

Report from the Discover Health/Descubre la Salud Community Dialogues

Background Info:

Anne Holland visited 6 libraries in April/May of 2016 to facilitate community dialogues between participating libraries, AHEC staff members, and other relevant community partners. These dialogues occurred at the Centennial Branch of the Greeley Public Library System, the Main Branch of the Aurora Public Library, the Pueblo Public Library, the Alamosa Public Library, the Cortez Public Library, and the Central Branch of the Grand Junction Public Library System.

The purpose of these dialogues was to record community health concerns, determine if the current exhibit/PBL/programming plan was relevant to these communities, and solicit suggestions for exhibit development, activity development, and partnership building with this project.

Logistical Data Collected:

In discussing their local populations with these groups, it was clear that each region had a very distinct Latino population. Some areas had a mostly recent population (meaning more of them only spoke Spanish), while others have a larger historic population (meaning even though there are large numbers of Latino's in the area, very few of them actually speak Spanish). We also learned that for one region, a Native American population was actually a much larger underserved audience than Spanish speakers. It was also made clear to us in several locations that while they did have a Spanish speaking population, there were many dialects and pidgins present, which makes it hard to use one unifying approach to reach them. Every region reported that some statistically significant portion of their Latino population was undocumented (making them reticent to get library cards or sign up for programs), ranging from 5% all the way to 30%. Census data for Hispanics in the service regions ranged from 11% to 58%.

Exhibit Suggestions:

Part of the purpose of these dialogues was to get suggestions on how to make the exhibit more relevant for the populations of these regions. The overall feeling from all the groups was that we need to focus more on healthy living, and less on "structural" items, like how the body works. Those pieces can be there, but instead of "this is your skeleton", it should be "this is how to keep your bones healthy". It may even be exactly the same information, but the language will be more welcoming if it's phrased as ways to make a healthy change, rather than just instructional.

The following are the most popular and feasible suggestions, that will be integrated into the current exhibit plan:

- Sticky Note Board – 4 dialogue groups made this suggestion, with a consensus that it should be for locally relevant tips about healthy eating (such as local restaurants that may cater to allergies, or have a heart healthy menu) and for suggestions for increasing your activity level in the local area (free programs at the rec center, hidden away parks, existing exercise clubs)
- Dental Health Component – Every group made this suggestion in some form. The likely solution will be a large tooth model that can be brushed and flossed (purchased from Carolina Biological, most likely) as well as a panel that shows how poor dental health can negatively impact other areas of your health (such as cardiac health).
- “Lock it Up!” – This suggestion came from 4 different groups. This should be a brief, informative panel on what types of items need to be locked up in your home to protect children and pets (marijuana, prescription and OTC drugs, guns, laundry pacs) As pointed out by the Cortez group, not everyone has access to social media or sees the PSA’s on TV, this could really make someone think and change their behavior.
- “Healthy in CO” – All groups had various versions of this suggestion. This panel should focus on unique CO health concerns caused by our elevation and outdoor lifestyle. Things like using sunscreen, wearing sunglasses, reminding visiting friends about the effects of altitude, using proper safety gear when ATV-ing, etc.
- “Every Little Bit” – Again, this suggestion came in some form from all the participants. This panel should focus on small changes you can make to live a healthier life, and it should be in quantifiable terms. For example, “taking the stairs 3 times works off X mini candies” or “if you switch to milk in your coffee for a year you can lose X lbs”
- Other suggestions are catalogued in the full notes from each session, and will be considered closely as exhibit design and text writing continues.

Programming and Partnership Ideas:

Some really great ideas for programming and partnerships came out of these sessions. Many of which would be possible at all of these locations. Below is a selection of the most popular/innovative programming ideas, followed by a list of potential partners.

Programming ideas:

- Mini Med School (available through all the AHEC offices)
- Stroller Fitness after story time
- Using existing fitness DVDs for un-facilitated fitness classes
- Bilingual story time
- Story time with dental health students (many existing books on dental health for young children/families)
- Cooking classes/Snack prep classes

- Community Forums around controversial issues (led by the community, using library space)
- Health Screenings
- Teddy Bear Clinics

Partnership ideas:

- CU (AHEC's obviously, mini med school)
- Local School Districts and home school groups
- Local community colleges (most have various medical programs, with service requirements)
- 9 News Health Fair
- Immigration Services
- Hispanic Nurses Association
- Reforma
- Local Hospitals and Clinics
- Local Restaurants
- Delta Dental (already in place at some locations)

How are libraries already approaching these topic/audience concerns?

