

Health and Communication: Exploring Two Areas of Need in the Walker's Point Neighborhood

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Foreword

The Robert M. La Follette School of Public Affairs at the University of Wisconsin–Madison is pleased to be able to apply part of its efforts to improving health in Wisconsin communities. Each year, in one of its graduate courses, the La Follette School randomly selects several communities from around the state and conducts research to identify important health issues and to work with community leaders to design ways of addressing those issues.

The Wisconsin legislature established the Robert M. La Follette School of Public Affairs in 1984 with a multifaceted mission—to engage in instruction, research, and outreach. The La Follette School fulfills this mission by offering a master's degree in public policy; by encouraging scholarly research on numerous issues that have public policy implications; and by offering numerous enrichment and training opportunities to policy makers at all levels of government.

The School's Center for State, Local and Tribal Governance has contributed to that commitment by establishing an annual program geared toward assisting Wisconsin communities in addressing community health issues. The program is the centerpiece of the Skornicka Seminars at the La Follette School, initiated with support from Joel Skornicka to improve local governance in the state. Joel Skornicka is a former mayor of Madison and assistant to UW chancellors.

The format of these seminars is that students at the La Follette School enroll in a course that provides them with an opportunity to conduct field research and to learn facilitation skills in community development. The students in the course form teams, and each team focuses on a specific community. Students complete an analysis and present it in a case study, like the one that follows. Then community leaders meet to discuss the findings of the case study and to formulate a way of resolving issues raised in the analysis. The La Follette School is happy to assist in any way it can with the implementation of plans designed at these meetings.

Initially, the focus of these seminars was on the issue of gangs and youth violence. We treated this concern as a health and safety issue. We have broadened the scope of the seminar this year to include other community health issues. This expansion is not because gangs and youth violence are no longer matters of concern, but rather to recognize that communities face a variety of health issues. We want to be responsive to the needs and priorities of the people of Wisconsin.

On behalf of the students, faculty and staff at La Follette, I would like to acknowledge and thank the many individuals who have made these studies possible. We appreciate the time and the information that you have contributed. Our hope is that you find our work useful in enhancing the health of the people in our state.

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Executive Summary

The Walker's Point neighborhood has a rich culture and unique history that make it a distinctive part of the City of Milwaukee. This neighborhood is grappling with a number of pressing community health concerns. This paper highlights many of these health issues with the intent of contributing to community dialogue and assisting community health development. Our research consists of numerous personal interviews with community leaders, health service providers, social service providers, local media providers, and community residents. Although we attempted to understand the perspective of community members, we recognize that as outsiders our perception of the Walker's Point community may be incomplete.

Over the years this community, located in Milwaukee's industrial corridor, has been home to waves of job-seeking immigrants. In the past couple of decades this neighborhood has developed into the heart of Milwaukee's Hispanic community. Census figures indicate that the Hispanic population in Milwaukee County now exceeds 80,000.

Our research revealed numerous community health issues in the Walker's Point neighborhood, and we have chosen to specify five of them. Our first area of concentration is the high prevalence of diabetes in the community which has been often resulting from poor nutrition and sedentary lifestyles. Second, we have chosen to examine how the lack of available (or adequate) health insurance affects many community residents. Economic decline and high rates of unemployment have exacerbated a situation in which many community residents cannot secure regular employment or affordable health care. Third, we examine the prevalence of domestic abuse. The people of Walker's Point face unique aspects of this issue because of language and cultural barriers or immigration complications. Fourth, we explore the language and cultural barriers confronted by Spanish-speaking residents. Bilingual health services are provided in this community but the services available do not match the needs of a growing Spanish-speaking population. Finally, we examine the issue of immigration status and the fears of many recent immigrants. This factor is particularly troubling because many recent immigrants do not take full advantage of available health services for fear of immigration authorities obtaining their personal information.

