Implications of racial and ethnic relations for health and well-being in new Latino communities: A case study of West Columbia, South Carolina

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Abstract In this community-based research, we reveal social processes contributing to health inequities among the resident Latino population – predominantly new immigrants – in a working-class, urban community with an historical, social and political landscape defined by a Black–White social divide and its attendant racial tensions. Using the social determinants of health framework, we identify both macro- and micro-level structures and processes that threaten the health and well-being of individual Latinos and the broader communities where they live and work: discrimination, social isolation, communication barriers, host community residents’ fear of immigrants, and racial/ethnic competition for work, housing, and educational and social resources.


Keywords: social determinants of health; immigration; Latinos; community-based research; race and ethnicity; intersectionality
Health and Well-Being in the New Latino South

Nativism and xeno-racism drive prejudice, discrimination and attacks on immigrants across the globe (Fekete, 2009; Menéndez Alarcón and Novak, 2010). In the United States, the divergent approaches to immigration management and control initiated by various sectors of the federal government and more recently by individual state legislatures reflect the increasing polarization around immigration policy (Burns and Gimpel, 2000; Schrag, 2010). Dominant culture-controlling images of immigrants taking jobs, housing and resources away from native-born citizens fuel surges in cultural and economic nativism (Lacy, 2009). In the Southeastern United States, where until recently there was minimal contact with Latinos, historical racial dynamics and existing macrosocial contexts clearly contribute to and shape social responses to the recent influx of Latino immigrants (Menéndez Alarcón and Novak, 2010). We explore these responses through the experiences and perspectives of Whites, Blacks and Latinos, in the context of one of these new Latino settlement areas and consider how such responses, in turn, shape the health and well-being of Latinos and the communities where they now live and work. We argue that understanding and developing interventions to improve Latino health and well-being requires recognizing and attending to the macro-social context of the new settlement receiving community – in particular the historical and current patterns of racial and ethnic social relations.

Social determinants of health

There is increasing recognition of the impact of macro-level social processes on health (Link and Phelan, 1995; Phelan et al, 2004; Weber and Castellow, 2012). Persistent health disparities between non-Hispanic Whites and racial/ethnic minorities in the United States underpin critiques of the dominant biomedical health research paradigm and its singular focus on individual determinants of health (for example, diet, exercise, tobacco use). Yet calls for more attention to the social determinants of health, including the broader social and economic context embedded in “variables” such as gender, race/ethnicity and socioeconomic status are not new. As early as 1899, W.E.B. Du Bois framed the causes of health disparities between Blacks and Whites as “primarily social” (Williams and Sternthal, 2010). Link and Phelan (1995, 80) posed the following argument for attention to macro-level social determinants of health:

First, … individually-based risk factors must be contextualized, by examining what puts people at risk of risks …. Second … social factors such as socioeconomic status and social support are likely “fundamental causes” of disease that, because they embody access to important resources, affect multiple disease outcomes through multiple mechanisms,
and consequently maintain an association with disease even when intervening mechanisms change.

More recently, these calls appear in reports of the Institute of Medicine, the Centers for Disease Control and Prevention, the World Health Organization and the National Institutes of Health, and converge with key elements of several critical health paradigms: fundamental causes, ecological, systems, social determinants and feminist intersectionality (Shonkoff and Phillips, 2003; Weber and Parra-Medina, 2003; Weber, 2006; Weber and Fore, 2007; CSDH, 2008a, 2008b; AHRQ, 2009; Baum et al, 2009; Graham and Spengler, 2009; Rashid et al, 2009; IOM, 2009, 2010).

In their conceptual model of social relations and health, Berkman et al (2000) described the linkages between upstream factors – including macro-level social structural conditions (that is, culture, racism, socio-economic conditions, politics and social change) and the structure and characteristics of social networks at the mezzo-level – that together influence the opportunities for downstream, micro-level psychosocial mechanisms (for example, social support influence, engagement, contact and access to resources). They posited the resulting impact on individual health through four primary pathways: (i) provision of social support; (ii) social influence; (iii) social engagement and attachment; and (iv) access to materials resources and goods. Coleman (1988) defined these mezzo-level pathways as components of social capital, a key health determinant, especially in the context of social inequality (Kawachi et al, 1997; Cattell, 2001).

Despite the recognition of social determinants of health and disease as embedded in the macro-social context and the theorizing about multiple pathways of influence, researchers and practitioners have not paid sufficient attention to the broader health implications of social change forces such as immigration, the racial/ethnic structures of US society, cultural norms and values, socio-economic inequality, political culture and public policies. Lack of direct engagement, communication and interaction with new immigrants breed negative stereotypes and mistrust, further contributing to discrimination and racial/ethnic othering that consigns Latinos to the margins as perpetual foreigners (Rocco, 2004; Viruell-Fuentes and Schulz, 2009; Menéndez Alarcón and Novak, 2010). Viruell-Fuentes (2007) calls for recognition of the negative health impact of extended exposure to racial/ethnic othering and discrimination on immigrants, challenging the more traditional immigrant health approaches that focus primarily on levels of individual acculturation and behavioral health determinants.

