

# Community Conversations

*with* **WHOLE HEALTH LOUISIANA**

## 2023 Report





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**I founded Power Coalition for Equity and Justice to ensure that people of color in Louisiana have every opportunity to thrive.** For decades, communities of color have been underinvested in and this has created inequities within our state, but has also meant we rank among the lowest in the nation for health indicators. Our community deserves better.

To fix these broken systems and chart a new path we need to have a clear understanding of where we currently stand. Power Coalition is proud to have partnered with Whole Health Louisiana to host community conversations across Louisiana to learn more about what people's day to day experiences are and hear their dreams are for their communities.

We heard about challenges finding quality childcare, violence in communities, and disappearing jobs and healthcare. But, we also heard stories of resilience and of radical community support and know that our communities are ready to build a future where we all have access to what we need.

This work is not and will not be easy. We will need large scale investments from the state and federal governments and we need to see policy changes that unlock opportunities for our communities. We remain inspired by the work that is happening every day across Louisiana to build community and create a more powerful future. We look forward to continuing this work with dedicated partners to build the Louisiana we deserve.



In Solidarity,

**ASHLEY Shelton**

Founder, President, and CEO

Power Coalition for Equity & Justice

**The Whole Health Louisiana Team has been engaged in a year long exploration of strategies and programs to support Louisiana children and families.** In the summer of 2023, Power Coalition for Equity and Justice, in partnership with members of the Whole Health Louisiana Steering Committee, hosted Community Conversations throughout Louisiana to hear direct feedback from community members who have been historically left out of conversations about health equity.

These Community Conversations were hosted in person in New Orleans (65 participants), Baton Rouge (40 participants), Alexandria (35 participants), Shreveport (70 participants), Monroe (33 participants), Lafayette (50 participants), Lake Charles (62 participants), Hammond (53 participants), and the River Parishes (50 participants). In each of these conversations, there were ideas and specifics to the city that were raised, but there are also a number of themes that emerged that show opportunities for this program to become involved.

### METHODS

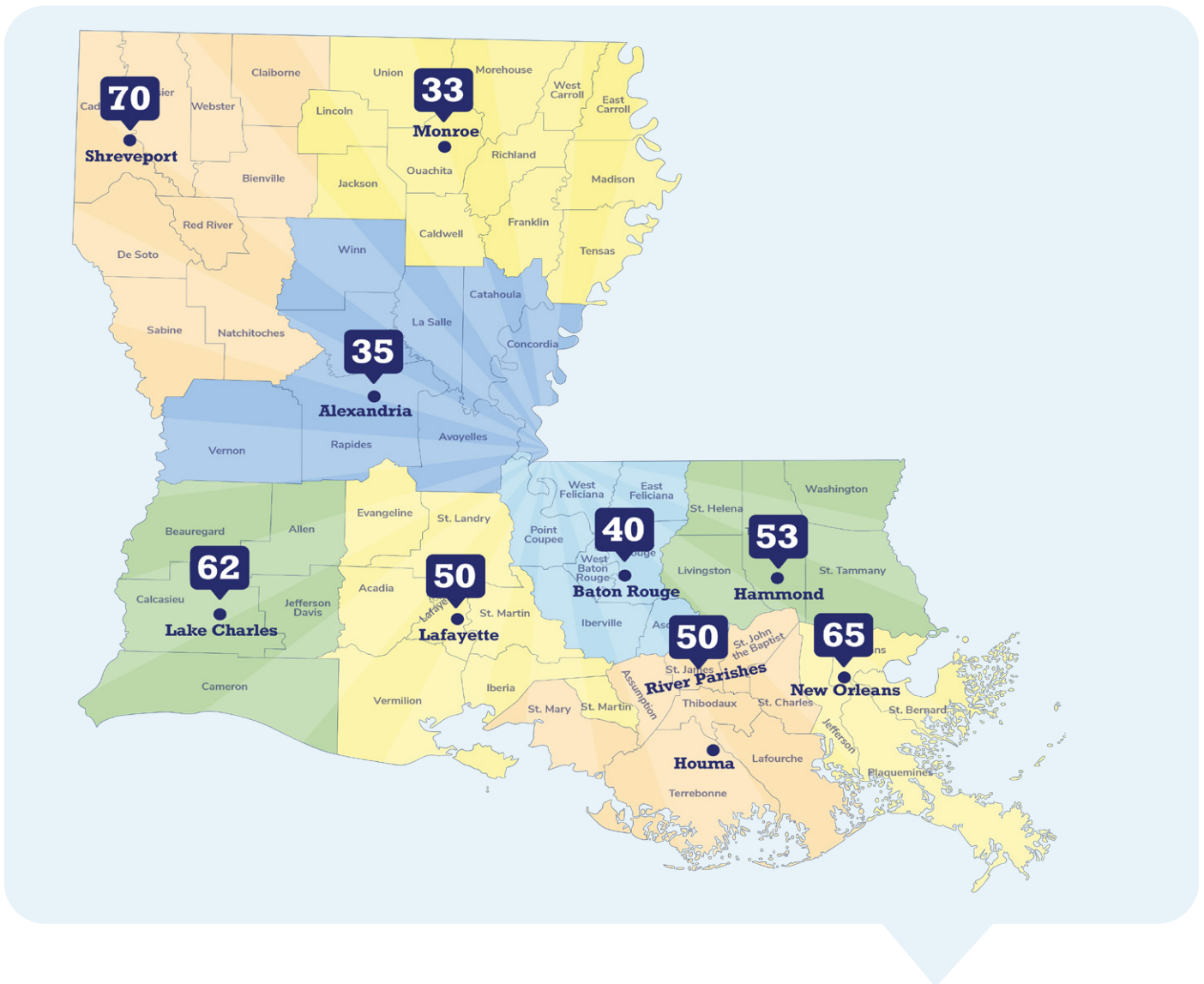
**Power Coalition and Whole Health Louisiana specifically worked with partners to conduct outreach to encourage participants from Black and Brown communities in these community conversations.** This oversampling of communities of color reflects the need to hear about the experiences of people and communities that have historically been left out of conversations with the state.