The resolution of each of these issues requires dedicated resources and a great deal of effort from community members. Strengthening and reinforcing available health information networks will help the community better understand and address their health needs. Services readily accessible to the English-speaking population such as print health news, television coverage, and talk radio are not as available to Milwaukee's growing Spanish-speaking population. Our research has demonstrated overwhelming support from community members who want more accurate and useful health information provided in Spanish. The media services that currently target this population provide a strong foundation for the development of a more expansive and consistent Spanish media network. Milwaukee's Spanish-speaking population deserves a communication network capable of transmitting vital health information.

Health and Communication: Exploring Two Areas of Need in the Walker's Point Neighborhood

by Eric Hudson, Chad Ruppel, and Sarah Sanders

The following paper presents research on health and communication issues in the community of Walker's Point located on the near south side of Milwaukee, Wisconsin. We compiled the information throughout an eleven-week period during which time we gathered facts and opinions through personal interviews, surveys, and other research. To the best of our ability we have attempted to verify information presented here but we caution readers that this report contains subjective testimony and personal observations.

Our efforts involve two stages of investigation: a general exploration of existing health issues, and a subsequent study of Spanish-language communication networks in Walker's Point. Most of the people we talked with during this project work or live in the area and fall into one of five categories: health provider, social service worker, community member, public official, or media representative. Conversations with these people helped us to understand the nature and scope of their community's health concerns. It is with considerable respect for their labor and dedication that we developed this paper.

History¹

In the 1830s Walker's Point was named for its original developer, George Walker. Walker thought the claim near the mouth of the Milwaukee River would attract settlers, but his youth and inexperience as a developer hindered his efforts to develop the peninsula successfully. Shortly after claiming the land, Walker lost it to claim jumpers and moved off the peninsula to an area now close to Sixth and Pearce Streets. This area was named Walker's Point Addition, and it was here he designated one block of land for public use; that area is now Walker Square.

After time, Walker purchased back a piece of the original peninsula with the intention of making the area downtown Milwaukee. The river and the confluence of all southern trails made the area around the peninsula ideal for the downtown. Ownership of the land was disputed as Walker, the claim jumpers, and Indians became tied up in legalities. This conflict foreshadowed a difficult social and economic future for Walker's Point and Milwaukee.

¹ Gurda, John (1999). *The Making of Milwaukee*. Milwaukee, Wis.: Milwaukee County Historical Society. Additional information obtained from personal interviews with community members.

The actual downtown was developed almost two miles north Walker's Point, and the entire Menominee Valley soon opened up for industrial development. Steel mills, foundries, and tanneries were built, and companies became highly dependent on immigrant labor. Until quota laws were enacted in the 1920s, immigrant labor poured in from Eastern Europe. The economy continued to grow, and companies that needed labor began to recruit African Americans and Latinos.

Los Primeros, the first group of Latinos to come to Milwaukee, was a group of 100 Mexican men hired by a tannery to live and work on the company's grounds. As job growth continued more Mexicans came to the area with their families. The Walker's Point neighborhood, near the factories and the near south side, became the center of Latino culture. The economy also developed as Hispanic social clubs and businesses opened. A Spanish language newspaper, though short-lived, helped hail the beginning of Latino settlement in Milwaukee.

Following World War II the Latino population in Milwaukee continued to grow, but investment and development outside of Walker's Point and Milwaukee's "inner core" left Latinos with decrepit housing and little economic opportunity. This expansion continued into the 1960s and prompted political movements that sought recognition and development of Milwaukee's inner city. This movement included all races and cultures, and provided a platform for Latinos seeking more liberal hiring practices and an increase in bilingual and bicultural public education. After 40 years these issues are still at the forefront in the community.

Walker's Point Today²

The Latino population of Milwaukee County continues to be centered in the Walker's Point area. According to the 2000 census, more than 71,000 Latinos live in the City of Milwaukee. They constitute approximately 12 percent of the city's population. More than 82,000 Latinos live throughout all of Milwaukee County, and although this constitutes less than 9 percent of the county's population (up from 2 percent in 1965), it represents nearly 43 percent of the state's Latino population. In the last ten years the Latino population has increased from over 44,000 to 82,406. Studies suggest this growth will continue in Milwaukee County, following the national trend.