In this article, we consider the social determinants of health and well-being in a new Latino settlement community, West Columbia and South Carolina. In particular, we examine racial and ethnic relations as described by Blacks, Whites and Latinos who live and/or work in the community. Our aims are to
further understanding of the complex and multi-faceted nature of the social relations of race and ethnicity and to consider how they operate as social determinants of health. Further, we argue that efforts to promote health and well-being and to address the increasing health disparities in new settlement communities must go beyond promoting healthy behaviors among individuals and address racial and ethnic relations within communities (Link and Phelan, 1995; Winders, 2005; Viruell-Fuentes, 2007; CSDH, 2008a; Messias, 2011; Vega et al., 2011).

Setting, Context and Approach

The setting: West Columbia, South Carolina

West Columbia is a working-class town of 13,000 people situated across the Congaree River from Columbia, the state capital. Established in the early nineteenth century, West Columbia’s original settlers ferried across the Congaree to work in Columbia’s textile mills. The first bridge, built in 1827, did not erase the social and economic distances between West Columbia and Columbia, many of which persist into the twenty-first century. The current economic base in West Columbia and the neighboring West Metro Area towns of Cayce and Springdale includes a major hospital, the regional airport, a poultry processing plant and a variety of storage and distribution facilities. Recently, lower housing costs and close proximity to Columbia have attracted young professionals and their families, university students and faculty and new Latino immigrants to West Columbia, transforming the community’s social landscape.

The context of new Latino settlements in South Carolina and West Columbia

In the past two decades, there have been dramatic changes in the racial, ethnic and class composition of communities across the Southeast (Center for Research on Women, 2006; Smith and Furuseth, 2006; Weber, 2012). Before the 1990s, the Latino presence in South Carolina was <1 per cent, consisting primarily of individuals of Puerto Rican, Cuban and Mexican heritage in the Midlands and, in the Upstate, a Colombian contingent (Young, 2005). In the mid-1990s, economic factors on both sides of the border fueled a rapid influx of Mexican immigrants – and smaller numbers of immigrants from other Central American countries – into South Carolina.

By 2004, South Carolina’s Latino population had the fourth fastest rate of increase in the country. Since 1990, Lexington County, which includes West Columbia and the West Metro Area, consistently has ranked among the 10 South
Carolina counties with the largest Latino populations (Vander Mey and Harris, 2004). From 1990 to 2006, the Latino population in West Columbia grew by over 1000 per cent (Table 1).¹ The town’s African-American population also experienced a population increase, whereas the White population declined by 9.5 per cent.² But Whites still maintain a clear majority (75 per cent) and preserve their historical political dominance and economic advantage.

Data from the 2000 Census (Table 2) demonstrates the excess burden of poverty among non-Whites in South Carolina, and more specifically Columbia and West Columbia. Although the total poverty rate in Columbia is 22 per cent, compared with 16.8 per cent in West Columbia and 12.4 per cent nationally, the poverty rate among Blacks and Hispanics in West Columbia is much higher than in Columbia. The total median household income level in West Columbia (US$31,000) is comparable to that in Columbia ($31,141), although significantly lower than the national norm ($41,994). Notably, the average income levels of both Whites and Blacks in West Columbia are lower than those in Columbia, whereas West Columbia Hispanics actually have a higher median income than Hispanics in Columbia.

A survey of Mexican-origin immigrants in South Carolina found 95 per cent of the respondents cited the goal of improving their economic situation as the primary reason they left Mexico (Lacy, 2007). The majority of these new immigrants came directly to South Carolina, and many were from new sending states including Veracruz and Oaxaca (Lacy, 2007). In new receiving

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**Table 1**: Racial and ethnic demographic change, West Columbia, SC (1990–2006)*

<table>
<thead>
<tr>
<th></th>
<th>1990</th>
<th>2006</th>
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</thead>
<tbody>
<tr>
<td><strong>Total population</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1990</td>
<td>12,541</td>
<td></td>
</tr>
<tr>
<td>2006</td>
<td>13,604</td>
<td></td>
</tr>
<tr>
<td>Percentage of change (1990–2006)</td>
<td>8.5</td>
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<tr>
<td><strong>Hispanic population</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of total population (1990)</td>
<td>0.6</td>
<td></td>
</tr>
<tr>
<td>Percentage of total population (2006)</td>
<td>7.3</td>
<td></td>
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<tr>
<td>Percentage of change</td>
<td>1116.0</td>
<td></td>
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<tr>
<td><strong>Black population</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of total population (1990)</td>
<td>14.9</td>
<td></td>
</tr>
<tr>
<td>Percentage of total population (2006)</td>
<td>18.6</td>
<td></td>
</tr>
<tr>
<td>Percentage of change (1990–2006)</td>
<td>24.8</td>
<td></td>
</tr>
<tr>
<td><strong>White population</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of total population (1990)</td>
<td>84.1</td>
<td></td>
</tr>
<tr>
<td>Percentage of total population (2006)</td>
<td>76.1</td>
<td></td>
</tr>
<tr>
<td>Percentage of change (1990–2006)</td>
<td>−9.5</td>
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</tbody>
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¹ There are a variety of reasons underlying the undercount of Hispanic by census enumerators. The most common factors include complex household makeup or cultural differences in defining households, individual/family mobility, legal immigration status (authorized versus unauthorized), fear or distrust of government and language barriers (Lacy, 2007).

