NOVEMBER, 2021

Advancing Equity for the Latino Population in the Richmond Region
Progress, Challenges and Opportunities
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTRODUCTION</td>
<td>4</td>
</tr>
<tr>
<td>BACKGROUND</td>
<td>6</td>
</tr>
<tr>
<td>Latino Population in Richmond Region</td>
<td>6</td>
</tr>
<tr>
<td>Impact of COVID-19 on Latino Population in Richmond Region</td>
<td>8</td>
</tr>
<tr>
<td>METHODS</td>
<td>11</td>
</tr>
<tr>
<td>RESULTS</td>
<td>16</td>
</tr>
<tr>
<td>Perceived Strengths of Latinx Population and Organizations</td>
<td>16</td>
</tr>
<tr>
<td>Perceived Challenges of Latino Communities</td>
<td>21</td>
</tr>
<tr>
<td>The Richmond Latino Community Health Initiative (LCHI)</td>
<td>24</td>
</tr>
<tr>
<td>Looking Ahead: Opportunities and Challenges</td>
<td>34</td>
</tr>
<tr>
<td>RECOMMENDATIONS</td>
<td>40</td>
</tr>
<tr>
<td>CONCLUSION</td>
<td>46</td>
</tr>
</tbody>
</table>
I am grateful to the many people who gave of their time to participate in interviews. Thank you to the staff of the Richmond Memorial Health Foundation and to the members of their Working Group who provided me with feedback for the presentations. Thanks also to Ms. Akhila Kunuthuru for her work on the charts.

Cecilia E. Barbosa, PhD, MPH, MCP
cBe consulting
In June 2020, 31% of all COVID-19 cases in Richmond City and 20% in Chesterfield County were to Latinos, despite making up only 7% and 10% of the population, respectively. Alarmed by the data, state and local health officials immediately requested help from the Centers for Disease Control and Prevention (CDC) that responded by sending a taskforce of bilingual epidemiologists and community outreach specialists to Richmond.

INTRODUCTION

The taskforce found that the Richmond region shared similar challenges to other US cities combating the pandemic, such as distrust of government by undocumented persons and those with mixed family status, or the fear of losing employment if found positive for COVID-19. Unlike other cities, however, they saw an innovative cross-sector initiative being formed to tackle the humanitarian crisis.
Following the recommendations of the task force, the CDC Foundation granted $500,000 to the Richmond Memorial Health Foundation as fiscal sponsor for Richmond City and Chesterfield County. Representatives from the health departments, Richmond’s Office of Multicultural Affairs, the funding community, nonprofit partners, and public leaders convened and quickly raised additional funds and deployed resources to address the vital needs of the local Latino and Hispanic population. In total, a coalition of public and private funders raised over $2.6 million to support a humanitarian response managed by organizations that have established trust within these communities.

The impact of the COVID-19 pandemic on the Latino population and local humanitarian work brought attention to underlying structural and systemic inequities and limited opportunities of the Latino and undocumented populations, despite their central role in providing essential services to the Richmond population. Leaders of the Richmond Memorial Health Foundation and Community Foundation for a greater Richmond decided to commission a study to develop recommendations to become “a springboard and platform for strategic and sustained investments to dismantle the structural and systemic inequities that foster and perpetuate health inequities and limited opportunities for Hispanic, Latinx and undocumented communities and people.”
Due to the large surge of COVID-19 cases among Latinos in the City of Richmond and Chesterfield County early in the pandemic, these localities are the primary focus of the study. According to 2020 Census, 86,068 Latinos (9.4% of the population) reside in the Richmond region (or RVA as it is known locally). Nearly half (46.7%) of the Latino population live in Chesterfield while about one quarter live in each of Richmond and Henrico (27.6% and 25.7%, respectively). Chesterfield and Richmond City have the highest proportion of Latinos in the population (11.4% and 10.3%, respectively) while the proportion of Latinos in Henrico (6.7%) is lower (Figure 1). While most of the Latino population is concentrated in these three jurisdictions, pockets of Latino residents live in other areas of the Richmond Metropolitan region, such as Ashland, Hopewell and Colonial Heights.
In Virginia, it is estimated that undocumented individuals make up 4% of the workforce; nearly 73% of these individuals work in critical jobs. Annually these individuals are estimated to have contributed $1.1 billion in state and local taxes and have a spending power of $8.7 billion.\(^5\) Nationally, nearly 30% of agricultural workers or painters are undocumented, as are 25% of landscaping workers, maids/housekeepers, and construction laborers.\(^6\)

Impact of COVID-19 on Latino Population in Richmond Region

From October 13th to 28th, 2021, 11.2% of new cases’ of COVID-19 in the Richmond region were to the Latino population. The highest percentages of new cases were in Chesterfield (11.9% of total), followed by Richmond City (11.4%) and Henrico (10.1%) (Figure 2). This percentage represents a sizeable improvement compared to one year ago. As of October 28, 2021, 53.1% of all Latinos in the three jurisdictions have been fully vaccinated and 60.4% have received at least one dose. In Henrico, 58% of all Latinos have been fully vaccinated, and in Chesterfield and Richmond, slightly over one half have been fully vaccinated (Figure 3).
FIGURE 3. PERCENT OF THE TOTAL POPULATION FULLY VACCINATED BY RACE/ETHNICITY, BY JURISDICTION IN THE RICHMOND REGION, AS OF OCTOBER 28, 2021

