Robert Wood Johnson Foundation

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New Routes to Community Health

An RWJF national program

SUMMARY

From 2006 to 2011, *New Routes to Community Health* brought together immigrant-led groups, local media organizations, and community institutions in eight cities to use storytelling and media making to address the health concerns of immigrants and refugees.

The Robert Wood Johnson Foundation (RWJF) funded the national program to build the capacity of immigrants to speak for themselves regarding their health challenges and those of their communities by creating local media, multimedia, and social media. The RWJF Board of Trustees authorized *New Routes* in November 2006 with funding for up to $4 million to the Benton Foundation. MasComm Associates in Madison, Wis., managed the program.

CONTEXT

Just over 1 million newly documented and undocumented immigrants and refugees arrive in the United States each year. Recent immigrants accounted for two-thirds of U.S. population growth from 1990 to 2000, and made up 12.5 percent of the U.S. population in 2009, according to the U.S. Census Bureau. More than half of immigrant families live at or below the poverty level.

The newcomers leave precarious economic or political conditions at home and sustain steep financial and personal costs to relocate to the United States. Once here, already vulnerable immigrants often face fear, anger, and prejudice in their new communities, as well as serious obstacles in gaining access to health care services.

For example, many immigrants lack health insurance. Some immigrants have limited English proficiency, and their cultural customs and views of illness and medicine may differ from those of most Americans. Limited information about the U.S. health care

system, and fears related to legal status, also prevent immigrants from seeking care for themselves and their U.S.-born children.

RWJF's Interest in This Area

Recognizing that media coverage of health issues was weakest at the local level, RWJF program staff thought that educational outreach by local radio stations and community partners could play an effective role in informing and involving citizens in health care.

From 1996 to 2006, *Sound Partners for Community Health*, an RWJF national program, awarded 148 grants totalling $5.4 million to collaborations between public radio stations (and later public television stations) and community organizations across the country.

The partners produced original broadcast programming—short reports, in-depth features, call-in programs, issues-oriented drama, and coverage of live forums or other events—and related outreach to the community. The programs often used storytelling to focus on the health and social needs of vulnerable populations. Many of these projects looked at how the inability to speak English, prejudice, cultural differences, difficulty in securing safe housing, and educational barriers compounded health and health care challenges.

In 2004 and 2005, RWJF conducted focus groups with new immigrants and refugees, who said that their knowledge of available health resources was minimal. They craved information that could help them adjust to their new communities, but often found U.S. media linguistically and culturally impenetrable. They noted that such information would be more valuable if communicated through trusted channels, including personal and community connections and media in their own language.

"Sound Partners was coming to an end, and members of the Vulnerable Populations team thought that the findings from the focus groups showed we had an opportunity to meet the unmet needs of immigrants and refugees through broadcast programming in their own languages," said Wendy L. Yallowitz, MSW, RWJF program officer. "We knew that local immigrant-led organizations were not prepared to work in media and needed technical assistance, and we thought, 'What a great opportunity.' *New Routes* was part of our bigger strategy in working in the immigrant and refugee community."

To pursue that strategy, RWJF also funded other programs and projects that addressed the health needs of immigrants and refugees. Among them:

- *Caring Across Communities*: *Addressing Mental Health Needs of Diverse Children and Youth*, an RWJF national program that built school-connected mental health services for underserved children and youth, especially immigrants and refugees. See RWJF Anthology Chapter and the Program Results Report.
- *Fresh Ideas: Improving the Health of Immigrant and Refugee Communities*, a solicitation for proposals to give immigrants and refugees tools and support to

improve and maintain their own health. Projects addressed ways to improve the health of new residents by linking how social factors—language skills, significant cultural differences, poor education, and poverty—affect health outcomes. See the Program Results Report that has links to three of the funded projects.

- A pilot project by the U.S. Committee on Refugees and Immigrants, which worked to meet the physical and mental health needs of unaccompanied immigrant and refugee children. See the Program Results Report.

THE PROGRAM

From 2006 to 2010, *New Routes to Community Health* brought together immigrant-led groups, local media organizations, and community institutions in eight cities to use storytelling and media making to address the health concerns of immigrants and refugees.