To conduct the conversations, Power Coalition had a conversation facilitator, note taker, and community partners to capture the responses from participants. Questions for participants to respond to were based on research questions from Whole Health Louisiana and the best practices developed by Power Coalition in response to previous community listening sessions.

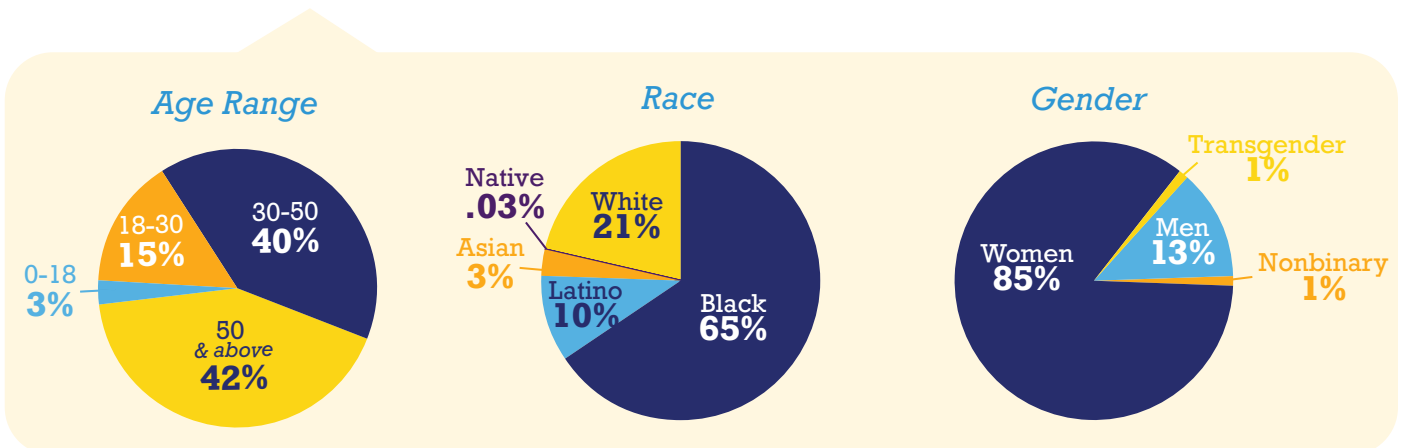
At the beginning of each community conversation, facilitators explained the goals of the conversation including the goals of Whole Health Louisiana. Facilitators presented a shared understanding of childhood adversity, trauma, and trauma-informed approaches that would serve as the basis for further conversations.