The dual impact of closures and the pandemic was devastating to families who relied month-to-month on wages or income from small businesses to support the family. School closures challenged family resources as parents struggled to take care of children at home and keep them focused on schoolwork. Tragically, family support systems contributed to the viral spread as physical closeness implied higher infection rates. As families needed to share homes, facilitating viral transmission, it was not unusual for ten or more household members to become infected. Social ties were strained as people complied with isolation and quarantine regulations, exacerbating the stress of isolation. Health problems like hypertension and diabetes worsened and contributed to susceptibility of severe COVID-10 disease. Increased stress led to more domestic violence and mental health issues. As time passed, students, whose parents had limited access to technology or resources to find alternate means of learning, fell behind. The grief from the loss of loved ones and the traumatic impact of the pandemic is one that Latino families will continue to feel for years ahead.
Thirty interviews and one focus group were conducted with 51 individuals representing 26 organizations from February 22nd to May 20th, 2021. The intention was to hear from a variety of people, both from the Latino community as well as those serving the Latino community. Interviews ranged in size from one to four individuals from the same organization. Included were all the CDC grant recipient organizations as well as community leaders, healthcare safety net providers and representatives of other relevant organizations, such as Spanish-language media, faith leaders and business owners (Table 1). One focus group was held with eight Spanish-speaking Community Health Workers. Nineteen interviews were conducted in English, eleven in Spanish, and one in Portuguese.
<table>
<thead>
<tr>
<th>Organization Type</th>
<th>Organizations</th>
<th>Number of Interviewees</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC Grantees</td>
<td>Chesterfield Food Bank · La Casa de la Salud (including focus groups of 8 community health workers) · Latinos in Virginia Empowerment (LIVE) Center · Sacred Heart Center · Southside Community Development and Housing Corporation · Waymakers Foundation</td>
<td>20</td>
</tr>
<tr>
<td>Safety Net Providers</td>
<td>Access Now · Crossover Healthcare Ministry · Daily Planet · Health Brigade · CAHN · Bon Secours · VCU Health · Rx Partnership</td>
<td>15</td>
</tr>
<tr>
<td>Government</td>
<td>Chesterfield County · Richmond City · Chesterfield Health District · Richmond City and Henrico Health Districts</td>
<td>6</td>
</tr>
<tr>
<td>Food/Wellness/Exercise</td>
<td>YMCA · Feed More</td>
<td>3</td>
</tr>
<tr>
<td>Faith Community</td>
<td>Saint Augustine’s · Second Baptist (Spanish and Portugese)</td>
<td>3</td>
</tr>
<tr>
<td>Media</td>
<td>Radio Poder</td>
<td>1</td>
</tr>
<tr>
<td>Business</td>
<td>Virginia Hispanic Chamber of Commerce · La Milpa-Latino Restaurant and Market</td>
<td>2</td>
</tr>
<tr>
<td>Foundation</td>
<td>Community Foundation for a greater Richmond</td>
<td>1</td>
</tr>
</tbody>
</table>
The scope of the project did not allow for an in-depth focus on special populations such as the elderly; pregnant and postpartum people; children or adolescents; people with special needs; or non-Spanish-speaking Latinos, such as speakers of indigenous languages and Portuguese.

Interview questions covered Latino community strengths and challenges; community or organizational changes in the past year, and community solutions (Table 2). In addition, CDC grant recipients were asked about the impact of the pandemic and the Latinx Community Health Initiative on their organizations and the people they serve.

### TABLE 2. INTERVIEW AND FOCUS GROUP QUESTIONS

**ABOUT THE LATINO COMMUNITY**

**Community Strengths**
- What are the strengths of the community?
- What are strengths of local businesses and organizations that are led by or serve the Latino community?
- Who are the trusted organizations, leaders and networks?
- Where does trusted information come from?

**Community Problems**
- What are problems faced by the community?
- What are the structural and systemic barriers?
- What makes it difficult for you to resolve problems or get things done for community members?

**Community or Organizational Changes**
- What changes have you seen in the Latino communities, positive and negative in the past year?
- What changes have you seen, positive and negative, in the Latino communities’ relationship with foundations or government?
### IMPACT OF LATINX COMMUNITY HEALTH INITIATIVE (LCHI) - GRANTEES ONLY

Thinking specifically about the funding you have received from the LCHI:

- How much funding did you receive from this initiative and what was it used for?

Please describe the people you serve as best you can in terms such as national origin, primary language spoken, and occupation.

What impact have you seen on the people you serve as a result of your organization’s work in this initiative?

Thinking about the changes that have come about as a result of this initiative, what key lessons have emerged?

### IMPACT OF PANDEMIC RESPONSE – GRANTEES ONLY

Prior to the COVID-19 pandemic, what services did your organization provide to the Latino population in the Richmond area?

What services do you provide now to the Latino population?

How have the services you provide changed since the pandemic began?

- Have your practices changed and how?
- Have your policies changed and how?
- Has your organizational culture changed and how?
- Has your capacity to work with and serve the Latino communities changed and how?
- Has your organization’s relationship with the Latino community changed and how?
- Has your organization’s relationship with foundations or government funders changed and how?
TABLE 2. CONTINUED

COMMUNITY SOLUTIONS

What can be done to sustainably lift up voices, honor opinions and implement recommendations coming from the community?

Thinking about the key lessons learned in the past year, how can we adapt and strengthen the system of care in RVA for Latino people and communities?

What actions could government and NGO leaders take to advance health equity for the Latino and Hispanic communities?

What strategic and sustained investments can begin to dismantle the structural and systemic inequities and advance Hispanic and Latino communities?

What actions could be taken within our region over the next 12-24 months?