The growing number of Spanish speakers has become an issue for the city. According to the 2000 census, the number of Spanish-speaking Milwaukee residents over the age of five has grown from over 28,000 in 1990 to over 55,000. More than half of these residents report speaking English "less than very well." Researchers estimate that in the next ten years more than 100,000 residents will be native Spanish speakers

Milwaukee's Latino population consists of many nationalities. Of the entire Latino population in Milwaukee County over half is from Mexico while 28 percent of the population is Puerto Rican. The Puerto Rican population today accounts for over 2

² Milwaukee population and census numbers were gathered from the U.S. Census Bureau Web site (2000 Census results). See <http://www.census.gov> (last downloaded April 9, 2003).

percent of the county's entire population, a larger proportion than the county's entire Latino population comprised 40 years ago.

Milwaukee's Latino population is a significant market group. A 2001 market analysis by the University of Wisconsin-Milwaukee Employment and Training Institute revealed the purchasing power of Milwaukee's neighborhoods. In the zip codes 53204 and 53215 (an area composed primarily of the Walker's Point neighborhood), resident retail spending per square mile is \$73,527,377 a year. Although the median income of most Walker Point residents is below average for the City of Milwaukee, the population and density of residents in the area make the community a formidable consumer group. The purchasing power of this area is much higher than many of Milwaukee's nearby suburbs (the targets of most media and advertising spending). Despite their significant purchasing power, however, residents of this area do not receive the same selection of retail, health and media services as neighboring suburban residents.

Like many other urban populations, the Walker's Point community faces significant challenges in depreciated housing, income inequality, and overcrowding. When coupled with a rapidly growing immigrant population, issues of health, communication, and culture create additional obstacles for the community. Numerous social service and health organizations have developed in and around Walker's Point to help meet the community needs. As the Latino population continues to grow, these health and social organizations will remain key in battling the issues of the community.

Issues

Our research allowed us to identify many of the community's major health concerns. These concerns are not unique but are common in any large city. What makes Milwaukee different is the number of agencies and groups battling to diminish the occurrence and negative effects of these concerns. The issues we have chosen to highlight are a sampling of the health-related concerns identified as significant.

Diabetes

Diabetes is a common disease. It is the fifth-deadliest disease in America and has no cure. Experts say more than 8.5 million Americans are living with this multi-systemic disease. Research shows Latinos are twice as likely to have type-2 diabetes as non-Latino whites. Health providers estimate the prevalence of type-2 diabetes in Walker's Point is as high as one in four. Everyone knows someone who is living with the disease.

Although research indicates a genetic predisposition to diabetes, environmental factors appear to be significant. The immigrant acculturation process among Latinos in Walker's Point often includes poor dietary choices and a sedentary lifestyle, both of which may accelerate or contribute to the onset of diabetes. Ongoing research is attempting to show that Latinos have genetically predisposed higher risks of acquiring the disease and that they are suffering more severe complications when they have it.

Patient education and preventive care is critical to prevention and management of this debilitating disease. Many who suffer from type-2 diabetes go undiagnosed and untreated. Approximately 16 million people nationwide have "pre-diabetes." A joint statement from the American Diabetes Association and the National Institute of Diabetes

states that people with this condition almost always develop type-2 Diabetes. Their studies also show, however, that 58 percent of people with pre-diabetes can prevent or delay the onset of advanced type-2 diabetes with changes in diet and exercise.³ Testing and regular medical care is essential to detection and prevention of this disease.

Steve Ohly, who diagnoses about 200 cases of diabetes a year, argues that the prevalence of type-2 diabetes in Walker's Point suggests the presence of large societal inequities. Medical evidence shows this disease to be easy to prevent, detect, and manage, yet it is a disease that is decimating the population. Ready access to prevention and management information could substantially reduce the amount of suffering and financial burden that accompanies this chronic disease. Those who cannot afford regular, preventive health care, information, and treatment suffer more severe complications and die sooner. This disease, like asthma and heart disease, is one of many chronic illnesses that plagues residents of Walker's Point.

Insufficient Health Insurance

Several of our sources declared lack of health insurance to be a concern for the community. Nationally, the Latino population represents 30 percent of the more than 41 million Americans who are uninsured. Those without coverage are more likely to go without vital health services and, when they do seek care, they often face more severe health symptoms and significant financial burdens. Low-wage earners, the poor, near-poor, and the unemployed are likely to be uninsured.

