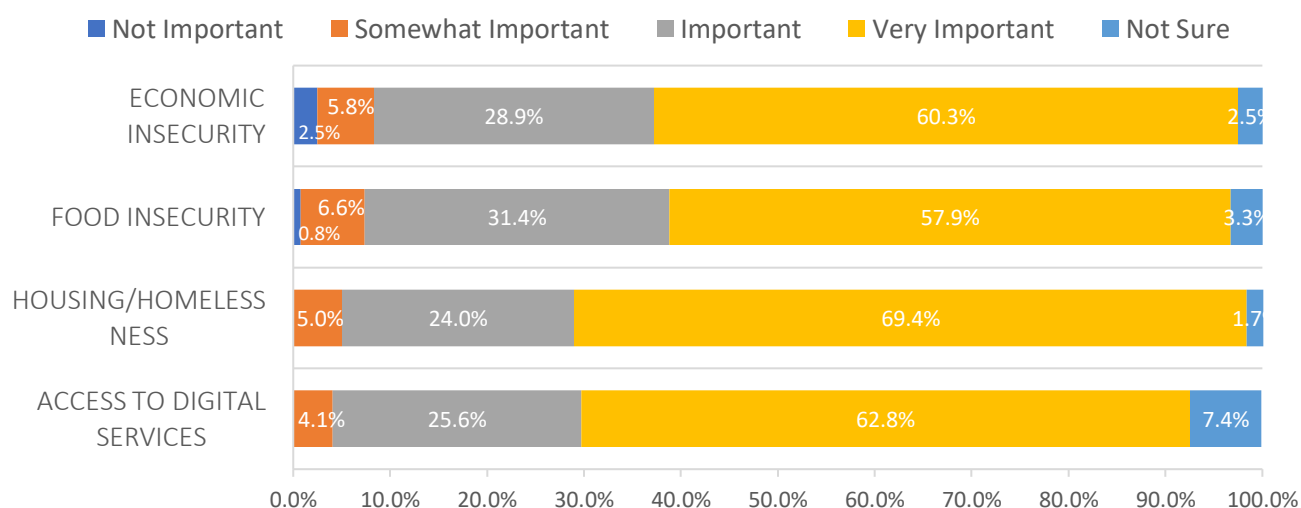
Figure 25 shows the importance of addressing health conditions. Approximately, 92% of community members ranked mental health and mental health disorders as very important or important to address. Chronic diseases were also selected as an issue that is very important or important to address by 90% of participants.

**Figure 25. Importance Of Addressing Health Conditions (N=121)**



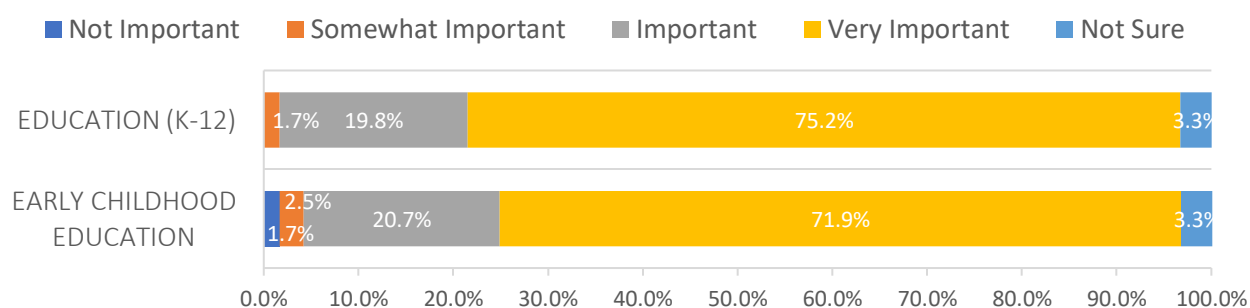
**Figure 26** shows the importance of addressing socio-economic factors. Approximately, 93% of community members ranked housing and homelessness as either very important or important to address. This was followed by economic and food insecurity with 89% of participants ranking it as either very important or important to address in the community.

**Figure 26. Importance Of Addressing Socio-Economic Factors (N=121)**



**Figure 27** shows the importance of addressing education. Approximately, 95% of community members ranked K-12 education as important or very important to prioritize. Early childhood education was also selected as important or very important by 92.6% of participants.

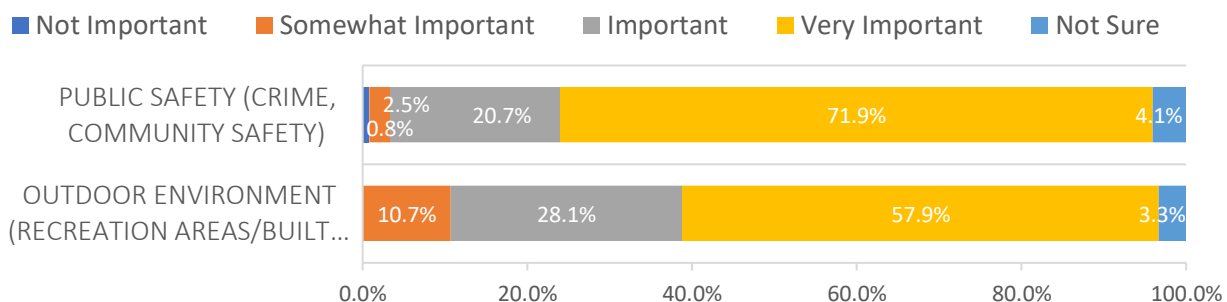
**Figure 27. Importance of Addressing Education (N=121)**



**Figure 28** shows the importance of addressing factors related to the socio-environment. Approximately, 93% of community members ranked public safety as a very important or important issue to address.



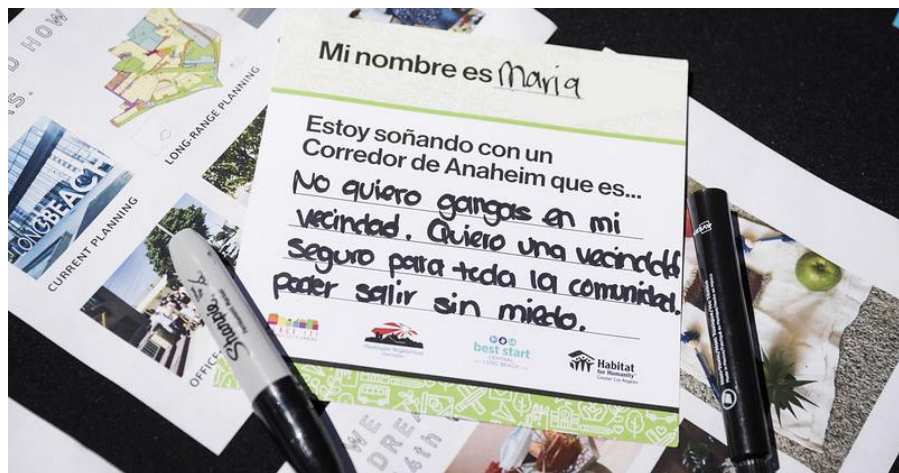
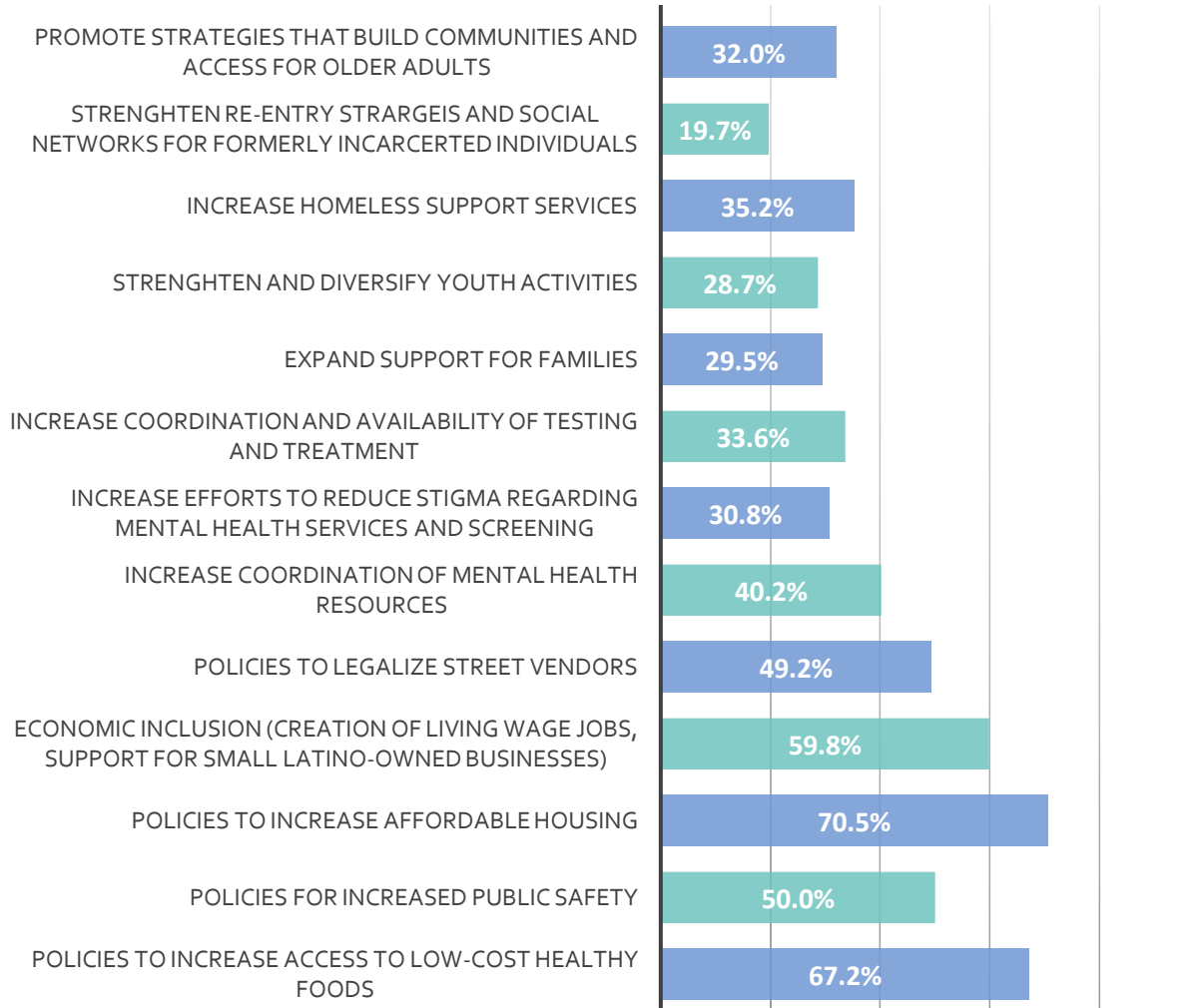
**Figure 28. Importance of Addressing Factors Related to Socio-Environment (N=121)**



