



Public health advocacy: Leveraging the immigrant experience

"...Being myself Latina, and having grown up undocumented, being on DACA now, and having all these opportunities to support those various intersections of our community, and do it through policy and sustainable systemic change." – Secia Aquino

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Welcome to Code WACK!, where we shine a light on America's callous healthcare system, how it hurts us and what we can do about it. I'm your host, Brenda Gazzar.

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This time on **Code WACK!** Who is **Dr. Secia Aquino** and how has her experience as an immigrant informed the work she's doing with the **Latino Coalition for a Healthy California**? What is the organization's mission and what role did it play during the devastating COVID pandemic to help keep people alive? To find out, we interviewed Dr. Aquino, executive director of the Latino Coalition for a Healthy California, the State's leading policy organization advocating for health equity in the Latine community. This is the first episode in a two-part series.

Welcome to Code WACK! Dr. Aquino.

Aquino: Thank you so much. I'm so excited to join.

Q: We're so excited to have you. First tell people a bit about yourself. What's your personal background, and how did you become interested in the issue of Latino healthcare?

Aquino: Of course. Well, this is very personal to me. The fight for Health Justice that we do today starts with a young girl back in Guatemala, Central America, where I was born. I was born to a working class family in Guatemala. My mother was a dentist there. My dad was a businessman, a family very close-knit, close to God, and a value that was instilled in myself and my family was always to help others and to put your own needs aside, to look out for the well-being of others and especially communities that were suffering injustices. And so I grew up going out to [the] outskirts, pueblos in Guatemala, and my mom would provide free dental care. So I grew up with a very defined passion for helping and standing up for those that didn't have the resources or the infrastructure that they needed and deserve to be well.

Q: Got it. And what about when your family moved to the United States?

Aquino: I grew up undocumented in California. A lot of the infrastructure and the safety net changes that I now advocate for, I personally saw and experienced when we moved here, we were unhoused. We didn't have a place to stay. For the first couple of months, we stayed with a family friend who had a mobile home in Gardena. For those first few months, our young family slept in a one bedroom. my mother, who was expecting my two other sisters, and myself, would sleep on the bed. My dad would sleep on the floor. He was working odd jobs to be able to provide for us and it's the fastest that I've seen my parents age. And just the difficulties that we experienced from putting food on the table to worrying about how to pay the rent or living in less than human conditions. But above all of that, we were together and we were safe.

It was basically a very early training in public health and in systemic change, right? Because I was able to experience what it's like to be in need of food stamps, to have access to the WIC program, and for the WIC program to put food on the table, and for a young immigrant family to have a little bit of extra milk, a little bit of extra cereal to share with the neighbor down the street who didn't have anything to put on the table that day. And so, you know, that same value system of giving, of providing, of supporting, helped us create this strong infrastructure and network in our new home in Gardena.

I was, of course, the first in my family to attend a U.S. university and graduate successfully. So it was a big celebration, not just for my family but my community.

Nice.

Aquino: So I started working as a promotora at the USC Dental school. I fell in love with public health. I started looking at population health because of its impact. So I always loved people, right? And so for me, I had this decision between going into research or practice based doctorates, and I, while I love and appreciate research so much, I wanted to be in a position where I could be more hands on, where I would be working with community members and working with elected officials and more of the Public Health Practice. And so I began my journey into a formal doctoral degree in public health at Harvard University, and I was off to the east coast for the first time. I started my journey. It was amazing. It was a beautiful experience. Again, [I] interacted with another system that wasn't built by us or for us. And I set out to create change.

Three years later, I was graduating with my Doctorate in Public Health. At the time, I was facing the harsh reality of a Trump presidency and the very negative rhetoric that we heard in that time, and I knew that I needed to come back to California to fight back, and I started working at the California Immigrant Policy Center, overseeing their health and safety net portfolio, and I fell in love with the work that we were doing. And I think something that kept coming up for us in that immigrant space was just the need for more dedicated and intentional work for the Latino community itself.

Uh-huh. And what did you do next?

