

## RECERT Community Conversations

Experiences and Needs of Cultural and Ethnic Minority Communities  
around COVID-19

Sponsored by: Racial Equity and  
Community Engagement Response  
Team (RECERT)

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## Executive Summary

Ramsey County's Racial Equity and Community Engagement Response Team (RECERT) funded 15 community partners to conduct conversations in their communities to gather input and knowledge regarding the communities' perceptions of COVID-19, and what is needed in order to slow the spread of COVID-19 among the racially, ethnically, and culturally diverse communities in Ramsey County during the pandemic. This work happened in conjunction with two other RECERT funded projects, Trusted Messenger and Cultural Community Connector, where partners were funded to work on one, two, or three of these projects.

A total of 49 conversations were held in multiple cultural communities in fifteen different languages and with over 1,500 Ramsey County residents between the months of November 2020 and February 2021. Community partners were provided with a conversation guide with a set of seven required and three optional questions.

## Findings

Those who attended conversations believe that COVID-19 is a huge issue in their community, both for the health and economic impacts, and are active in taking precautions for themselves. However, there is concern that many in their community may not be treating COVID-19 as a serious issue and hold accurate knowledge about COVID-19, nor are taking adequate precautions to protect themselves and their loved ones.

A number of factors impact taking protective steps to prevent the spread of COVID-19:

- Barriers to obtaining accurate information about COVID-19.
- Misinformation and belief that COVID is not real or overexaggerated.
- Stigma around positive COVID status.
- Distrust in healthcare systems, including fear of going to the hospital.
- Barriers in access to personal protective equipment and sanitation supplies.
- Barriers to testing, quarantine, and vaccination.

Key cultural considerations that should inform any education or intervention strategies include:

- Role of faith and spirituality
- Use of traditional medicines
- Community-centered cultural values

Cultural and ethnic minority communities are at additional risk for contracting COVID-19 due to:

- Large, intergenerational households
- Many are frontline workers and lack employee protections
- Reliance on public or shared transportation

The COVID-19 pandemic has had significant impact on communities and have been compounded by preexisting factors, including poverty, systemic racism, and historical trauma. Communities have been impacted in the areas of:

- Unemployment
- Difficulty paying bills

- Housing instability
- Food insecurity
- Distance learning impact on education
- Mental health concerns including uncertainty and fear, loneliness, anxiety and depression
- Family issues and grief and loss
- Concern for youth and elders
- Lack of access to community support and cultural traditions that would normally help community members with these issues.

Access to help during COVID-19 pandemic has increased but it is not enough. Even when resources are available, many communities face barriers in accessing these resources, including language barriers, lack of awareness of available resources, reluctance to seek out help, ineligibility due to legal status, and strict eligibility or documentation requirements.

Other key findings:

- Communities have strengths, assets, and resilience and have been helping each other during the COVID-19 pandemic.
- Communities want to play a role in offering support to one another and with spreading information and knowledge.
- Distrust in government and issues of systemic racism and historical trauma need to be addressed.
- Many communities face barriers to accessing Ramsey County services.

Communities want Ramsey County to:

- Continue to fund linguistically appropriate communication about available resources and COVID-19 information
- Provide information and resources through trusted community leaders and organizations
- Provide more financial support
- Provide culturally specific health care providers
- Take a stronger role in COVID-19 protections education and enforcement
- Invest in ongoing engagement with their communities and provide opportunities for communities to advocate for themselves.

## Recommendations

These findings lead to recommendations in three key areas.

### **Take steps to reduce the spread of COVID-19 in cultural and ethnic minority communities.**

- Ramsey County should continue to fund messaging and engagement campaigns that will increase knowledge and proactive behaviors within communities.
- Develop resources for individuals and families at risk due to living in large multigenerational households and working in jobs (and use transportation) where exposure to COVID-19 risk is high.
- Provide culturally-specific COVID-19 clinics for testing, vaccination and treatment.
- Provide free masks, other PPE equipment and sanitization supplies.

- Recognize and engage with community strengths and their interest in helping to support their community by providing COVID-19 education and advocacy as well as hands-on support to members of their community.
- Facilitate safe ways for communities to stay connected.

**Continue to support communities to mitigate impact of pandemic.**

Communities would benefit from continuing resources to minimize the economic, educational, and wellness impacts of the COVID-19 pandemic.

- Continue to provide and expand financial assistance resources, especially in the areas of housing and food.
- Continue to provide employment support.
- Provide resources for community mental health, grief and loss as well as cultural wellness and healing support.
- Support efforts to address family stress with distance learning and other educational concerns.
- Need for linguistically appropriate services and communication
- Engage trusted community organizations to provide direct service, education about and connection to available resources.
- Improve access to culturally specific services and health care providers.
- Facilitate grief/loss and community healing opportunities.

**Build relationships and trust with communities and recognize and repair past harm.**

- Address barriers to accessing Ramsey County services, including language access, customer service and reducing documentation barriers.
- Continue active ongoing engagement with individual cultural communities that is focused on relationship building and shared power with community. Directly address historical racism and trauma many communities have experienced with Ramsey County and other systems.

## Introduction

Ramsey County's Racial Equity and Community Engagement Response Team (RECERT) funded 15 community partners<sup>1</sup> to conduct community conversations in their communities to gather input and knowledge regarding the communities' perceptions of COVID-19, and what is needed in order to slow the spread of COVID-19 among the racially, ethnically, and culturally diverse communities in Ramsey County during the pandemic. This work happened in conjunction with two other RECERT funded projects, Trusted Messenger and Cultural Community Connector, where partners were funded to work on one, two, or three of these projects.

A total of 49 conversations were held in multiple cultural communities between the months of November 2020 and February 2021. Table 1 shows the number of conversations held by community partner, including total Ramsey County residents reached and the targeted community for each partner.

Community partners were provided with a conversation guide with a set of seven required and three optional questions. Partners could also add their own questions. A copy of the conversation guide can be found in Appendix A.

## Data Analysis

Documentation provided from the community partners on each of the conversations was imported into Dedoose, a qualitative analysis software. Both inductive and deductive analysis was used to code the documentation and identify patterns and themes across conversations and communities.

## Limitations

The number of conversations held in each cultural community and the level of documentation of the conversations varied widely. Therefore, there was more information to analyze for some communities than of others. In addition, not all partners used the interview guide, which made it harder to compare responses across communities.

In addition, it is likely that the persons who chose to participate in these conversations were more likely to be knowledgeable about COVID-19 and supportive of Ramsey County's response efforts and voices of persons who hold different beliefs about COVID-19 are limited.

Finally, since several months may have passed between the time of some community conversations and the timing of this report, community perceptions and experiences may have evolved or changed based on the rapidly changing COVID-19 pandemic and response.

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<sup>1</sup> A sixteenth partner was engaged to conduct community conversations but was not able to complete them due to circumstances outside the partner's control.

**Table 1. Community Conversations**

| Partner Organization                   | # Conversations | Total Reached | Language(s)                           | Communities                |
|--|-----------------|---------------|---------------------------------------|----------------------------|
| Hmong American Partnership             | 5               | 80            | Hmong, English                        | Hmong                      |
| St. Paul Promise Neighborhood          | 3               | 45            | English                               | Multi-racial               |
| Project Restore MN                     | 1               | 70            | English                               | Mostly Black/ADOS-youth    |
| The Black Tech Guy LLC                 | 3               | 43            | English                               | Black/ADOS-youth           |
| Restoration for All, Inc.              | 3               | 107           | Yoruba, Pidgin English, English, ASL  | West African               |
| Hmong 18 Council                       | 2               | 59            | Hmong, English                        | Hmong                      |
| Run Like Harriet                       | 4               | 543           | English                               | Black/ADOS                 |
| HACER                                  | 6               | 53            | Spanish                               | Latino/x                   |
| Vietnamese Social Services             | 5               | 66            | Vietnamese, Karen, Karenni            | Vietnamese, Karen, Karenni |
| Minnesota Dawah Institute              | 4               | 45            | Oromo, Somali                         | East African               |
| McLemore Holdings                      | 3               | 53            | English                               | Black/ADOS-youth           |
| Ark of Covenant Ministry               | 2               | 77            | English, Pidgin                       | West African               |
| JR Broadcasting and Native Roots Radio | 1               | 14            | English, Dakota, Ho-Chunk, and Ojibwe | Native American            |
| Black Civic Network                    | 3               | 164           | English                               | Black/ADOS, African-born   |
| African Network for Development        | 4               | 83            | Pidgin English, English               | West African               |
| <b>Total</b>                           | <b>49</b>       | <b>1,500+</b> |                                       |                            |

## Findings

This report summarizes the common themes that existed across most of the community conversations, reflecting most of the communities. Table 2 in Appendix B also includes a summary of findings by cultural group. Quotes are included throughout that shed light on each finding. The cultural group from which the quote came is also noted.<sup>2</sup>

### COVID-19 Beliefs and Behaviors

Those who attended conversations believe that COVID-19 is a huge issue in their community, both for the health and economic impacts, and are active in taking precautions for themselves. However, there is concern that many in their community may not be treating COVID-19 as a serious issue and hold accurate knowledge about COVID-19, nor are taking adequate precautions to protect themselves and their loved ones.