² According to the US Census data, the ratio of African Americans to Latinos in South Carolina declined from 34:1 in 1990 to only 7:1 in 2008 (Rodriguez, 2012).
communities such as West Columbia, Latinos entered settings with a long history of racial segregation, reluctant receptivity and limited capacity to respond to newcomers (Menéndez Alarcón and Novak, 2010; Weber, 2012). Given the absence of an established Latino presence in the area, these new immigrants also encountered more limited local social networks and fewer opportunities to cultivate social capital, a critical resource for promoting community health and well-being (Lacy, 2007).

**The research context: Women’s well-being initiative (WWBI) in West Columbia**

This research was conducted within the context of a campus-community partnership, the WWBI. The broad focus of the WWBI is to contribute to improving the overall well-being of women and girls through interdisciplinary, community-focused programs of research, education and action. Women’s well-being is conceptualized within a social justice framework to include mental, physical, social, economic and spiritual health and well-being. West Columbia and the surrounding West Metro Area is the principal setting for the WWBI, chosen for its socio-economic and racial/ethnic diversity and proximity to the Columbia campus of the University of South Carolina. A Community Advisory Board (CAB) composed of residents and representatives from diverse sectors (for example, education, health, social services, business, government, faith organizations) provides input and guidance on program priorities and direction.

Since 2002, collaborative faculty and student initiatives have involved West Columbia residents in a variety of arts-based youth outreach and empowerment projects, and community-based participatory research (CBPR) focusing on the well-being of diverse groups of women and girls. Over the past decade, we have

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**Table 2: Household income and poverty data – West Columbia, Columbia and United States (2000)**

<table>
<thead>
<tr>
<th></th>
<th>West Columbia, SC</th>
<th>Columbia, SC</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Percentage of individuals below poverty (2000)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>16.8</td>
<td>22.0</td>
<td>12.4</td>
</tr>
<tr>
<td>White</td>
<td>11.4</td>
<td>9.8</td>
<td>6.7</td>
</tr>
<tr>
<td>Black</td>
<td>33.0</td>
<td>26.1</td>
<td>23.5</td>
</tr>
<tr>
<td>Hispanic</td>
<td>32.7</td>
<td>13.2</td>
<td>22.0</td>
</tr>
<tr>
<td><strong>Median household income (2000)</strong></td>
<td>$31,000</td>
<td>$31,141</td>
<td>$41,994</td>
</tr>
<tr>
<td>Total</td>
<td>$34,558</td>
<td>$39,877</td>
<td>$44,687</td>
</tr>
<tr>
<td>White</td>
<td>$18,813</td>
<td>$21,393</td>
<td>$29,423</td>
</tr>
<tr>
<td>Black</td>
<td>$34,558</td>
<td>$31,079</td>
<td>$33,676</td>
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</tbody>
</table>

witnessed increasing efforts among local health and development programs to build their capacity to address the specific context and needs of the Latino population in West Columbia. In response to these and other assessment data, the WWBI CAB formed a Latina Task Force with the intent of improving links and relationships between new Latina residents and the broader community. Reflecting a commitment to an inter-disciplinary approach to health promotion and community development, key participants on the Latina Task Force include librarians, health and social service providers, educators, community members and representatives from Hispanic-serving organizations. Initial Task Force efforts have focused on enhancing Latinas’ interactions and integration with educational institutions and health-care services (for example, libraries, schools, prenatal services), and improving their English language and computer literacy.

**Research approach**

The qualitative interview data for this analysis were collected as part of an extensive WWBI community assessment process in West Columbia. The assessment aims were to gather citizen input and compile existing demographic, economic, political and organizational data; identify and characterize West Columbia community assets, needs and priorities; and inform the development of future community-based, participatory research and service projects. We first developed a semi-structured English language interview guide with the aim of eliciting views and perspectives of community leaders and members. We subsequently adapted and translated the interview guide into Spanish. We identified potential participants through referrals from community-based organizations, as well as our ongoing community engagement activities and observations with the community. The English-speaking sample \( (n = 48) \) consisted primarily of Whites \( (n = 28) \) and Blacks \( (n = 14) \), but also included individuals who self-identified as Hispanics \( (n = 3) \) and multi-racial \( (n = 3) \). These proportions approximate the racial composition of West Columbia (Table 2). The Spanish-speaking sample consisted of 21 foreign-born Latinos. Table 3 summarizes the demographic characteristics of this purposive sample.

