

# La Clínica de La Raza

OAKLAND, CALIFORNIA

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La Clínica de La Raza (La Clínica) is a Federally Qualified Health Center with 800 personnel and 26 sites across three counties. The mission of La Clínica is to “improve the quality of life for the diverse communities it serves by providing culturally appropriate, affordable, high quality and accessible health care.” La Clínica efforts to leverage the SDH are inspired for the most part by their clinical experience as well as by listening to the communities served. Most SDH efforts at La Clínica have a foundation in education and advocacy and are primarily developed and managed within the Community Health Education Department, also referred to as Casa CHE. SDH programs include training community members as *promotores*; providing opportunities for youth to learn leadership and community action skills; providing pregnant and parenting teens and their children with safe opportunities, support, and relationships with caring adults; helping Latino men explore better adaptive ways to be a man, a husband and a parent; organizing a diabetes walking group, and a supervised group for planning nutritious affordable meals and shopping strategies; having health educators perform “puppet plays” in local school classrooms to prompt discussions on violence and what the child or teen could do when a violent situation arises; coordinating a network of culturally and linguistically sensitive domestic violence services and education for immigrants; and offering WIC services and classes on managing stress.

A group of University students in Oakland, California, concerned about the limited number of affordable health care options available to low income residents in the East Bay, opened a storefront free clinic initially staffed by volunteers in 1971. Before the clinic was established, the only medical option for many residents was to go to the local emergency room. The clinic has since grown into La Clínica de La Raza, a Federally Qualified Health Center (FQHC) and one of the largest community health centers in the state with 800 personnel and 26 sites across three counties. In 2010, with a budget of \$68.5 million, La Clínica served about 68,100 urban community residents through 328,200 patient visits. This community health center predominantly serves Latinos, but also provides services to many African-Americans, Caucasians, and Asian or Pacific Islanders. Forty-four percent of patients are uninsured, 43 percent are enrolled in Medi-Cal, and 96 percent live at or below 200 percent of the Federal Poverty Level.

La Clínica's efforts to leverage the social determinants of health (SDH) are aligned with the organization's five-year strategic plan. The strategic plan outlines specific SDH program areas that are to be pursued, and the CEO and board, with input from department heads, staff, and the community, select the blend of

these programs. In the development of individual efforts, La Clínica may perform additional community surveys or focus groups, or both to decide whether to not pursue a particular idea and, if so, how to best design the program.

The continuous dialogue that the community health center maintains with residents about personal and community concerns provides a rich source for program ideas. For example, the domestic violence prevention program, *Proyecto Cambio* (Project Change), came about because many clients were coming to La Clínica's Community Health Education Department (Casa CHE) speaking about "difficulties" in their homes. It turned out that these women were subject to domestic violence, but feared that community counselors would separate the family to prevent further abuse. What the wives were looking for was an alternative that would keep the family together. Thus, with support from a CDC grant, La Clínica's health educators developed a program focused on better ways to handling life stresses and resolve conflict. Under *Proyecto Cambio*, health educators visit local classrooms and perform "puppet plays," telling stories with music to discuss violence and what the child or teen could do when such situations arise. The program expanded over time with additional funding and now includes workshops and classes. Furthermore, Casa CHE looked at potential root causes of domestic violence in Latino homes and found it may be associated with gender role expression, family relationships, and media violence. Casa CHE established the Latino Men's Group to address gender role expression. The group teaches how to be a man without violence and healthier ways to handle stressors. Moreover, for the past two years Casa CHE has been putting on theatrical performances to demonstrate how best to deal with domestic violence in the local communities. These programs deal with this issue by encouraging audience participation while presenting the material in a nonthreatening and engaging way. The program has been lauded by the communities served, and *promotores* who themselves were victims of domestic violence have experienced great personal growth through their experience in Casa CHE's domestic violence programs. Most referrals to these programs come from La Clínica via clinical staff, but Casa CHE services have been requested by outside agencies as well.

Clinical staff may also prompt individual programs. For example, a physician noted that just prescribing medicine did not adequately help a subset of patients with diabetes. The doctor talked to the department head, and suggested that *promotores* may be helpful in teaching these patients how to better control their disease by augmenting the medical plan with better and affordable nutrition and increased physical activity. The suggestions also included incorporating *promotores* as part of the primary care team. This idea moved up the leadership chain and resulted in La Clínica's Advancing Diabetes Self-Management (ADSM) program, which also included walking classes to promote increased physical activity. The Robert Wood Johnson Foundation sponsored the program from 2002 to 2005.

Casa CHE manages most of La Clínica's efforts to leverage the SDH. The department consists of 20 staff, led by a director, and programs include obesity prevention; classes on diabetes, nutrition, exercise, and parenting; pregnancy and domestic violence prevention; mental health promotion; and tobacco,

alcohol, and substance abuse prevention. These programs are taught in many formats and venues to maximize reach and impact. For example, staff may conduct home visits to parents having difficulty with their teenager's behavior or possible drug use. Casa CHE also monitors the success of many interventions through surveys focusing on the participant's knowledge, perception, and behaviors before and after the program.

Other programs managed by other La Clínica divisions include the Teens & Tots program that provides pregnant and parenting teens and their children with safe opportunities, support, and relationships with caring adults. Participants receive access to medical care, psychosocial services, education enrichment, parenting classes, and youth development activities. La Clínica also offers WIC programs at two of its locations.

The community health center hires a great number of community residents for employment throughout La Clínica, including its efforts to leverage the SDH. As staff, these residents provide input to the leadership regarding community needs and feedback on program impact, helping the organization maintain a continuous dialogue with residents about personal and community concerns. Furthermore, La Clínica staff are committed to improving the socio-economic and environmental conditions so strongly that they will individually volunteer during their personal time to participate in efforts conducted with other municipal, private, and community agencies to confront significant problems such as childhood obesity, nutrition and active living.