Even those who are employed may face insurance problems, because studies indicate that 70 percent of the uninsured live in a household with a full-time worker.⁴ Although Medicaid and SCHIP programs assist many children, coverage for undocumented immigrants and adults without dependent children is limited.

Some residents of Walker's Point are eligible for coverage under Milwaukee County's General Assistance Medical Program (GAMP), one of Wisconsin's community safety net programs. GAMP provides limited health care for homeless and uninsured residents of Milwaukee County who are ineligible for other assistance programs. GAMP clients apply for health coverage at the same time they seek health care at one of Milwaukee's 23 GAMP service providers. Because of overcrowding at emergency rooms, GAMP implemented a community-based primary care model that transferred services and program management to outpatient locations. Prior to this initiative, 48 percent of GAMP clients applied at emergency rooms and hospitals. GAMP clients are now required to select one of the service providers as their "medical provider [which] will be responsible for providing and coordinating health care services on behalf of that

³ American Diabetes Association, <http://www.diabetes.org/main/util/basicdiabetes> (last downloaded April 8, 2003). Additional information from: <http://www.cdc.gov/diabetes/statistics/surv199/chap1> (last downloaded April 4, 2003).

⁴ Kaiser Commission on Medicaid and the Uninsured "Health Insurance Coverage in America: 2001 Data Update" January 2003, p 14. Henry J Kaiser Family Foundation: Menlo Park Calif., Washington D.C.

client.”⁵ It is this aspect of the program that is problematic. Many agree that the effectiveness of programs like GAMP is compromised in an area that is chronically underserved. Dr. Lee Dresang of the Aurora Family Health Clinic explained that the health care facilities in the community are at capacity and face financial constraints. Many health care providers cannot afford to accept more GAMP clients.

GAMP clients present needs typical of those of an underserved and financially depressed population. Most need more intensive medical services and suffer health complications exacerbated by long-term lack of preventive care. National studies indicate that people without health insurance do not receive routine health care, receive too little health care too late, suffer more severe health problems, and die sooner.

Health insurance presents a separate battery of challenges for immigrants. Although many who arrive have connections to family or friends, others have to navigate a foreign health care system on their own. Many do not know what services they can receive or what type of information they must provide in exchange for service. This complicates the process for those who need health services but may not have proper documentation, and leads to over-reliance on emergency care facilities.

Domestic Violence

The people of Walker’s Point face special challenges when they consider how violence affects new immigrants and non-English speakers. A community assessment sponsored by the founders of the Latina Resource Center revealed language to be a significant deterrent to those who were seeking help in situations of violence. Community leaders determined three ways in which domestic violence is an especially problematic issue: a lack of education regarding rights and services, negligible services in Spanish, and an altogether lack of existing service within Walker’s Point. Efforts are under way to address these challenges, and community response has been overwhelming. The level of response suggests a significant amount of violence has gone unchecked. Community involvement also indicates that residents are unifying to resolve long-standing issues.

Some women in Walker’s Point are isolated by their language and culture. Many do not have contacts outside the home and are not aware of their legal rights as residents in the United States. Many will remain silent because they have uncertain immigration status. For some, abuse may extend across borders. Many who are not here legally feel they cannot report what has happened. As Mariana Rodriguez of the Latina Resource Center explains, the decision to leave a violent situation is always hard, but this choice may be more difficult when a woman cannot communicate or legally seek work in order to support herself. Some are afraid they will be deported or lose their children.

Various providers have commented that the circumstances that lead to abuse may be different for those who act violently. Aspects of a traditionally male-dominated culture

⁵ Wisconsin State Planning Grant – Briefing Paper 5, Sept. 2001 “Milwaukee County General Assistance Medical Program” p 2. Wisconsin Department of Health and Family Services, retrieved from the World Wide Web 30 March, 2003 at www.wisconsin.gov/agencies.

and prevalence of *machismo* may fuel frustrations felt by men facing social barriers and limited employment opportunities.