Community members were asked to prioritize strategies to address the different health issues and focus areas described above. **Figure 29** includes the results, priorities with the highest rankings are the following: policies to increase affordable housing (70.5%), policies to increase access to low-cost healthy foods (67.2%), and economic inclusion (59.8%).



Figure 29. Stakeholder Identified Priority Strategies



### B.3. Community Stakeholder Survey Results

#### Participant Characteristics

##### *Socio-demographics*

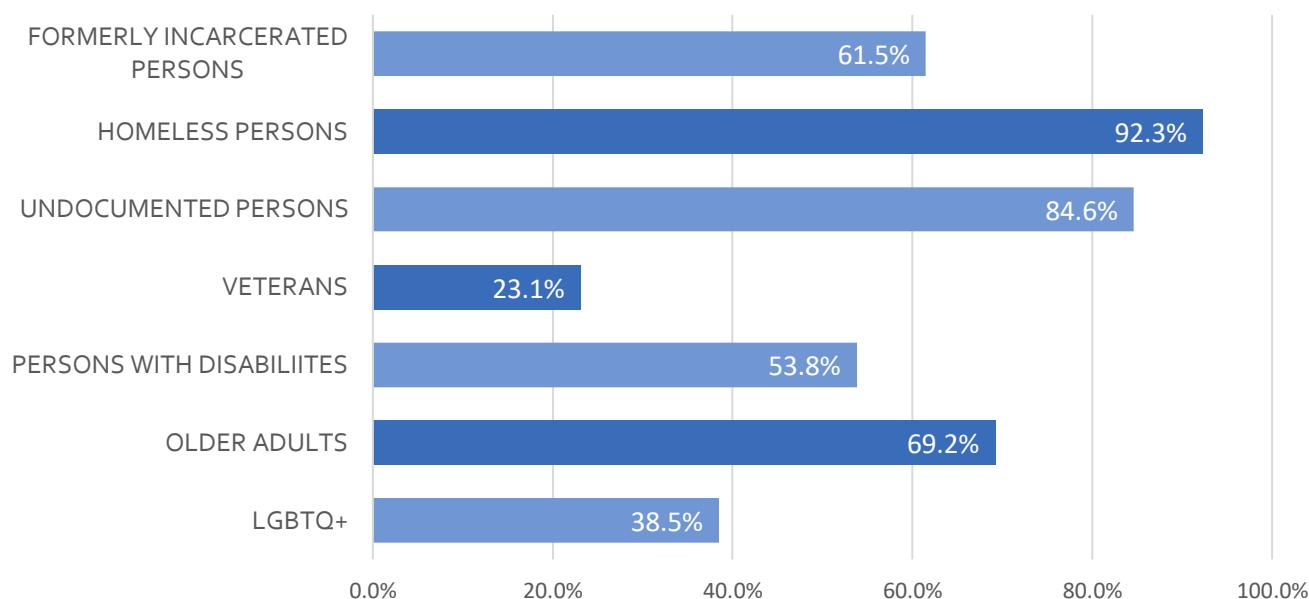
A total of thirteen (13) community stakeholders completed the survey. The sample included six males and seven females. The majority (76.9%) were Hispanic/Latinx and had completed a bachelor's degree (46.2%). Almost all (69.2%) were most comfortable expressing their thoughts and ideas in English. Employment sectors varied. Most (46.2%) were employed in education, 30.7% were employed in non-profit organizations, one in a faith-based organization, and others did not state.

##### *Perceptions of Health Status, Services, and Gaps in the City of Long Beach*

Community stakeholders were asked a series of questions related to the health status of different community groups, access to health services, and gaps in services and support that can lead to poor health status among Latinx Long Beach residents.

Community stakeholders were asked to select up to five community groups who are most affected by poor health. The top five selected groups in order of highest ranking are persons experiencing homelessness, undocumented individuals, older adults, formerly incarcerated persons, and persons with disabilities (see Figure 30).

**Figure 30. Community Groups Affected By Poor Health (N=13)**

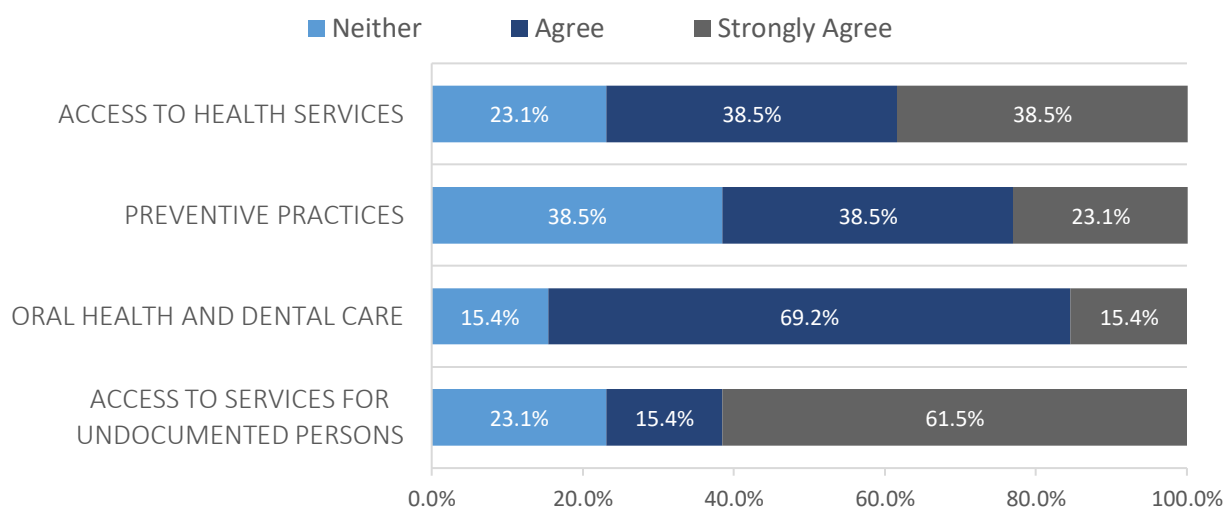


### *Issues Affecting the Latinx Community in Long Beach*

Community stakeholders were asked about the issues that impact the Latinx community in the City of Long Beach. Issues were categorized as follows: healthcare, health conditions, socio-economic status, education, and the socio-environment. Responses were collected using a 5-point Likert scale (1=strongly disagree to 5= strongly agree). Results are presented below in Figures 30-34.

