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The Community Voice: Identifying Barriers and Facilitators to Access and Utilization of Healthcare Services for an Underserved Population through the “Photovoice” Technique

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A HOPEFUL HOPELESSNESS

Every day, this house speaks to me. It’s just like myself. It just needs some help, some sincere help. Somebody that’s really gonna care.

If you don’t have hope, you die. That’s what this house is doing. It’s dying.

Illuminating the challenges relating to health and healthcare among Highland Park residents
This project began with the question “Why?”

**WHY** is there a stark difference between health and health-care access among Richmond communities?

**WHY** when services are provided for an at-risk population, are they not utilized?

**WHY** are some individuals able to successfully navigate the barriers to good health care while others are unable to do so?

Good health care means being able to receive the right care at the right time. Yet sometimes for some people, gaps in access make it impossible for to get the care they need.

Some images in this exhibit represent the **disconnects** along the path to health care, such as environmental stress, a lack of transportation, insufficient resources, inadequate care, or healthcare workers, who by their first contact with a patient make it difficult to receive the best care possible.

Other images portray human **connections** of hope, compassion, respect, and empathy that empower the individual and promote dignity and respect.

As you “hear” the stories told here, understand our goal was to listen and learn. We wanted first to understand the problem. To gain understanding, we chose to hear from those who are walking the path. Observe where the connections and disconnections continue aid and hinder this community in their quest for good health.

Then ask yourself, “**Am I a connector?**”
Throughout the photovoice process, participants identified persons or situations that both helped and hindered their ability to get the health care or support services they needed.

We labeled these persons, situations, and concepts as connectors and disconnectors operating within the larger healthcare system.

By understanding the impact connectors and disconnectors have on a vulnerable community we have a real opportunity for change.

**DISCONNECTORS & CONNECTORS**

DISCONNECTORS
- lack of transportation
- limited cell phone minutes
- non responsive healthcare providers
- inadequate healthcare policy

CONNECTORS
- community leaders
- accessible transportation
- access to quality food
- accommodating clinic hours
- clear patient provider communication
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Community members who took these photos of persons experiencing physical and mental difficulty shared a common sense of being invisible to members of the larger community. Their isolation is further complicated by their feeling that their voice is unheard in their struggle for change.

2013 FEDERAL POVERTY LEVEL (FPL):
- $11,490 yearly income / person
- $23,550 yearly income / family of four

26.3% of Richmond City population lives below FPL*

11.7% of Virginia’s statewide population lives in poverty**


I just see this dog barking and barking. They stay chained up 24/7. They’re never let off the chains and walked. They never get no exercise. They’re just on the chain.

He runs so hard from side to side, the chain’s just snapping back. Chains do make a dog meaner.

I have never seen this dog off this chain.

I really wonder how this dog would really act if he could be free and he had somebody that showed him love.
These [crutches] are like my other friends, you know what I’m saying? I got to depend on these, you can’t take them away.

When you get up in the morning, the first thing that hit your mind. You want to go somewhere, but you gotta carry Betsy Lou and Diane. I gotta carry them with me everywhere.

You’d be tired before you even think about what you got to do.

I just try to laugh to keep from crying.
There’s two brothers there. These are two people that have been struggling with the challenges of life. They’re a true reflection of the saying, ‘God wouldn’t change the condition of people until they change that within themselves.’

You have to know these people see the change.

That if [others] know them, it might be some inspiration for them.

“[This man on the right] has changed his condition. He has a business now with seven people working.

You see [the man on the left]. He’s meeting the struggle, challenge of life. He have came a great distance.” – hassan
I see a lot of homeless people who has mental issues. They don’t have nowhere to go.

She just comes there every day. Rain, sleet, snow. It would be nice for the people that have problems have a place to go to.

This is not it, her sitting right here like this. She’s been doing this almost 2-1/2 years since I’ve been here.

“What happens is in the process, she gets dropped because they can only provide so much services because of her Medicaid services, so they can only go so far. Maybe five days, maybe ten. After she maxes it out, they release her. They say, ‘Well, she’s on her meds. She’s good,’ and they release her. Within a couple of hours, she’s sold her meds and is back out.”

loretta, community member
This is my daughter. She stayed in the hospital for a month. They still couldn't tell me what was wrong with her, they sent me to go see a GI specialist, ...way out in Short Pump.