#### **Ongoing concern for community members not taking COVID-19 precautions**

Although following recommended COVID-19 precautions are happening by a good number of community members, there continues to be concern that too many community members are not taking COVID-19 precautions such as masking, social distancing, testing, or quarantining.

Comments about following COVID precautions.

*People staying out of each other's way, calling folks out for not wearing masks. Social distancing, people staying home or in the house.- Black/ADOS*

*COVID-19 education such as social distancing, hand washing, mask wearing is being shared broadly, even in the Hmong community in our spoken language.- Hmong*

*We avoid gathering within the community. We wear masks. We regularly disinfect our hands each time we go out.- Vietnamese*

However, others report that precautions, including wearing masks and not gathering in groups are not being followed by many in their community.

*We get together and don't wear masks, we don't even consider there's a pandemic, my family don't see it as a big issue, my family can fight it were all healthy, it's just a little virus.- Black/ADOS*

*People in their neighborhood do not wear masks, do not take precautions, and no signs tell people to wear masks.- SPPN*

*People ignoring guidelines and breaking COVID-19 rules and spreading the virus.- West African*

Many concerned that youth are not following precautions.

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<sup>2</sup> One partner conducted community conversations within a geographic area of Ramsey County, the St. Paul Promise Neighborhood (SPPN), rather than a specific cultural community. Quotes from these conversations are denoted with "SPPN."



*Worry that the youth were very reckless and would end up hurting themselves and their loved ones if they don't settle down and follow the protocols.- Black/ADOS*

*I feel like some of our young adults/teenagers think they are invincible, so they are letting their guards down. Then when they get infected, they go and infect their parents unknowingly. Young people think they can fight this virus and be okay, but they forget we live in multigenerational households where you can infect an elder adult.- Hmong*

*Also, the young adults who were termed not to be vulnerable seem to have had a carefree attitude violating the prevent measures and still meeting up with friends and partying.- West African*

There is concern that persons who are ill or have been exposed to COVID-19 are not getting tested nor quarantining.

*People are not getting tested.- Black/ADOS*

*We had relatives who were sick, and they refuse to go test. When parents got sick, they didn't test so we got sick.- Hmong*

*There is a fear to get tested. Some do not quarantine after testing and still go out.- Hmong*

*People are sick are scared of going to the doctor because they are scared of the results and what will happen.- Karen/Karenni*

And not all persons who test positive are sharing their positive status nor quarantining.

*People think that once they get better from COVID that they can take their kids out and about, even though the kids need to quarantine as well in case they are infectious but not symptomatic.- Latino/x*

*I know someone who had COVID but has refused to stay in quarantine.- Hmong*

## Reasons Why Precautions are Not Taken

Participants worried that precautions are not being taken for a variety of reasons, including lack of knowledge about the seriousness of the virus and how to limit exposure, active misinformation and distrust of government, and perception of it as a political issue.

### **Information is out there but not everyone is accessing it.**

Although conversation participants recognize that information is getting out there, not all access it and there are barriers to accessing accurate information.

### **Getting information**

*We get a lot of COVID-19 messages and information from both our community leaders, Ramsey county, MDH and CDC.- West African*

*I have a better understanding about the disease and its prevention and the election. We share news with each other.- Vietnamese*

*Community dialogs and awareness has increased about COVID.- Black/ADOS*

*When you have someone, who is educated they can share that information with family and elders who are not literate or who don't have access to information.- Hmong*

Communities are reporting that knowledge is being shared and people are taking precautions, but there are enough people in their community that do not have the knowledge, reject knowledge, and do not follow precautions to continue the risk in their communities.

Lack of information and misinformation is contributing to spread of virus in their communities.

### **Not getting information**

*Lack of proper knowledge about the virus amongst the people of my community.- West African*

*There is a lack of knowledge about COVID-19 and the ramifications that follow contracting the virus.- Black/ADOS*

*We don't seem to have enough information on this COVID-19 to protect ourselves.- Hmong*

*Lack of information. Community needs to be more informed so we can protect ourselves. Community misinformed, some people think you get sick by going to testing sites.- Latino/x*

### **Misinformation and belief that COVID is not real or overexaggerated**

A large challenge is the spread of misinformation and myths about COVID-19 that need to be actively countered in order to spread accurate information.

This misinformation can range from whether or not COVID-19 is a real and serious illness to conspiracy theories and myths and misinformation around how COVID-19 can be prevented or treated.

Some talked about the belief that COVID-19 is not real or is being over-exaggerated.

*Some people don't take the virus seriously and don't wear masks for social distance 6 feet apart.- Karen/Karenni*

*Many believe that COVID-19 is a hoax and are not respecting protective advices and PPE.- West African*

*Honestly, I think its fake- Black/ADOS*

*People do not believe yet that the virus exist. And that is a reason for which it is being spread. For many is like a joke. But until the tragedy reach us, it is too late.- Latino/x*

*COVID-19 is not that serious. I don't see any COVID fatalities within the Vietnamese community.- Vietnamese*

The amount of misinformation is also a concern.

*There is a lot of mis-information about how you contract the virus, how it spreads, and what measures people can take to protect themselves- Black/ADOS*

*Make sure that it's from a credible source. Inaccurate information makes more harm to Hmong elders than good. I think the Hmong news is great, but the wrong Hmong news is bad.- Hmong*

*Some YouTube channels give false information.- Hmong*

*I think language barriers is a big issue in my Karen community. It is concerning because we cannot and do not get reliable information. We get our information from Facebook and it is not reliable.- Karen*

*For us Hmong people, we are getting the wrong information among our community and that is hurting us.- Hmong*

*People in the community believe that there is an over exaggeration of the seriousness of the virus.- Black/ADOS*

*It's a big issue in that people hold conspiracy theories- East African*

*Most of our community's members knows that COVID-19 is real because many were affected, however due to some misinformation, some are still skeptical about COVID-19.- West African*

*Sometimes the information is on the Hmong radio but sometimes the information is not as accurate, so it causes some fears to the elders, so the educated people have to clarify for them.- Hmong*

Knowing someone who has had COVID-19, especially with complications or death tend to take COVID-19 more seriously.

*When community members do not take it serious, because it has not had an impact on them directly or no one in the family.- Black/ADOS*

*Not that big, because having nobody caught it that be around us, so we don't really worry about it- Black/ADOS*

*Hell yeah, it's real, but I think it's way over blown. People look at it like religion it has to happen to you or happen to someone close to you for you to take it serious.- Black/ADOS*

*I don't see and know many sick people personally; I mostly hear about it in the news. It is not that scary for me. I don't think it is a big deal.- Vietnamese*

*It depends on the person who is going through COVID 19, if people know someone or had COVID 19 think it is a bigger issue than someone who doesn't experience the symptoms- Hmong*

## **Myths**

Community members shared myths about COVID-19 that exist their communities. Some were myths about its source and how it is spread.

*The virus comes from monkeys - probably mixed up with HIV/AIDS.- Black/ADOS*

*Asian people/food are spreading it - origins of the first case.- Black/ADOS*

*I'd even go further and say that it was created at a lab and it got out so now the world is left to deal with someone making this virus.- Black/ADOS*

*Why COVID exists is because Chinese people ate bats. This is a myth because people are being rude and biased and making stereotypes.- Hmong*

*I have heard that flu shots will give you COVID so ladies in my church will not get the flu shot.- Hmong*

*That it's just a cold (or pneumonia.)- Latino/x*

Or myths about its authenticity or how serious the virus is.

*It's not as contagious the numbers are fake.- East African*

*Hoax- Black/ADOS*

*That COVID doesn't exist.- Latino/x*

There are also myths that COVID-19 is a government conspiracy.

*The virus is a planned attempt to kill poor people - Capitalism and racism- Black/ADOS*

*It's a big issue in that people hold conspiracy theories- East African*

*Some myths are that some people think COVID is fake because it is political.- Hmong*

*Virus doesn't exist, created by government to control the population.- Latino/x*

*COVID fake, govt created it to get rid of immigrants.- Latino/x*

A few shared myths about who gets the COVID-19 virus.

*People thought that Black people could not catch the virus, now the Black community are dying faster than any other group.- Black/ADOS*

*All Chinese person or Asian people have the virus- Hmong*

Myths about what happens when you get COVID-19 and may need to go to the hospital.

*The fear of hospitals is valid because a video she saw about a nurse who said people were being killed purposely because hospital get paid more to get COVID deaths. Most of the elderly will not go to the hospital.- Hmong*

*People shouldn't go to the hospital because they were killing people there.- Latino/x*

*Govt giving hospitals \$35k for every person that dies of COVID, so hospitals saying people are dying of COVID even though that's not the real cause of death. Heard this from a nurse.- Latino/x*

Finally, some noted myths around the use of natural remedies and special cures to prevent and treat COVID-19.

*Some people believe that the virus is curable, and that there are natural remedies to cure people from the virus.- Black/ADOS*

*There are a lot of myths in the Hmong Community. For example, my mom told me to drink my own urine and opium as a way to heal COVID.- Hmong*

*The most common myth is that traditional herbs for example ginger, garlic and green tea with honey serves as prophylaxes against COVID 19 infection.- West African*

### **Barriers to getting information**

Communities noted a number of barriers to getting accurate COVID-19 information. In addition, there are barriers to accessing the information that is being provided, including using the right channels to reach specific audiences, language barriers, and access to technology.