What are two actions to take immediately (low-hanging fruit)?
RESULTS

Perceived Strengths of Latino Population and Organizations

The Latino population is very diverse, by national origin, race, class, place of birth and upbringing, and native language. Trajectories and immigration journeys vary widely. However, interviewees referred mostly to immigrant-headed households with limited English language skills as those who most needed services. Their statuses vary – some are undocumented, others seek or have residency or citizenship, and yet others are refugees or political asylees.

Overwhelmingly, resilience of the Latino population was cited as the most salient strength. One interviewee quoted an expression in Spanish – “uno se la busca” – we find a way, that aptly expresses this quality. Many immigrant Latinos have suffered through dire circumstances in their home countries, along their journey, and upon arrival and bring with them a determination to survive and flourish in their new home.
I think one important thing to remember is that the communities do not trust organizations they trust the people from those organizations”

Latino immigrants bring with them distinguished cultures, multiple languages, and traditions that can enrich the local cultural landscape. Once here, they may feel shame and the pressure to assimilate and abandon or hide their cultural practices and beliefs. The children easily learn English and, if encouraged, maintain fluency in their parents’ language, becoming bi- or multilingual, a skill that is invaluable in a global society.

The trusted voices and organizations are many, developed over years of working with the communities. Several individual leaders have earned, through their community roles, trust among community members. Often the trust is with the person rather than the institution – when that person leaves, so does the trusted relationship.

Organizations with Latino leadership and/or staff can more strongly position themselves as trusted organizations. The cultural affinity, common language, and authentic service help to earn that trust. One nonprofit leader recounted the transformative impact of hiring one key staff member of Latina origin on organizational culture and service and recognized the need to hire more members of the community. However, the diversity of the Latino community – their histories, cultural heritages, class and racial relationships – all impact acceptance and trust. Organizations or businesses that show sincerity in serving the community earn trust; those who cheat others or are self-serving can quickly lose it.
Interviewees named many trusted organizations. A common feature of trusted organizations is that they have intentionally over several years developed the capacity to effectively serve the Latino communities, by hiring bi-cultural and bi-lingual staff, expanding outreach, and tailoring their services to be culturally appropriate.

Both Richmond and Chesterfield have long-standing multicultural liaison offices that have benefitted from strong and continuous leadership over the years. While both are multicultural offices, much emphasis is placed on outreach and service to the Hispanic/Latino communities. Henrico’s program is more recent and is directed at many cultural communities, reflecting the county’s more diverse population.

The faith community is influential in the lives of many Latino people. While the Catholic church plays a strong role in the community, many other churches conduct services in Spanish or Portuguese – Baptist, Evangelical, Christian, and Adventist, among others. The churches are “very in their bubbles but they do have...a very powerful influence,” meaning that they focus on the needs of their congregations but have not an established means of sharing information across religious disciplines. Due to the confidential nature of their relationships with the community, observations of religious leaders can bring to light the internal and many times taboo problems of families, including domestic violence, family stress and strife, mental health issues, and alcohol abuse.
Numerous private businesses have developed trusted relationships with the Hispanic/Latino community, such as Latino grocery stores (bodegas), restaurants, lawyers, tax specialists, and other small businesses. Many of the businesses, especially those providing food, become hubs for the Latino communities – a place to meet and connect with others from your own culture, converse in your own language, and find the food that you know and enjoy. These businesses and organizations become trusted places and sources of information.

The Hispanic community counts on two radio stations, one of which is religiously affiliated. These radio stations have become strong, known and trusted sources of information for the community. During the pandemic, one radio station in particular, Radio Poder, has partnered regularly and frequently with community organizations to interactively educate the community in Spanish on resources, key people and their organizations, and health topics.
Television such as Telemundo and Univision are important sources of information, but they do not provide local information. Sometimes the information they provide from other states can be alarming and confusing – people may not realize the level of autonomy of each state – and therefore the news may unnecessarily cause fear.

One of the fastest ways to communicate is through social media. The many WhatsApp groups quickly channel messages to their members and have been a powerful and effective way to send COVID-related facts and myths. Unfortunately, misinformation increases exponentially when uncritical WhatsApp users forward information indiscriminately. Other popular ways to share information are Instagram and Facebook. The many Facebook groups can be nationality-based (Mexicanos en Richmond, Brasileiros em Richmond), gender-based, or primarily focused on marketing or selling products, such as the popular Pulga (flea) page. Due to these clusters and with the help of social media, information travels quickly. Friendship and relationship clusters provide a powerful way to learn about new resources and expand knowledge.
Perceived Challenges of Latino Communities

Three challenges faced by the Latino community rose to the top: immigration status; language and culture; and understanding and navigation of systems.

So these issues are going to continue if we’re not able to fix those really deep problems that are at the core, in my opinion, of the issue.”

Immigration. As immigration policy is set at the federal level, Virginia and its localities cannot change the legal status of the people living there even as they contribute positively to the Commonwealth’s welfare by creating new businesses and working at essential jobs. The system is highly complex and fragmented with barriers for those who are undocumented or not US citizens.

People who are undocumented are in constant fear of deportation, that leads to trepidation around accessing services and signing documents. They may use false papers or a false name and take any number of similar actions to avoid recognition. In practice, being undocumented may mean not having a lease in one’s name and consequently being ineligible for rental assistance. It may mean not wanting to sign up for a vaccine on an internet site. It may mean not raising one’s voice as a victim of crime or exploitation. Being undocumented has ripple effects – for example, lack of documentation affects employability; healthcare access and effectiveness; and access to housing, higher education, financial resources, and transportation.
Complex systems barriers create spaces for exploitation. While some businesses and organizations legitimately help people access services at reasonable prices, others take advantage of people’s fear, limited education, and complex policies to charge exorbitant prices. Employers may also abuse their employees or deny payment of wages. Many do not feel safe reporting abuses, know their legal rights in these situations, or have access to legal advice. There are few advocacy groups to protect against this practice and those that exist are underfunded.