Participants were compensated for their time and expertise in their lived experiences.

## PARTICIPANT LOCATIONS



## PARTICIPANT DEMOGRAPHICS



## COMMUNITY CENTERS



**In all of the community conversations, participants mentioned that community centers and programs such as Boys and Girls clubs, after school programs, and similar opportunities for both children and teens have disappeared.** In many areas, there used to be free or affordable programs for the community, but many of these programs have left and the remaining programs have fees that many families can not afford. The loss of these programs has also meant that many youth job opportunities have disappeared from communities. Many of these programs also provided tutoring programs for children, giving support for education that may not be available in households or within less formal systems. Participants in the community conversations stressed the desire to see a new investment in community programming and care. This will not only support children and teens having somewhere safe and productive to be after school and during summers, but is an important economic development tool to ensure parents can work and know that their children are safe. Investing in these programs will also add jobs in communities that have had opportunities taken from them in recent years.

This need shared by Louisiana families reflects a national pattern. Even before the pandemic, a national study by the Afterschool Alliance found that “for every child in an afterschool program, there are three more children waiting to get in.”<sup>1</sup> This trend is particularly acute in communities of color and low income areas, leading many families to make a hard decision about leaving the workforce to care for their children after school and during school breaks, or leaving children unsupervised when they would like to find care for their children. Since the pandemic shut downs of many programs, it has only gotten harder for families to find quality care for their children when not in school.

*“Where do I go when I am not okay? Can I even say that or will I be punished? Things just keep happening and just keep going. We had a hurricane and kept going. Toxic waste in our air... Keep going. I wish there was a care center or something I can walk into to get rest or even to take a class to be a better parent. You know, no one ever taught me how to parent... This child just appeared and I was supposed to know what to do.”*

**-BLACK WOMEN, 22  
LAKE CHARLES REGION 5**

<sup>1</sup>Afterschool Alliance “America After 3pm, Demand Grows, Opportunity Shrinks” <https://afterschoolalliance.org/documents/AA3PM-2020/AA3PM-National-Report.pdf>



Participants also expressed interest in more libraries and services from these existing resources. This is one of the few remaining locations where parents and caregivers can still bring their children. This could be a place for parents to get more information about other available resources, but many people feel that they do not know how to access services for which they may be qualified. The systems to get care can be overwhelming and hard to access for many families and it is important for there to be community centers with staff who know how to support people navigating these systems.

In all of the conversations, but it was particularly raised in New Orleans, Lake Charles and Hammond participants shared that not only were there not enough programs for children, **but that a lack of programs to support parents and adults in the community are making it more difficult for them to succeed as parents.** There are many young parents who have had their children without the opportunity to grow up themselves, they become parents without finishing their education and are not able to access resources to support them and consequently are also not able to support their

children in all of the ways that they would like to. As we build out programs and supports for children and families, we should consider what would support parents both in their parental role but also as individuals with goals and needs that should be nurtured.

## PUBLIC HEALTH

**Access to healthcare is a challenge for families across Louisiana.** In Baton Rouge, participants noted that it is particularly difficult to access dental care for children. In each conversation, participants shared that they felt like access to healthcare was inequitable in their community.

Waiting lists can be long to see a provider, and people with medicaid and medicare find that they have to wait longer than patients with private coverage. There is a desire to see more state supported facilities to fill in the gaps that have been left by private providers. The expansion of healthcare in the state has helped people get affordable healthcare but now we





*“The systems that are extremely complicated. These are systems that are supposed to help us like the Health, Education, Welfare system.... And then how we are treated and handled. And the systems do not represent the populations they serve. We need more people to speak other languages and live in the communities. And pay the people in the front more so they treat us better.... People should not be one paycheck away from being in the same system they are working for”*

**-PARTER ADVOCATE, LATINO NONBINARY HAMMOND, REGION 9**

need to ensure that the infrastructure is there to fully support accessing services and care. In New Orleans, participants noted that in the past there were community health clinics and hospitals that took patients regardless of their ability to pay, ensuring that community members were able to access care. Recently, many of these clinics have closed or have been sold to private companies making the services inaccessible to the community members that are looking for health care. Investments in the healthcare infrastructure and workforce are critical to ensuring that people can access healthcare across the state.