I had no transportation of getting there.

When I finally did get there with her, they told me Medicaid only paid for half of the visit, so I had to pay maybe $400, so she never got a chance to see them.

I really gave up on it. I had no way of getting to Short Pump every other week, and I sure didn’t have the money to pay for it every time.


A single mother of two children who works 40 hours a week earning minimum wage (around $15,000 per year) would not qualify for medicaid. SHE MAKES TOO MUCH MONEY.

She would also not qualify for subsidies to sign up for health insurance on the exchanges. SHE EARNs TOO LITTLE.*
You got to go down there [to the clinic] every 30 days just to get your prescription refilled. Thirty days come quick if you’re working and taking care of family or whatever you may be doing.

I have high blood pressure and high cholesterol and I didn’t get my prescription filled because I sat in there for an hour and 45 minutes and didn’t see the doctor. I know my health is important too and my patience ran a little thin. I couldn’t take it no more. I said, ‘Look, I have to reschedule.’ [If someone would have said,] ‘Have some patience, Mr. _____. The doctor will be there,’ I maybe would have stayed another five, ten minutes.

[But there was] no compassion at all.

Oh well. Okay, bye.
Full time work is hard to find. This job was 30 miles from home so I was lucky to have a car.

Very cold in the winter, very hot in the summer. You work from 12 until the job is done. If you are sick, you still have to work outside in the brutal cold.

You have no sick time as a temp worker and no insurance. If you miss work for being sick they might terminate you.

You have to take care of yourself so you don’t get sick because I couldn’t see a doctor. I have a job now that has insurance but I had to make it through the temp jobs to get here. But even [with a full time job], I saw one worker who was moved from temp to full time. He got sick and his doctor took him out for awhile, and when he returned, he was terminated.
Many community participants shared that although they were not where they wanted to be in terms of quality health care, most were able to see where they wanted to go. Further, they felt they were working hard within the system to access the care they needed. The problem identified in our group sessions was often not just a lack of resources available, but the lack of knowledge of what was available. Often times the variable transportation and inconvenient or impossible timing of appointments kept patients away from their doctors.

Who qualifies for Medicaid/FAMIS (Virginia’s Medicaid CHIP program) in Virginia?

- **Working parents** who earn less than 30% of the FPL: $5900 for a family of three.
- **Children up to age 18** whose parents earn less than 200% of the FPL: $47,000 for a family of four.
- **Pregnant women** who earn less than 200% of the FPL: $23,000 per year.
- **Elderly & disabled people** who earn less than 80% of the FPL: $9,000 per year.
- **Adults without children** are ineligible.
A variety of fresh vegetables spells ‘Good Health Choices.’ They are located upon entering the store and you can’t help but pick from the Garden of Life.

Sometimes I have an opportunity to pay someone to take me to a Wal-Mart or Kroger to shop for groceries. Most super stores are located outside of our community where our members have limited access to shopping there for better quality foods to promote better health.

It’s a different world all together. It’s exciting, not frustrating and depressive and you go home feeling satisfied.

bad meats
A big thing of meat cost $1.70 and was brown. What in the world could it have possibly been and why is it so cheap? This is the quality of meats that we are sometimes stuck with, either eat it or go hungry. This can’t be healthy or nutritious, but it will keep you from starving. Access is limited which in turn limits healthy choices.

fresh meats
Quality always looks healthy and delicious. Quantity says we have your best interest at hand. Super stores are great! Fresh meats are a rare commodity in some communities. Inner city communities have the least access to some foods. Transportation can be a problem for some of the members in our community.
As you get older, you develop all kinds of medical issues, it takes up most of your time in a day. [The parole office] decided that because of my drug history — not what I’m currently into — that I need to be on Color Codes.

They insist and demand that we show up, regardless of our other medical appointments or anything, and it’s taking its toll.

I haven’t figured out just how I’m gonna handle it yet, but I know this — I’m not gonna be able to make it and stay free. I got too many doctor appointments. They demanded me to come down there twice a week. Now, they’ve added onto it, I got to call in four times a week.

I can’t get to the provider, so I’m thinking I’m gonna end up going to the emergency room for [my health issues].
WalMart — me and my son were there on Friday. I had to pay a bill. Also, they have healthy things in the grocery area, they have a pharmacy, they have — which I need — eyeglasses and they do exams for vision.