People who are legally present and on a path to citizenship face barriers such as being ineligible for certain government services and, until very recently, being fearful that their use of public services might place them at risk for being considered a “public charge,” thus potentially threatening approval of their residency or citizenship application. As a result, many have avoided signing up for Medicaid or SNAP even if eligible.

Language and Culture. As with immigration, limited English ability and understanding of the local culture affects all aspects of the immigrants’ lives. For example, one interviewee stated that patients could not access health care services due to difficulties filling out forms in English. Communication with health care providers is hampered, risking miscommunication and medical errors. Communication barriers at work can lead to misunderstanding and employee abuse. The limited English language skills of parents affects their children’s learning and success in school.

Some new immigrants arrive with limited years of education, which impacts many aspects of their lives, such as their ability to learn English, access services, critically assess information sources, and know how to manage health problems, such as diabetes and hypertension. Immigrants with low literacy levels who depend on verbal, pictorial or simple written communication face additional barriers in a culture that relies significantly on the written word. The use of online technology has greatly facilitated access to services by eliminating the need for transportation for some, but for others, who are unfamiliar with or lack resources for technological advances, the move to online has reduced their access to services.
Understanding and Navigation of Systems.
The immigration system and language barriers are compounded by problems faced by new immigrants globally: unfamiliar culture, rules, and systems. One interviewee called this challenge simply “not knowing,” which takes on many forms. It can mean not knowing or understanding the system and how to navigate it; not understanding the political system and the power of advocacy; not knowing your legal rights; not knowing where or how to raise your voice; misreading cultural cues or body language; and not knowing because you access channels of information that are not mainstream, and information can be delayed or inaccurate as mainstream channels are often only in English or, if translated, are not easily accessible or culturally or linguistically appropriate.
The Richmond Latino Community Health Initiative (LCHI)

It’s amazing that the funders came together to do this….I think unprecedented in Richmond’s history…so that’s pretty incredible.”

The CDC Foundation funds ($500k) that were granted to Richmond City and Chesterfield County sparked unprecedented donations of over $2.6 million from foundations and individuals in the Richmond region and beyond. Using the CDC Foundation funds as leverage, the Community Foundation for a greater Richmond and the Richmond Memorial Health Foundation led a coalition of public and private funders to collaborate on a historic and groundbreaking investment in the Latino community. Over $3.1 million in funds were donated for the Latino Community Health Initiative to meet emergency basic needs of the Latino population, with 42% of the funds designated for housing and food relief. About one-third of funds were unrestricted and the remainder funded community health workers to ease quarantine and isolation; health and vaccine education; translation services; employment assistance; and capacity building.
The Richmond Memorial Health Foundation (RMHF), as the fiscal sponsor for the Initiative, and the Health Districts sought community input to help identify organizations that could bring the most humanitarian benefit to the Latino population during the COVID-19 crisis. They formed a Working Group composed of RMHF lead staff, multicultural liaisons from Richmond City and Chesterfield, staff from the Richmond/Henrico and Chesterfield Health Districts who are responsible for COVID-19 pandemic education and outreach, and social service staff from Chesterfield County. Several of these members are highly respected Latino leaders with long-standing community ties. It was through this Working Group that the LCHI identified new Latino-led grassroots organizations that had not previously received foundation funding.

### FUNDING

#### National Funders

<table>
<thead>
<tr>
<th>Foundation</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC Foundation</td>
<td>$500,000</td>
</tr>
<tr>
<td>(original investment)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$99,788</td>
</tr>
<tr>
<td></td>
<td>(2021 grant to a local organization)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Foundation</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open Society Foundation</td>
<td>$250,000</td>
</tr>
</tbody>
</table>

#### Local Funders

<table>
<thead>
<tr>
<th>Foundation</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Foundation for a greater Richmond (COVID-19 Response Fund)</td>
<td>$588,230</td>
</tr>
<tr>
<td>Richmond Memorial Health Foundation</td>
<td>$200,000</td>
</tr>
<tr>
<td>City of Richmond (CARES Act)</td>
<td>$200,000</td>
</tr>
<tr>
<td>FeedMore</td>
<td>$135,000</td>
</tr>
<tr>
<td>Virginia Health Care Foundation</td>
<td>$134,000</td>
</tr>
<tr>
<td>Mary Morton Parsons Foundation</td>
<td>$100,000</td>
</tr>
<tr>
<td>Virginia Department of Health</td>
<td>$80,000</td>
</tr>
<tr>
<td>Jenkins Foundation</td>
<td>$20,000</td>
</tr>
<tr>
<td>Individual Donors</td>
<td>$815,000</td>
</tr>
</tbody>
</table>

**TOTAL: $3,122,018**
The Working Group meets weekly to discuss ongoing community needs and has invited organizational leaders and staff to present on specific topics. For example, the Working Group invited CDC Foundation grant recipients to a series of meetings, each one of which focused on a specific topic: food, housing, and community health workers. The weekly meeting has allowed the RMHF and Health Districts to learn about new community organizations and leaders, keep abreast of successes and challenges, and to quickly respond to community needs. It was through the community partners in this Working Group that RMHF and Health District staff learned about two organizations that were beginning to distribute food to Latino families. One was Waymakers Foundation, a Latina-led grassroots organization and the other one was the Chesterfield Food Bank, an organization with no Latino staff that, with the onset of the COVID-19 pandemic, began receiving many more food requests from Latino residents. As detailed below, both organizations received transformative funding from CDC Foundation that has led them to greatly expand their services, increase their credibility and visibility, and receive substantial additional funding from local foundations.