The Robert Wood Johnson Foundation (RWJF) funded the national program to build the capacity of immigrants to speak for themselves regarding health challenges in their communities by creating media programming for radio, television, the Web, and social media.

In contrast to *Sound Partners*, which awarded grants of up to $35,000 to 148 sites, typically for no more than a year, *New Routes* provided eight sites with up to $225,000 over three years, and provided extensive technical assistance.

"One of the things we learned in dealing with a range of projects with *Sound Partners* was that a year isn't enough," said Karen Menichelli, Benton Foundation liaison to both *Sound Partners* and *New Routes*. "We learned that if you are going to establish a partnership in a community, it takes a long time to build trust, create an operating protocol, and get people on the same page."

Another key lesson from *Sound Partners* was that media projects that most engaged the community were produced by local partners rather than traditional, large media outlets, according to Beth Mastin, national program director of both *Sound Partners* and *New Routes*.

"*Sound Partners* had several projects where immigrants were making media in their own language around health issues," Mastin said. "Those were exciting projects that engaged the community. It was immigrants or Native Americans who were creating stories, reporting on matters of importance to the community."

New Routes planners envisioned going beyond traditional public broadcasting to tap other forms of community media that spoke to the needs of immigrants and refugees, such as cable television and commercial radio. Toward that end, each *New Routes* site had three key partners:

- An organization that worked directly with and was led by immigrants
- A local media production center (i.e., a television or radio station) or other media organization (i.e., an advertising agency)
- A managing partner—often a university— that oversaw the fiscal and administrative aspects of the program

Sites could bring in more partners if needed.

Program Design

Program Management

The Benton Foundation, based in Washington, which works to ensure that media and communications promote the public interest, provided a fiscal home and oversight for *New Routes* under executive vice president Karen Menichelli. Beth Mastin, president of MasComm Associates, a communications firm based in Madison, Wis., directed the program.

Brenda Gonzalez, an immigrant who had managed interpretive services for a major health provider, served as deputy director of the program. Consultants Catherine Stifter and Gale Petersen developed and managed a *New Routes* website and provided media technical assistance to grantees.

A national advisory committee helped select grantees, and some members provided advice to the program and accompanied staff on site visits. See the Appendix for a list of committee members.

The Projects

Each of the following projects received a six-month planning grant of up to $20,000, and up to $205,000 over 33 months to pursue their work:

- *HEAR ME: Health Education via Airwaves for Refugees* (Atlanta) focused on improving health among East African refugees through radio, video, and online media. Partners: Emory University, Sagal Radio, and WFRG 89.3 FM Atlanta.
- *Twa Zanmi* (Three Friends) (Boston) used media to address mental health challenges among the Haitian community. Partners: Institute for Community Inclusion of University of Massachusetts/Boston, Haitian Media Network, and Haitian American Public Health Initiative.
- *Salud: Healing Through the Arts* (Chicago) enabled Latino immigrant youth to create theater pieces and radio shows to improve community health. Partners: National Museum of Mexican Art, Latinos Progressando, Radioarte, and WRTE-FM Chicago.

- *10 Steps to Better Health* (Los Angeles) focused on helping Chinese seniors and their adult-children caretakers navigate the health care system. Partners: Chinatown Service Center, Asian-American Network for Cancer Awareness, Research and Training at UCLA, LA 18 KSCI TV, and L.A. Care.
- *Egal Shidad* (Minneapolis/St Paul) used folk tales and Somali approaches to create stories about Somali health for radio, television, and classroom use. Partners: Saint Paul Neighborhood Network, KFAI Community Radio, ECHO Minnesota, and the Confederation of Somali Community.
- *Abriendo Las Cajas* (Opening Boxes) (Oakland) focused on reducing domestic violence in the Latino community. Partners: Zero Divide, La Clinica de la Raza, and Bay Area Video Coalition.
- *Our Stories, Our Health* (Philadelphia) created videos for use in workshop settings to improve the health and access to care of Laotian and Vietnamese seniors. Partners: University of Pennsylvania Department of Family Medicine & Community Health, Southeast Asian Mutual Assistance Associations Coalition, Temple University Center for Intergenerational Learning, WHYY Philadelphia, and the Thomas Jefferson University Department of Health Policy.
- *Domestic Worker Safety & Dignity Project* (San Francisco) promoted nontoxic, dignified work climates for Latina domestic workers and their employers. Partners: Labor Occupational Health Program at the University of California, Berkeley; La Raza Centro Legal; and Underground Advertising.