It’s a one stop shop.

We do have a bus, a GRTC bus that comes to pick people up in the community and takes them once a month to Wal-Mart, but I wonder how that works if you got 60, 70 people on the bus with groceries.

loretta, community member
Once we identified some of the health care problems in the community the dialogue quickly moved to how they could be addressed. A consistent lack of resources and knowledge about existing resources were common barriers in the path to solutions.

**WHO CAN FIX THIS?**

Once we identified some of the health care problems in the community the dialogue quickly moved to how they could be addressed. A consistent lack of resources and knowledge about existing resources were common barriers in the path to solutions.

**ACCESS TO HEALTHY FOOD**

- **19.9%** of Richmond’s population is food insecure.
- **11.8%** of Virginia’s statewide population is food insecure.
- **Over 40%** of Richmond’s population lives in a food desert.

**WHO CAN FIX THIS?**

Once we identified some of the health care problems in the community the dialogue quickly moved to how they could be addressed. A consistent lack of resources and knowledge about existing resources were common barriers in the path to solutions.

**Food insecure** means lacking access or uncertain availability to adequate nutritional food necessary for a healthy, active life. The term **food desert** is used to describe low-income neighborhoods with limited or no access to healthy foods.

I guess at the same time, I was trying to express some things about myself because my mouth is a little messed up. This man wanted to get his mouth fixed, but there’s no leads for him to do it. Once again,… this is an ignorance here to the facts of what can be done.

You could sit back and you can look at other people’s lives and speculate, but you can never know what’s really going on in that person’s life. You can say they can do this, or you can say they can do that, but for one thing, for ignorance, it may be the case it can’t be done at that time for that person.

* Virginia Medicaid Dental Coverage for Adults:
Coverage is limited to medically necessary oral surgery and associated diagnostic services.

There are serious links between oral health and overall health and well-being: including nutrition, digestion, speech, social mobility, self-image, and esteem and quality of life.

* VIRGINIA MEDICAID DENTAL COVERAGE FOR ADULTS:

*Source: http://www.vhcf.org/data/statistics-and-research-on-dental-access/ • http://jchc.virginia.gov/4.%20Untreated%20Dental%20Dis-

There are very limited dental options for the uninsured with EDs — a common but very expensive treatment option that usually offers only a temporary relief for dental problems.
You can see all the damage.

It’s torn down and one of the rubber wheels missing one tire. She has Medicaid and Medicare and she’s been trying to get a wheelchair and they keep denying her. She had made numerous attempts to get a new wheelchair and have failed. She’s been trying this probably a year and a half, close to two years.

I’ve made some calls for her to her doctors. I don’t know if it’s on our end over here or the medical end, I don’t know, but I know she don’t have a wheelchair, whatever the reason is. I could pull my hair out. Attempts have been made. We don’t just sit around and don’t do nothing.

I hope I don’t have to deal with that when I get older and need to be on Medicare or Medicaid. I hope something will be done about it by then.

*Source: http://kff.org/medicaid/fact-sheet/the-virginia-health-care-landscape/*
At these super stores fresh fruit and vegetables are the first to greet the consumer.

There’s just something natural about the visual effects that’s kind of soothing for the soul/spirit.

REAL COST OF OBTAINING A TOMATO IN A FOOD DESERT: $25.50
3 hours of time away from work at job that pays minimum wage: $21.75
Bus fare both ways: $3
Tomato at Kroger on Lombardy: $0.75

This picture represents the lack of fresh vegetables in our community grocery store. An empty shelf is well lighted displaying ‘nothing,’ while our veggies are packaged with no light to inspect items.

The empty shelf is not a ‘sold out’ shelf, it’s a waiting to be used shelf.

CLOSEST GROCERY STORE
Food Lion on Mechanicsville Turnpike (30-minute bus ride)
Kroger on Lombardy (40-minute bus ride with one transfer)
My prosthetic leg is kinda heavy to be toting around to me. It’s uncomfortable. I’m kinda tired now thinking about it. I want something easy to put on, you know what I’m saying? Light.

That’s the part right there [therapy] that kills me. You gotta go see a therapist two times a week? And I got to go two places to take therapy. Now how in the world?