Having “a voice at the table” is an important way to structure equity in decision-making. The Working Group serves as a model for involving communities in the grantmaking process. During an interview, one of the members of the Working Group stated:

“The advisory group that met about the allocation of the funds, just providing feedback on what organization is doing what and they need more support or for what...was rewarding to see how they listen and not just to one person, but they took the time to gather information from different angles to make those informed decisions....This is...the one group that I have really seen the impact of the voices of the participants into the decisions and the actions of the program very clearly.”
The funding was transformative not only for individual recipients of funds but for the grantee organizations as well.

At the onset of the pandemic, Waymakers Foundation, a Latina-led organization that had previously collected clothing and other donations for disasters in Central America, sensed the need to serve families in a manner that respected their culture and food preferences and pivoted to serve the immediate local disaster facing Latino families. Foundations, impressed by the leader’s and organization’s passion, cultural and technical know-how, organizational skills, and compassion, invested in this growing organization to distribute culturally appropriate food and services. Interestingly, the Executive Director pointed out that distributing food created an opening for a trusting relationship with clients and the sharing of additional personal and family concerns. This has led the organization to provide more comprehensive assistance to families.
As befits an organization that is expanding its reach, it is experiencing the growing pains of limited space and funding. As the word gets out about the organization, demand keeps growing. The organization reported that one week, staff decided to accept clients without appointments and posted its services on Facebook. They were inundated by demand for food: over 250 families showed up in one day, their vehicles extending well beyond Waymakers’ doors.

Recognizing the need to increase its presence and trust with the Latino community, Chesterfield Food Bank (CFB) requested funds to hire a Latina outreach coordinator. Prior to the pandemic, language barriers limited Spanish-speakers’ access to CFB, and the organization experienced miscommunication between staff and clients. The new coordinator, with only four months on the job, formed new partnerships with organizations, established trusted relationships with the Latino community, and brought the Spanish language and Latino culture into all aspects of the organization. The community now has a person at CFB to see and connect with, the website is in Spanish and all pantry labels are in Spanish, so that Spanish-speaking volunteers feel comfortable finding their way around. Reflecting on the experience, the Executive Director said:

“I always had some reservations of whether or not the food bank could handle opening the door totally to the Hispanic/Latino population. It was a big deal for me and for us for COVID to hit like it did and...we have changed so much as far as the way we look at things, as far as being able to deal and communicate and care for the public, no matter what the face looks like, no matter what their culture is....I’m very grateful for that—that it’s changed us like that.”
Meanwhile, the organization has engaged in self-reflection and has made strides in being more inclusive, by training staff on cultural sensitivity, coaching volunteers on tone and language, and changing some practices. For example, CFB used to limit food distribution to one bag of food per household but once staff realized that multiple families were living in one household, they became more flexible, allowing one person to pick up food for more than one family. The Executive Director commented, in reference to the CDC Foundation grant money she received: “it cracked that door open enough for us to walk through it.” Similar to other organizations, the CFB recognizes the need for additional services that can lessen food insecurity, such as ESL and GED classes, and services to address depression, abuse, and addiction.

“If you can help organizations employ, then it will grow from there….I think investing in these organizations, so they...add more opportunities to the community....I think that is an awesome investment.”
Southside Community Development and Housing Corporation (SCDHC) is a financial services center that focuses on providing resources that enable clients to be independent, such as financial literacy, employment and business support, digital navigation and connecting with other needed resources. During COVID-19, it received funds for rental and utility assistance. People facing housing issues due to job loss also could receive employment and business assistance to get back on their feet. SCDHC focuses on understanding the situation of each client and finds ways to reduce barriers to accessing resources. Staff feel that they meet a unique niche in the community and other organizations look to and refer clients to them for resumé assistance, help with finding a job, opening a bank account and other financial services. As with other organizations, they see the need for holistic, one-stop shop comprehensive services to best serve the community.

Over the past year, they have increased their bilingual staff from one person to four. They have held staff meetings so that staff from multiple cultures can understand each other better and to become a more inclusive organization.

They also have appreciated the increased confidence they receive from funders. In terms of their relationship with foundations, the Executive Director said:

“I think they [RMHF] have a lot of confidence in our organization….First foundation that I can say…let’s look at this group and see what they’re about and see what their needs are. And they just have been wonderful.”

La Casa de la Salud (LCS) received funds for community health workers (CHWs) with deep connections to and trust of the community to address the multifaceted needs of Latino families impacted by COVID-19. LCS is an organization that, prior to the COVID-19 pandemic, counted on a network of mostly volunteer community health workers to provide health education and information focusing on chronic disease prevention and management, and referrals to safety net clinics and other community partners.
During the pandemic, LCS CHWs have broadened their expertise to include public health measures to contain coronavirus transmission, culturally appropriate emotional support, and connecting families to resources, especially food, rental/utility financial assistance, and health care.

Formalizing the relationship with CHWs through contracts for part-time service has helped the organization strengthen its infrastructure of regularly paid native Spanish-speaking CHWs to serve the growing Latino community and more comprehensively address its needs. It also contracts with monolingual Spanish speakers or Spanish-speaking Latinos with limited English, thus being capable of reaching into communities of recently arrived immigrants. LCS has also increased its visibility and reach, created new connections with local and national organizations and foundations that have resulted in additional funding and recruitment of additional paid CHWs.