**Figure 31** presents findings related to access to healthcare. The most pressing issues related to healthcare identified by stakeholders include oral health, access to healthcare, and access to services for undocumented persons. Close to 85% of stakeholders strongly agreed or agreed that access to oral and health care is an issue for Latinxs in Long Beach. Further, 76.6% of stakeholders strongly agreed or agreed that access to services for undocumented persons is an issue in Long Beach.

**Figure 31. Impact of Access to Healthcare on Latinxs (N=13)**

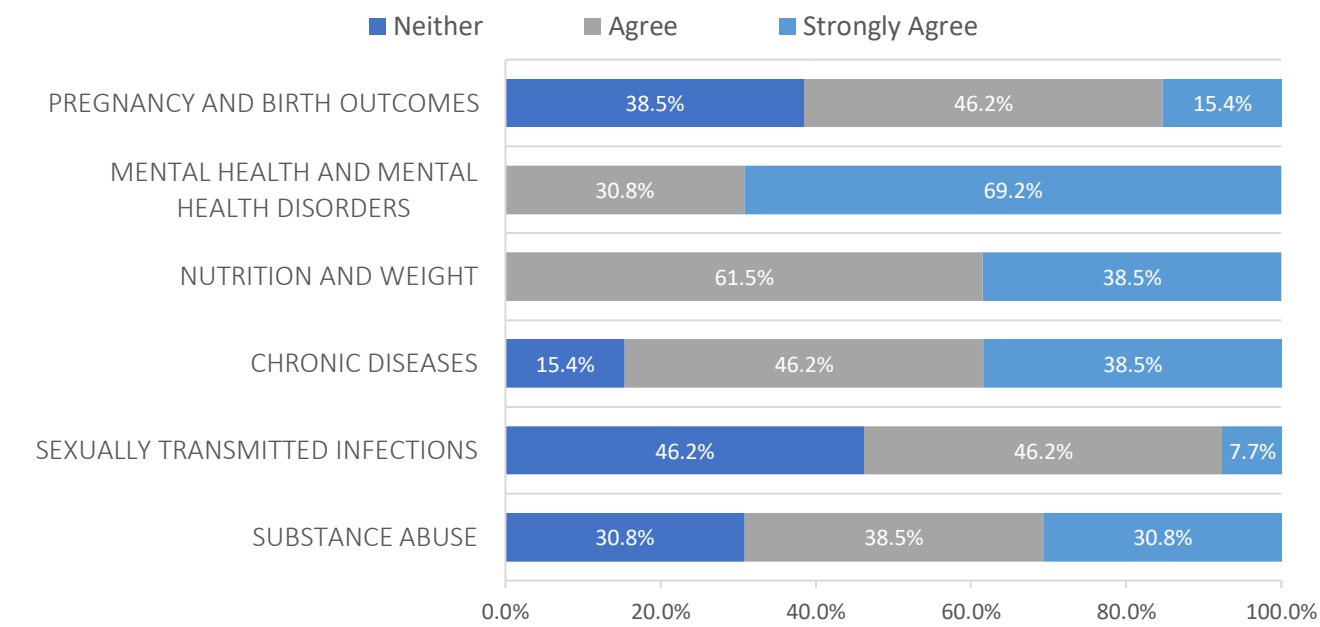


*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” and “Disagree” were not selected are therefore not include in figure.*

**Figure 32** presents rankings related to health conditions among Latinxs. Findings suggest that all (100%) of stakeholders strongly agreed or agreed mental health and mental health disorders are a major issue that impacts Latinxs in Long Beach.



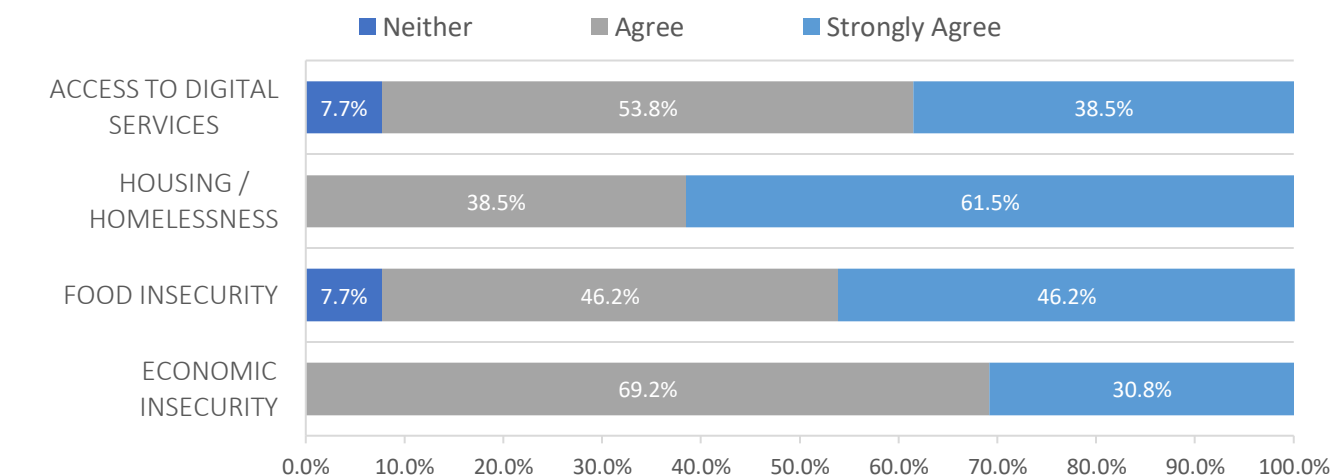
**Figure 32. Impact of Health Conditions on Latinxs (N=13)**



*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” and “Disagree” were not selected are therefore not include in figure.*

**Figure 33** includes findings related to socio-economic status. Stakeholders ranked all socio-economic status factors as major issues impacting the Latinx community in Long Beach. All stakeholders (100%) strongly agreed or agreed that housing/homelessness and economic insecurity are issues that greatly impact the Latinx residents in Long Beach. Further, 92.4% strongly agreed or agreed that food insecurity affects Latinxs.

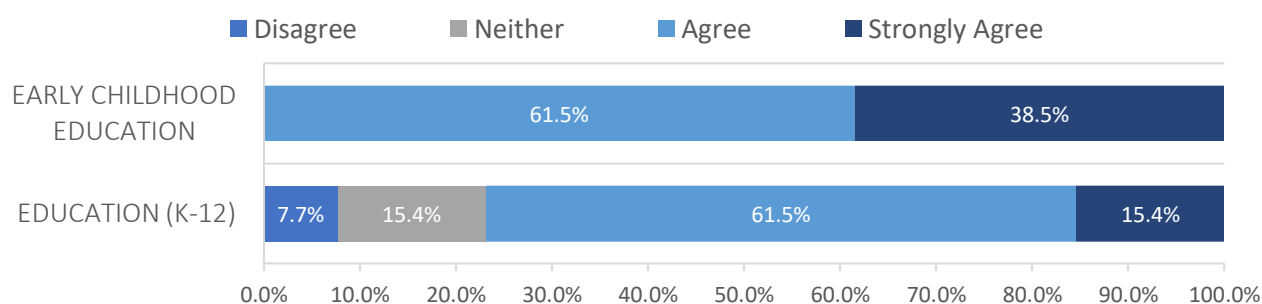
**Figure 33. Impact of Socio-Economic Status on Latinxs (N=13)**



*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” and “Disagree” were not selected are therefore not include in figure.*

**Figure 34** includes findings related to education. All stakeholders (100%), strongly agreed or agreed that early childhood education is an issue impacting Latinxs, while 76.9% strongly agreed or agreed that K-12 education impacts the Latinx community in the City of Long Beach.