Project Guidelines

While each site developed a project specific to its community, the national program office issued these guidelines. All *New Routes* grantees would:

- Create local media, multimedia, and social media[1]
- Forge partnerships between immigrant, media, and community groups
- Build the skills of immigrant leaders to communicate with immigrants and the larger community about health challenges, and how addressing them will benefit everyone
- Reinforce founding American values, including the right to free speech, equity, and opportunity for all

Technical Assistance

Technical assistance from the national program office staff and consultants to the sites included:

[1]Also called "new media," it is defined as interactive forms of communication that use the Internet, including podcasts, RSS feeds, social networks, text messaging, blogs, wikis, and virtual worlds.

- Holding annual meetings that allowed grantees to share their work and learn from one another
- Conducting site visits to discuss the projects with all local partners
- Scheduling regular conference calls with grantees to discuss their projects
- Creating a website where partners posted regular updates on their projects and shared resources and tools to improve their work
- Encouraging collaborations between sites working on similar projects

KEY RESULTS

According to the report *From Charting New Routes to Building New* Bridges, other reports from and interviews with the national program staff, and the *New Routes website*, the program produced the following results:

- **Immigrant groups, media organizations, and local institutions jointly produced broadcast media, multimedia, and new media designed to improve the health of immigrant communities and call attention to their health care needs.** These productions included television and radio features, telenovelas, first-person narratives, live theater, print materials, and social marketing campaigns in Amharic, Chinese, Creole, French, Lao, Somali, Spanish, Swahili, and Vietnamese. For example:
  - HEARMe, ***in Atlanta, produced "Double-Double," a fictional video that incorporates East African language, settings, and humor to address the community's custom of adding a double portion of cream and sugar to coffee,*** which can lead to obesity and diabetes when coupled with U.S. sedentary lifestyles. The video resonated with East Africans locally, nationally, and internationally, and was downloaded 70,000 times as of August 2011.
  - ***Ten Steps to Better Healthcare in Los Angeles produced 10 video news segments designed to help Chinese-American seniors overcome barriers to communicating with their adult-children caretakers and health care providers.*** The segments featured seniors and health care providers speaking in Mandarin about their health experiences, and provided step-by-step instructions on how to navigate the U.S. health care system.

    LA 18, a commercial TV station, aired the news segments. Project participants also distributed some 25,000 DVDs with the segments through community partners in Los Angeles and San Francisco, and posted the segments on the project's website.
- **The collaborative storytelling and media-making process built immigrants' production, journalistic, message-framing, and leadership skills, as they**

solicited, managed, and promoted the interests of their communities. For example:

— ***Latinas developed leadership skills through the Domestic Worker Safety & Dignity Project in San Francisco.*** Participants developed a social marketing campaign to promote the professional image of domestic workers and the use of nontoxic cleaning products. The campaign posted billboards and public-transit posters portraying domestic workers looking confident, professional, and proud.

After the campaign launched, demand for the services of La Colectiva, a cleaning collective and project partner run by domestic workers, nearly doubled. Participants also gained skills in advocating for their rights locally, nationally, and internationally. For more information, see the sidebar Domestic Workers in San Francisco Find Their Power.

— ***Latinos working with Abriendo Las Cajas (Opening Boxes) in Oakland's Fruitvale neighborhood created nearly two dozen digital videos that told their stories about intimate-partner violence.*** Community groups used a DVD with the stories to help spread a violence-prevention message.[2]

More than 200 organizations across the United States, including health clinics, schools, and prisons, showed the DVD and used a viewers' guide to spur discussion of the role of media in normalizing violence. Project participants also produced a short documentary exploring violent messages in Spanish-language media.

In 2010, Abriendo Las Cajas received an invitation to present digital stories at the FCC Digital Inclusion Summit in Washington, which drew teachers, technologists, community leaders, and national policy-makers.

