



Su Casa is the primary provider of social services, case management, family reunification, education, and health promotion services to the Hispanic/Latino community in Greater Cincinnati (Figure 1). The mission of Su Casa is self-sufficiency for the immigrant community that comes to the U.S. looking for a better way of life for themselves and their families.

Figure 1: Su Casa Hispanic Center Services

Adopt a Family	Christmas Program	
Case Management & Assistance for Immigrant Families	Comprehensive services for complex cases	
Educational Services	 English for Speakers of Other Languages (ESOL) Classes School-based Tutoring Language Exchange Beginner SPanish Vacaciones Útiles (8-week virtual summer program for low-income Hispanic/Latino children entering 1st to 5th grade) Individualized Service Planning Referral for Other Services 	
Emergency Assistance Services	 Needs Assessment Notary Services Benefits Application Assistance Employment Resources Domestic Violence Referrals Connections to Medical Homes Connections to Dental Homes Connections to Vision Centers Referrals to Mental Health Services Community Police Relations 	
Family Reunification	Comprehensive services for complex cases	
Health Promotion Classes	MADRES	

	 Buckle Up for Life Cribs for Kids Nutrition Classes for Children & Adults Research Project 	
Health Promotion Outreach	Monthly Health Days3 Annual Health Fairs	
MARCC ID Drives	The Metropolitan Area Religious Coalition of Cincinnati Identification cards to help undocumented people, people experiencing homelessness, those released from prison or anyone without traditional government identification obtain photo ID cards.	
Trafficking Victims Assistance Program	Case management for victims of human trafficking	

As an organization, Su Casa addresses several SDOH that face the Hispanic/Latino community in the greater Cincinnati area. For example, they provide health promotion outreach events and education classes to improve health and education. They create a supportive community, led by members within their community, in order to foster trust and build social support.

The COVID pandemic limited Su Casa's ability to see their clients in person, especially in the office. This hindered our ability to meet with the community. However, Su Casa still held outreach events and provided their primary services despite these COVID challenges. Their main challenge was encouraging vaccination within the

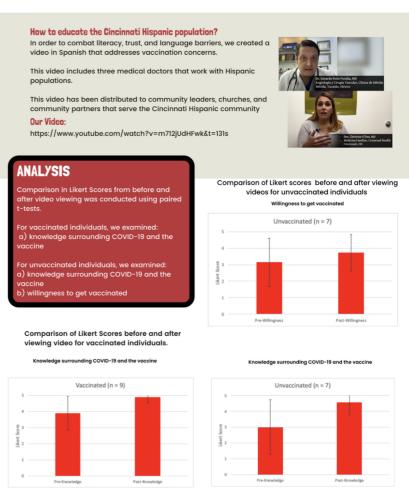


Figure 2: Overview of LC 13 Service Project, 2021-22

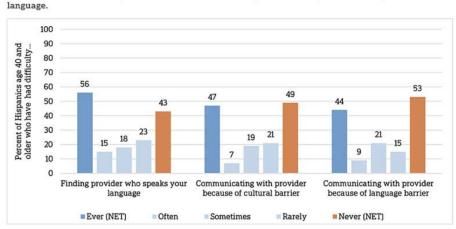
Hispanic/Latino community, a challenge further complicated by limited health literacy and trust in the health care system.

Our project with Su Casa addressed the SDOH's of Health Literacy and Language Barriers, by focusing on educating the local Spanish-speaking population about the various COVID-19 vaccines and why getting vaccinated is important. We addressed these SDOH's by working with Spanish-speaking physicians that serve this community already – we featured them in a short video that explained what COVID is, what the potential symptoms and risks of getting COVID are, and compared these risks with the risks and benefits of the vaccinations. We then showed the video to clients at Su Casa events, and gave them pre- and post-surveys to assess their knowledge about the vaccines and their willingness to get vaccinated before and after watching the video (Figure 2).

COVID impacted our service-learning experience as students by limiting our connection with our community partners. Virtual communication became a difficult barrier between us and our community partners. However, we were able to volunteer at 3 outdoor health fairs. This was a great way for us to safely be amongst the Hispanic community in Cincinnati.

Some of the greatest challenges to providing equitable access to quality healthcare in the Cincinnati community are poor health literacy and limited English proficiency (Figure 3)¹. For example, Su Casa serves patients without documentation who may fear legal repercussions in seeking medical care. In our experience working with Su Casa, there were individuals who wanted to use names linked to their employment records to prove their vaccination status to employers. However, these vaccination cards could not be used in their personal lives, as the names often did not match. This fear of legal repercussions was further exacerbated by limited English proficiency and unclear government policy; without community outreach through Su Casa, there would be little access to knowledgeable, Spanish-speaking providers with insight into these fears.

More than half of older Hispanics have had trouble finding a health care provider who speaks their



Question: How often have you had difficulty finding a health care provider who speaks your language, whether that provider is for yourself or for a loved one? How often have you had difficulty communicating with a health care provider while getting care for yourself or a loved one because of a [ITEM]?
Source: AP-NORC Long-Term Care Poll conducted March 2-29, 2017, with 1,341 adults age 40 and older nationwide, including

Figure 3: Older Hispanics with Trouble Finding Spanish-Speaking Providers

As it relates to the COVID-19 pandemic, there is a lot of misinformation circulating among the Hispanic/Latino Cincinnati community. This misinformation stemming from poor

health literacy and limited English proficiency. Individuals were unaware of the COVID-19 vaccine side effects, and many were also unsure of the proper dose regimen to follow. Speaking with community members revealed that some individuals received multiple vaccines types (i.e. Moderna, Pfizer, Johnson & Johnson) as opposed to a first and second dose of the same one. All of these factors have impacted the vaccination rates for Hispanics/Latinos in Ohio – although this population does have higher rates of vaccination than other ethnicities in Ohio, they are still not as high as we would like them to be (Figure 4)¹.