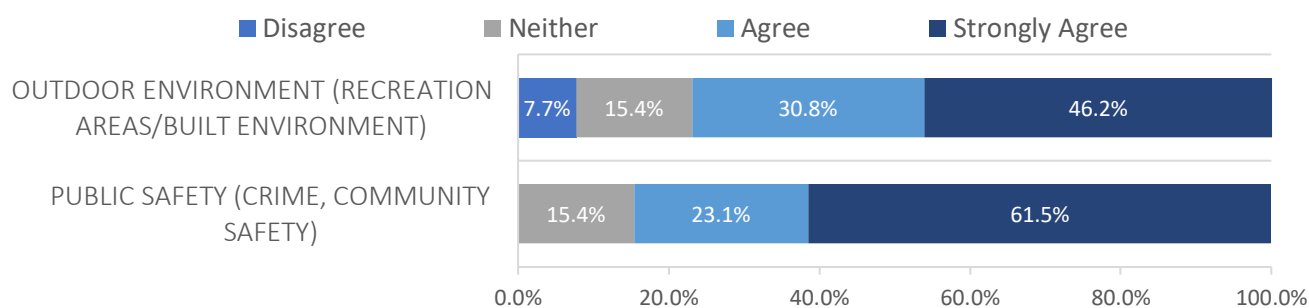
**Figure 34. Impact of Education on Latinxs (N=13)**



*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” and “Disagree” were not selected and therefore not included in the figure.*

**Figure 35** presents findings related to the socio-environment. Results show that 84.6% of stakeholders strongly agreed or agreed that public safety such as crime and community safety are issues in Latinx neighborhoods. Similarly, 80% of stakeholders strongly agreed or agreed that the outdoor environment (i.e., recreation area cleanliness) are issues that impact the Latinx community.

**Figure 35. Impact of Socio-Environment on Latinxs (N=13)**



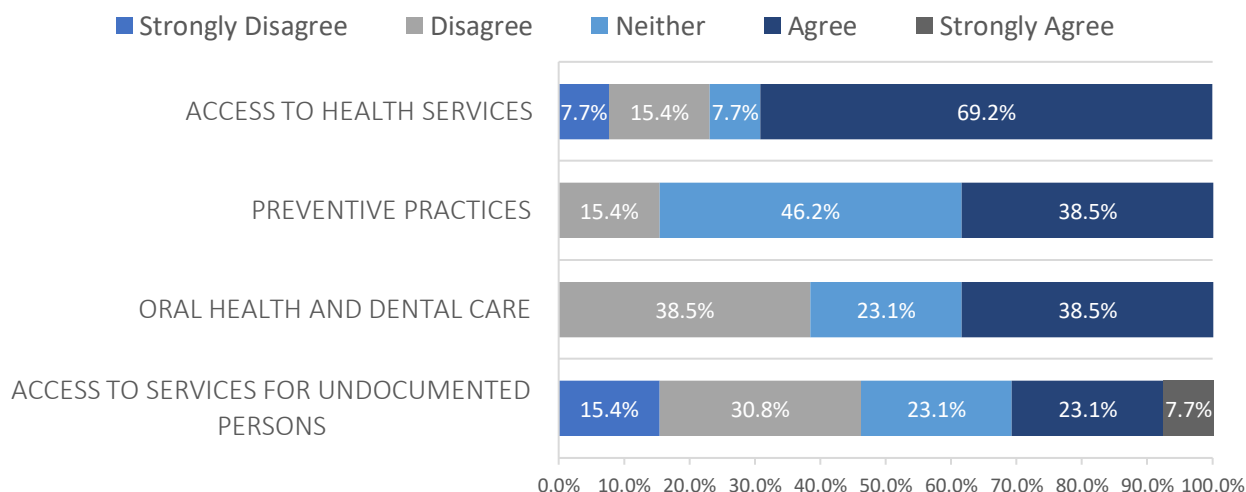
*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” was not selected and therefore not included in the figure.*

### *Perceptions of Existing Services in Long Beach*

Stakeholders were asked about the existence of services and resources to address different issues among Latinx community members in Long Beach. Approximately, 69.2% agreed that there are existing services for access to health services, while 38.5% agreed there are preventive services and oral health and dental care services. Conversely, 46.2% strongly disagreed or disagreed that there is access to services for undocumented persons.

**Figure 36** highlights perceptions of the existence of services and resources to address issues related to healthcare. Approximately, 69.2% of stakeholders strongly agreed or agreed there are existing services and resources related to access to health services for Latinxs in Long Beach.

**Figure 36. Perceptions of Existing Services Resources for Healthcare (N=13)**

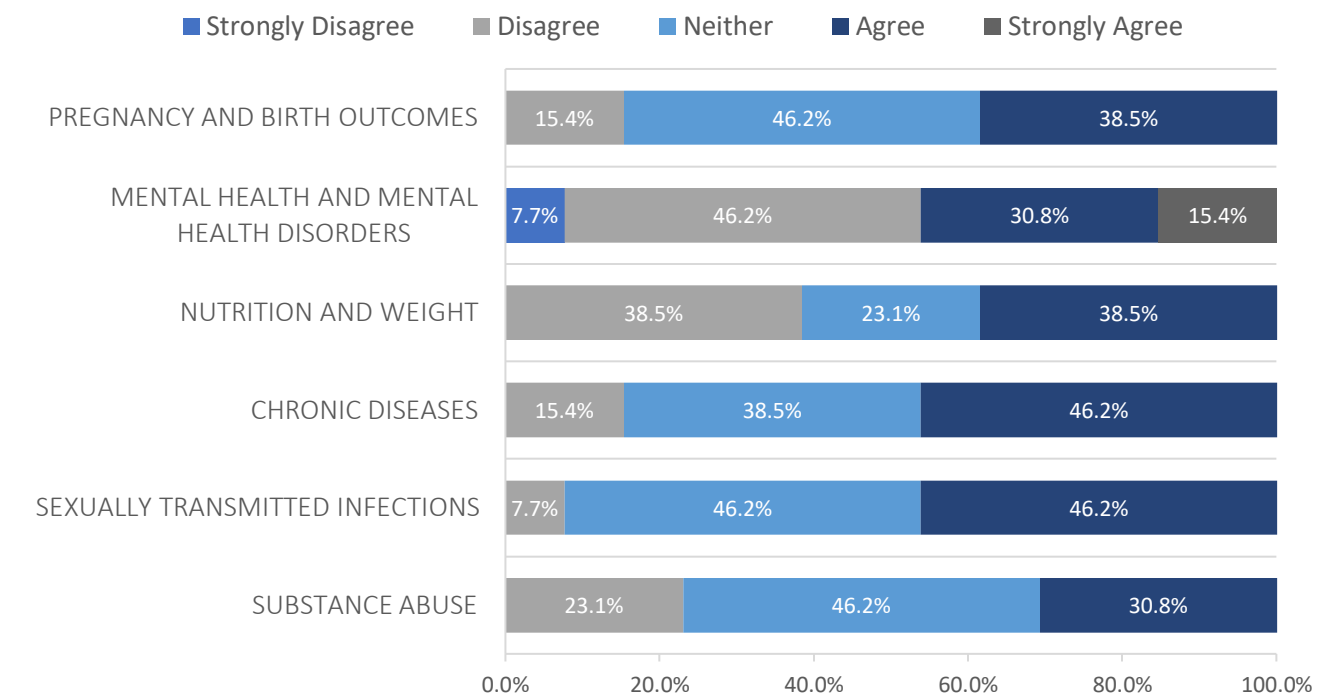


*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” was not selected in some issues and therefore not included in the figure.*

**Figure 37** includes stakeholder perceptions of existing services and resources to address health conditions; 46.2% of stakeholders agreed there are services and resources for chronic conditions and sexually transmitted infections. Approximately, 53.9% strongly disagreed or disagreed there are services and resources to address mental health and health disorders.

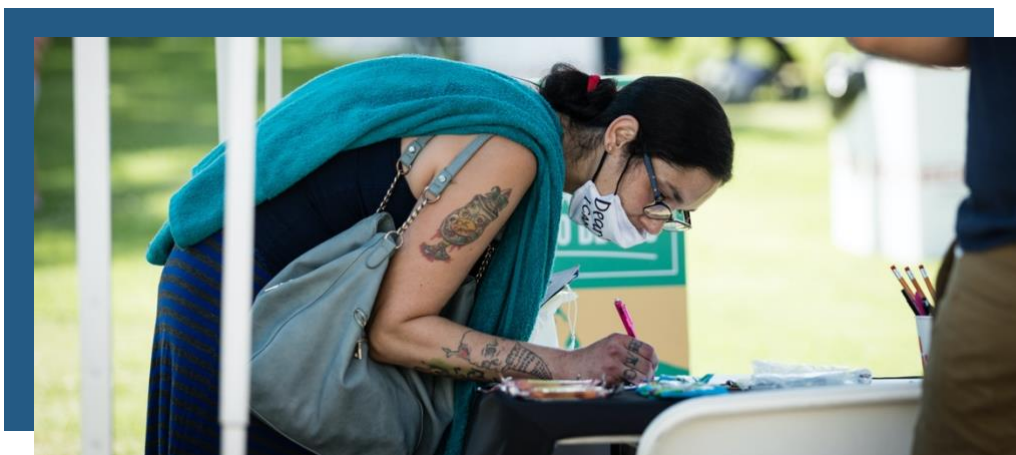


**Figure 37. Perceptions of Existing Services and Resources to Address Health Conditions (N=13)**



*Note: Some categories are not visible on the figure as the percent was equal to 0. For example, “Strongly Disagree” was not selected in some issues and therefore not included in some rows.*

**Figure 38** highlights perceptions of the existence of services and resources to address issues related to socio-economic status. Approximately, 69.2% of stakeholders strongly agreed or agreed there are existing services and resources related to food insecurity for Latinxs in Long Beach. There is a discrepancy between stakeholder and community perceptions related to food insecurity. This finding points to the need for targeted efforts to provide available services to the Latinx community.