*There is a lack of information about COVID-19 on social media sights that young people use: TikTok, snapchat, and Facebook.- Black/ADOS*

*The news which is not a good source sometimes we are getting negative side we are not getting culture testing sites.- East African*

*Our elders get information from our children so if they translate wrong, then the wrong information gets passed.- Hmong*

*They see a lack of creativity on the part of the organizations to convey the message to the Latino community. They should use text messages or WhatsApp.- Latino*

Lack of access to information and communications in their first language is a huge barrier for communities.

*Many Hmong are illiterate so even if you translate materials for the Hmong community, they will not get the message. Nothing better than word of mouth communication/spoken communication.- Hmong*

*Our community is French speaking; language barrier is a huge problem. We need diversity, French speaking staff at Ramsey County such as they have for other languages such as Somali, Oromo, Hmong, Spanish to say the least.- West African*

*I think language barriers is a big issue in my Karen community. It is concerning because we cannot and do not get reliable information. We get our information from Facebook and it is not reliable.- Karen*

*Not enough information translated into Spanish.- Latino/x*

*Due to language barriers, we have a hard time getting COVID 19 news. We need to have a translator to digest the news.- Vietnamese*

Not all members of their communities have access to technology.

*Ramsey County and others assume everyone knows how to use technology or access to technology, but many people do not and rarely receive any information about COVID-19.- SPPN*

Finally, some are concerned that the politicization of the pandemic has impacted levels of trust in information about COVID-19.

*People are confused is the mask and gloves are actually effective at slowing the spread of COVID-19. There is no consistent information about COVID-19, people want to know what the facts about the virus, free of a political agenda and propaganda.- Black/ADOS*

### **Stigma around positive COVID-19 status**

In a number of immigrant communities, there can be a stigma tied to contracting COVID-19. This stigma prevents people from getting tested, wanting to know their status, sharing their positive status and taking protective measures to prevent spread.

*My sister's family directly shamed people who were sick, and they refuse to tell others who were sick. There was shame when people got sick. We felt if we shared it helped people but then others got shamed for sharing it. There is a stigma. They don't want people to know they have it.- Hmong*

*People embarrassed to say that they are positive, community needs to open our minds and not be afraid because the virus is no one's fault.- Latino/x*

*They prefer not to know their status. They do not have trust that they will be treated like others fairly. Because they are always looked upon differently.- Karen/Karenni*

*Some people still see the virus as a stigma and sometimes hide the fact that they have it and need help.- West African*

### **Distrust in healthcare systems**

Another barrier to changes in knowledge and behaviors regarding COVID-19 is distrust in the healthcare system.

*There is still a huge amount of distrust for the health institutions by the ADOS/Black community for issues in addition to COVID. This distrust keeps many community members in the ADOS/Black community on edge.- Black/ADOS*

*Racism, anti-blackness, experimenting on black bodies, exterminating black bodies. distrust in government and with the racist medical field.- Black/ADOS*

*People distrust the medical community- East African*

*Fear of going to the doctor if sick.- Latino/x*

In particular there can be a fear of going to the hospital.

*The Hmong are very scared of the hospital. Our people are the ones dying a lot. Are the hospitals really helping us or not when they are at the hospital?- Hmong*

*My mom and grandma want Ramsey County to know they're scared to go to the hospital. Previous people they know had to get a shot at the hospital and they didn't know what kind of shot they were getting, then passed away shortly after visiting the hospital and getting the mysterious shot.- Karen/Karenni*

*The elders think that if you go to the hospital, you will never come back home alive. When you go, you are going to die.- Hmong*

### **Barriers in access to PPE and sanitation supplies**

A number of community members noted the need for masks, other personal protection equipment (PPE) and other supplies to protect against the COVID-19 virus.

*Give us free masks and sanitizer.- Black/ADOS*

*We need mask and hand sanitizer.- East African*

*Families are still needing PPE supplies and resources.- Hmong*

*With COVID, we need help with hand sanitizer, soap, and disposable masks. We only have one or a few masks and we have to keep wearing them over and over again.- Karen*

*Provide some disinfectant products to the health facilities and schools around the county.- West African*

*Please help to provide us with masks, gloves, and disinfectant.- Vietnamese*



### **Barriers to testing**

Although many noted the availability of testing, a number of barriers to accessing testing still exist, including accessible testing locations, options for method of testing, lack of bilingual staff at testing site and, as discussed above, fear of a positive test result.

*Lack of access of testing spots for COVID Testing- Black/ADOS*

*There are not enough testing sites for people to go to, or there is not enough public information about where to get tested for COVID-19. Some of the tests are not accessible to people with disabilities or children.- Hmong*

*Finding free COVID-19 testing sites is another problem.- SPPN*

*Providing resources to those who are not able to social distance as they would like because of work and providing access to testing.- West African*

### **Barriers to vaccination**

There is strong interest among many conversation participants in becoming vaccinated and see the COVID-19 vaccine as a sign of hope for recovery from the pandemic.

*But being locked down for so long it's starting to mess with you, but the vaccine is coming out, just be patient, you can do it,- Black/ADOS Youth/Young Adult*

*Now that a vaccine is coming people are becoming more relaxed.- Hmong*

*Find vaccine and let everyone be able to get it.- Black/ADOS*

*Would like to be more vocal about the vaccines. Wants kids to get vaccinated so that she can go back to work. Is willing to help in whatever way that she can. Wants to educate people on what it means to be asymptomatic. Thinks adults should get vaccinated and then kids should follow good hygiene practices because vaccine isn't trialed with kids.- Latino/x*

*Even though some skeptical about the vaccine, our hope is that the vaccine will be effective to provide immunity against the COVID-19 virus. Our community wants to go back to our normal lives as possible.- West African*

Community members who support the vaccine do have concerns about access.

*Latines being affected by COVID more than other groups, so should prioritize Latines with vaccines. Address people's fears with vaccines starting now.- Latino/x*

*We wonder about how the vaccination program and news will be disseminated to the seniors with language barriers and limited access to technology. The community hopes that VSS could serve as point of contact to serve the community in this aspect.- Vietnamese*

*The vaccine needs to be disseminated to the clinics of Hmong led so that Hmong people can access it.- Hmong*

*Where the vaccine is administered may contributed greatly to my community, i.e. like the currently shot given at River Centre/Wilkin Auditorium? Though the Hmoob New Year is held there annually for the last 30 plus years, getting there remain a great challenge. Thus, access should be considered to be partnered with trusted and accessible*

*community center like the East/West side clinic and other community clinics that are accessible to the refugee and immigrants' communities.- Hmong*

Other did note their own hesitancy or reluctance of others in their community to get the vaccine.

*See it's like the flu though, see how the flu changes every year, what if COVID19 like that, I'm not getting a flu shot ever and I'm not getting the vaccine either. I don't get the flu shot and I have never gotten the flu, I'm don't believe it.- Black/ADOS Youth/Young Adults*

*There is not a big understanding among the elders what vaccinations mean and how it works. There needs to be more awareness and honest discussion about it along with the consequences (both positive or negative).- Hmong*

*People are skeptical about the vaccine and the possible dangers.- West African*

Some of the skepticism is due to the approval process.

*The quickness of the vaccine and not trusting its effectiveness.- Black/ADOS*

*I'm actually afraid of it, just because I read about it a little and it's not FDA 100% approval, I feel that they're just stating that there is a vaccination, so that people feel more at ease, but at the same time.- Hmong*

*Many of them are skeptical about it due to the quick realization of the Vaccine.- Hmong*

For some there is direct fear of the COVID-19 vaccine.

*I feel like if we take the vaccine we might die faster. Cause I seen that nurse fainting taking the vaccine.- Hmong*

*Participants are unsure if the vaccine is safe, and they are also uncertain if their communities will promptly get the vaccine.- SPPN*

*They have also heard that the vaccine brings a microchip to monitor people and that it can also modify people's DNA.- Latino/x*

*In my family, we found disturbing information that some COVID vaccinations are made from fetus cells. Whether it was lab grown or copied, it came from a baby, and this really affects the Christian community. You can choose which vaccine you want, whether its prolife or pro-abortion, but that is one thing my family talked about. The vaccine is still a scary thing for us to try. I do not think my family is ready to take the brave step to take the vaccine.- Hmong*

*I know a couple friends who have grandparents and a father who refused to go to the hospital because they think they will get a vaccination/injection that may kill them.- Hmong*

*I'm scared to get it. I want to be the last ones to get it.- Hmong*

Concern that availability of vaccine is making some people more relaxed in following precautions.

*I saw some friends karaoke and I told them to stop social gathering. They said oh, we have a vaccine now. I don't believe this is the right attitude.- Hmong*



## Key Cultural Considerations

The role of faith and spirituality, use of traditional medicines as well as community interconnectedness all have an impact on how BIPOC communities respond to the COVID-19 pandemic.

Communities, especially Asian and African immigrant communities, carry beliefs about the COVID-19 illness that are tied to their faith and use of traditional medicine.

### **Role of faith and spirituality**

It is important to understand how their faith impacts beliefs and behaviors around COVID-19.