The domestic violence services that exist now are overextended and in need of more comprehensive capabilities. New organizations like the Latina Resource Center are building solid programs but are also experiencing growing pains. They need continued community support.

Language Barriers

One of the primary concerns voiced during interviews is the need for clear and accessible health information and services, including greater access to bilingual and bi-cultural services. Many organizations, like the 16th Street Clinic, the Walker's Point Community Health Clinic, Aurora Family Health Clinic, La Causa, and UMOS, are capable of providing high levels of service to Spanish speakers, but the need is still great for additional bilingual providers who are considerate of the cultural norms of Hispanic clients. Insensitivity or ignorance of language or culture may deter residents from seeking service or asking questions.

Although Spanish-speaking residents of Walker's Point are immersed in a bilingual neighborhood, they are not always dealing with bilingual health or social service providers. Some needs require the services of multiple government agencies where translation time and costs can strain already limited resources and may cause delays in services or resentment among staff and clients. There is a tremendous risk that vital information may be lost or not communicated. Residents who are challenged by language barriers are much less likely to receive complete and accurate information regarding health concerns or services.

As Carolina Soza, a case manager at the Milwaukee Christian Center, mentioned, the culture of the client population can also affect access of health service. The presence of *machismo* among some Latinos may prevent some families from seeking health care until a problem has escalated to an advanced stage. Similarly, health information and advice may not be sought or complied with to the extent necessary to change or form life habits. Nonrecognition of traditional treatments may cause some people to distance themselves from health services that observe only contemporary health care practices.

Related conflict can arise between "Americanized" family members and immigrant parent generations, causing additional stress to some families. Some newly arrived residents easily adjust to a new language and culture, while others remain isolated by tradition and language, which may augment the difficulties they face accessing various health services.

Immigration Status

Many of the residents in this neighborhood are recent immigrants. Although most enter the country legally, some do not have the proper documentation necessary to obtain legal residence, work, or social services. These residents may intentionally distance themselves from health service providers out of fear of deportation or other punitive action by the U.S. government. Although this fear is evident among newly arrived or

undocumented immigrants, it echoes a reluctance many legal immigrants have when interacting with health providers or government agencies.

This issue is particularly troublesome because so many health services require clients to provide personal information. Although most providers use this information for their own records, it is difficult to ease fears that immigration authorities may become involved. The fear of deportation runs deep, and some individuals would rather risk personal health and forgo vital social services than take a chance they will be found in violation of immigration laws.

Each of the health concerns presented poses a considerable challenge to the Walker's Point community. Mitigating them will require considerable effort. In addition to these concerns, our research uncovered other serious health issues such as drug and alcohol abuse, gangs and youth violence, malnutrition, failure to receive proper prenatal care, and the need for lead paint abatement. All of these health problems merit community attention. We feel that many of these issues stem from inaccurate and incomplete distribution of community health information. Many community residents do not have access to useful or consistent health information. By revamping its health information system, the people of Walker's Point can better inform themselves of available health services and establish strategies necessary to address current health issues.

Communication

This community needs more accurate and useful health information to be provided in Spanish. Research in the Walker's Point community revealed considerable evidence to support this assertion. Community sentiment was gauged through a survey of community members and a focus group of Spanish-speaking residents. Many of the community leaders and service providers interviewed cited a strong need for more developed bilingual media services. This view is advanced by Walker's Point Alderman Angel Sanchez, who feels a reliable local Spanish-language broadcasting system would aid in the distribution of information and help unite Milwaukee's Spanish-speaking residents.

Services that are readily available to Milwaukee's English-speaking population, such as print health news, television coverage, talk radio, or culturally competent health providers are not as available to Milwaukee's growing Spanish-speaking population. A variety of community newspapers offer information in English, and the *Milwaukee Journal Sentinel* (Milwaukee's major English newspaper) offers a regular section devoted to health issues. Local television and radio stations offer accurate and useful health information to their English-speaking audiences, but few, if any, of these services are available to Milwaukee's Spanish speakers. The bilingual health information networks that develop in many other large U.S. cities have not developed in Milwaukee. Milwaukee's Spanish-speaking population deserves access to a communications network capable of transmitting this vital information.