**Figure 38. Perceptions of Existing Services to Address Socio-Economic Status (N=13)**

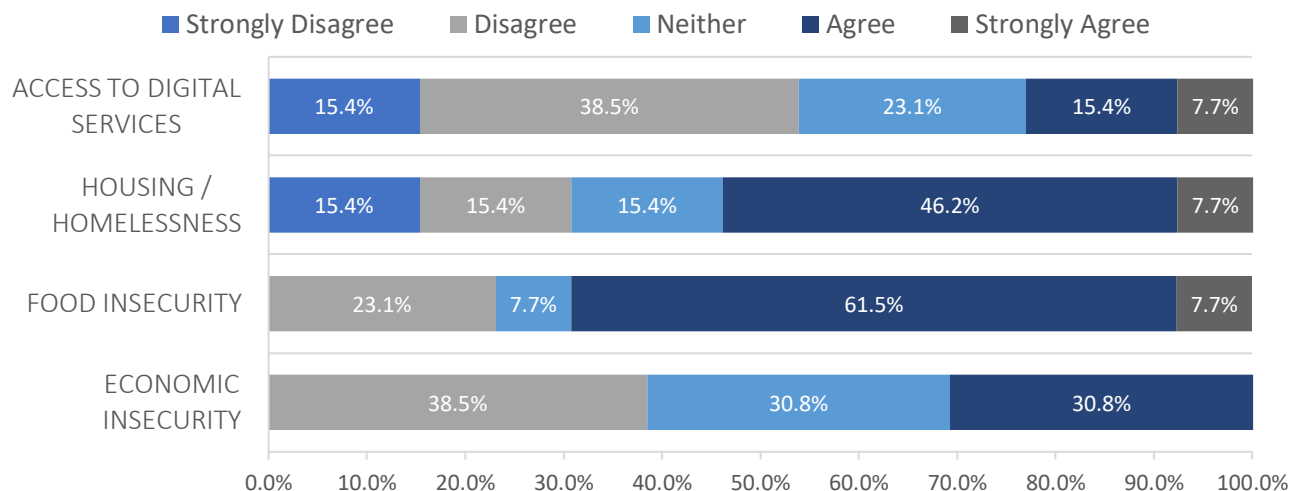


Figure 39 includes perceptions of existing services and resources for education. Approximately, 46.2% strongly agreed or agreed that services for early childhood education exist in Long Beach, and 69.3% strongly agreed or agreed there are services for K-12 education.

**Figure 39. Perceptions of Existing Services and Resources for Education (N=13)**

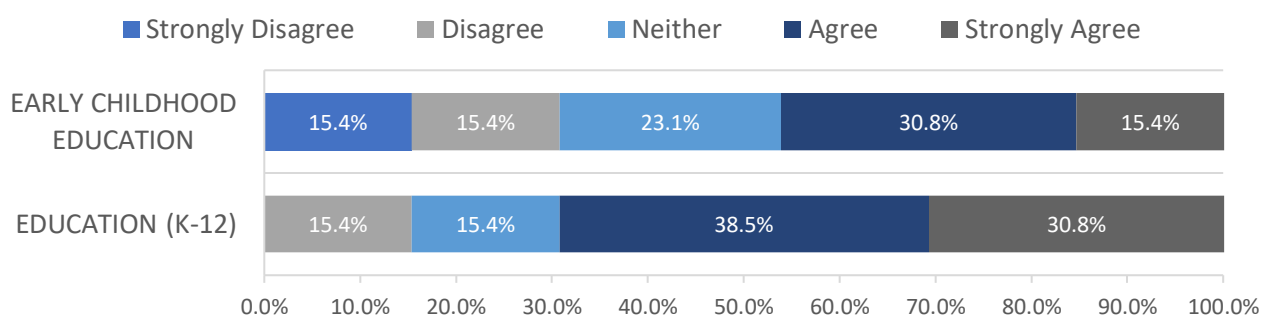
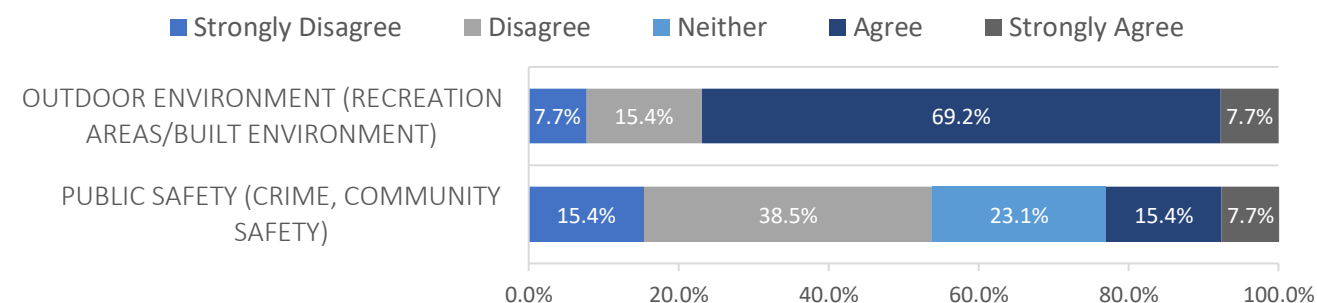


Figure 40 presents findings related to existing services and resources to address the socio- environment. Approximately 69.2% of stakeholders agreed there are outdoor environment services, while only 23.1% strongly agreed or agreed there are services related to public safety.

**Figure 40. Perceptions of Existing Services and Resources to Address Socio-Environment (N=13)**



*Perceptions of Insufficient or Adequate Services in the City of Long Beach*

Community stakeholders were also asked about the adequacy of existing services by responding to items related to insufficient or adequate services to address the different issues. Issues were categorized as follows: healthcare, health conditions, socio-economic status, education, and the socio-environment. Responses were collected using a 5-point Likert scale (1=strongly disagree to 5= strongly agree). Results are presented below in Figures 40-44.

Figure 41 presents stakeholder perceptions related to the adequacy of healthcare services. Although 69.2% agreed there are services, 76.9% strongly agreed or agreed the existing healthcare services are insufficient or adequate to meet the needs of Latinx in Long Beach. Similarly, 84.7% of stakeholders strongly agreed or agreed there is insufficient or adequate access to services for undocumented persons in Long Beach.

**Figure 41. Perceptions of Insufficient or Adequate Resources for Healthcare (N=13)**

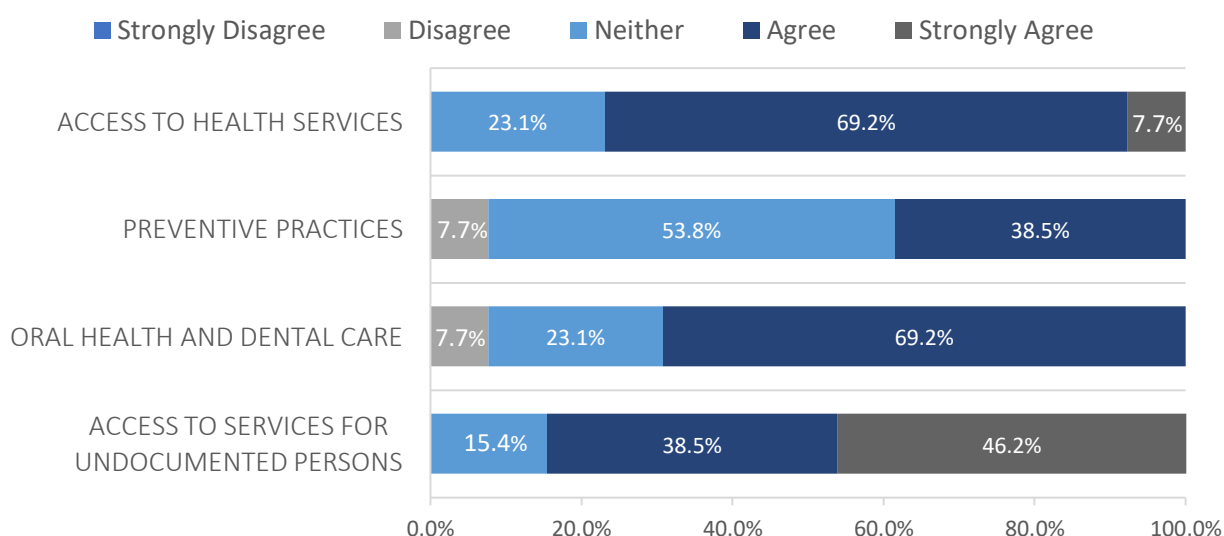


Figure 42 displays perceptions of insufficient or adequate resources to address health conditions. Similar to the findings above, although stakeholders reported existing services for health conditions, all stakeholders (100%) strongly agreed or agreed there are insufficient services to address mental health and mental health disorders. Similarly, 68.6% strongly agreed or agreed there are insufficient resources to address nutrition and weight among Latinxs in Long Beach.