*I'm following all the rule and praying for personal and family safety.- Black/ADOS*

*We hope COVID-19 finish done in sha Allah (If God wills'.)- East African*

*Hope is from the guidance of the Lord for a better tomorrow.- Hmong*

*In this community, we know there isn't a vaccine or a way to protect or heal us from COVID, the only thing we can do is pray.- Karen/Karenni*

*The African culture/community in particular rely on faith/prayers.- West African*

*Like Dr Stately was saying, lean on your traditions and lean on your teachings and your cultural ways to get yourselves through this time keeping close to your prayers, keeping close to creator.- Native American*

### **Use of traditional medicines**

Use of traditional medicine to prevent and treat COVID is very common. This includes well-established traditional medicine practices but also promotion of “miracle cures” that elders are especially susceptible to.

*Many Hmong families would much prefer herbal remedies over other medicines.- Hmong*

*Even if we don't go to the hospital, we stay home and use traditional medicine and heal ourselves. Some people believe that our traditional medicine is better than medical intervention from hospitals.- Karen/Karenni*

*We think drinking ginger and rubbing ointment will help us feel better.- Vietnamese*

*Community member are using traditional remedies, and herbs like ginger, garlic, lemon drinks/tea to stay healthy.- West African*

*You know, using those medicines that we were given some of our sacred medicines you know on cedar tea is just one of the, one of the best medicines that you can have right now and so I'm trying to we've been trying to do some programming to help people learn. You know how to harvest these medicines, how to use them prepare them.  
- Native American*

Although these uses are viewed as positive by most participants, concern was raised in the Hmong community about the use of some medicines by some elders of their community.

*Misconception of medication that is being sold under table and declared it will cure COVID. Hmong elders like my mother who is not informed and don't know, still believes this.- Hmong*

*Natural remedies are really good. When you don't have good information. It's scary when the elders buy stuff they don't know what it is.- Hmong*

*My mom bought medicine from somebody from Florida and if she can just give it to me with urine. This misconception of cures that people are telling the elders in the community They are buying into it. I can't imagine that there are other moms out there looking for ways.- Hmong*

### **Community-centered cultural values**

Many conversation participants talked about the role of community and family gatherings in their culture and how family desires and social expectations around gatherings make social distancing a huge challenge for many community members.

*That our people bond through community.- Black/ADOS*

*We have a strong sense of a community.- East African*

*The Hmong culture piece is very important to Hmong people. When relatives choose to not attend weddings or funerals, it is seen as a bad/disrespectful.- Hmong*

*The first big issue is as a community, are very good at helping each other and being close but since COVID, we haven't been able to be close and help each other, especially in person.- Karen/Karenni*

*We are a community that interact with others a lot. We have to learn to love from a distance while supporting each other.- West African*

### **Added Risk Factors**

Intergenerational households and work conditions are factors that put many BIPOC-communities at higher risk for COVID and more difficult to follow COVID-19 precautions

### **Large, intergenerational households**

For cultural and economic reasons, many in BIPOC communities live in large intergenerational households increase risk of exposure and prevents quarantining.

*A Hmong household has many generations living in there together, so this is why it is spreading so much to our community.- Hmong*

*Not having a good place to quarantine because of having a large family and they won't quarantine in their own room because many elders historically don't like young people staying in their own rooms so now it doesn't look well to quarantine.- Hmong*

*We live together with our family, if one family member gets the virus, they'll spread it to the rest of the family.- Karen/Karenni*

*A high number of people live in the houses.- Vietnamese*

*We have extended, crowded families- Latino/x*

*This has been compounded by our status as often large household, due to taking care of our elderly family. this has put a lot of Kenyans in situations where they are unable to feed their families and pay for their needed medical, home, and other expenses.- West African*

### **Frontline workers and lack of employee protections**

In nearly all communities, participants discussed the compounding challenges their communities face due to primarily being employed in frontline positions which put them at greater risk for exposure.

*Lower income people are not always able to stay home and safe due to the nature of their work.- Black/ADOS*

*Some people get sick from being an essential worker, and they spread it.- Hmong*

*Some people are sick, and they still go to work because of financial limitation. A lot of the community members work in the community as CNAs and pick up shift from different facilities to make ends meet even when they are sick. This end up with a big spread in the community.- West African*

In addition, many are employed in workplaces that do not provide adequate sick leave protections and pressure employees to continue coming to work, even when sick.

*In reference to my response for question one, many Hmong elders rely heavily on the market as their main source of income. Therefore, even though they may be sick, they force themselves to continue going to the market in order to pay for bills and to survive. - Hmong*

*Some employers make employees come to work, even when they are sick or ask them to come back to work before they have recovered.- Karen/Karenni*

*Owners are also pushing hard to people to keep on working, regardless of them being sick. That is a great and big problem.- Latino/x*

The fact that many workers rely on public transportation or shared rides also came up as a concern.

*Many of the Karen people cannot drive, and they share rides to go to work. If someone has symptom of COVID, everyone has to quarantine- One person's problem becomes everyone's problem.- Karen*

*Many Hispanics do not have a driver's license and have to use public transportation. - Latino/x*

*Those who have to work and take mass transit and interact with people who don't wear masks.- Black/ADOS*

### **Impact of COVID-19 Pandemic**

In addition to the health impact, the COVID-19 pandemic has had profound and widespread effect on employment, keeping up with expenses, education, and mental health and has huge implications for cultural values around community as well as grief and loss.

### **Employment and Economics**

BIPOC communities are facing immense challenges in the area of employment, both with widespread unemployment and the disproportionate number of BIPOC individuals in low-wage essential and frontline positions.

Many community members are struggling with unemployment.

*Several people in family have lost employment or lost jobs and got others that paid less.  
- Black/ADOS*

*Some families are dealing with layoffs. This is creating a lack of resources for the community.- East African*

*There is a lot of job loss, furlough. Our bus drivers aren't working because the schools are not in session.- Hmong*

*Lack of jobs affecting community. Some people undocumented so it is more difficult to find a job.- Latino*

As discussed later in this report, the move to distance learning has forced many parents to stop working or reduce their hours in order to be home with their children.

*Some are quitting their jobs to help their children with schoolwork because it is too stressful to work from home and take care of household responsibilities.- Hmong*

*Most households have just one working parent because the other parent needs to stay at home and help the children with distance learning. Home schooling is challenging. Technology literacy is challenging.- West African*

*School and daycare closed down and had to go to part time from full-time.- Black/ADOS*

*With schools closing in distance-learning It's hard with working to keep a roof over our head and food on the table.- Black/ADOS*

Small business owners are also impacted.

*Some businesses forced to close down- Black/ADOS*

*Hmong town and Hmong village do not have as much customers anymore. Its impacting small businesses.- Hmong*

*The pandemic has affected small business owners who depend on their businesses for survival.- West African*

### **Financial struggles**

This widespread job loss has led to many individuals struggling to pay their bills, including rent and food insecurity continues to be a concern, despite an increase in resources in this area.

*It has had a direct impact on those who have loss income at a reduced rate or all together and now facing eviction, going hungry and not being able to purchase necessary items to keep them safe.- Black/ADOS*

*Very bad while there is no job and unemployment we can't provide for our families.- East African*

*Many have also been laid off and are struggling to get enough financial support to pay for bills and feed their families, their children. Hmong families are much larger in size, which increases bills and essential needs.- Hmong*

*COVID-19 has greatly affected the Latino community economically in three main aspects: Loss of employment, delay in payment of services and in the increase in rent. - Latino/x*

*Has made us to be unable to pay our rents and med bills as well as social needs to support our large poor families back in Africa.- West African*

### **Housing instability**

*How renters will get stable after all the COVID dollars go away.- Black/ADOS*

*No stabilized housing to social distance.- Black/ADOS*

*Losing my house. I lost my house already and with my mother along my whole family. The space is very tight.- Hmong*

*Landlords wanting to kick people out because of renters not being able to pay rent, landlords not being very understanding.- Latino/x*

*There has been increase rate of homelessness, some sleep in their jobs if they have any.- West African*

This compounds impact that many communities were already dealing with prior to the pandemic including multi-generational poverty, racism and discrimination and lack of access to culturally appropriate health care providers and services.

*Marginalized communities feel the brunt of the virus because they were already struggling before the pandemic and now getting access to resources is even more difficult.- SPPN*

*It's been a struggle before COVID. It seems like it more help know then before. Stimulus checks. As black people in MN we been living in a pandemic.- Black/ADOS*

*It is a big issue, but so is our liberation.- Black/ADOS*

*Because us to look at high levels of poverty, homelessness. Young. Poor educational outcomes. Child Protection. Rich, children are being placed on a home on criminal justice system for virtually half of Minnesota, and 10% of the prison population are 100% in person. So, we're being inducted just. So, the COVID-19 setting is really exhausting. - Native American*

*Being blame because we are Asian and being used as an object of COVID-19. Because everybody thinks that all Asian are from China. Fox 9 news and Donald Trump spread this rumor. Speaking for older Asian, they are more scare to out now. They scare of getting attacked by random people because they are Asian.- Hmong*

*Because we are Karen, Asian, we are also scared of the racists.- Karen*

*We feel we are going to be treated differently, discriminated.- Latino/x*

*Some community members feel that they are discriminated against when they go for COVID-19 treatments.- West African*

## Distance Learning Impact on Education

The move to distance/online learning has been a large challenge for most families. There are some that report positives of distance learning, such as the opportunity to be more involved with their children's schooling and ability to safely continue learning during the pandemic. It has also helped many families become more comfortable with technology. And older students may prefer the flexibility of the online format.