Figure 4: Vaccination rates in Ohio by Ethnicity (as of 08/18/22)¹

	Ohio	Hamilton County
Not Hispanic or Latino	55.57% (6,234,533)	58.73% (462,997)
Hispanic or Latino	63.72% (299,843)	69.95% (20,341)

Furthermore, the Hispanic/Latino community has a disproportionately high rate of infection and poor health outcomes related to COVID-19. Some of the reasons for this include that this community tends to live in close quartered spaces and have working class jobs that cannot be done virtually or from home, so social distancing and other precautions were not an option for these people.

There is an increased need for culturally competent physicians, access to live interpreters² (as opposed to digital methods), access to mental health services in Spanish³, and legal services⁴ among the Hispanic/Latino community. Privacy concerns are a frequent concern, and providing information that address patient risk concerns about immigration status.⁷ Furthermore, given that the COVID pandemic has persisted for the last 2.5 years, there is less of a safety net for vulnerable communities; unfortunately, the recent inflation has placed higher pressure on the same populations.

Moving forward, future groups can provide support in a variety of ways. For example, we or future students can write a letter to the city council and the governor of the state requesting an allocation of resources where our community partner and us have determined to need support. Su Casa provides multiple levels of support, and the Cincinnati city government referring people to Su Casa can greatly increase the positive effect of Su Casa. We can

¹ Ohio Department of Health. (2022, August 18). *COVID-19 Vaccination Dashboard*. Retrieved August 18, 2022, from https://coronavirus.ohio.gov/dashboards/covid-19-vaccine/covid-19-vaccination-dashboard
² Jacobs, E. A., Lauderdale, D. S., Meltzer, D., Shorey, J. M., Levinson, W., & Thisted, R. A. (2001). Impact of interpreter services on delivery of health care to limited-English-proficient patients. *Journal of general internal medicine*, *16*(7), 468–474. https://doi.org/10.1046/j.1525-1497.2001.016007468.x
³ Cabassa, L. J., Zayas, L. H., & Hansen, M. C. (2006). Latino adults' access to mental health care: a review of epidemiological studies. *Administration and policy in mental health*, *33*(3), 316–330. https://doi.org/10.1007/s10488-006-0040-8

⁴ Escarce JJ, Kapur K. Access to and Quality of Health Care. In: National Research Council (US) Panel on Hispanics in the United States; Tienda M, Mitchell F, editors. Hispanics and the Future of America. Washington (DC): National Academies Press (US); 2006. 10. Available from: https://www.ncbi.nlm.nih.gov/books/NBK19910/#

advocate on behalf of our community and the specific issues they are dealing with. Specifically, language barriers can increase difficulties the community is already facing. It is difficult to increase outreach and education about COVID-19 and the vaccines with language barriers. Because of this, extra care and resources are needed to make sure this vital part of our city is not forgotten. Resources online provided by the Cincinnati city government need to include variations in different languages.

In addition, we can discuss public transportation for Su Casa clients without personal vehicles to commute to work, medical appointments, community events, etc. This problem can make it difficult for the community to maintain their health, form relationships with their community, and provide for their families.

Another barrier this community faces is with legal identification. Many Su Casa clients are undocumented immigrants, and without proper identification, it can make it difficult to access many social services available in Cincinnati. The MARCC (Metropolitan Area Religious Coalition of Cincinnati) ID is a local form of identification that is recognized by several organizations such as the Cincinnati Police Department and Hamilton Co. Sheriff Office⁵. While this is not a true form of legal identification, it still functions on a local level to establish the identity of undocumented individuals. We could advocate to the local Cincinnati government to expand the scope in which this ID is accepted to provide Su Casa clients with more access to social services and a greater sense of security when traveling around town.

In particular, certain barriers, for example language barriers, can worsen mental health issues brought on by COVID-19 pandemic. Advocacy in this area is critical to improving health incomes in this community. There is also a lack of Spanish speaking psychiatrists in the Cincinnati area. In addition, advocacy and resources for more "sanctuary" locations where immigrants can access healthcare resources without fear of deportation, is critical. These locations should include preventative health care services, information on other healthcare resources, and basic medical or hygiene supplies.⁶

⁵ "Metropolitan Area Religious Coalition of Cincinnati." *Metropolitan Area Religious Coalition of Cincinnati*, 19 Aug. 2022, marcconline.com.

⁷Tan-McGrory A, Schwamm LH, Kirwan C, Betancourt JR, Barreto EA. Addressing virtual care disparities for patients with limited English proficiency. *Am J Manag Care*. 2022;28(1):36-40. doi:10.37765/ajmc.2022.88814

⁶Shin TM, Ortega P, Hardin K. Educating Clinicians to Improve Telemedicine Access for Patients with Limited English Proficiency. *Challenges*. 2021; 12(2):34. https://doi.org/10.3390/challe12020034