The analysis team of researchers and graduate students worked collaboratively, conducting the initial open coding of the interviews, identifying themes and developing an inductive coding scheme subsequently applied to the entire data set using the Atlas.ti qualitative software, Version 5.0 (Atlas.ti, 2006). We then developed matrices to identify and compare thematic trends within and across racial/ethnic groups. Bilingual team members conducted the analysis of the Spanish-language data in the source language and translated Spanish data segments chosen for dissemination purposes. As we concurrently developed and interpreted the major narrative themes, we drew on the existing literature and our knowledge, understanding and experiences of the local context and setting.
Narrative Themes

We present the findings from our analysis of the English- and Spanish-language interview data in three sections. We begin with participants’ descriptions of the historical and current context of Black and White relationships in West Columbia. We then discuss perceptions of the rapid demographic transition and expanding diversification with the arrival of Latino immigrants to the area. Finally, we examine the specific case of Black and Latino relationships in West Columbia, and consider how perceived and real communication barriers and competition for housing, jobs and educational resources shapes the dynamic between these two groups.

Setting the stage: The legacy of Black/White relationships in West Columbia

Participants’ descriptions of racial characteristics and relationships in West Columbia provide background on the socio-historical context of the community. For many long-time residents, West Columbia’s small-town homegrown and traditional character included social and political conservatism, and racial division and segregation. Experiences and perspectives shared through the
interviews reflected the legacy of past racial tensions. Two different communities – the old and the new – were going through a complex process of learning to live together as:

... West Columbia ... is an older community ... there’s still some of the tensions that older communities have with regards to the issues of race .... The 40s, 50s, 60s is still part of that base culture of that community, and so it hasn’t kind of gone full circle into becoming something. I mean, they’re still holding onto vestiges of the past ... [that] they haven’t grown through or successfully addressed. That’s my opinion (58-year-old White man).

Such vestiges of the past include racially segregated neighborhoods and churches, limited economic opportunities for Blacks, confederate flags proudly hanging outside a popular barbeque restaurant chain, police brutality toward Blacks, and limited inter-racial dialogue.

Whereas some participants avoided or skirted the topic of racial tensions, others explicitly identified racism as an integral part of the fabric of the West Columbia community. A 56-year-old Black woman recognized lingering racial tensions, noting that people of different races rarely talk to each other. But she also observed that racial dynamics had improved from the past, when the intensity of racial tensions provoked overt fears among Blacks. She noted that when she was a young married woman living in Columbia, we didn’t come over to West Columbia, not after dark.

A more recent example of West Columbia’s insular nature and reluctance to welcome outsiders was community backlash to the proposed resettlement of approximately 120 Somali Bantu refugees in 2003. In coordination with the US State Department, the Lutheran Family Services organization, charged with relocating 12,000 refugees to the United States, oversaw the local resettlement process. The West Metro town of Cayce, which borders West Columbia, was chosen because of low crime, affordable housing and availability of public transportation (Callebs, 2003). At the time, even though several community leaders publicly denounced fears of the Bantu bringing terrorism and AIDS to the area as “irrational,” popular opinion prevailed. The number of refugee placements in Cayce was reduced from 120 to 60 and eventually was canceled altogether (Callebs, 2003; Ludden, 2005). In reflecting on the arrival of Latino immigrants, several participants recalled the strong negative community reaction to the proposed Bantu refugee settlement, noting both concerns about the potential drain on social and educational services and the more blatantly xenophobic fears of others:

... there was a lot of concern in the Cayce and the West Columbian community about having these Somali Bantu families come in to their
community and the impact it would have upon their community. And we knew this was a very small group of people and that there were thousands of Hispanics who had kind of just [come] in [through] an underground way [and] just kind of melded into the community (58-year-old White man).

In contrast to the fiercely negative public reaction to the proposed resettlement of the dark-skinned Black Bantu was the more muted reaction to the ongoing, less publically noted influx of mostly brown-skinned Latino immigrants into this community over the last 15 years. As these examples illustrate, reactions to new immigrants may vary, but visible physical features and the ability to speak English are two prominent factors contributing to the construction of otherness (Menéndez Alarcón and Novak, 2010).

The new diversity and transformations in community space and relations

In relating their community’s ongoing struggles negotiating historical and current racial tensions, participants noted that the current population no longer fits the racial categorization of Black or White and repeatedly used the word diverse to describe the current, more complex racial, ethnic and socio-economic class composition of West Columbia. One participant framed her description of West Columbia’s history and recent demographic transitions around the movement of racially identified groups:

... the Hispanic community is growing a lot in this place. It seems to me that they [West Columbia residents] have been leaving through the generations, first the White people came, then the Black people came, now the Black people are moving and the Hispanics are arriving (55-year-old Latina).