**Figure 42. Perception of Insufficient or Adequate Resources to Address to Health Conditions (N=13)**

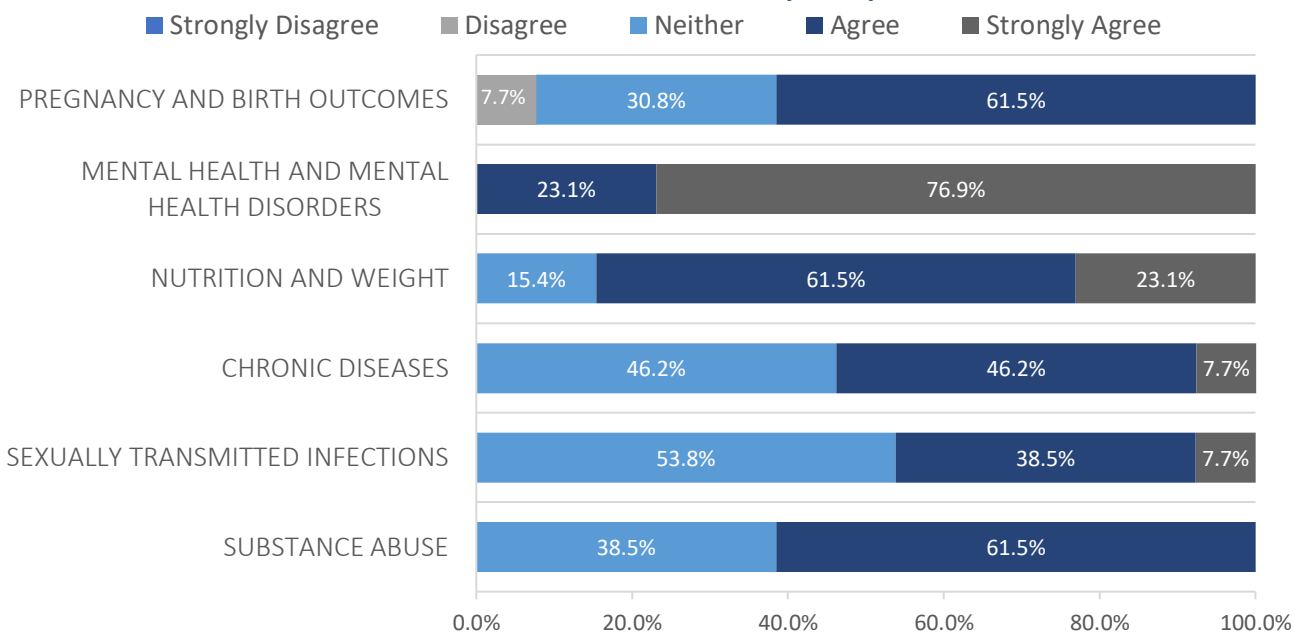


Figure 43 includes findings related to perceptions of insufficient resources related to socio-economic status. The same trend was found in this category as above, 100% of stakeholders strongly agreed or agreed there are insufficient resources to address housing and homelessness, and 92.3% strongly agreed or agreed there are insufficient resources to address economic insecurity among Latinx residents in Long Beach.

**Figure 43. Perceptions of Insufficient or Adequate Resources Related to Socio-Economic Status (N=13)**

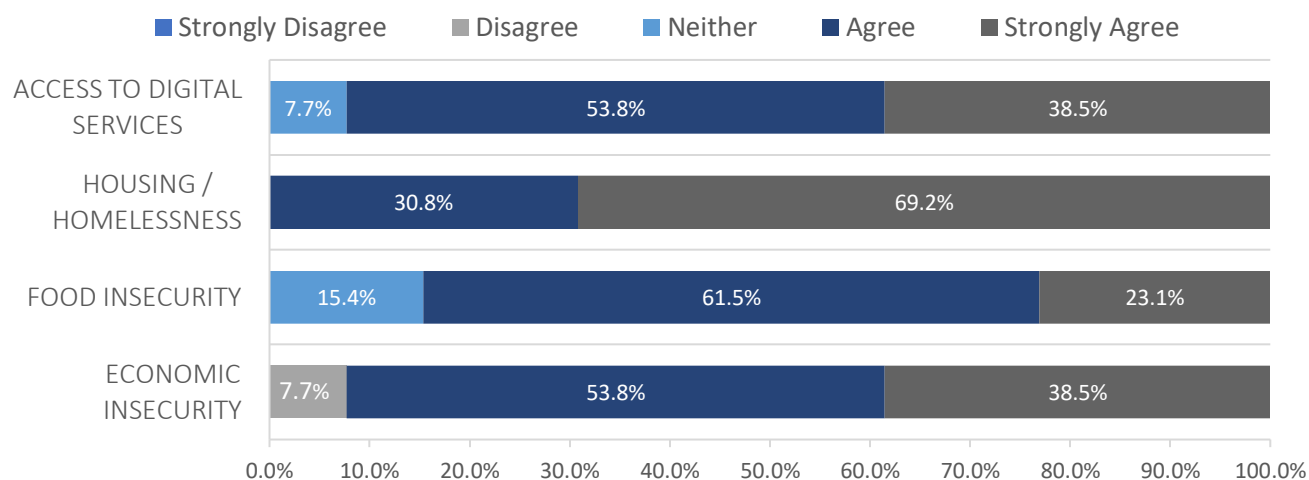


Figure 44 displays perceptions related insufficient resources related to education. Approximately, 46.2% strongly agreed there are insufficient resources related to early childhood education and 46.2% agreed there are insufficient resources related to K-12 education.

**Figure 44. Perceptions of Insufficient or Adequate Resources Related to Education (N=13)**

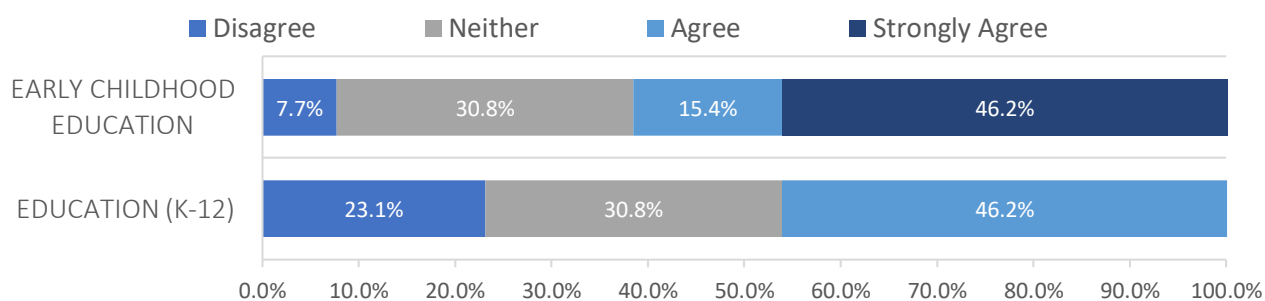
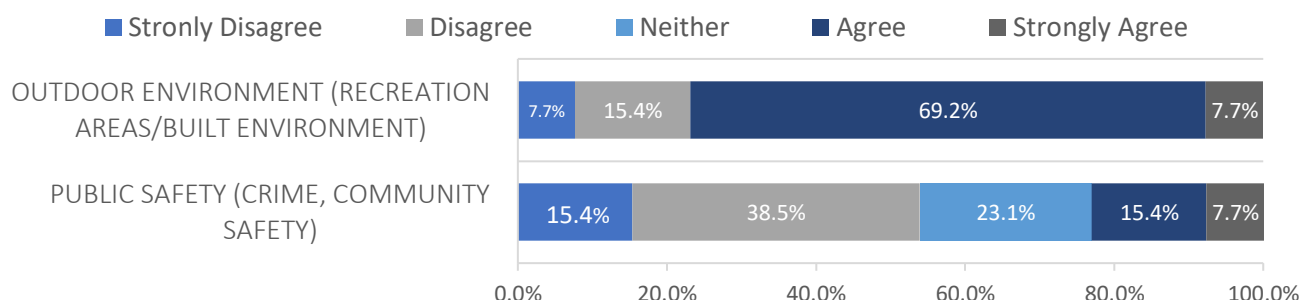


Figure 45 includes stakeholder perceptions related to insufficient resources related to the socio-environment. Approximately, 84.7% of stakeholders strongly agreed or agreed that there are insufficient resources to address public safety among Latinxs in Long Beach.

