In summer 2017, Southwest Health and Human Services (SWHHS) contracted with Wilder Research to conduct a community health needs assessment to identify the health needs and assets of prominent cultural groups in their 6-county region. Findings from this assessment will be used to inform the services provided by SWHHS and to help staff at SWHHS understand how to adjust or target their services to meet the health needs of these communities. For this study, Wilder Research conducted five focus groups with four cultural communities located in the Southwest region. Focus groups included individuals who are part of the American Indian (Lower Sioux), Hmong, Latino, and Somali communities in Southwest Minnesota.

The study was sponsored in part by the participating counties’ grants from the Minnesota Department of Health’s Statewide Health Improvement Partnership (SHIP), which aims to help Minnesotans live longer, healthier lives by reducing the burden of chronic disease. Additional funding from United Way of Southwest Minnesota made it possible to conduct a second focus group with Hmong residents. Community partners including the Lower Sioux Community Health staff, United Community Action Partnership, and individuals; Khou Lor, Tina Quinones, Samira Sheikh, and Kara Thul provided space and helped with recruitment for the focus groups.

Focus group participants were asked questions about their definition of health; what helps them to be healthy, and what makes it difficult to be healthy; as well as any suggestions they have for how SWHHS can support health in their community. They were also asked specific questions about physical activity, healthy eating, and tobacco use.

This report summarizes findings from a focus group conducted in Marshall, Minnesota with 11 individuals from the Latino community. Four participants were male and seven were female.

### Definition of health

Southwest Health and Human Services defines health and wellness as a state of complete physical, mental, and social well-being rather than merely the absence of sickness. Focus group participants were invited to share what being healthy means to them.

Participants talked about the activities that make people healthy, like having a balanced and nutritional diet, exercising regularly, drinking a lot of water, and getting enough sleep. People also talked about avoiding drugs and alcohol. Being healthy allows people to be active and shows the degree to which one respects themselves and their body. Some participants described aspects of health in other ways.

> Good health is important. With good health I am able to stay active. Also, I think good health is to be able to laugh.

### Primary health concerns

Participants shared a variety of health concerns in the Latino community. The largest number of participants mentioned diabetes and depression. Other concerns included Alzheimer’s disease and high cholesterol.

Two participants discussed their personal challenges and successes related to diabetes and talked about what they have learned about eating a healthy diet from their doctor.
I had diabetes, but after following a diet I don’t have diabetes any longer. I think it was pre-diabetes. The doctor told me that I could eat everything, but in moderation. It is knowing how to eat and the amount of food I eat [that helps].

Participants discussed depression in their community, particularly for middle-aged people and school-aged children.

I think depression is brought on by financial problems, work, and immigration situations. I think between 30 and 40 years of age it’s more predominant.

Two women in the group were concerned about depression among youth due to bullying and, for recent immigrants, challenges with adapting to a new environment and social landscape.

Depression among some of the school-age children could be brought by adaptation to the social environment as recent newcomers. I have wanted someone [government or human services organization] to come to town and address the problems and help Hispanic children. The need for help is mostly for children. Children should be the focus of help for depression.

One participant felt that men with a family (wife and children) experience depression because of the long hours they spend working to support their family and, as a result, the limited amount of time they have to spend with their family.

**Barriers to health**

When asked about what makes it difficult to be healthy, participants named a number of barriers. One participant said that their community lacks education about nutrition and that many people do not have the information or discipline needed to be able to choose a healthy diet. Additionally, people have formed bad habits based on what they were fed as children. Working long hours can also make it difficult to make healthy choices.

While some people in the Latino community do not have health insurance, many of those who have health insurance said that it is not accepted at clinics nearby. This is particularly true at dental clinics.

Accessing transportation to get to a medical appointment is also a challenge for many people in the Latino community. Also, participants stated that there are many employers that do not allow time off or a flexible work schedule for doctor visits.

Although there is a place that provides mental health services, there are no providers that have Spanish speaking therapists.

Also, lack of knowledge of English or not knowing how to read and write [is a barrier]. Medical appointments could be hard or impossible to do.

According to participants, people in their community often wait too long to address health issues, which leads to health problems that could have been prevented.

**Resources and supports**

When asked about what resources or supports people in the Latino community use to be healthy and where they get health-related information, most participants mentioned specific health care facilities.

- Western Mental Health Center
- Avera Marshall Regional Medical Center
- Open Door Health Center
- Johnson Family Dental Care
- AMC Health (known by community members as La Clinica)
- School nurse

Information about health is given by doctors. Also, there is some information given by SWHHS and WIC where some pamphlets are handed out, but in English. There is not a community clinic. The Johnson Family Doctor helps, but is limited to once a week.
**Physical activity**

According to participants, group activities, like soccer leagues, group aerobics, or group bike rides, make it easier for people to participate in physical activity. One person said that owning a bike makes them more likely to go on bike rides.

Challenges to getting exercise include lack of time, often due to long work hours at local factories where many Latino people are employed, general motivation/willingness, and stress. One participant felt that participating in group activities would help people who are experiencing depression.

To increase physical activity in the Latino community, participants said it is helpful if activities are free or low cost. Additionally, people are more likely to attend information sessions and other events if the information is presented in Spanish and by a Spanish speaker.

*One of the problems is the language. They need to communicate in Spanish.*

**Healthy eating**

Participants agreed that it is healthier to cook and eat at home rather than out at restaurants. Planting their own vegetables or buying produce from farmers markets was one way participants felt they could improve their eating habits. Most participants focused on individual-level changes rather than environmental factors to increase healthy eating, however, some participants said that food support from WIC, a Special Supplemental Nutrition Program for Women, Infants, and Children, has helped their family access healthy foods.

*WIC helps. With food stamps you can only buy healthy food. We have also the farmers market.*

Frequent eating at restaurants or fast food places and lack of time for grocery shopping and cooking are the main factors that make it difficult for participants to have a healthy diet.

---

**Tobacco use**

Participants were well aware of the harmful health consequences of tobacco use. Tobacco use was described as affecting lungs and causing cancer. Several participants described the negative effects on appearance (e.g., causes wrinkles) and the unattractive smell of those who smoke. Secondhand smoke was also understood as detrimental to one’s health.

*The mouth of smokers smell, it affects the lungs, and from a religious point of view, the body is God’s temple. Smoking (cigarettes or marijuana) also affects mental health.*

People are seen smoking most frequently outside of bars, dance halls, the work place, and the casino. Most people said they mostly see young people smoking, but some felt that older folks smoke as well.

Addiction, the lack of advice to quit, and internal motivation make it difficult for people to quit according to participants.

Participants shared a lot of ideas about how to prevent youth in the Latino community from using tobacco. Some participants suggested providing educational programs at schools and emphasizing the importance and benefits of extracurricular activities, while others suggested fear-inducing strategies (e.g., showing the negative consequences of tobacco use: cancer, unattractive appearance, etc.)

*Less number of commercials where smoking is shown as glamorous.*

*[Involvement in] sports, different activities.*

*Help make young people feel good about being in sports.*

According to participants, e-cigarettes are not commonly used in the Latino community.
Recommendations

Based on findings from this focus group, Southwest Health and Human Services might consider:

- Working with local employers to implement workplace wellness programs.
- Negotiating with local health clinics to accept government insurance.
- Hiring Spanish-speaking health care professional and community health workers.
- Offering free or low-cost group fitness activities.

For access to other reports, visit http://www.swmhhs.com/public-health-assessment-and-planning/