These cycles of racial/ethnic migration in West Columbia, suggesting what some participants describe as diversity, are a reflection of shifting residential patterns that in fact perpetuate racial/ethnic homogeneity within neighborhoods (Crowder et al, 2011). This Latina also highlighted affordable housing as contributing to the influx of Latinos into West Columbia. Over the past decade, Latinos have been settling into – or as another participant noted, taking over – affordable apartment complexes and trailer parks, many of which were located predominantly, if not exclusively, in African-American neighborhoods.

Older, long-term residents indicated a certain level of comfort with the fact that West Columbia had been, and for some still was, a racially segregated space. Given that segregation was the norm rather than the exception for this city, some participants found dealing with the new ethnic diversity particularly
challenging. Older White and Black residents approached West Columbia’s new Hispanic population within the context of the town’s existing racial dynamics:

I think people get along fairly well but I think there’s a clearer line between African Americans and Whites. I think there is a line there. I think there is and I also think ... there may be some of the older community are very much not liking the growth of the Hispanic population (52-year-old White woman).

Another participant described how an older White man angrily objected to the public library online catalog being available in Spanish, reinforcing the notion that English is the language of West Columbia. The explicit lack of trust of Latinos among Blacks and Whites was succinctly described by one 55-year-old Black man, who clearly recognized the historical underlying lack of trust between racial/ethnic groups in West Columbia and the current othering of Latinos:

... older White citizens still tend not to trust the Black folk, and a lot of young Black folk don’t trust them, and since the Hispanics come to town, nobody trusts them at all. So far as relationships are concerned, there is really not a whole lot of camaraderie here.

In contrast, others voiced slightly more optimistic views, framing racial and ethnic relations as a little uncomfortable or describing the limited relationships with Latinos as a consequence of communication barriers rather than of overt racial/ethnic tensions or mistrust. A 56-year-old White woman shared this more optimistic view of the new Hispanic immigrants:

... we all try to get along and work together. The Hispanic population, we’ve got a good many of those here and we’re trying to figure out who, what, when, where and how to help those folks out also .... The language barrier there is kind of tough in a way, but as far as any kind of clashes or anything, none. We all seem to get along pretty good.

Her sincere interest in trying to figure out how to function as a community indicated the potential for open-minded, motivated opinion leaders in the community to direct a shift to greater acceptance and integration. It is noteworthy, however, that she frames the notion of getting along in terms of the absence of clashes rather than on evidence of actual integration or solidarity. The language barrier between Spanish-only speaking Latinos and English-only speaking Whites and Blacks was a recurring theme. Long-term residents’ inability to communicate with new neighbors often created and reinforced
predominantly negative perceptions and stereotypes and exacerbated fears and tensions. In addition to fear and negative stereotyping, Latino participants emphasized their limited ability to tap into wider social networks – often referred to in the literature as *weak ties* – that can serve as links to opportunities beyond individuals’ immediate social networks (Granovetter, 1973).

For Latinos, social isolation was one of the most pronounced consequences of the language barrier. The health implications of this social isolation were framed in a gendered context. Women linked social isolation to feelings of loneliness, depression and lack of physical activity, reflecting descriptions of other first-generation Mexican women immigrants (Viruell-Fuentes and Schulz, 2009). Several Latina women expressed frustration in not knowing about or having access to safe places where their children could play or participate in organized sports or cultural activities. Social isolation among Latino men was blamed for excessive alcohol consumption, substance abuse and engagement in high-risk sexual behaviors, similar to behaviors identified among recently arrived Mexican men in New York City (Muñoz-Laboy et al, 2009).

Latino participants also suffered social isolation within their own cultural and linguistic groups. Living arrangements frequently involved a large group of single men or multiple families together in a single dwelling. One 55-year-old Latina was quick to point out that these communal living arrangements and the high Latino concentration in apartment complexes and trailer parks did not automatically generate meaningful social relationships:

... because people need to socialize and ... here, among Hispanics themselves, sometimes even they don’t socialize because while they know each other, they are not really friends. They get together sometimes because they live close by and speak the same language, but they are not really friends – like when you are living in your country and have your friends from when you are young and you know people.

Challenging the idea that positive health outcomes among Latinos can be explained by their supportive social networks, this woman’s experience introduces the notion that supportive social networks are not automatically reproduced among Latino immigrants, especially given the strains associated with migration, poverty and crowded living arrangements (Menjivar, 2000). Cattell (2001) argues that although social networks, conceptualized as a form of social capital, can serve as a buffer between a context of poverty and health in marginalized communities, there are limits to the support such networks can provide if they do not “bridge” beyond the community and expand social inclusion and access to a broader range of health promoting resources.