Recent population growth and purchasing power have made Milwaukee's Latino population a major player in Milwaukee's economy and community structure. This group deserves an increase in media and health services. Milwaukee's media providers should

recognize the growing strength of this population and begin matching the supply of services with the growing community demand. More effort should be devoted toward developing Milwaukee's bilingual television, radio, and print media.

Several organizations have developed bilingual and Spanish media directed toward the Latino population. These resources should serve as the building blocks for more extensive community information systems. Several small bilingual newspapers currently serve Milwaukee's Latino population. They include the following:

- *The Milwaukee Spanish Journal*

This free weekly bilingual paper has a circulation of 20,000 papers. The paper offers articles covering local, state, and national news and is available at many local grocery stores, restaurants, and community centers. The *Spanish Journal* has sponsored health events but has not developed a regular relationship with any of Milwaukee's community of city health providers.

- *The Spanish Times*

This free weekly bilingual paper also has a circulation of 20,000 papers and is available at many local grocery stores, restaurants, and community centers. The paper has not developed any permanent relationships with Milwaukee's health service providers, and some of the community residents surveyed do not regard it as a source for health information.

- *El Conquistador*

This free bimonthly bilingual paper has a circulation of 10,000. It is available at many local grocery stores, restaurants and community centers. *El Conquistador* focuses on local news regarding the Hispanic community but has no regular health section. It sometimes prints messages in Spanish from Aurora Health Care.

In addition to these newspapers, several other print resources are available to this community. For instance, some community organizations, like the South Side Organizing Committee, produce community bilingual newsletters to inform residents of community events. These newsletters are not widely available and contain limited information in Spanish. Large newspapers such as the *Shepard Express* and the *Milwaukee Journal Sentinel* have recently begun to address issues pertinent to the Latino community. The *Shepard Express* has hired a reporter to cover Latino issues, and the *Milwaukee Journal Sentinel* has begun printing a regular column addressing Latino women's health issues. Although an encouraging beginning, these articles are not reproduced in Spanish, so the newspaper's treatment of these issues does not reach non-English readers.

Milwaukee's Spanish-language radio options are quite limited. Much of Milwaukee's Latino radio programming is from Chicago. In addition, Racine has one Spanish-language station, WBJX, which can be received in Milwaukee. Although these stations are valuable to Milwaukee's Latino population, they are not local. The news coverage does not target local issues, and reception is sometimes poor. Furthermore, they do not have any working partnerships with local community health service providers.

The only local radio station with regular Spanish-language programming is WMSE FM 91.7. This station has one Spanish-language show, "Orgullo Latino," which airs from noon until 3:00 pm on Sundays. The station provides community

announcements and is receptive to more Spanish-language programming. Currently the station does public service announcements two times an hour for about \$25 each. All Spanish-language broadcasts are limited to the three-hour time slot.

Milwaukee's Spanish-language television broadcasting is also quite limited. With the exception of Spanish-language broadcasting through cable or satellite, Milwaukee has one regular Spanish-language program. This program, "Adelante!" is broadcast on public television channel 10 WMVS for a half hour every Tuesday beginning at 6:30 p.m. The show focuses on local issues regarding the Latino community. In the past, the show has partnered with the 16th Street Community Health Center to cover health issues such as diabetes and breast cancer. The producer, Patricia Gomez, is receptive to future community health partnerships, but the program's short timeslot limits the amount of information that can be covered.

Barriers

Strengthening the relationship between health services and the media to build a more effective information network is a challenging task. The relationship must be built on a foundation that includes a long-term commitment to maintain cooperative efforts. The following barriers must be overcome:

Lack of Accurate Information

Our focus group uncovered a number of incidences involving inaccurate or easily misinterpreted information distributed through current media sources. Although Milwaukee's Hispanic media sources provide a great benefit to the community, they should work to develop permanent partnerships with the local community health providers. Without such partnerships, inaccurate health information may be unintentionally spread. Listeners who realize they have received inaccurate information from a media source are far less likely to rely on that source in the future.