In 2016, Louisiana became one of the few Southern states to expand Medicaid with

about 500,000 adults taking advantage of this program. Though Louisiana remains at the bottom of many health indicators on a national level, Medicaid expansion and access to care has been very helpful both to community members and to the state economy. Across the nation, states that did not have medicaid expansion have had to close more rural hospital and health care centers.<sup>2</sup> Though Louisiana is still experiencing capacity constraints within the healthcare system, health insurance access is no longer one of the concerns raised by community members.

Louisiana continues to have one of the highest rates of food insecurity in the nation with 18% of children living in households that experienced food insecurity between 2010-2021.<sup>3</sup> With the absence of community center programs, many opportunities for free meals for children have disappeared. Though many children qualify for free or reduced school meals, this program should be extended to include more children to ensure that all kids have the energy to participate in classes and achieve their best work. There are other places that provide meals such as churches and community organizations in the absence of more centralized programs, but food insecurity remains a challenge for families across the state.

<sup>2</sup>America Hospital Association, “Rural Hospital Closures Threaten Access” <https://www.aha.org/system/files/media/file/2022/09/rural-hospital-closures-threaten-access-report.pdf>

<sup>3</sup>Kids Count Data Center, “Children Living in Households That Were Food Insecure at Some Point During the Year” <https://datacenter.aecf.org/data/tables/5201-children-living-in-households-that-were-food-insecure-at-some-point-during-the-year#ranking/2/any/true/2097/any/11675>



## BUILT ENVIRONMENT



In each of the community conversations, **participants shared a number of physical infrastructure improvements that they would like to see in their communities that would support healthier outcomes.**

This included more walking trails and green space, better street lighting to make it safer to be outside and drive at night, creating walkable neighborhoods to connect people to resources without needing a car, transit systems that serve communities, and addressing blight.

These investments in underserved communities can make people feel more comfortable, improve safety outcomes, and provide a sense of place in neighborhoods where people feel disconnected.

*“We need investment in our areas. All types of investment businesses, state, city, schools. Heck, where are the street lights? Can we have a street light?”*

**-BLACK WOMAN, AGE UNKNOWN  
NEW ORLEANS REGION 3**

## COMMUNITY SAFETY

*“Much of the time I feel like an afterthought or a box that needs to be checked. Hard to feel whole when you feel like that. At my school, I lost three classmates last year to gun violence and two in my community. All I hear about is violence in big cities. We have beaucoup violence in small towns too”*

**-BLACK, BOY 16, MONROE, REGION 8**

Participants discussed the impact of drugs, violence, and criminalization on communities.

**Children are witnessing violence in their communities and there are few resources to address the resulting trauma.**

The resulting criminalization impacts families when loved ones are incarcerated but the incarceration does not fix the underlying factors that have led to drug use, gun violence, or mental health challenges. Despite some criminal justice reform in recent years, Louisiana's incarceration rate remains one of the highest in the nation with Black men being incarcerated at a disproportionate rate.<sup>4</sup> This high rate of incarceration is not keeping communities safe. Under investment in crucial resources such as housing, healthcare, quality jobs, and more are keeping communities from safety.

Community members shared that they need resources to address challenges posed by gun violence, drug use, and other crimes that do not result in increased police presence or incarceration, particularly for children.

<sup>2</sup>Prison Policy Initiative, “Where People in Prison Come From: The Geography of Mass Incarceration in Louisiana” <https://www.prisonpolicy.org/origin/la/2022/report.html>

## SCHOOL SYSTEMS

**In New Orleans specifically, participants shared frustration with the school system and in particular with the charter school system.** Parents and community members do not feel like the schools are serving the students or the families. Many children have experienced significant trauma, the curriculums being taught are not trauma informed, and schools punish children for behavior instead of supporting them, even from a very young age.