*Have more time with kids at home. Can see what type of work they do with school and teachers.- Latino/x*

*Doing homework at own pace, do not feel the need to rush.- Karen/Karenni*

However, distance learning has been a challenge across many families in all communities. This has impacted both parent's ability to continue working while having kids at home, added immense stress and many are concerned that their children are struggling and falling behind in school.

*Children are not being properly educated, due to distance learning. Job loss is a huge problem.- Black/ADOS*

*Another problem is we are now the teachers to the young kids at home. We have to watch them, be their teachers, and we have so much stress right now. We don't even know how to use technology so how can we help them. We have 4-5 kids in a household to help with schoolwork. We are also all fighting for internet, and to meet with teachers for conference calls. Now one parent has to be at home to help the kids, so we lose one income.- Hmong*

*It's difficult for parents to make sure if their kids have finished their homework. A lot of young children have failed their online classes because parents aren't able to help. Some community members are new to Minnesota, one person has three children, she doesn't know how to read and write in English, so it's very difficult to help her children with their schoolwork online.- Karen/Karenni*

*Distance learning because of COVID-19 has affected family wellbeing. Several families are stressed and traumatized because of the new normal. The children are failing their grade level examination because schooling at home is new and not taken seriously. Parents are torn between racing their children to have good education and working.  
- West African*

## Mental Health Concerns

Participants are concerned about the mental health of their community members and general well-being of their communities. Two of the most common experiences reported about the COVID-19 pandemic were fear and uncertainty.

### Uncertainty and fear

Experiences of generalized uncertainty and fear are common.

*What will the future hold for us.- East African*



*I've had elders explain the feelings of trauma and hopelessness in a society of so much uncertainties. There is a lot of healing that will need to occur post-pandemic in the communities that serve.- Hmong*

*So many individuals in my community are experiencing fear of the unknown from this virus.- Hmong*

*Many families are afraid and uncertain of their future due to the COVID-19. Some people are withdrawn but do not speak out, there is the "fear of the unknown".- West African*

*There is a lot of emotional insecurity. It puts people in fear and makes them think about how they can survive.- Hmong*

*During COVID, we have to stay home and we're afraid to go out.- Karen/Karenni*

*Fear of going to the doctor if sick.- Latino/x*

*We worry a lot. We are concerned and worried about going out.- Vietnamese*

### **Isolation and loss of activities**

The confinement, isolation and loss of activities are a struggle for community members.

*Our community people do not speak up about mental health but being isolated and socially distance from friends and families is the hardest part of the pandemic.- West African*

*Most people have had depression and stress since they stay at home without anything to keep them busy.- East African*

*It impacted physically and mentally because they're all just home. It impacts more mentally than physically, and it is driving me nuts. It is giving me a mental me a mental breakdown. It is I am telling.- Hmong*

*Being stuck inside all the time feels like being imprisoned.- Latino/x*

*Lots of "cabin fever" and boredom leading to depression.- West African*

### **Increase in mental health concerns**

All communities brought up concerns for mental health in the areas of depression, stress and anxiety.

*Believe it's important but it's impacting mental health and causing anxiety.- Black/ADOS*

*The feedback on the impact was very sobering. For those that have lost their employment, they are in a constant state of stress while trying to find long term stability and cope with daily demands of personal and family obligations.- Black/ADOS*

*Were depressed, anxious, nervous and mentally drained.- East African*

*Lots of worry and anxiety.- East African*

*I see mental health is very important and we lack support right now. There's no one to talk about our problems with them so some are very depressed and have anger by staying home so much.- Hmong*

*I'm young enough that I do not have PTSD from the war, but this pandemic is beginning to wear me down mentally, I see it in myself and my child. Depression, hopelessness, fear, anxiety, stress.- Hmong*

*I have heard so many people talking about depression.- Latino/x*

*We worry a lot. We are concerned and worried about going out.- Vietnamese*

*Mental health issues have increased in families.- West African*

*And, you know, we're really seeing a lot of people who are depressed and anxious, I'm sure that's no surprise I mean, anybody who has a tendency in that direction when you take a general community climate like we have here in the middle of our pandemic. You know it makes it worse. It makes it harder for them.- Native American*

In addition, getting support for mental health concerns is a challenge, as many cultures do not have ways to talk about mental health.

*There are also so many of us who are falling into depression and don't know how to treat it because mental health has never really been a known practice for traditional families.  
- Hmong*

*Has met a lot of people that feel depressed. Some people feel like they can't speak up about feeling depressed.- Latino/x*

*Our community people do not speak up about mental health.- West African*

## Family Relationships

Conflict and strain within family relationships was also a common concern. A few did note the positive impact of the pandemic on their family.

*Families staying together and spending time with each other.- East African*

*COVID has brought my immediate family more together and we have had the opportunity to spend time with one another.- Hmong*

*More time to spend with family, more unity among family.- Latino*

However, others talked about the family issues that have arisen, including domestic violence.

*The feedback included strained relationships.- Black/ADOS*

*Domestic violence and abuse has been on the rise with COVID and more supports is needed for that.- Hmong*

*COVID-19 has caused some families to have to down-size on space, which has caused many stresses.- SPPN*

*Abuse. Disagreement and fights at home.- West African*

## Concern for Youth and Elders

In talking about their concerns, community participants often noted particular concern for their youth and elders.



### Concern for youth

Parents and other community members expressed general concern for the well-being of youth including their level of engagement in school and their typical interests as well as mental health concerns.

*Kids getting into alcohol and drugs.- East African*

*Everyday my son tells me that he is bored, and he is craving to human interaction. When we go to my mom's house, he doesn't want to come home because he is missing the social interaction with relatives. My son misses going to school . mental health during COVID is a big concern. We can go a little crazy staying home.- Hmong*

*A lot of kids I know are becoming more depressed. It's terrible.- East African*

*Has teen daughter—not in the mood to do anything, always locked in room, wouldn't wake up if she didn't have to. Used to be a good student, was going to be in PSO before pandemic, and now mom recently had a chat with teacher because she is now failing, which is surprising to mom.- Latino/x*

*I think that everything, all the signs are basically pointing to that we are having, especially a lot of teenagers, with more depression. And I think that, unfortunately, we're, those are the kids that we're losing. Those are the kids that are, you know, not attending school virtually. Those are the kids who are youth programs are having a really hard time connecting with those kids too.- Native American*

### Concern for elders

Community participants also noted frequent concern for their elders, due to the increased need for isolation and barriers elders face to getting accurate information about COVID-19.

*We are not able to see our elders.- Black/ADOS*

*The elderly doesn't get reliable information. I try to educate the elders about what's credible and what is not. My parents tell me to not take them to the hospital if they ever catch the virus. They are afraid.- Hmong*

*It's been hard. Grandparents are very isolated and depressed and don't really understand why we can't visit them, especially when my grandmother only had days to live.- Hmong*

*In our community, especially the elders, some have passed away and we don't know if we're getting the resources we need for elders. We're not seeing youth being hospitalized or passing away. We need help with support for elderly community members.- Karen/Karenni*

### Grief and Loss

In addition to general mental health concerns, the experience of grief and loss is very common. Many are dealing with the loss of immediate family members to COVID-19. In addition, there is grieving for loss of jobs, their usual way of life and loss of community engagement. In addition, the pandemic has made it harder for many communities to carry out their death and grief practices.

*I've lost a lot of people due to COVID19, then the funerals where only one representative can go.- Black/ADOS*

*In the Hmong culture, we mourn and grieve together, and not being able to do that is very hard.- Hmong*

*My sister-in-law's dad just passed away from COVID. Death by COVID has affected our family a lot. There have been others who have passed form other causes, and we were unable to attend the funeral due to COVID which impacted our family very much.  
- Hmong*

*A lot of family members have passed away, so the remaining family is very sad.  
- Karen/Karenni*

*Many families are also mourning loved ones who died due to complications of COVID-19.- West African*

*Okay, I've had 14 relatives passed away from COVID. 14 of them. And I was only able to attend one service for a relative who died at COVID, you know, and it's hard.- Native American*

### Lack of Access to Community Support and Cultural Traditions

On top of the economic, educational and mental health challenges, communities now face huge barriers to how they would usually weather these challenges- through family and community gatherings and connection. All of the communities talked about the role of socialization, family and community gatherings on their community vitality and personal mental health. Many people are feeling very isolated and not being able to gather has made it hard to maintain their community values and feel healthy and supported during the pandemic.