**Figure 45. Perceptions of Insufficient or Adequate Resources Related to Socio-Environment (N=13)**

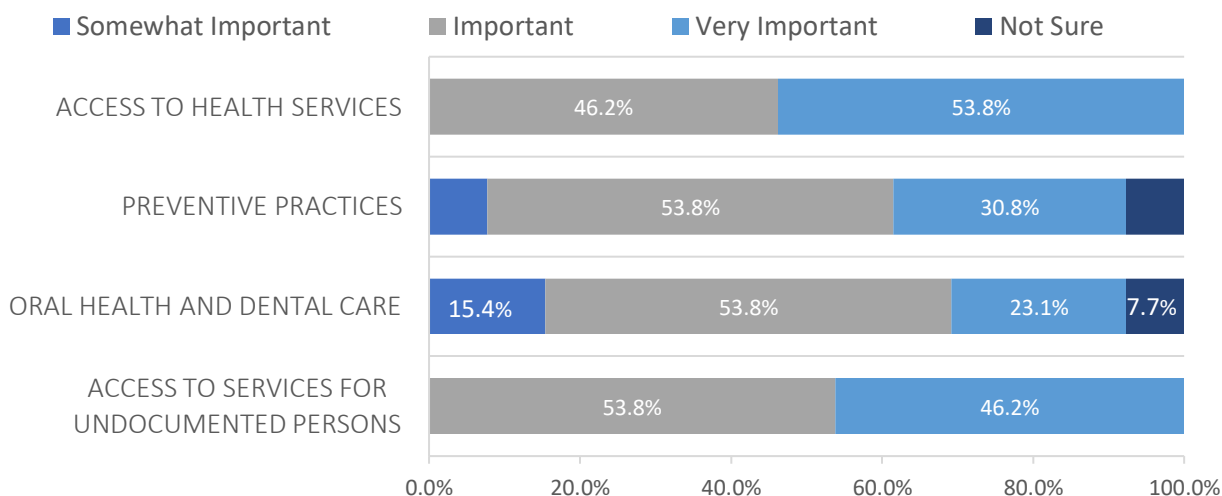


#### *Level of Importance to Addressing Different Issues*

Community stakeholders were asked to rank the level of importance that should be given towards addressing the above-mentioned issues. Response options included a 4-point Likert scale (1=Not important to 4=Very important). Results are presented in Figures 44-48. The issues with highest percentages for “Very Important” are the following: housing and homelessness (84.6%), early childhood education (76.9%), access to digital services (61.5%), and nutrition and weight (61.5%).

**Figure 46** includes findings by level of importance to address access to health services among Latinxs. All stakeholders (100%), stated that access to health services and access to services for undocumented persons are important or very important.

**Figure 46. Level of Importance - Access to Health Services (N=13)**



**Figure 47** includes findings on the level of importance to address issues related to health conditions. Approximately 92.3% of stakeholders ranked addressing mental health and mental health disorders as very important.



**Figure 47. Level of Importance - Health Conditions (N=13)**

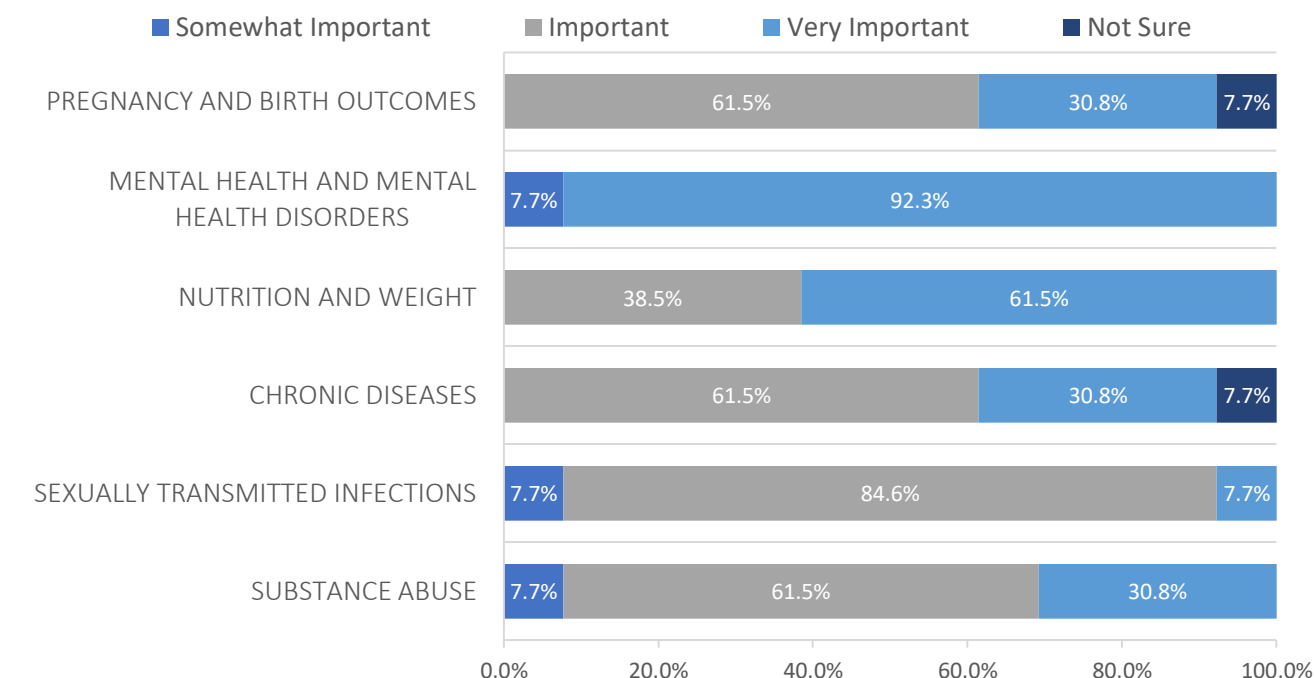


Figure 48 includes level of importance for addressing socio-economic status issues. All stakeholders (100%) ranked housing/homelessness and economic insecurity as important or very important to address in the Latinx community.

**Figure 48. Level of Importance - Socio-Economic Status (N=13)**

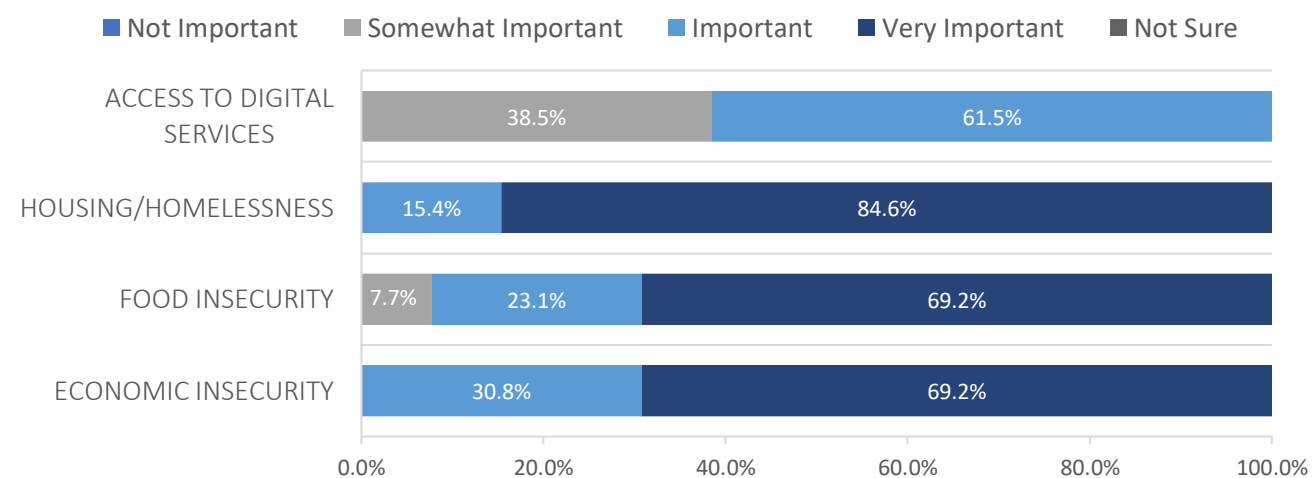


Figure 49 includes findings related to level of importance for addressing education issues. All stakeholders (100%) agreed that it was important or very important to address both early childhood education and K-12 education.