The pervasive language and communication barriers also fueled stereotypes and negative perceptions of racial/ethnic others. As a result, many of the shared attitudes and stories of negative incidents reported by participants across all
racial and ethnic groups were based on second-hand sources (for example, stories told by family, friends or workmates) or media depictions (for example, reports of violence between Blacks and Latinos) rather than on first-hand experiences. Interestingly, a 78-year-old White woman described the general hearsay about the overcrowded housing among Mexicans, even though her limited personal experience with Mexican neighbors had been positive:

We have so many Mexicans that’s moved in and I’ve heard, or maybe some people will say, that they see a Mexican family moving in, well one moves in and [then] they’re like 30 [more] move in the house. I have a Mexican family that live right back here, the children are just as nice and well behaved as can be.

This woman’s language is an example of how individuals may negotiate contrasting information coming from what they hear with what they experience firsthand. Several respondents described Latinos as a burden on the system of education, health and social services. A 37-year-old White woman with children in the West Columbia school system repeated the gossip she had heard about Latino children’s being a drain on the school system because they need extra help to learn English, reinforcing the notion that newcomers must fit in and should not expect to receive more than their due share of resources:

Well, a comment, and this is gossip and I don’t know that it’s true, but a lot of the teachers are spending time helping the [Latino] children that don’t speak English and working with the [Latino] parents that don’t speak English, when really, we need to be able to focus on a classroom as a whole and not … I mean I know that teachers need to help children that need help more than others, but still, this is West Columbia.

These views reflect what Lacy (2009) and others have labeled economic nativism – targeting undocumented immigrants as undeservedly taking jobs, housing, and educational, health care and social services away from those who rightfully deserve them – the natives. After questioning the use of teacher time and resources to support Latino students and families, this woman’s comment that this is West Columbia also reflected the recurring theme of othering.

Similar to situations described in other new settlement cities (McClain et al, 2007), competition for low-wage jobs was identified as one source of racial/ethnic tension. A 57-year-old multi-racial man observed, … a lot of Mexicans come in here and they’ve taken a lot of jobs. For many Black and White participants, a focus of the discussion of the growing Latino population was a local poultry processing plant, one of the major employers of Latinos at the time of the interviews. Because of the plant’s central location along the
Congaree River and on a major thoroughfare linking Columbia and West Columbia, Latino employees were in clear public view around the plant:

I see where the Hispanics are coming in, and they’re taking over more of the jobs ... like the chicken poultry [processing plant] down here, for instance. Now you see them, all of the Hispanics there ... where [before] you saw more of the Blacks that did not have that education or trade (51-year-old Black woman).

Participants voiced conflicting opinions about the Latinos employed at the poultry plant. Some accused them of unfairly taking over the jobs, whereas others noted that only Latinos were desperate enough to accept the low wages and highly undesirable working conditions.

These narratives reflect what Portes (1998) has called a Latino *ethnic niche* in the poultry industry, leading to the exclusion, perceived or real, of Blacks. Although Latino workers are clearly not the decision makers in the poultry factory, the perception of poultry work becoming a *brown-collar* occupation with overrepresentation of Latinos creates a sense of competition and exclusion, especially among another marginalized group with high levels of unemployment (Catanzarite, 2000). In the context of a poor urban environment with high unemployment, this type of job competition can easily fuel racial and ethnic tensions. After these interviews were completed, Immigration and Customs Enforcement conducted workplace raids in the Upstate area, including at a poultry plant under the same ownership as the West Columbia facility. As a result, the number of Latino workers at the West Columbia plant declined dramatically.

Although empirical data on job competition between Blacks and Latinos is limited, there is growing evidence that Blacks *perceive* job competition with Latinos in new settlement areas of the Southeast and that this perception fuels tensions and breeds mistrust (Mohl, 2003; McClain *et al.*, 2007). In Durham, North Carolina, McClain *et al.* (2007) found that although both Blacks and non-Blacks felt a potential economic threat in the rapidly increasing Latino immigration, this perceived threat was greatest among Blacks. Thus, although there may not have been much of an initial public outcry in West Columbia over the influx of Latinos, given the current national economic recession and recent passage of anti-immigrant legislation in South Carolina and other Southeastern states, the potential for increasing backlash against immigrants clearly exists.

Recognizing the economic contributions of the new Latino residents, a 62-year-old White woman noted that although many West Columbians feel Latinos are taking jobs away, *there is not a West Columbia person that I know that would take some of those jobs*. Her comments imply that despite the historical racial tensions, Blacks and Whites have a shared identity as *West Columbia people*, an identity not extended to Latino outsiders. This
distinction reflects the complexity and dynamic nature of racial and ethnic relations beyond the Black/White binary (Lee and Bean Frank, 2007). Marrow (2009) suggests that racial and ethnic relations in rural North Carolina demonstrate the emergence of a “Black/non-Black” color model whereby Latinos, despite the actual color of their skin, “perceive the social distance separating themselves from Whites is more permeable than that separating themselves from Blacks” (1037). Although we did not specifically examine this phenomenon, the salience of the narratives of tensions between Blacks and Latinos suggests that West Columbia could reflect a similar pattern.