### Role of community in culture

*We hang out to keep from being depressed.- Black/ADOS*

*Its huge we value community gathering as well as events.- East African*

*Despite being in a pandemic, us Hmong people need to attend gatherings to show respect. We will still be there for one another and show up despite a whole pandemic. We have grown up with values to truly love and value one another so we must show up in person to things and events. Even though us Hmong people are struggling, we will still physically go out to help despite everything.- Hmong*

*Gatherings are a very important part of our Hmong community, and this pandemic has made it very difficult for our family.- Hmong*

*Used to being close to family and being close to others, so pandemic changed everything.- Latino/x*

*Our community is close knit, we gather for celebrations/parties such as wedding, christening, graduations, and funerals in large numbers. When COVID-19 hit, it was difficult to remove us from our learned and cultural behaviors. This has contributed to the increase in case and spread of COVID-19 in our community.- West African*

*We usually do things in person and it's culturally very hard on Native people to not be in person.- Native American*

### Impact on mental health and vitality

*COVID has prevented me from being able to be with family who I would normally care for.- Black/ADOS*

*Family gatherings were a way for us to check on each other's wellbeing. Without the gatherings, we only know how our immediate families are doing and not so much the relatives. Even with immediate families, there is less connection too.- Hmong*

*There has been a sense of loss, a sense that if we continue down this path without a sense of 'normal' in sight, that we may lose our way of being. Someone mentioned that we don't just gather to gather. I agree with that. There is a much deeper meaning in our community to come together, regardless of the occasion. It is the bond that continues to keep our families close knit.- Hmong*

*I think one aspect that is important is to understand how COVID-19 especially effects communal cultures like our own. Our ability to manage and take care of ourselves and love ones is more dependent on our ability to united as a people. in addition to structural support to address the financial and health implication of the pandemic, we also could benefit from continued resource allocation to find ways to safely and responsibly engage with each other.- West African*

### Access to Help During COVID-19 Pandemic

Participants have seen increase in resources provided to community, especially in area of food support, but still struggle with resources being available, knowing about the resources and unique barriers to resources.

A number of community members have noted an increase in available resources since the pandemic started, especially in the area of food support.

*Ramsey County has been able to get more resources for assist with housing, food, and youth.- Black/ADOS.*

*Gaining resources in my community is important at this time. The Asian community in Saint Paul is heavily impacted and I am glad to be able to find resources that helps me with my life at this time. Receiving delivery groceries and technology support has been helpful my me and my family.- Hmong*

*The amount of free food has increased dramatically, and they have been able to distribute food to the elderly and family. Free food can be found in many locations: community and rec center, Fire station.-Hmong*

However, many community members report to continue to struggle with getting financial help and food insecurity is still a challenge.

*We need opportunities and resources available to us!- Black/ADOS*

*We are struggling to just put food on the table as well as pay bills. We need MORE financial help.- Black/ADOS*

*Our culture needs more resources to better themselves.- East African*

*Resources. I am concerned that many of those who are not informed are not getting access to resources available to them during the pandemic.- Hmong*

*We don't have the same resources and finances that Americans do.- Latino/x*

There is also a need for more food resources.

*Hard to keep up with bills and food on the table. Black/ADOS*

*I live in a multigenerational household as well and since the kids are always home, so we need to buy more groceries. I haven't worked since COVID hit. My parents have been unemployed since COVID hit. More payments have been needed to be made toward groceries and bills.- Hmong*

*Have to make choices about paying bills vs getting food.- Latino*

*Hunger in our community because of COVID-19.- West African*

*Some people don't have enough food.- Karen/Karenni*

Some communities do not have access to culturally appropriate food.

*Hispanics eat more rice, and Anglos eat more canned food. So, even food comes to you, if it is something you don't like, you are not going to feel like eating it. We are different than Anglos, Asian...- Latino/x*

*They also like their ethnic foods, e.g. plantains, garri, cocoyam which are not found in the food shelves. The Africa born do not access the food shelf because a majority of food served is not cultural.- West African*

*Hmong food is really important. Culturally appropriate food is going to benefit the hungry Hmong families.- Hmong*

In general, communities feel that the resources that have been provided are not enough.

*I think one of the biggest issues right now that COVID has brought about is about money. Literally everyone I come in contact with is struggling with money and paying for things they need, including myself.- Black/ADOS*

*There is shutdown is going also there no help from the government during this difficult time.- East African*

*Since the protests during the summer, resources have been scarce, and COVID-19 has only made resource scarcity even more of a concern and issue for Ramsey County residents.- SPPN*

*A lack of resources to address the reduction of services and income due to the pandemic.- West African*

## Barriers to Accessing Available Resources

Even when resources are technically available, BIPOC communities face a number of barriers to accessing these resources. These barriers include knowledge of available resources, documentation requirements, perceived or actual eligibility/impact given their legal status in the U.S. (public charge, undocumented workers) and reluctance to seek out help.

### Knowledge and language barriers

*Resources. I am concerned that many of those who are not informed are not getting access to resources available to them during the pandemic.- Hmong*

*Food giveaways, financial assistance are not accessible by non-English speakers. They are not aware of these resources. So other people are having to push the resources out to non-English speakers. A majority of our non-English speakers are not receiving these resources.- Hmong*

*We are too many Latinos, and we need them to speak to us in Spanish. We do not understand clearly, and we then do not receive the benefits. Especially now with the pandemic.- Latino/x*

### **Reluctance to seek out help**

*Some of these needs are not expressed in the community for a because people are shy and suffer in silence.- West African*

*The Hmong are not getting the relief packages like other people. We have a lot of needs, but we will not go get in line for services or assistances either. We rely on families. We don't seek resources because we might not know resources or there is a shame to it. - Hmong*

### **Eligibility and legal status**

*So many people do not pay and having the stamps are not for everyone. Many do not qualify for them.- Latino/x*

*We fear of calling the county, as we think it is for legal persons (with docs), as no one speaks Spanish, I feel I wouldn't understand. I know now that they can help us anyways, but there are still several others with fear.- Latino/x*

Some noted expecting to be eligible for certain relief but were not.

*I have been laid off and re-hired three times but during the lay off period I was refused unemployment.- Black/ADOS*

*Families thought they were going to be approved for financial support from the county and postponed their bills.- Black/ADOS*

*"Someone applied from RC and they said they will only help with renters but not mortgages. This is a problem.- Hmong*

Or don't have the documentation to be eligible.

*Many of the families don't have access to paperwork or proper documentations like lease/contracts because they are living with elders who can't keep up with legal documents. Verbal explanations should be submitted as a substitute for lack of legal documentation.- Black/ADOS*

*Many ADOS/Black people qualify for need but they don't have employment or proof of income because they don't have a bank account or pay stubs. They may make money through cash or electronic transfers to reloadable debit cards. Change the application process or offer ADOS/Black navigators to help people apply. The county should refer people to these organizations.- Black/ADOS*

## **What Communities Need**

Communities directly asked for support in a number of areas, including more resources and information and to have these resources and information be provided via their own trusted community organizations.

**Continue to Fund linguistically appropriate communication about available resources and COVID-19 information**

*Continue spreading the word about COVID.- Black/ADOS*

*To provide how to protect our self and provide the information and we like the masjid to give us face mask and food distribution.- East African*

*Encourage people to go test more often at the testing sites, or if you have a family with multiple generations then you should definitely go get tested.- Hmong*

*Please provide more health information for our community, For our community, we are concerned about the increase of COVID 19 spread within our community.  
- Karen/Karenni*

*Suggests sending a letter home to families in their preferred language, telling them the things they can do to protect themselves, such as using hand sanitizer, proper handwashing, where to find local clinics and how much it costs (ex. test is free but visit is not).- Latino/x*

*Participants would like Ramsey County to mail fliers to residents, do a better job telling the public what the precautions are for COVID-19.- SPPN*

*Clear direction on what is safe and unsafe and what alternatives to social gathering as well as support financially.- West African*

And for this information to be provided in their language.

*Provide information in different languages.- Black/ADOS*

*Hmong is a spoken language, and nothing is understood better in the Hmong community than to get spoken language communication. Our language does not translate into English very well and it is more confusing to translate material word for word because it isn't understood the same way as we speak.- Hmong*

*Ensure all information are translated online or have videos online for Hmong families to listen to or have again a number that families can call to ask for questions or get updates if needed.- Hmong*

*Ramsey County should create a social network about COVID-19 information. We need news about the pandemic in Vietnamese.- Vietnamese*

*Translation of disinfection, also translation on explanation on why we must take certain measures.- East African*

**Provide information and resources through trusted community leaders and organizations**

*Black women lead us, our hairdressers are our counselors and when you give us resources, we share them, often not meeting our own needs.- Black/ADOS*

*They just need to talk to one important person in the Karenni community, that person will then spread the information to the rest of the community. Karenni people typically will trust and listen to people of their same community because of the language barrier.- Karenni*

*We trust information coming from people who look like us.- Hmong*



*Provide grants to and work with the community-based organization that are at the heart of the community.- Hmong*

*The funds should be directed to the people in the community by having the trusted leaders give out resources. This will be more efficiently done compared to what is done right now by Ramsey County.- West African*

*We want our leaders to be liaison persons between our community and Ramsey County. We like for them to bring information and resources directly to us. Our leaders understand the system, language and how to get the resources to our communities.  
- West African*

*Provide Linkage for our community through masjid Dawah Islamic Center.- East African*

### **Provide more financial support**

*By offering more relief funds.- Black/ADOS*

*We need money were down horribly.- East African*

*Understand that more families are struggling with financials and making support resources more available and easier to access.- Hmong*

*Provide resources needed for the struggling families.- West African*

### **There is a need for culturally specific health care providers**

*Trusted medical practitioners to serve the ADOS/Black elderly and health compromised.  
- Black/ADOS*

*It would be nice to have a medical facility with Hmong staff so many elders and community will feel easier about attending to get checked on if they are positive or not for COVID.- Hmong*

*It is helpful to have Hmong professionals in health care to spread information of COVID. In our community, we trust each other. We trust other who look and sound like us. Especially among our parents, they trust Hmong professionals who are knowledgeable in healthcare more. Success stories are also needed for Hmong elders to not stress and worry so much about COVID.- Hmong*

*We need to feel like we can trust the clinics, we need to feel welcome in these spaces.  
- Latino/x*

### **Ramsey County to take a stronger role in COVID-19 protections education and enforcement**

One way that community participants feel that Ramsey County can support their community is by enforcing mask mandates and taking a stronger stance in enforcing mandates.