**Latinos in Virginia Empowerment (LIVE) Center**, an organization that provides culturally tailored services in Spanish to victims of violence, received CDC Foundation funds to provide rental and utility assistance to Latino families. Although providing this service was outside of the organization’s core mission, giving out rental and utility assistance expanded the organization’s reach and allowed them to create trusting relationships that opened the door for clients to seek help for domestic violence. It was logical for clients to also want to take care of their basic needs before seeking help for violence.

The impact of these funds on the organization extended beyond the direct service provided. The funds have allowed it to grow by becoming better known in the community, developing more organizational relationships, and receiving additional funds from local foundations. Recently, they expanded their telephone services so that they now have a phone line in Spanish available 24 hours a day 7 days a week and through which they help victims and provide referrals to resources statewide.
Sacred Heart Center (SHC) is a trusted community hub in downtown Richmond with the mission to connect Latino families with tools to thrive and flourish. It provides a continuum of educational and innovative programs for adults, children, and youth, such as GED preparation, youth mentorship, summer camps, literacy and ESL classes, and a leadership program. In response to the COVID-19 pandemic, SHC converted its educational programs to remote learning and pivoted to meet the immediate basic needs of Latino families: preventing evictions and keeping people fed. It has an expanded food pantry; provides rent, mortgage, and utilities assistance; plans vaccination events; and communicates weekly with the community through a partnership with a local Latino radio station. SHC served many new families. Its success comes from providing culturally appropriate services and reducing barriers to access, such as minimizing documentation requirements. The following expression of gratitude represents not only the sentiments of the staff at the Sacred Heart Center but also of the many organizations and people who have been touched by the initiative.

“We are truly grateful that you are listening because listening to our voices is like listening to the thousands of voices that we listen to. And thank you for your support…for the many things that we have been able to bring to the community…I hope we can continue to work together, because you are thinking about the community, our Latino community. There are so many needs...from the first time we talk to them to when we give them the good news, we know what a difference it makes....This is more than a check...people understand that the interest is authentic...when we give them the good news and we hear the people crying...there are no words for this.”
Concluding Observations

Several grantees cited greater awareness of and connections to the other organizations serving the Latino communities. As a result of receiving grant funds, grantees have become more visible and trusted service providers, have expanded their networks, and have been successful in securing more funds. The grant recipients work together more, with increased cross-referrals and ability to find resources for clients. Helping their own community members in dire need has fostered a sense of common purpose and desire to coordinate services and engage in collaborative planning.

"If we pull together, we can accomplish so much more than everybody working in silos.... I think if we build on each of our strengths and pull together, we can work together because we serve the same community."

Grantees expressed sincere gratitude for the unprecedented generosity of the foundations and individuals who have come forward to support the Latino community members. The donations touched the lives of many, not only because of the financial support at a critical time, but because it symbolizes the significance of Latino people and the Latino community to the Richmond region.
Looking Ahead: Opportunities and Challenges

Beyond the impacts on families and recipient organizations, interviewees offered their observations on region-wide impacts that could provide leverage to improve opportunities for, and dismantle structural and inequities faced by, Hispanic and Latino people.

**Awareness and appreciation of the Latino community and its organizations.** Latino and non-Latino interviewees alike recognized the new awareness of and attention to the Latino communities by foundations, organizations, and RVA residents. “We are opening up our eyes to a different perspective,” shared one respondent. “I think people are finally talking about a population of people that exist in our community and how do we care for them and what are the needs and how do we respond?” said another.

The more than $2.6 million raised locally is testament to the support and recognition of the value and contributions of the Latino population and that helping one community in need can help all residents. “How do we help them be whole and healthy and well,” asked one respondent, “because we know that it impacts all of us. The community will never be thriving if we have a subset of our population not thriving.” The new conversations about Latinos reflects an environment that is ripe for change.

With this awareness also comes the recognition and recommendation that non-Latino residents would benefit from learning more about the Latino people, their history, immigration journey, economic and cultural contributions, and challenges.
Connection between Latino community members and organizations that can help them. Organizations have intentionally built connections and trust with the Latino community by hiring bilingual and bicultural staff; diversifying, and educating their board and staff; immersing Spanish into all aspects of their work; expanding services and bringing them closer to the community; and intentionally removing barriers to service. Being offered food that is familiar and from their culture and helping families with rent and utilities has also brought more people to organizations. It has allowed community members to learn about and connect to other services they can benefit from such as business and employment advice, mental health services and educational opportunities.

The impact of this work can be demonstrated through the exponential increase in the Latino population’s visits to outlets of Feed More, which distributes food through many organizations. This increase reflects the immense need but is also due to greater trust building between organizations and the community. In one year, visits to Feed More outlets by Hispanic individuals increased by 339% (Figure 4).
This intentional work has augmented community members’ awareness of and trust in services that are increasingly being offered by people from their own culture and language and with whom they feel an affinity and connection. This results in increased confidence and reduced fear of community members to approach organizations for help and voice their concerns and needs. Even more powerful have been the stories of community members, grateful for the help they have received, coming forward to volunteer at those same organizations so that others, with even more needs, may benefit.

The unprecedented generosity and compassion toward the Latino community have helped families survive the past turbulent year. However, besides difficulties related to recovery from the pandemic, many systemic challenges are rooted in historic and current xenophobia, racism, classism, and segregation. Traditional funding practices are difficult to break and when new populations enter a locality, decision makers, who are accustomed to and comfortable with the status quo, may not be prepared for or resist change. Services may not be designed for people with limited literacy, who are not citizens, or have not yet learned English or understood the local systems. They may be intentionally designed to restrict access by non-citizens. Examples of systems barriers abound. Below are a few examples.