Evolving racial/ethnic relations in West Columbia: Blacks and Latinos

Participants across all racial/ethnic groups identified tensions between Latinos and Blacks as a community concern. A bilingual Latina, interviewed in English, provided this rather fatalistic perspective, framed within the socio-historical context of race relations in West Columbia:

I believe that the racial tensions and ethnicity tensions, cultural tensions are one of the biggest problems that we’re facing in West Columbia … I don’t think those problems are gonna go away … There’s an unfortunate tension between the African Americans and the Hispanics. At one time it was a lot of tension between the Whites and the African Americans. Now there’s a lot of tension between the Whites, the Blacks, and the Hispanics, and mainly with the Blacks and Hispanics.

This woman’s observation suggests that traditional Black and White tensions have been transferred to Blacks and Latinos. One of the most salient and recurring themes among Blacks was the feeling of loss and estrangement within their neighborhoods as Latinos moved into traditionally African-American residential areas. A 55-year-old Black woman described her experience of the diminishing presence of African Americans in her neighborhood:

We basically have more Hispanics or Mexicans if you will, than African Americans … This particular [district] was predominantly African American, but now we’re outnumbered almost two to one, and it’s kind of strange getting adjusted to that, because I’m so accustomed to having, I would say, my own people around. All of the apartment areas are predominantly Hispanic, all of them, like 99 per cent. Every two or three houses now, if it’s rental property, it’s Hispanic.

Limited economic and social power may, in turn, enhance fear of others and impede opportunities for developing social integration and cohesion, which are
critical for creating healthy communities. Recent research suggests that both Whites and Blacks tend to migrate out of areas with higher concentrations of immigrant populations (Crowder et al., 2011). Given these trends, it is possible that out-mobility among people such as this woman may be restricted because of economic constraints and other forces of social marginalization.

The role of communication barriers also surfaced in descriptions of Latino/Black relations involving housing. Consider the comment of a 56-year-old Black woman who lived near a predominantly Latino complex, whose tone suggests more frustration with language barriers than overt negativity or fear of others:

The worst I would say is … not that we have so many others [Latinos], but it’s like every other house now, you have somebody that you can’t even speak to because of the language. All of the apartments right across the street, they’re full of a different race [Latinos] that you can’t really speak to.

Owing to limited opportunities for social interaction and communication between Black and Latino neighbors, language barriers may fuel negative perceptions and stereotypes portrayed in the media. In her response to news reports of violence between Latinos and Blacks, a 28-year-old Latina noted, *It’s like they [Latinos and Blacks] just can’t see each other.* This woman’s observation reflects how media may contribute to the perception of tensions between Blacks and Latinos, two groups that are frequently depicted negatively in local media. A 66-year-old Latino man echoed the sentiments of tensions within neighborhoods and apartment complexes:

For example, I have seen tensions with the African American community [and Latinos]. There is, perhaps, a certain rejection of our Hispanic population to the point that there is no approaching [each other]. I have known in a few cases [Latino] people who had to move apartments because the neighboring apartment was making their lives impossible.

Although both these examples referred to media depictions or second-hand information, rather than actual lived experiences, they reflect perceptions circulating among the Latino populations.

Economic concerns and poverty also figured in participants’ discussions of tensions between Blacks and Latinos. As indicated by the West Columbia economic data (Table 1), Blacks and Latinos are disproportionately represented among the poor. Several participants suggested that poverty, rather than race/ethnicity, was the driver of tensions between Blacks and Latinos. Tensions related to sharing of scarce resources even played out among neighborhood children. In one case, competition for local park space between Black and Latino children required intervention by a community liaison. These experiences
highlight how the growth of the Latino population in a context of poverty and racial segregation can create both perceived and real tensions between two socially and economically marginalized populations. These findings echo earlier sociological studies indicating that poverty and other forms of marginalization may limit the ability of social networks to generate social capital, both among Latinos and across racial and ethnic groups (Fernandez-Kelly, 1994; Menjivar, 1997, 2000).

**Implications for Community Health and Well-Being**

Our study’s findings further support the need for public health research, practice and policies, guided by deeper understandings of how macro-level structures and social relations impact health and well-being in immigrant and minority communities. Current explanatory frameworks that focus primarily on individual health status and health behaviors fail to provide a complex, textured understanding of the experiences of Latino immigrants and the broader context shaping their health outcomes (Evans and Baldwin, 1987; Messias and Rubio, 2004; Viruell-Fuentes, 2007). The consequence is a de-contextualization of health outcomes and failure to recognize the dynamic nature of social relations within these structures – which may be sources of both support and stress (Viruell-Fuentes, 2007; Viruell-Fuentes and Schulz, 2009).