Students often do not attend the schools nearest to them because of the system that is now in place. This results in kids spending hours a day traveling to and from school and making it difficult for parents to engage with the school on a regular basis. Parents are struggling to connect with schools and teachers because they are not in close physical proximity. The lack of neighborhood school systems exacerbate a lack of community connection that many experienced when they were growing up.

Despite what are often good intentions, many of the schools are not helping kids reach grade level skills. Test scores are low and many students do not finish high school. These outcomes are a result of a number of intersecting factors but families do not feel like they are being involved in finding solutions.



## COMMUNITY ENGAGEMENT

Community participants in Alexandria raised their concern that there continue to be research projects and conversations hosted by community partners that are extractive, take community ideas and concerns, and then programs and the partners are not seen again and the programs are not realized. **Many community members feel like they have been burned by people in power who over promise and under deliver.** As we conceptualize what programs and strategies look like for Louisiana, there must be deliberate relationship building and continued community involvement to both create the most successful programs and to rebuild trust that has been eroded over decades of intentional and unintentional marginalization.

In addition to participating in this project, participants expressed wanting more access to local and state government. There are barriers to accessibility including language access, having to appear at events in person, and processes that can be confusing. Additionally, many people are not aware of opportunities to engage with decision making processes from school board decisions to city government. This lack of transparency upholds the status quo or causes already vulnerable communities to lose power.

One of the key takeaways from these conversations was a desire from communities to remain engaged in decision making processes. There are numerous opportunities for state and local investment to support better childhood and family outcomes and community members are eager to guide that decision making process. Other key takeaways include

- Integrate community into the decision making and design making of the programming. It's important for the community to own and be leaders of the work.
- Invest in the local “gems” and build the infrastructure and capacity needed to within sustain the programming and change we seek.
- Consistently gather and implement community input in the process
- Center the needs of the most disadvantaged in your programming or system design
- Account for the inequities of a particular community. For example, has there been a recent natural disaster or collective community trauma that the community experienced. The needs of South Louisiana will be different than North Louisiana or rural vs. urban area
- Track the progress and replicate!
- Less bureaucratic system

***“Many of the resources are out there but we just do not know about it. I learned more attending these sessions than I have in a while. I can’t access what I do not know. In rural areas we don’t get any information until we go to the hospital or medicaid office and then the deadlines pass. ”***

**-WHITE WOMAN, 36, BOSSIER REGION 7**

## COMMUNITY RECOMMENDATIONS

In addition to programming, policies that advance equity in communities such as affordable housing (in their current communities), childcare, living wages, paid leave, quality education, early care and healthcare. **Achieving community whole health is no easy feat and will be a continuous process. This will require an equity based approach that will put most affected communities at the center.** To start, decision makers need to be intentional about addressing both past and current conditions. The persistence of people living in neglected places plagued with extreme concentrated poverty and pollution was overwhelmingly cited as the reason why communities are experiencing deep trauma. Until we address these major concerns, many of the recommendations will not work.

- Resource Navigators- Across the state, residents overwhelmingly intensified the need for a navigator to aid with maneuvering resources and information. These navigators are needed in the community and should be able to meet the community where they are instead of the community having to come to them. For example, community health worker model or power coalition canvassers model
- Care Centers for mental health and community care needs with violence disruptors and non police forms of mental health care. Community healing and conversations need to happen when trauma and harm happens. People need to be trained in restorative approaches to care and healing
- Streamlining systems and making sure they work together. Information being shared within systems and qualifying for multiple benefits or resources. For example if you receive SNAP. You should automatically receive CCAP.
- There is existing infrastructure in communities that needs to be leveraged such as churches and centers
- Parent and caregiver resources and classes
- Job and skills training

*“There are so many bright spots here in our communities. People serve as natural resource navigators. My church established a program where they just help us figure out these systems. You need help with medicaid or medicare- call this person. You need help with mental health support because you are a victim of gun violence called this person. **And the state should know that my church does that**”*

**-BLACK MAN, 60, LAFAYETTE REGION 4**