Partnerships are key to the organization's success in leveraging the SDH. "La Clínica sees that there is so much need in the local communities, and the community health center cannot handle all those needs in all those areas alone," said Viola Lujan, the La Clínica Director of Business and Community Relations. "We have had multiple examples over time that show when we do collaborate, we are able to provide better services with better outcomes, because the partners come in with their own expertise and enhance the program greatly." The CEO and board are expected to network and pursue partnership opportunities; however, partnerships have also evolved from interactions between the community and La Clínica staff. For example, the health center's Community Health Education Department was invited to a local school to speak about domestic violence; La Clínica was eventually asked to support a satellite clinic in that same school and at the request of that same community, the community health center will soon be breaking ground for their newest clinic site in the same community.

Many La Clínica programs have a leadership training component and are based on Paulo Freire's concept of empowerment. The community health center seeks to have people actively participate in and take responsibility for their own education, and ultimately their health. A training program that Casa CHE is particularly proud of is its community health workers (CHW) or promotores program. Centro de Promotores or Health Promoter Training Center began in 1991 and trains about 30 volunteers yearly who wish to catalyze change in the community. This is not a certified program, but the promotores are given

formal training and receive a diploma during a ceremony. The program is open to women and men, who participate in a 2:1 ratio. Often the trainees are members of the targeted population the community health center wishes to empower with self-management skills. Promotores from the targeted population offer ideal peer support because they have firsthand experience in these problems. Trainees attend a 10-lesson instructional course to learn basic skills. The curriculum comprises the philosophy of community action, an understanding of group dynamics, and leadership skills. After the initial training, promotores attend weekly meetings where they receive ongoing specific topic training and social support to participate in the various education programs. Promotores are involved in health promotion, diabetes prevention and education, diabetes walking group, the chronic care model, social support groups, pregnancy prevention, domestic violence prevention, substance abuse prevention, tutoring, stress and relaxation classes, and parenting classes. If the promotores wish, they may specialize in a particular area. It is important to point out that the health educators in these programs only act as facilitators; the group makes all the decisions and owns any action plans it develops. Topics covered in this training program include how to identify the root causes of community issues and problems, how to facilitate a group discussion, how to create consensus within a group, and how to plan and conduct community action.

Another Casa CHE program is the Peer Educators program, also called "Latino Youth Brigade," which was started in 1998. It is a youth program modeled after the promotores/CHW program for adults, but tailored for adolescents 12-19 years of age. The program was prompted by youth who had assisted in promotores programs in their schools and requested a similar program for themselves. Their families and other community members also advocated for a youth program. Thus, each year, about 30 adolescents take part in activities to promote positive self-esteem, community involvement, and leadership. The group receives training in specific topics such as family life education and nutrition. Following their training, they choose and implement a community action to promote health messages among their peers. For example, a few years ago the Youth Brigade conducted a "tobacco sting" in the neighborhood, raising awareness of the ease in which minors can obtain tobacco products at the local area merchants. Once the issue was illuminated, the community pressured the shop owners to stop selling to minors. The youths in this program receive weekly tutoring and are very active in the community, participating in local events and health fairs. During the summer months, they go on educational day trips and exchanges with other youth groups. The goal of the program is to teach leadership skills, community action skills, support academic skills, share these skills with peers and participate in various community-based activities under the guidance of a Casa CHE health educator. The program nurtures a sense of community responsibility and involvement among participating youth. In 2004, the Oakland Fund for Children and Youth conducted an evaluation by surveying the youth participants, their parents, and the staff. Survey results noted an 80-90 percent perceived improvement in terms of success at school, sense of self, ability to

communicate, ability to learn new things, ability to connect with adults, ability to work with others, and ability to stay safe.<sup>1</sup>

One of the recent examples of La Clínica's efforts to leverage the SDH is the East Bay Coalition Against Gender and Domestic Violence. This network of providers assists in the coordination of all types of referral services, including housing, legal, and psychiatric counseling, and education for Spanish-speaking immigrants who suffer from isolation and do not know how to navigate the system in order to access domestic violence institutions if needed. A network coordinator located at La Clínica is in charge of the program. The coalition had its first conference in October of 2011, and is planning to create a documentary about domestic violence and the services the coalition offers.

To secure grant funding and report on its programs, Casa CHE collaborates with La Clínica's Development Office and the larger Planning Department, which consist of 12 staff members responsible for writing and tracking proposals, reports, program evaluations, and renewals for funding. Besides grants, funding for Casa CHE programs also comes from La Clínica's operating budget which is boosted by holding small fundraising events such as musical performances, an AIDS Walk, and an annual "Health Care Without Borders" employee donation drive (97 percent of staff participated last year). The community health center also secures additional funding by having private agencies pay consulting fees to Casa CHE.

One of the challenges that La Clínica faces in leveraging the SDH is that funders are looking for evidence-based programs to fund. For that purpose, La Clínica has collected many success stories to demonstrate the beneficial impact of its efforts. However, statistical analyses may be preferable, and the community health center is working on strategies to demonstrate the impact of the promotores programs on health outcomes and wellbeing. The ability to measure and evaluate the impact of these programs will help sustain the programs that are most important to La Clínica and the communities they serve.

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<sup>1</sup> The results of this survey can be found at [www.childtrends.org/what\\_works/city\\_scan/Oakland/La%20Clinica%20de%20La%20Raza%20-%20Youth%20Brigade%20expanded.htm](http://www.childtrends.org/what_works/city_scan/Oakland/La%20Clinica%20de%20La%20Raza%20-%20Youth%20Brigade%20expanded.htm).