- Some rental assistance is said to be available to all Virginia residents, but application forms are complex and require that applicants have leases in their names or that landlords apply on their behalf.
- Funds are available for childcare support, but are restricted to documented residents.
- Many application materials require high level of literacy, knowledge of English, or access to the internet.

[One family with kids was packing bags for families that live in motels and are homeless] [They said] we can’t stop….We are volunteering so those who live...in the motels or homeless, those children have something to eat.”
Leadership Structures  The absence of Latinos in leadership positions in the Richmond region is a concern raised by respondents, one of whom asked, “Are our communities represented among decision makers? I think not.” One hypothetical reason given was that neither the Latino or immigrant communities nor the realities they face are on the radar of decision makers. Another respondent observed that while lower rungs of organizations are aware of the issues confronting Latino communities, this awareness does not necessarily reach the upper tiers, where major decisions are made. Several interviewees stressed the importance of Latino community members having a “voice at the table.” There is evidence of change as organizations reach out to find Latino community members to serve on boards and fill staff leadership roles.

Organizational Capacity  Despite the increase in resources, the demand for services in the past year has strained organizations. Several organizations lamented their limited capacity to serve clients, especially during this period of high need and demand. Community health workers expressed frustration at not finding affordable healthcare services for their Hispanic clients. Challenges are long waiting period for appointments, cancelled appointments, and having to extensively search for appointments. A safety net provider confirmed this experience and elaborated:

“We are at capacity. We are turning away patients who are coming to us from care due to lack of hospitals....80 percent of our patients are uninsured and 90 percent of our uninsured don’t speak English....So the demand is overwhelming. And if we had more resources, we could see those folks, but they’re probably going to go to the emergency room or just not go to the doctor....We had to redirect [resources] to COVID testing and COVID vaccines. And, you know, that’s a strain on an organization.”
Relatively new grassroots organizations have capacity challenges, although this has improved in the past year. One grassroots leader talked about the multifaceted complexities of managing and sustaining a nonprofit, especially without deep community connections to people and organizations with resources and while learning the complex laws and regulations governing nonprofits. While funding for direct services tends to be easier to find, securing funding for leadership and the organization’s infrastructure is challenging.

The needs of clients are complex and multifaceted and solving one of a family’s problems, such as food, may not be sufficient. More time and compassion are needed to devote to people who have language, literacy, cultural, and technology barriers. Several organizations lamented their capacity to only do “light case management.” They called for more resources for a comprehensive approach that can help resolve problems and lead to family self-sufficiency.

“We need to be able to help them with breaking the barriers that are there by providing wraparound services and the sensitivity to understand what the barriers are….We need to get to the bottom of the problem and be able to address it from there.”
The ability to communicate in the client and community’s language and culture is an essential aspect of effective service. One interviewee said: “When we look at many organizations and local and even state government systems, it’s still an afterthought.” While there has been progress, respondents commented that “in the State of Virginia, especially in Richmond, there are not many organizations that have Spanish available.” A similar comment was made about the difficulty in finding medical interpreters, although the new reliance on remote videoconferencing is helping to ease this challenge. This capacity problem is compounded by the difficulty in finding bilingual and bicultural staff to fill positions. One provider asked, “So where are the grants for the Latinx students to enter into health care?” She continued, “and if you want to make a sustainable change, start at…elevating that group…so not only did you elevate that person, you now gave them a tool set where they’re going to assist others in their community. That’s a more impactful change.”

Another aspect of organizational capacity has to do with assuring the longevity of know-how or effective programs, in the event of personnel changes. Unfortunately, too often a loss of an employee also results in a loss in organizational capacity. Ways need to be found to maintain the organizational capacity even with personnel changes by establishing institutional policies and creating ownership of programs with multiple people in an institution.

As many leaders are stretched to meet the daily needs of the community, there is little time to carry out broader high-level coordination and collaborative planning. Community leaders called for better coordination among organizations to work more effectively and efficiently. They also expressed the need for “figuring out what we can do together” and tapping into the community knowledge to jointly articulate a vision for a healthy and thriving community.
The CDC Foundation investment of $500,000 in the past year has stimulated unprecedented humanitarian support from the Richmond community to the tune of more than $2.6 million to dampen the devastating impact of the COVID-19 crisis. As we look to the months ahead, vaccinations will still be a priority, especially aimed at young adults, adolescents, and children. RVA residents and decision makers will need to pay attention to the many sequelae left in the wake of the coronavirus. Focusing on the Latino population, these include school children who have fallen woefully behind; people, who for many reasons, have had difficulty managing their health conditions; and people suffering from mental health issues resulting from grief, isolation, and financial stress. What will happen when the eviction moratorium ends? Financial recovery will be a central concern, especially for the many families who worry about and support loved ones in their country of origin. While we can anticipate the types of issues Latino communities will face, the full scope of the damage will become more apparent in the months to come.

RECOMMENDATIONS

“I do think the foundations do have some responsibility...to orchestrate some of this. They often hold the position of that orchestra conductor and pulling people and creating networks, building, and helping to...create those relationships that maybe didn’t exist before because they do have so many contacts. I do think foundations should have this at the top of their list.”
Beyond direct support to Latino residents, the COVID-19 pandemic’s impact on the Latino community has galvanized foundations and other community leaders to respond to the need for “strategic and sustained investments to dismantle the structural and systemic inequities that foster and perpetuate health inequities and limited opportunities” for Latino communities and people. To begin this process, the following three recommendations are offered for consideration:

1. **Raise awareness of local decision makers and residents about Latino and immigrant history, origins, culture and experiences**

2. **Bring together community members of Latin American origin to envision a better future for their communities and people in the Richmond region**

3. **Initiate systems for responsive grantmaking**
Raise awareness of local decision makers and residents about Latino and immigrant history, origins, culture and experiences. Understanding a people and its culture is an essential step toward valuing, accepting and trusting that community and breaking down barriers among communities. This step advances those already taken by many community leaders with the aim to achieve broader acceptance of and connections with the Latino community in the Richmond region. A multipronged approach would be most effective.