- **Immigrant leaders who emerged through *New Routes* used media making to bridge generational, cultural, legal-status, and language boundaries**. For example:

— ***In Our Stories, Ourselves, Laotian and Vietnamese elders learned interviewing techniques and camera skills as part of a video project that aimed to increase access to health care in Philadelphia's Southeast Asian community.*** Southeast Asian elders interviewed each other on camera about their experiences navigating the U.S. health care system.

These Laotian- and Vietnamese-language videos aired at local workshops on hypertension and patient-provider communication, while segments produced and aired in English by partner public TV station WHYY helped educate the broader community. Sharing stories with other Southeast Asians and the wider community helped legitimize the experiences of these elders, according to project staff.

[2]The video is available for $10 online.

— ***Salud: Healing through the Arts helped nurture Latino youth leaders in Chicago.*** Youth wrote, directed, and performed five new plays for audiences totaling more than 1,000; produced, broadcast, and webcasted novellas and public service announcements; and helped create summer-school and after-school curricula on diabetes and obesity and mental and sexual health.

  Several *Salud* youth emerged as national strategists and spokespeople in efforts to pass the federal Dream Act, which seeks to provide a path to citizenship for young adults who arrived in the United States as children.[3]

- **Immigrants and refugees used *New Routes* to focus on the often-taboo subject of mental illness.** As participants captured stories of isolation and post-traumatic stress as well as resilience and hope, addressing mental health concerns emerged as key to improving overall health in immigrant communities, according to Mastin. For example:

  — ***At the start of the*** Egal Shidad ***project in Minnesota, Somali participants at a well-attended community meeting said that mental health was one of their top health concerns.*** In response, project participants produced a one-hour television show on mental health that includes storytelling, accounts of traditional ceremonies, guidance from an imam, and insight from two mental health professionals experienced in working with Somalis.

  More than 6,000 viewers around the view have visited the *New Routes* website, Blip.tv, YouTube, and ads on popular Somali websites. Some 2,000 DVDs of the program have also been distributed in 22 states and 11 countries. For more information, see the sidebar Somali Group in Minnesota Tackles Tough Issues.

  — ***Twa Zanmi helped Haitians in Boston cope with stress and trauma stemming from the 2010 earthquake in Haiti, which affected family members and friends***. Haitian-Americans used media and community events to build awareness that depression, anxiety, and post-traumatic stress disorder are treatable illnesses, and directed Haitian-Americans to treatment resources.

  For example, project partners produced information aired on Creole radio programs about trauma, anxiety, and depression, and hosted open forums to discuss mental health challenges and provide counseling to individuals and groups. A continuing biweekly AM radio program focuses on the mental health needs of the Haitian community. And the project produced a film drama of a Haitian middle-class family struggling to adapt to life in America.

[3]No RWJF funds were used to advocate for passage of the Dream Act.

Communications Results

In a report to RWJF, Mastin cited three core communications results:

- **The *New Routes* website, which includes information on each site and snapshots of local leaders, as well as all media produced by the sites.** Staff at the national program office also posted a biweekly digest of news on community media making, the health of immigrants and other vulnerable populations, and policy developments, as well as resources and tools for use by immigrant communities. When the biweekly updates ended in January 2011, they had more than 1,300 subscribers.

  National program staff also created a YouTube channel and blip.tv channel on the program.

- **Videos on *New Routes* projects and the leadership role of key participants, produced by the national program office and posted on the *New Routes* website,** YouTube channel, and blip.tv channel.

- **Two reports:** *From Charting New Routes to Building New Bridges***, on lessons from the program, and** *Immigrant Media Making: New Voices for Community Health***, on media making as a tool for community change.**

  The National Program Office conducted a national telebriefing in June 2011 on key findings from the second report, with 190 participants from 33 states. National program staff also distributed some 250 print copies of that report in English and Spanish to national Latino organizations and other immigrant leaders.

For more information, see the Bibliography.

LESSONS LEARNED

1. **Use media making to bring voice and power to immigrant communities.** Giving immigrant organizations and leaders the opportunity and tools to communicate with their own community and win support from the broader community is vital. The ability of immigrants to advocate for themselves is strongly linked to mental well-being.