**Figure 49. Level of Importance - Education (N=13)**

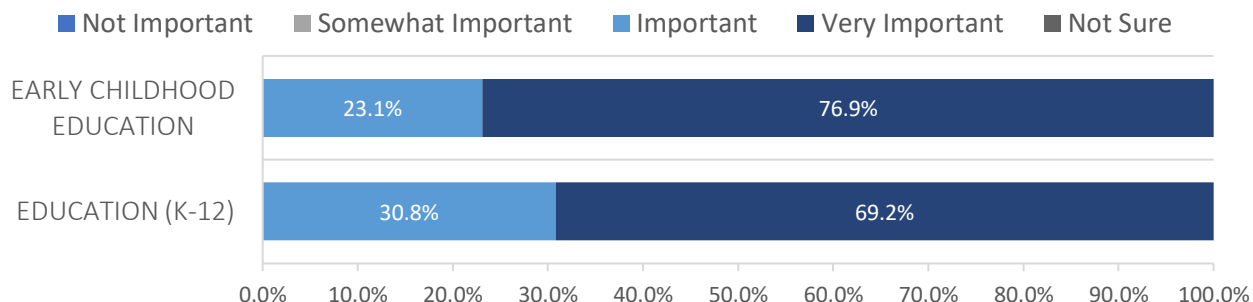
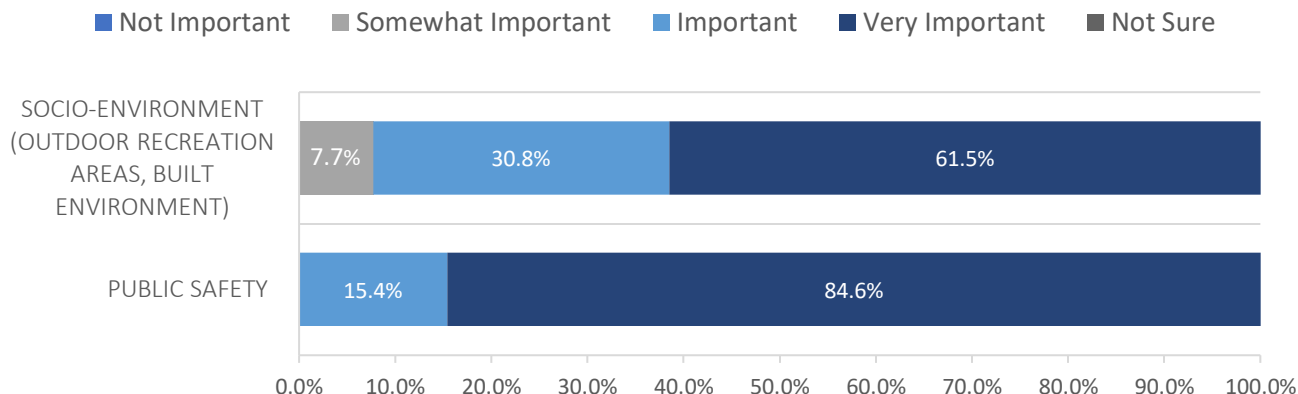


Figure 50 shows the level of importance to address socio-environment issues among Latinxs in Long Beach. All (100%) community stakeholders perceived public safety as important or very important. Similarly, close to 90% of community stakeholders perceived the socio-environment as important or very important.

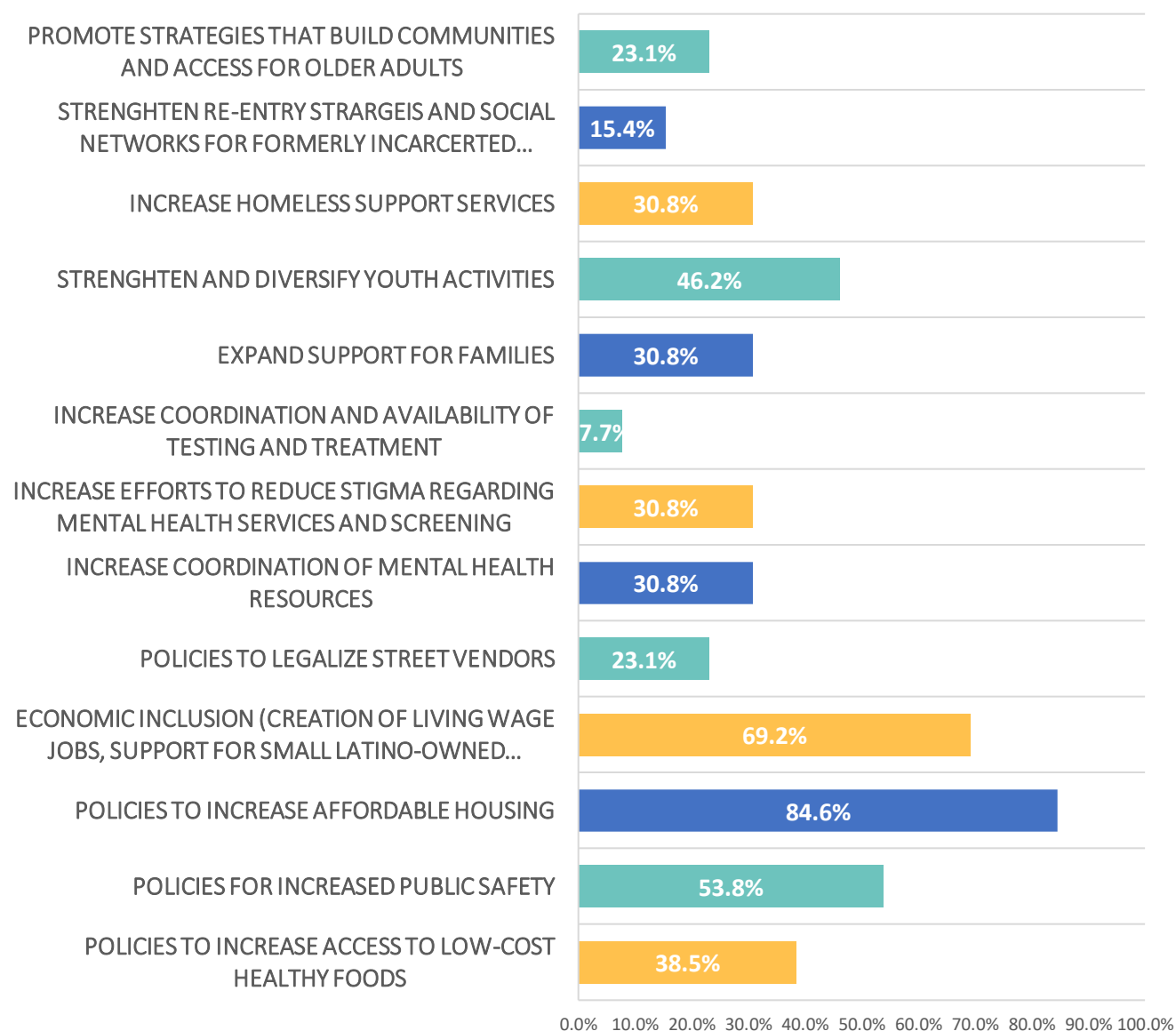
**Figure 50. Level of Importance - Socio-Environment (N=13)**



### Priority Strategies

Community stakeholders were asked to prioritize strategies to address the different health issues and focus areas described above. **Figure 51** includes the results, priorities with the highest rankings are the following: policies to increase affordable housing (84.6%), economic inclusion (69.2%), policies for increased public safety (53.8%), strengthen and diversify youth activities 46.2%), and policies to increase access to low-cost healthy foods (38.5%).

**Figure 51. Stakeholder Identified Priority Strategies**



*Other Recommendations from Stakeholder Survey*

Community stakeholders provided other recommendations to improve the health and wellness of Latinxs in Long Beach. See **Figure 52** below.

**Figure 52. Recommendations of Improved Collaboration with Stakeholders**



## F. Acknowledgements

We would like to express our deepest gratitude to all who were involved in the various phases of this initiative including the development of the survey and listening session questions, outreach and recruitment, survey administration, and data analysis and reporting.

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  - Jonathan Gray, Youth Director
  - Alma Orozco, Program Director



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# MI VIDA CUENTA

## COVID-19 Latinx Health Initiative



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