One approach would be to convene business, nonprofit and government leaders, and residents to learn about the history and context of Latino presence and immigration, the culture, countries, demographic growth, barriers, and lived experience of residents. One respondent suggested modeling this event after a “Big Learning Event” on redlining that was hosted by Housing Opportunities Made Equal. The expertise within several local colleges and universities as well as the many stories of local residents would greatly enrich this event.

The local media can play an important role in gathering, sharing and talking about personal stories through the internet, television, radio and print. Several local leadership programs can bring attention to the realities of the Latino communities through research, dialogues, and projects. Other partners in this endeavor would include community organizations, government, multicultural organizations, and chambers of commerce. In short, there is a richness of local expertise that, working together, can lead to greater understanding, acceptance and support for this growing population.
Bring together community members of Latin American origin to envision a better future for their communities and people in the Richmond region. This recommendation responds to the many voices calling for the Latino community to come together to envision its destiny. An idea is to form a Latino Collaborative with mechanisms for ongoing listening and understanding of needs; visioning and planning; identifying gaps, breaking down barriers and advocating for change; and collaborating, coordinating, and communicating with each other. The Collaborative would develop plans for:

- A trusted infrastructure of organizations and services
- Acquiring knowledge for self-sufficiency
- Developing human capital, including leadership
- Forming a coordinated communications strategy

First steps would involve bringing together a handful or two of community leaders to further develop the concept of and seek funding for the Collaborative. Early activities would be a landscape analysis of services and gaps. These analyses would provide the foundation for the plans. Figure 5 contains further thoughts on the Latino Collaborative.

**FIGURE 5. BUILD A LATINO COLLABORATIVE**

**PURPOSE:** Ongoing listening and understanding of needs; visioning and planning; identifying gaps, breaking down barriers and advocating for change; and collaborating, coordinating, and communicating with each other.

- Inclusive of diverse Latino communities, languages and cultures
- Sustainable funding
- Regional approach
- City/County Multicultural Affairs offices as members of core leadership
- Involve Latino/Latino-affinity faith leaders, community organizations, and people with health, education, legal, business, housing, workforce, civic and language expertise
- Connect with statewide Latino/Immigrant organizations such as Virginia Hispanic Chamber of Commerce, Virginia Coalition of Latino Organizations, Virginia Coalition of Immigrant Rights, Virginia Latino Hispanic Education Network, Virginia Latino Advisory Board, and Office of New Americans and its board
- Build on strengths of Latino community
One of the key projects for the Latino Collaborative, would be to envision a trusted infrastructure of culturally appropriate services aimed at the Latino community. A central but not exclusive aim would be to strengthen community-based organizations. As one respondent said: “I would say look at the organizations that really support this community and have real in-depth conversations about what can we do to expand access or how could you make Richmond a more equitable community for folks from these communities?”

Questions to consider are:

- What is the vision and how does each organization relate to the vision?
- What does it look like geographically?
- What does it look like from the client’s perspective?
- What is the role/relationship of grassroots vis-à-vis larger organizations?
- How can long-term investment in infrastructure development be secured?
**Initiate Systems for Responsive Grantmaking.**
The third recommendation is to initiate systems for responsive grantmaking. Already, several foundations have collaborated to jointly fund community investments. This is a model to continue and consider expanding.

In addition, foundations can model community engagement by structuring that involvement in their work. For example, the Richmond Memorial Health Foundation has already created a workgroup, with Latino members, who inform funding decisions affecting the Latino community. Such a workgroup can serve as a model for other foundations. Second, creating structures for continuous learning from and understanding the Latino community and Latino-serving organizations, their strengths and limitations, will also help foundations become more responsive to the community. Third, foundations can be intentional in funding community-based organizations with the capacity or authentic intention to effectively listen to, understand and reach the Latino community, as it is those organizations that hold the promise to increase opportunities for and dismantle barriers for Latino populations.

Lastly, foundations can incentivize self-reflection within their organizations as well as encourage this inquiry among their funded organizations. Some respondents reflected that the mere participation in the current study provoked self-reflection and consideration of what organizations could do to better to serve the Latino community. Questions to consider include:

- Are community members involved in decision-making?
- Who and how are services designed and received?
- Are barriers being eliminated?
- Are the processes transparent?
The Latino community in the Richmond region has suffered greatly during the past year and the Richmond philanthropic community responded with unprecedented generosity and has worked tirelessly in collaboration with local government, non-profits, and volunteers, to support Latino families. But the work is not over. The Latino community is resilient and will respond to opportunities to thrive and succeed. Creating a welcoming community for all to be healthy and thrive together will benefit all residents of the Richmond region.

CONCLUSION
1. Personal communication. Mark Constantine, CEO of Richmond Memorial Health Foundation, January 19, 2021.

2. As the Richmond City and Henrico Health Districts operate as one entity and due to the regional perspective of many community members, leaders and organizations, data is provided for all three jurisdictions.

3. In this report, the term RVA refers to Richmond City, Chesterfield County and Henrico County.

4. The Richmond Metropolitan Statistical Area consists of 18 jurisdictions in Central Virginia and a population of approximately 1.3 million.

5. Based on pooled 2018 and 2019 1-year American Community Survey microdata.


7. For whom race/ethnicity was reported

8. Chesterfield Health District and Richmond City and Henrico Health District