Aquino: This amazing opportunity came up to become the deputy director the Latino Coalition for a Healthy California so, you know, I applied, made my shift over, and it was an honor to be at LCHC during the pandemic, being able to put into practice all that Public Health Training right, to bring into the room that community wisdom, being myself Latina, and having grown up undocumented, being on DACA Now, and having all these opportunities to support that those various intersections of our of our community, and do it through policy and sustainable systemic change. And so it was a privilege. And then about two years ago, I was I had the huge honor to step into the executive directorship role.

Q: And what was your vision for the organization?

For me, my vision for the Latino Coalition for a Healthy California was to really own our power. Latinos in California make up 40% of the population. That's 16 million Latinos and indigenous community members. We are a powerful part of California. And you know, we contribute over \$83 billion in taxes. And so when we talk about health, when we talk about the economy, we're talking about Latinos. And so for me, it's really important that we create the policy and systemic change that will completely break those poverty chains and those poverty cycles that keep our communities unhealthy.

Wow. What a journey you have been on, my goodness. So I just want to clarify a couple things. How old were you when you immigrated to the United States?

I was 10 years old.

So why was the Latino Coalition for Healthy California created, and what is its main mission?

Aquino: Yeah, so the Latino Coalition for Healthy California was built over 30 years ago now, and the goal and the vision was to address health inequities

across California for Latino communities. We want to make sure that our communities have everything that they need to be well, to have dignity in the way that they live and that they have all the support that they need to live healthy lives.

Q: Yes, absolutely! You've led the Coalition for Healthy California for nearly two years, as you said, and were Deputy Director before that, when the COVID pandemic was in full swing. What was that like for you to be a leader of a nonprofit at that very critical time?

Aquino: Yeah, it was quite a privilege to be in a position to serve as a nonprofit leader, especially as a Latina, and as we know, COVID-19 and the pandemic was really hurtful for the Latino community and for communities of color. And you know, those of us in public health, it was very clear that this was going to be the case because these are exacerbated health inequities. These inequities didn't just pop up because of COVID-19. They had been at play for many, many years, and our communities have been systemically and historically underfunded and when, when you make a policy choice to keep certain communities underfunded and lacking the resources that they need to have full lives, you are, of course, going to see less than desired health outcomes. So both with acute issues, acute disease, but also long term chronic issues. You know, Latinos were not faring well. And so when we add to that a global pandemic, and we have a very acute case where, you know, the public health community was trying to figure out what to do right, and we had those months where we didn't have answers, and we didn't have a vaccine, and we had to very transparently, have very hard conversations with our community members across California who were asking us, what do I do? How do I get some support?

Q: How were community members reacting to the situation?

Aquino: People were fearful. We were also coming off a Trump era, or Trump presidency, and there had been a chilling effect that ... had led many community members to disenroll from life saving care, because of fear, not because they needed to disenroll. And so it was. It was really hard to see these various issues

intersecting and creating deeper, deeper issues for the community. And so what a lot of our work highlighted was a) utilizing and tapping into those trust and communication networks across the state. As Latinos really owning our power and owning what we're good at, right? Our tias, our abuelitas, you know, they know how to communicate. They know who needs to be connected with in this household or in this neighborhood, and what resources are available.

True.

So for us, it was really about activating that network, so that we could get the word out to community members. We ended up doing the very important work of translating and being the bridge from government directly into community, right? What are the resources? What is the latest information that we're hearing? Use your mask. Wash your hands. If you're sick, don't show up to work. This is where you can go get some support. Once the vaccines came, right, let's get vaccinated. Everyone needs to get vaccinated. Fighting back any fears or misinformation that was coming out about the vaccines. And, you know, also to the systemic items for many community members who work in very humble fields, they don't have PTO that they can take, right? They have to put food on the table. And so it was very difficult to be able to have those conversations around, 'okay, these are your rights as an employee and and your human rights as a person to take care of your health.'

Thank you Dr. Secia Aquino of the Latino Coalition for a Healthy California.

Do you have a personal story you'd like to share about our wack healthcare system? Contact us through our website at heal-ca.org.

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