Cultural and Community Barriers

Our research in this community highlighted a few characteristics of community interaction that may inhibit the distribution of accurate health information. Like many immigrant groups, the recently immigrated Hispanic population in Milwaukee has developed its own system of informal information networks. Neighbors rely on neighbors as health and available service information is spread through conversation. Although this type of communication is good for community union, the information shared can sometimes be inaccurate or incomplete.

Low Levels of Literacy

Some of our community contacts estimated the Spanish literacy rate in this community to be about 60 percent. If true, this limits the amount of information that can be spread through print media. Although newspapers still provide a valuable medium for reaching this community, emphasis should be placed on alternative methods of information transmission like area radio and television.

Lack of Money and Technology

Many of the residents we spoke to highlighted low earnings and poverty as barriers to communication. In a population with high joblessness, communication mediums that rely on access to technology such as the Internet, cable, or satellite television programs are inappropriate means of targeting the whole community. The community should focus instead on developing free and easily accessible forms of communication media.

Conclusion

The Walker's Point community boasts an array of dedicated leaders, residents, and service providers who help the neighborhood address numerous health concerns. Among the issues the community faces are diabetes, insufficient health insurance, domestic violence, language barriers, and other health concerns, exacerbated by immigration status. An essential step toward progress in these areas must be an expansion and reinforcement of the community's current bilingual communication network. Through increased access to accurate and useful health information, neighborhood residents will be more prepared to determine their own health needs and improve their own well being. Although significant challenges exist, the community has a group of dedicated leaders, residents, and service providers who are determined to hurdle these barriers. This community must now ask itself, "How can the health communication network within Walker's Point be strengthened?"

Community Recommendations

Our summary of findings was reported to community leaders on April 29, 2003. Several community leaders, health and social service providers gathered at the Walker's Point Community Clinic to discuss development of the bilingual health communications network in Walker's Point. (*Contact information is available in the attached appendix*). The group generated numerous ideas and debated several recommendations designed to strengthen the Walker's Point community health information network. The proposals can be categorized into three groups: short-term, medium-term and long-term recommendations.

The ideas identified as short-term can be implemented immediately using the resources already available in the area. These simple steps will help build a foundation for realizing the larger goals of the community. The short-term recommendations include: (1) the development of a formal collaborative network between area health service providers--this may be realized through monthly meetings and regular cross-agency personal contact, (2) increased cooperation between health providers and area bilingual media to provide health related articles, health topic fact sheets and public service announcements for distribution to the greater community, and (3) increasing outreach efforts to accurately inform local residents about health issues and service providers. It would build a trust between community members and providers of the health services.

The medium-term recommendations target more complex community goals. They include: (1) raising the awareness of those who live outside of Walker's Point regarding

the nature and extent of the community's health crises and challenging them to become involved. This can be accomplished by engaging mass media and producing a series of well circulated news stories describing the needs of the community. (2) Development and enhancement of the non-traditional word of mouth networks. (3) Organization of community health advocates who will act as frontline representatives of health providers and community members, building and reinforcing trust. (4) Promotion of consistent, accurate, bilingual health resources and information. This can be accomplished using a bilingual health newspaper distributed through the Milwaukee Public School system or available in area food pantry's, social service offices, and businesses. (4) Coordination of health issue awareness months. These would focus community attention regularly on such issues as diabetes prevention and detection, lead poisoning abatement, and pre-natal care.

The group's long-term recommendations embody the ultimate goals of the community: to empower community members to affect their own wellbeing and provide a comfortable standard of living for their families. Implementing and sustaining these long-term strategies will require significant persistence and cooperative effort. The many dedicated individuals working and living in the community continue to demonstrate the necessary strength, talent and dedication to achieve lasting change. The ideas presented here received the most support from those attending the meeting and represent strategic objectives of any interested in advancing the community. The long-term proposals include: (1) Expanding the network of health providers, (2) Developing and unifying grass roots advocacy to lobby for the community in local, state and federal policy making bodies. (3) Promoting the economic development of the neighborhood and creating sufficient sources of employment. (4) Add to the infrastructure of the community to provide sufficient health access, and health centers. (5) Build a local bilingual radio station and additional bilingual television programming (6) Unite the community with others to create political power.