The responses to this prompt varied greatly. Some libraries (like Greeley and Pueblo) are already well-known and trusted in their local Spanish speaking community, while others have yet to make a foothold. Bilingual story time was common in all but one of the libraries (who tried it for 6 months and cancelled after never having anyone show up), as were Spanish language resume and computer classes. A common problem seen across even the libraries doing a great job is having a welcoming venue. Only one library has a toggle on their website to Spanish, or their hours posted in Spanish on the door. Some (3) had various Spanish book sections, but the signs were only in English! All the libraries agreed that this program is a great opportunity to try to start doing a better job with reaching this particular audience.

As far as health topics go, there were similarly mixed results. One library has already done dental health story times through Delta Dental and the AHEC offices, while most are still struggling to figure out how to reach the Health component of this year's summer reading. A common realization in these discussions is that many of the libraries already have health conversations occurring in their libraries (through other groups using their study rooms and conference rooms), but these events are never advertised in the library! As an example, one library noted that there are diabetes dialogues happening in their conference room on a weekly basis, because the community room at the hospital wasn't big enough. However, those dialogues were only being advertised at the hospital, so frequent library patrons weren't getting the benefit of these discussions. All the libraries noted that they had discounted advertising these sessions because often people doing sales pitches and things use their rooms, so they weren't comfortable putting the library name on flyers, or allowing advertising in the

library. They all however, agreed that in the future they will do a better job of “vetting” health related meetings so they can advertise and co-brand appropriately.

Differences between English and Spanish speaking audiences

In each Community Dialogue we also discussed what differences the libraries (or AHEC staff) had noticed between English and Spanish speakers utilizing library or health care resources.

A few items were similar across all 6 communities. For example, everyone agreed that they most often see Latino’s using the library as a family group. With the rare exception of teenage boys by themselves, they reported that they almost never saw Latino patrons come in not as part of a family unit. All locations also agreed that these patrons rarely visited the adult section of the library, and instead were most often found either in the Children’s area, or in the DVD checkout area.

Another observation that crossed all 6 communities is that Latino patrons are very reticent to get a library card, or to sign up for programming. The reasoning, however, varied across sites. In one location, it was simply because most Latino residents are recent transplants from Mexico, where libraries are only for the academic elite. Until someone from their community explains to them, they don’t even realize they’re allowed into the library. In other communities (3), it was a fear of giving personally identifiable information to a government entity, because of the large population of undocumented immigrants. Even naturalized citizens are wary, and were more likely to sign up if an address wasn’t required.

It was also noted in 5 of the 6 regions that Latino and Spanish speaking patrons seemed to be very purpose driven in their library visits, they would come in, get what they needed, and leave. Longer visits only happened when they needed to use the internet. Very rarely did they see Spanish speaking patrons stop to look at exhibits or displays, or participate in programming.

One library had much better participation in programming and exhibits than the others. This was likely due to efforts by the library system to make Spanish speakers feel more welcome (signs in Spanish, press releases/posters in Spanish, and name tags clearly stating who spoke Spanish).

Results/Recommendations

The exhibit plan is currently being modified to reflect requests from these Community Dialogues. The project team will also be meeting to make sure the Problem Based Learning Sets being developed by CU will be relevant to these communities.

The most important recommendation though, is going to have to involve participation by the libraries themselves. It’s clear that while Latino’s/Spanish speakers are definitely using these libraries, they don’t necessarily feel welcome to participate in exhibits and programming (especially programming). As there is a bit of time before the exhibit starts, I recommend that we work with CLACE to create a Best Practices checklist for each of these libraries. This should just be basic things that they can do to make Spanish speakers more welcome in their venues. Suggestions that shouldn’t be too onerous include: Signage in Spanish, nametags indicating

who can speak Spanish (including the dialects/pidgins in these unique regions, and even who is willing to have a conversation in Spanish to learn!), if the libraries have a bilingual storytime make sure it's either a native speaker or it's clear this is an opportunity for BOTH sides to learn, advertise programs on Spanish speaking radio or at relevant local events.

It was clear that some of these libraries had a great desire to interact more meaningfully with these populations, but they just hadn't been given the tools to do it. Training at the workshop will be beneficial, but I would like to get some help to these libraries prior to that so they can start before they have an exhibit and programming to worry about.