*Enforce a mask mandate and start fining people out of compliance. Fine those that knowingly infect others.- Black/ADOS*

*Make gloves mandatory for grocery stores or work.- East African*

*If they were to be able to make a decision that would be most impactful it would have been good to do a hard shut down.- Hmong*

*County can be a little more strict with businesses—went to a Cub Foods and there were no hand wipes, so businesses are being more lax.- Latino/x*

*When walking around in public, there should be lots of signs informing people about COVID-19 precautions. Participants believe the lack of signage in their communities is a major contributing factor to the safety and well-being of the people in Ramsey County.  
- SPPN*

*Ramsey County should limit gatherings.- Vietnamese*

## What Else Ramsey County Needs to Know

A number of other common themes came up in these discussions that will impact how Ramsey County works with these communities during the COVID-19 pandemic and beyond.

### Community Strengths

Communities have strength, assets and resilience and have been helping each other during the COVID-19 pandemic.

*How community leads came together to assure there were adequate resources.  
- Black/ADOS*

*People coming together in times of need and communicating any resources that may be unknown to the public. People are also realizing how important it is to be there for those in need.- Black/ADOS*

*We help each other when we have questions about COVID or if we need help with COVID testing. We encourage each other to quarantine when people are feeling sick.  
- Karen/Karenni*

*Seeing lots of empathy among the community, when someone needs something the community finds a way to help that person.- Latino/x*

*We share and support each other very well.- Vietnamese*

*My community is on a united front and is having discourses to address the needs of Kenyans and Africans in general in our community.- West African*

*Many community groups within Ramsey County and nearby have connected and banded together to offer resources their people have asked for. Traditional Medicines, ways to answer questions through the COVID 19 hotline, and expressed gratitude for the social media sphere.- Native American*

Community members want to play a role in offering support to one another and with spreading information and knowledge.

*One of the things we can do is we can encourage people to, to make good choices right and to try to try our best to, you know, follow the guidelines of the state health department, and you know, do our part to keep other people safe.- Native American*

*Being vocal and letting other know I'm here for them and spreading knowledgeable and support.- East African*

*I want to be a well-informed individual so that I can help share facts to families and friends; demystify the misbeliefs.- Hmong*



*Will do anything needed to protect community. Share as much information as possible with our community on social media. For those that were infected with COVID, share their story.- Latino/x*

*The community would like to continue share the information about preventive measures e.g., and social distance, wearing of Masks, washing of hands.- West African*

There is distrust of government in many communities, particularly the Black/ADOS community. Much of this distrust is due to systemic racism and historical trauma experienced by many communities and need for Ramsey County to directly address and repair this harm and distrust.

*It's a big issue for the community because people are not really getting the correct information and are still not trusting in a government that continues to show us that they don't care as much as they make it seem.- Black/ADOS*

*We have a lack of confidence in the American Government due to historic trauma.  
- Black/ADOS*

*Participants want Ramsey County to understand the racial history of medicine in the United States. In the past, Black people were used as lab experiments against their will and without their knowledge. This bad history still lingers in Black people's minds, and they want Ramsey County to understand that when they are pushing for the vaccine to be given to everyone.- Black/ADOS*

*Ramsey County needs to remember people of color for years been disproportionately impacted by a system of this country created to keep people of color oppressed. So, Ramsey county needs to know that building relationships and establishing trust within community is the key. Once that is done community members will have no problem telling Ramsey county about their needs and concerns.- Black/ADOS*

*The condition of the ADOS/Black community can be greatly improved by the county if it was to adopt a reparations framework to their departments for social services. ADOS should be prioritized like our Native American counterparts. The focus should be justice through services.- Black/ADOS*

*That the county cannot make decisions for people they don't actually represent.  
- Black/ADOS*

*County can do is to continue to resource dialogs about the impact of white structural racism and the role the county and other government agencies have played in the past. This should be coupled with a renewed commitment to reallocate resources and reconstruct Ramsey county programs to proactively rebuild the ADOS/Black family units and persons so that we are not as economically and socially vulnerable to these kinds of catastrophes when they strike.- Black/ADOS*

*Youth indicated that they want to carry the importance of still talking about other social issues, like Black Lives Matter, Missing and Murdered Indigenous Relatives, and other issues that are important.- Native American*

### **Communities want ongoing engagement with Ramsey County and opportunity to advocate for themselves**

*Reaching out to the Communities hands on. With different resources.- Black/ADOS*

*Engagement/involvement/partnership with businesses and/or venues where we frequent like social clubs, bars, concert events, gyms, faith places, and or protests.- Black/ADOS*

*Government plays an important role, but in my opinion, they must continue to strive to understand the communities they serve better.- Hmong*

*The community will appreciate continuous engagement by the County in culturally appropriate manner using community leaders and stakeholders.- West African*

*Organize further forums like this, where we can express ourselves. And to open a channel, a help line.- Latino/x*

*I would like to be an advocate.- West African*

*Among community and we put together that order to centralize and bring the knowledge together. This was able to be launched, creating the kinds of systems that will provide for the services that are being delivered. So that was some of the things I've learned over the years. And I call it reverse engineering. And if we can be involved in the creation of these things. We can actually have more of say in how things go.- Native American*

*I would like to participate in more conversations where the government is able to listen to my experiences and ideas then act on it.- Hmong*

*I can use my voice; advocate for change, communicate what is truth.- Hmong*

### **Many communities face barriers to accessing Ramsey County services**

Many communities talked about the issues they have faced trying to access services from Ramsey County, including the lack of bilingual staff as well as barriers to learning about and applying for assistance.

There is a need for bilingual staff.

*There is lack of diversity in Ramsey county staff, We need people of African origin to help understand us, and also to assist with advocating for Africans due to language barriers, low health literacy and healthcare disparities, difficulties assessing government programs- West African*

*Ramsey County needs to also hire more Hmong staff to work for the community.  
- Hmong*

County customer service and program access are concerns.

*I used to work at the county, and what I see is that Hmong don't know about the resources at the county. We have to actively look for it, but we don't look for it so when the pandemic hit, we don't know where to find it. The county needs to go beyond what they traditionally do to market their services.- Hmong*

*No accountability for racist, rude, disrespectful employee conduct with recipients.  
- Black/ADOS*

*RC does need to do a better job of communicating information about their resources to the Hmong community because the Hmong don't really know how to access these.  
- Hmong*

*Make resources easy to access via online and over the phone. Require less documentation since it is hard to get around to get them with places closed or families not having enough English skills to request online.- Hmong*

*Every year Ramsey County sends a letter to families with children, we're unsure what to do. During COVID, we want RC to understand, even when the renew letters come in, we don't know how to fill out the renewal letters without having translators. Please understand it will take longer for us to respond to renewal letters for government services, because it is difficult for us to understand and most of the community offices that used to support us with filling out these forms are closed right now.- Karen/Karenni*

*The applications are too long and difficult to fill out, people don't know how to fill it out, they call and don't get an answer, then they start getting calls from the landlord, ripple effect. Applications have too many requirements, creates additional barriers.- Latino/x*

*We have problem getting help from the Ramsey County government when we call. We are asked to leave messages for a call back when does not happen.- West African*

## Recommendations

These findings lead to recommendations in three key areas.

### Take steps to reduce the spread of COVID-19 in cultural and ethnic minority communities

1. Ramsey County should continue to fund messaging and engagement campaigns that will increase knowledge and proactive behaviors within communities.

These campaigns should be:

- Culturally and linguistically appropriate and tied to community values.
  - Directly address and counter any stigma that is present in community.
  - Directly addresses myths and misconceptions held in the community.
  - Engage faith leaders and traditional medicine practitioners.
  - Take into consideration cultural values around faith, traditional medicine and community interconnectedness in developing public health messaging.
  - Encourage community disclosure and storytelling around experiences with COVID-19 to reduce stigma and people who know someone who's had COVID more likely to take it seriously.
2. Develop resources for individuals and families at risk due to living in large multigenerational households and working in jobs (and use transportation) where exposure to COVID-19 risk is high.
    - Quarantine resources for families.
    - Encourage safe workplace practices and employee sick leave.
  3. Provide culturally-specific COVID-19 clinics for testing, vaccination and treatment.
  4. Provide free masks, other PPE equipment and sanitization supplies.
  5. Recognize and engage with community strengths and their interest in helping to support their community by providing COVID-19 education and advocacy as well as hands-on support to members of their community.
  6. Facilitate safe ways for communities to stay connected.

### Continue to support communities to mitigate impact of pandemic

Communities would benefit from continuing resources to minimize the economic, educational and wellness impacts of the COVID-19 pandemic.

1. Continue to provide and expand financial assistance resources, especially in the areas of housing and food.
2. Continue to provide employment support.
3. Provide resources for community mental health, grief and loss as well as cultural wellness and healing support.
4. Support efforts to address family stress with distance learning and other educational concerns.
5. Need for linguistically appropriate services and communication.

6. Engage trusted community organizations to provide direct service, education about and connection to available resources.
7. Improve access to culturally specific services and health care providers.
8. Facilitate grief/loss and community healing opportunities.