We believe the substantial conversation and contact initiated at the community meeting must serve as the first in a progression of steps towards more complete collaboration. One potential avenue for cooperation is a partnership between the Community Union members and area health service providers. Both groups share similar community development goals and collaboration would allow both to utilize the strengths and abilities of the other. Similar efforts were proposed between members of the Aurora Family Health Clinic and the Milwaukee Christian Center.

Accepting the challenge presented by the discussion of this project will not be easy – in fact the easiest work has been done already. The most difficult work has yet to be undertaken, for the community must assume responsibility of these issues, agree to continue their discussion and choose a course of action. A strong need exists in the community for a more developed source of bilingual health information. Addressing this issue will allow the community to unify and work for resolution of other outstanding concerns. The community members who attended this meeting demonstrate their willingness to improve the community on a daily basis. With cooperation and patience the ideas they presented to one another can be achieved.

We appreciate the opportunity we have had to learn from the people of Walker's Point. We would also like to thank those of you who so generously offered your valuable

time and knowledge assisting our research. While we believe that real and sustainable change must be created and supported by the community, please feel free to contact the students involved in this project for any assistance in organizing or communicating this research, or the ideas generated by its discussion.

Appendix I: Meeting Attendees

Name: Steve Ohly (Walker's Point Community Clinic) Phone: (414) 384-1400 email:	Name: Paul Lloyd (Esperanza Unida/Community Union) Phone: (414) 671 0251 email:
Name: Joy Lloyd (Community Union) Phone: (414) 671 0251 email:	Name: Ellyn McKenzie (16 th Street Health Clinic) Phone: (414) 672-1353 email:
Name: Dr. Lee Dresang (Mitchell Point Community Clinic) Phone: (414) 671-8800 email:	Name: Joel Dresang (Milwaukee Journal Sentinel) Phone: email:
Name: Angel Sanchez (City Alderman) Phone: (414) 286 3762 email: success@milwaukee.gov	Name: Tina Rivera (UMOS) Phone: (414) 389-6500 email: tenelia.rivera@umos.org
Name: Godofredo Meraz (Community Union) Phone: (414) 671 0251 email:	Name: Carolina Soza (Milwaukee Christian Center) Phone: (414) 645-5350 email: csoza@mccwi.org
Name: Rich Oulihan (Esperanza Unida) Phone: (414) 649 2570 email: roulahan@esperanczunida.org	Name: Mindy Williams (Community Union) Phone: (414) 671 0251 email:
Name: William Reyes (UMOS Special Projects) Phone: (414) 389 6500 email:	

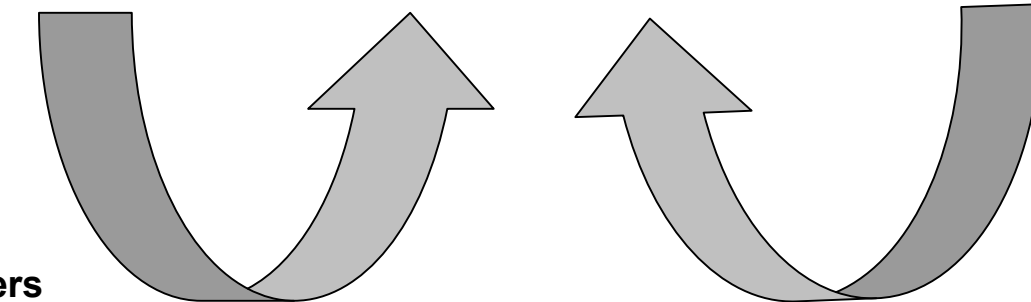
COMMUNITY GOALS

**Community Economic Development
Strengthened Political Lobby**

**Coordinated Health
Awareness Months**

**Promote Awareness
Outside of Community**

**Community Advocates
Formal Health Networks
Media & Health
Partnership**



Health Service Providers

Community Advocates

Current Media Outlets

Social Service Providers

Appendix II

LONG-TERM

MEDIUM-TERM

SHORT-TERM