   The use of "first-voice" storytelling, in particular, puts immigrants at the center of media making and ensures an inclusive process. (National Program Director/Mastin)

2. **Win support from the larger community for the needs of immigrants by reinforcing core American values, including the right to free speech, equity, and opportunity for all.** "People come here for a better life, and that includes free speech, freedom of religion, and freedom of expression," said national program director Mastin. "Those are ideals that everyone can relate to.

"If people and groups working with immigrants keep in mind what is extraordinary about the United States, and highlight ideals that resonate with most Americans, they can break through polarization over immigration."

3. **Use media making to nurture emerging leaders in immigrant communiti**es, **especially youth.** In *New Routes*, immigrant youth played critical roles as cultural brokers who used media to navigate across generations, languages, and cultures. Immigrant leaders have "enough cultural understanding of U.S. customs and norms and their country of origin to be the natural bridge between often-insular immigrant communities and the often-blind larger community," according to Mastin.

4. **To improve immigrants' physical health, address their emotional and spiritual concerns.** *New Routes* participants found that mental health and physical health were inextricably linked, and that project components that addressed mental health and well-being were the most important. (National Program Director/Mastin)

5. **When tackling immigrants' health concerns, hire staff from the community**. "Having an immigrant staff member with skills in community building, cultural competence, and immigrant health was important," according to Mastin. "The leadership of Deputy Director Brenda Gonzales was key to walking the walk and talking the talk."

6. **Allowing for a six-month planning period helped hone project proposals into projects that are doable.** Applicants tend to write grant proposals that are too broad, according to Mastin. *New Route*s' six-month planning period allowed national program staff time to work with partners at each site to hone their goals and strategies and ensure that their project was doable. The planning period also allowed participants to hammer out the terms of their partnership.

7. **Universities can partner with local organizations to pursue participatory, community-based research—also known as "translational research**." For example, researchers from Emory University worked with East Africans on the HEARMe project in Atlanta, benefiting both the academic and immigrant communities. (National Program Director/Mastin)

AFTERWARD

Several projects have continued work begun under *New Routes*. For example;

- In 2011, the Domestic Worker Safety & Dignity Project in San Francisco collaborated with national advocates to produce a YouTube video in response to *The Help*, a movie that tells a story of domestic workers in Jackson, Miss., in 1972. The video shows how little has changed for domestic workers, and calls for passage of a California bill of rights for those workers.

- A 2011 opinion piece in the *Washington Post* drew attention to a film by Abriendo Las Cajas about the lack of federal oversight of the content of Spanish-language broadcasts.
- The Education Development Center developed a toolkit for use in work with immigrant families that featured two *New Routes* grantees. The toolkit was produced under the federally funded Safe Schools, Healthy Students initiative.

The Benton Foundation—and later the Robert Wood Johnson Foundation—will continue to host the *New Routes* website, to provide information for organizations seeking to address the health needs of immigrants and refugees.

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APPENDIX

National Advisory Committee

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Education or Toolkits

A webcast on key findings from Im*migrant Media Making: New Voices for Community Health*. Held June 2011, with 190 participants from 33 states.

Communications or Promotions

Grantee Website

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Promotions or Communications

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Salud: Healing through the Arts Project Impact Video. Madison, WI: National Program Office. Available online.

Domestic Worker Safety & Dignity Project Impact Video. Madison, WI: National Program Office. Available online.

10 Steps to Better Health Care Project Impact Video. Madison, WI: National Program Office. Available online.

Twa Z'anmi (Three Friends) Project Impact Video. Madison, WI: National Program Office. Available online.

Abriendo las Cajas (Opening Boxes) Project Impact Video. Madison, WI: National Program Office. Available online.

Egal Shidad Project Impact Video. Madison, WI: National Program Office. Available online.

Social Media

You Tube channel. *www.youtube.com/NewRoutesCommunity*. Madison, WI: National Program Office.

Blip.tv. channel. *http://blip.tv/new-routes-to-community-health*. Madison, WI: National Program Office.

SIDEBAR LIST

- Egal Shidad: Stories of Somali Health (Minneapolis, MN)
- Domestic Worker Safety & Dignity Project (San Francisco, CA)