#### Build relationships and trust with communities and recognize and repair past harm

1. Address barriers to accessing Ramsey County services, including language access, customer service and reducing documentation barriers.
2. Continue active ongoing engagement with individual cultural communities that is focused on relationship building and shared power with community. Directly address historical racism and trauma many communities have experienced with Ramsey County and other systems.

## Appendix A: COVID-19 RECERT Community Conversations Guide & Questions

### Facilitator Background Information

Ramsey County's [COVID-19 Racial Equity and Community Engagement Response Team \(RECERT\) Community Conversations Initiative](#) selected trusted community members and/or community agencies to engage individuals, families and community groups in culturally specific, age and linguistically appropriate ways via web-based and/or call-in community conversations to gather input and knowledge on the communities perceptions of COVID-19, and what is needed in to slow the spread of COVID-19 among the racially, ethnically and culturally diverse communities in Ramsey County during the pandemic.

### Facilitator Opening Remarks

**Note:** *Facilitators can use the following introduction to the conversation.*

Thank you all for choosing to take part in this conversation. Today, we are engaging you in this conversation to gather input and knowledge on your perceptions of COVID-19, and what is needed in to slow the spread of COVID-19 among the racially, ethnically and culturally diverse communities in Ramsey County during the pandemic.

This will inform Ramsey County and the COVID-19 Racial Equity and Community Engagement Response Team (RECERT) on how they can better partner with residents and community partners in Ramsey County to advance racial equity in during this pandemic to meet the needs of the diverse communities.

The suggestions and recommendations you develop will be shared with the RECERT, leadership and staff at Ramsey County. Ramsey County will compile all the feedback we gather and make this information available to Ramsey County at the end of the initiative.

Over the next **60 to 90 minutes** we will go through a series of questions intentionally designed to bring up your thoughts and perceptions on this topic. There are no wrong ideas or answers to these questions. Some of your contributions may conflict with others - and that's ok! We want to make sure everyone is heard, and we include everyone's ideas as we understand what this topic might mean for the Ramsey County.

**Note:** Do introductions if feasible or collect attendance via the online chat feature or via registration for the event.

### Facilitator(s) Questions

**Note:** *Please ask the required questions in the order below that have an asterisk (\*) next to them. Feel free to add questions that you think would be important for community to share with Ramsey County. Translate any questions below to be linguistically appropriate. Restate the questions below to be culturally appropriate and/or age appropriate.*

*Record conversations if possible, for transcription purposes. If you are recording the conversation it's required that you let participants know it for documentation purposes, so they can opt-out if needed.*

*If this conversation has a chat feature, allow participants to put their answers to the questions in the chat box. You can screenshot the chat box at the end of the conversation for additional documentation of the conversation.*

So, let's get into our first question:

1. \*What is going well for your community right now?
2. \*What are the biggest issues or concerns facing your community during COVID-19?
3. \*How does your community get information about COVID-19 cases and support resources?
  - Probe: What specific sources are you using to get information? (not required)
  - Probe: What information is your community getting and not getting? (not required)
  - Probe: What information is your community getting about when to go get tested and how to access testing? (not required)
4. \*How big of an issue do you think COVID-19 is in your community? Why do you think that?
  - Probe: What myths about COVID-19 does your community have? Why do you think that? (not required)
5. \*What do you think is contributing to COVID-19 cases/spread in your community?
6. \*What is important for Ramsey County to understand about your culture and community?
7. \*How can Ramsey County better protect and support your community during the COVID-19 pandemic?
8. How has COVID-19 impacted the financial wellness of your families and communities?
9. How has COVID-19 impacted the overall wellbeing (including mental health) of your families and community?  
What are your hopes for you, your family and community during COVID pandemic and after?
10. What role would you (or your community) like to take in supporting and protecting your community during COVID-19?
11. <Insert additional and/or new questions> ? *Note: It's Optional to add your own questions and delete any non-required questions 7-11 above if more time is needed.*

### **Facilitator Closing**

A quote to consider (or please share a culturally specific quote or saying)

“Not everything that is faced can be changed, but nothing can be changed until it is faced” - James Baldwin

Thank you for joining this conversation. Your feedback and time are appreciated.

(Include other closing information here per the facilitator)

For more information and access to Ramsey County COVID-19 Resources visit:

<https://www.ramseycounty.us/coronavirus-disease-2019-COVID-19-information>



## Appendix B: Findings from Community Conversations by Cultural Group

The below table breaks out the individual findings from the report and denotes in which cultural communities the finding was present. It is important to note that just because a finding is not checked for a particular community, it doesn't mean that issue exists for that community. It could be that the topic did not happen to come up in the conversations.

| Finding   | Black/ ADOS | Latino/x | East African | West African | Karen/ Karenni | Hmong | Vietnamese | Native American | Youth |
|---|-------------|----------|--------------|--------------|----------------|-------|------------|-----------------|-------|
| COVID not taken seriously   | x           | x        | x            | x            | x              | x     | x          |                 | x     |
| COVID precautions not taken   | x           | x        | x            | x            | x              | x     | x          | x               | x     |
| Lack of knowledge about COVID-19 prevention   | x           | x        | x            | x            | x              | x     | x          |                 | x     |
| COVID-19 misinformation and myths   | x           | x        | x            | x            |                | x     |            |                 | x     |
| Barrier to getting COVID-19 information   |             | x        |              | x            | x              | x     | x          |                 |       |
| Distrust in healthcare systems  | x           | x        | x            |              | x              | x     |            |                 |       |
| Barriers to accessing PPE   | x           |          | x            | x            | x              | x     | x          |                 |       |
| Barriers to accessing testing   | x           | x        |              | x            | x              | x     |            |                 |       |
| Barriers to accessing vaccinations  | x           | x        |              | x            |                |       |            |                 |       |
| Stigma related to positive COVID result   |             | x        |              | x            | x              | x     |            |                 |       |
| Faith/spirituality play role in response to COVID-19  | x           | x        | x            | x            | x              | x     |            | x               |       |
| Use of traditional medicines play role in response to COVID-19  | x           |          |              | x            | x              | x     | x          | x               |       |
| Cultural values around family and community   | x           | x        | x            | x            | x              | x     |            | x               |       |
| Increase risk due to large, multigenerational households  |             | x        |              | x            | x              | x     | x          |                 |       |
| Increased risk due to employment in low-pay positions with increased interaction with others (frontline, essential) | x           | x        |              | x            |                | x     | x          | x               |       |
| Concern about workplace protections and ability to take time off work when sick                                     | x           | x        |              | x            | x              | x     |            | x               |       |
| Increased risk due to public/shared transportation  | x           | x        |              |              |                |       |            |                 |       |
| Job loss and reduction of hours   | x           | x        | x            | x            | x              | x     |            | x               | x     |
| Difficulty paying bills   | x           | x        | x            | x            |                | x     |            |                 | x     |

| Finding   | Black/ ADOS | Latino/x | East African | West African | Karen/ Karenni | Hmong | Vietnamese | Native American | Youth |
|---|-------------|----------|--------------|--------------|----------------|-------|------------|-----------------|-------|
| Food insecurity   | x           | x        | x            | x            |                | x     |            |                 |       |
| Concerns about distance learning and education  | x           | x        |              | x            | x              | x     |            | x               | x     |
| Increased mental health concerns  | x           | x        | x            | x            |                | x     | x          | x               | x     |
| Uncertainty and fear  | x           | x        | x            | x            | x              | x     | x          |                 | x     |
| Isolation/lack of gathering   | x           | x        | x            | x            | x              | x     | x          | x               | x     |
| Family issues   | x           | x        |              | x            |                | x     |            |                 |       |
| Concern for youth   | x           | x        | x            | x            | x              | x     |            | x               | x     |
| Concern for elders  | x           |          |              |              | x              | x     |            |                 | x     |
| Grief and loss  | x           | x        |              | x            | x              | x     |            | x               | x     |
| Lack of access to community support and cultural traditions   | x           | x        | x            | x            |                | x     |            | x               | x     |
| Limited access to help during pandemic  | x           | x        | x            | x            | x              | x     |            |                 |       |
| Lack of access to culturally appropriate food   |             | x        |              | x            |                | X     |            |                 |       |
| Barriers to accessing available resources   | x           | x        |              | x            | x              | x     |            |                 | x     |
| Language barriers   | x           | x        | x            | x            | x              | x     | x          |                 |       |
| Need for continued culturally and linguistically appropriate information about COVID-19 and other supports. | x           | x        | x            | x            | x              | x     | x          |                 |       |
| Want community orgs, trusted messengers to take stronger role   | x           | x        | x            | x            | x              | x     | x          |                 | x     |
| Need for culturally specific health care providers  | x           | x        |              |              |                | x     |            |                 |       |
| Racism, discrimination and historical trauma  | x           | x        |              | x            | x              | x     |            | x               |       |
| Want Ramsey County to take stronger role in enforcement   | x           | x        | x            |              |                | x     | x          |                 | x     |
| Community strengths and resilience  | x           | x        | x            | x            | x              | x     | x          | x               |       |
| Want ongoing engagement with Ramsey County and opportunities to advocate for community                      | x           | x        |              | x            |                | x     |            | x               |       |
| Wants role in education and advocacy  |             | x        | x            | x            |                | x     |            | x               |       |
| Barriers to accessing Ramsey County services  | x           | x        |              | x            | x              | x     |            |                 |       |