In their individual descriptions and reflections, participants recognized how the steady influx of Latino immigrants over the past 15 years had transformed their small urban community from a dichotomous White/Black composition to one that is more racially and ethnically diverse. The historical context of Black/White racism and segregation in West Columbia framed Latinos’ reception, and continued to shape the way different racial and ethnic groups lived and interacted with each other and negotiate their community identities (Winders, 2008, 2009). These dynamic structures of racism and segregation are among the social determinants of community health and well-being. To adequately respond and address health disparities in new Latino settlement communities, we suggest traditional theoretical frameworks need to be revised, and Latino health promotion policies and practices expanded to include social and structural-level interventions (Link and Phelan, 1995; Viruell-Fuentes, 2007; Viruell-Fuentes and Schulz, 2009).

This case study indicated various processes and effects of social fragmentation. Lack of communication and trust combined with perceived competition for economic and social resources among the most socially marginalized posed major barriers to community integration and, consequently, health and well-being. Whether they are real or perceived, we argue that these racial/ethnic tensions have the potential to significantly affect the overall health and well-being of Blacks, Whites and Latinos, by perpetuating a context of
racial/ethnic othering and limiting the development of social ties and community integration, which are critical social determinants of health (Berkman et al., 2000; Cattell, 2001; Viruell-Fuentes, 2007; Viruell-Fuentes and Schulz, 2009; Bernosky de Flores, 2010).

Linguistic, social and physical isolation limited opportunities for Latinos to foster meaningful social connections, to develop broader social networks and to take full advantage of community resources in West Columbia. Contextual characteristics of settlement communities and variations in modes of immigrant incorporation, as well as class and social capital contribute to differences in language acquisition among immigrant groups (Portes and Rivas, 2011). In turn, the isolation and lack of social ties have clear implications for both physical and mental health, from decreased physical activity and poor nutrition to increased depression and substance use (Muñoz-Laboy et al., 2009; Viruell-Fuentes and Schulz, 2009; Guendelman et al., 2011; Loury et al., 2011; Wen and Maloney, 2011) have noted the need for further research on the impact of English or Spanish language usage on experiences with discrimination, obesity-related health behaviors, and access to health information and quality health-care services among US Latinos. As social ties are communication dependent, promoting Latino immigrant health requires not only affordable and accessible English-as-a-second language classes, but also increased and improved direct communication between individuals of diverse racial/ethnic groups to reduce stereotyping and lack of understanding.

One popular intervention model used to promote Latino health draws on social ties within the Latino community by engaging lay health advisors – promotoras/es – to deliver health promotion messages and social support of healthy behaviors (Rhodes et al., 2009; Ayala et al., 2010). Although promotoras/es are critical sources of many forms of social support, their efforts generally focus on health at the individual level. There are few examples of lay health advisor initiatives aimed at social and environmental determinants of health or structural interventions that address contextual influences on health among Latinos (Ayala et al., 2010). Our findings support the need to expand the scope of these important efforts to engage diverse community members – including lay health workers, health professionals, community leaders, educators, employers, labor leaders and others – in a more critical analysis of the health implications of social, economic and political contextual factors in order to develop effective, multi-level interventions to improve individual, family and community health in new settlement Latino communities.

Building on existing models of health promotion in Latino communities by actively engaging promotoras/es, health-care providers and other community members in these processes of improving inter-ethnic communication is one possible approach to addressing these broader contextual influences on health. Another potential approach for addressing the health impacts of racial and ethnic tensions is through CBPR, the model used to guide the current study. Emphasizing
empowerment, collaboration, collective learning, capacity building, and balancing research and action, the CBPR model provides tools for both research and action to address health disparities in communities (Israel et al., 1998; Minkler et al., 2010). Key strategies used in CBPR include developing academic and community partnerships to define research aims and methods, and actively involving community members in all facets of the work, including data analysis and interpretation (Israel et al., 1998; Cashman et al., 2008). This model has been used to improve understanding of Latino health issues (McQuiston et al., 2005) and inform health promotion efforts among Latinos in the Southeast (Rhodes et al., 2006). Minkler et al (2010) describe an innovative CBPR project in California in which promotoras/es as co-researchers and policy change advocates to achieve policy-level environmental health changes affecting Latino communities. These outcomes highlight how CBPR can be used to achieve structural-level change to address social determinants of health.

In this examination of the racial and ethnic relations in Southeastern community, we sought to provide a situated understanding of the social and structural factors that shape health and well-being in new settlement Latino communities. Public health programs and policies must expand beyond the focus on individual behaviors and proximate determinants to directly address the broader social determinants of health and well-being through the integration of community-based and structural interventions.

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