Yeah, I need therapy, but who in the world gonna take you to therapy two times a week?
Lack of Communication

I haven’t had a — what you call them doctors now — primary doctor my whole life. Actually, I was ignorant to the fact that I could have a primary doctor. I had x-rays, MRIs. I don’t know what’s going on with my legs. Sometimes I can’t hardly walk. [The doctor] couldn’t give me no concrete information about nothing I asked him. Every time I asked him something, he gave me a dumbfounded look. I felt like a cattle, a piece of meat or something, every time I went to his office because I didn’t get anything. I was supposed to be getting scheduled for some kind joint injection. I waited almost five months, to no avail.

A couple of days ago, the radiology department called me and said that they had scheduled me. They told me that they were only notified two days before that when I been waiting five months for this scheduling. This doctor hadn’t done what he was supposed to do. I just know that it’s a poor medical system this day so far as people — I would say it’s ‘undeserved’ [underserved] people.

— Virgil

Unreliable Resources

I was just down at the workforce center, I got people in my neighborhood looking for jobs. She gave me this big stack of papers and all kind of job handouts. I happened to give to it a couple of the young men standing around.

I followed up with them and I said, ‘What happened with that terminal job, working as a stocker?’ He said, ‘The job was in Pennsylvania.’ 80 percent of [the jobs] were not in the city of Richmond. They were either in northern Virginia, South Carolina [or other states].

These young men don’t have a way to get there. They’d have to live there. That’s one of the things I see is that even though you’re getting resources they’re not reliable.

— Loretta

Lack of Empathy

Within 45 days, I made three trips to the emergency room, where they never touched me. They told me I had some kind of virus the first time. The second time, they told me I had some kind of blood disorder. They never touched me.

The third time I went in there, I couldn’t hardly walk. I just told them that they need to call the police cause I’m not leaving till somebody tell me what’s wrong with me. That’s when they admitted me into the hospital. It wasn’t a decision of mine. I was trying to get help. I didn’t have insurance. That’s the first thing they ask you when you go to the hospital.

— Virgil
The photovoice participants shared many stories related to inspiration for change. Inspiration was found in family, friends, and faith and often included examples of other community members who modeled successful pathways to a healthier life. Empowerment often proceeds change, health care workers who “saw” their patients also acted as inspiration for change.
This was a nursery, but it was shut down because of some negligence. At one time it was a friendly house, whenever you went by the house it brought smiles to your face. It just was the atmosphere just seeing those kids smiling playing around with each other.

It was full but now it is empty, and life was here and now it’s gone. Now, you don’t see the kids, so I call it ‘Lost Kids.’ Where are they at now? When I look at houses and stuff like this, [I think],

how can we do something better to bring it back?
My father was the grand marshall of the Masonic Temple Mason, a leader, and an organizer who stood for what was right for the people.

Most men grew up with their moms. That man was my idol.

My father, diabetic, heart medicine, high blood pressure. He stopped using the medicine. He had an enlarged heart and he had a heart attack and passed.

I went [to the doctor] last week. [My doctor] asked me, ‘How many those Pepsis you drink a day?’ He got on me so bad. He said, ‘Sugar is killing you.’

I cried in that office. I felt like he was my father telling a young boy something because what I’m doing was killing myself with Pepsi, with sugar in my coffee, sweet cakes that I eat.

That scares me, but is it scaring me enough to look at me and look at my health and take what I need to do for my health and just to live?
What I was trying to show here is [my friend] is a strict vegetarian. You can see that you can take care of your health yourself if you eat the proper stuff. He got beans and rice right there. You have your fruit right there. You got water. I mean he’s a strict vegetarian.

He hardly ever gets sick. He gets up every morning, does his exercises, and other things that we can do.

You know we can be our own doctors. Take care of ourselves.

You’re talking about your health care, you’re talking about your life. Talking about nobody else life.
Participants identified persons in their family, at the clinic, and in the support service path that facilitated their efforts to live a healthy life.

**HUMAN CONNECTION**

**THE LINK TO A HEALTHY COMMUNITY.**

Participants identified persons in their family, at the clinic, and in the support service path that facilitated their efforts to live a healthy life.

*respect and dignity*

“I was supposed to get an injection. I got every question that I had in my mind about what I was going through and what I was gonna go through with the injection answered. The people was real nice. I was overjoyed about the treatment myself because it comes far and few and in between. I hate to say that. [The doctor] heard me. I think she felt me cause she was just adamant about what I was going through. She was attending to my situation.” – co-researcher J.
[My boss and landlord] has had [his own business] for 32 years. He hires within the neighborhood.

I rent a room from him. I once stayed in the old church out on Midlothian Turnpike. It was so stressful over there that I knew [it did something] to my health too.

I always wonder like a lot of time when you go to the doctor they ask you like, ‘Do you live alone? How do you feel about where you live at?’ I always wondered like what difference did it make? But it does make a difference.
“This is my foundation. This is my family right here. This is what keeps me going.”
Those two women throughout their life has been battered, left, beaten down by society, by their family, friends or whatever the circumstances. They told them you will never live on the outside.

[Two women] with extreme mental issues. They are able to adequately live on their own and actually enjoy a moment in the sun without any stress. They’re enjoying their neighborhood. Now the neighbors know them. They wave at them. They speak to them. They’re willing to help them.

Their battle was just everyday basic living. Those ladies had that trust enough to believe that somebody was gonna hear them. It took not just one person, but it took a team of people. It took the health professionals to listen.
Transportation to outside services can make or break a patient’s recovery from illness.

Transportation gives you access to everything you need. If you had adequate bus service, it would eliminate a lot of the extra money spent for private transportation. Adequate service even allows you to go get food because if you don’t have an adequate grocery store in your neighborhood, at least you could ride the bus.

If you had adequate transportation, you don’t have to depend on somebody to get you there. This transmits a lot to me because it means that people have a way to go and do something for themselves. It gives me a sense of independence.

Not only that, to have a bench because everybody is not a spring chicken and can stand and wait for the bus. A trash can. Those are simple, quick fixes in the neighborhood.
Because so many of our young ladies are with kids and no father with them so that’s why I called this picture ‘Young and Innocent,’ baby having babies.

She is very interested in health care because she has a couple kids and has no man with her, boyfriend, none whatsoever.

With Obamacare, she don’t know exactly how everything is.

This photo displays the end results of a community garden. The garden developed out of concern for healthy vegetables in a community with limited access to fresh vegetables.

This garden also represents relationship building and community efforts.

We invite all to plant and harvest free of charge to combat the lack of these items in our community. We have planted herbs, onions, peppers, potatoes, squash, melons and much more. This is something that we can do as a community together to bring fresh vegetables to our community, and it’s free.

The primary intent of this photovoice project was to listen to and learn from those who generously shared their stories and experiences about health and health care in the community. It was our hope that participating individuals would feel a sense of empowerment from the simple action of speaking their concerns and having their voices heard.

Good health care means being able to receive the “right care at the right time” from our health care providers, and acknowledging that limitations in transportation, communication and scheduling are serious considerations in whether or not someone will receive the care they need.

As we work to improve the health care system, we believe it is the human connections, providing knowledge, understanding and joint solutions, that becomes a lifeline for many who are unable or unsure about how to use health care services.

We discovered extraordinary persons and examples of human connections that through a resiliency in spirit and tenacity in action encouraged many to seek better choices and higher quality of care.

Some were the doctors who actively listened to their patients and asked about the life issues that helped or made it harder to be healthy, the receptionist who understood that buses run only at certain time of the day and scheduled patients accordingly, the clinic that provided transportation for patients without other options, and the neighbor who noticed a need, and simply did what she could to meet it.

QUESTIONS POSED BY OUR PARTICIPANTS:

We know there will always be people in poverty, the question is, how are they treated as they try to get health care?

How can we get the healthcare gap to close?

We also know that people [health care providers] do what they can do, so how do we [those in need] get what we need and not break the back of the people who are trying to help?
OUTCOMES

Our primary desired outcome for this project is the empowerment of the individual, and collectively, of the community in which they reside. This empowerment comes from being heard, participating in dialogue to identify issues important to the community, and having the opportunity to bring identified concerns to influential advocates.

In this final stage of our project, the photographs and accompanying stories continue to be used to increase knowledge and awareness about the identified issues, initiate constructive dialogue, and promote possible grassroots action for change.