

Querida Promotora

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Abstract

This open letter to the promotoras de salud (community health workers) of Long Beach, California explores the multifaceted demands placed on low-wage, highly skilled health educators within the nonprofit industrial complex, and exposes the geographies of Latinx health precarity from the perspective of urban health care feminized labor. The letter also shares and celebrates the deep commitment to justice that promotoras struggle toward through their care work.

Keywords

Promotora, community health worker, nonprofit industrial complex, Latinx geographies, care work

Querida Promotora,

During our time working together I was charged with “directing” you, when in reality I was humbled as your student. I spent three-and-a-half years being mentally, emotionally, and physically unraveled by the demands of my labor by a mission-driven health care organization. My brief, intense immersion in the U.S. public health system cracked my perception of where, when, and by what means we can work toward and possibly achieve social and environmental justice.

By the time I left the clinic I was broken. Physically, I developed chronic pain that still lives with me. To this day it is an ever-present reminder that I will never again push myself to such a brink for work. What I do is not my identity nor my self-worth. Mentally and emotionally, I was set on a path to heal my wounds. My journey shifted to put the broken pieces of my worldview together anew. Years later my research, scholarship, and daily practices of being in community with others are constructed from lessons *your praxis* taught me. I am still learning from you, *siempre*.

When I came into the role as director of health education and outreach services for a nonprofit healthcare organization in Southern California I knew little of what I was doing. The job is demanding across so many levels of the organization’s mission to serve the “needy.” The health education and outreach services we were responsible for were integral to our classification as a federally qualified health center. A classification that meant we were the bare-bones U.S. healthcare safety net. Working at the intersection of administration and health education development I took on too many tasks. I tried to please everyone outside our department and beyond the organization but was barely treading water. Very much in-line with U.S. nonprofit culture I was responsible for doing the job of multiple people. But, along the way with your guidance and support, I shifted course.

My perspective was renewed by your persistent love for the community members who came through our clinic doors. I witnessed your steadfastness against tides of administrative change and demands. I observed and learned from the holistic care you provided to our patients. You gave as much as you could, from your whole heart. It was exhausting, but that unconditional love was also a source of nourishment for you to continue in your role. You were a pillar in the community and source of unconditional support for our patients. So, I learned that I must be a source of unconditional support for you, even if it was short-lived. My top priority was working for the women in our department, the *promotoras*. The job became, and always was, to protect you. To protect the community health workers. To protect the *promotoras de salud*, so that you may continue doing the care work your community so depended upon.

During my time working with you I made the conscious decision to shoulder as much of the bureaucratic burden as I could. I took the brunt of criticism and abuse from the top, and quickly realized it was only a matter of time until I would be forced out. I acted as a buffer between the very top and their unreasonable demands on your labor until I could, quite literally, no longer bear it. The job existed within a toxic organizational culture. The nonprofit “shadow state,” and a health care system predicated upon the false and fabricated notion of scarcity. There was scarcity of good health for our patients. There was scarcity of health care resources for the community. There was scarcity of labor within our organization, and scarcity of adequate support for the labor force that was employed (or volunteered). The job

deteriorated my mental, emotional, and physical health. It shifted my perception of what justice *is*, and it has since challenged me to understand how we can possibly achieve it.

The core of your work as a *promotora* is centered on the patient, on the community, and on humanity. But the realities of the demands placed on your labor wear on you. You have shared with me some of the struggles you have endured within the nonprofit industrial complex since I left. You intimately know the toxicity that can be bred in a place that paradoxically ensures community survival. You once told me that being a *promotora* was your calling. Is your calling necessitated by the unjust conditions you face in your community? You are a healer. You enact a theory and a practice of care grounded in ancient cultural knowledge that far precedes us but is alive *en nuestra sangre*. Such ways of being and knowing are imprinted on our epigenetics as descendants and survivors of Indigenous peoples of, and with this *tierra*, Turtle Island. You lead with your heart, and you love your patients and the community unconditionally. Your radical care is boldest in your actions. Through those actions you generate hope and possibility in your client's lives and in community futurity. I know this, intimately. I've witnessed it and been a part of it. Through my experience, apprenticed to your labor, I know that such care work is both contingent within a capitalist framework, but also is produced in excess of it, exceeding its logic and framework and producing justice otherwise.

One of the many blessings of my time working at the clinic, and the joy I carry with me always, was being surrounded by strong and loving, wise and knowing *mujeres*. The integration of our shared cultural values in health care praxis has molded my care philosophy and practices in every aspect of my life, particularly in the possibility and the *life* that is generated through the monotony of care labor at every scale. When I first came to the clinic, and before I left, you told me that the work you did was the heart of the organization. This is true, but your work is also a driving force of love and justice in the community you serve.

Con todo de mi corazón y en solidaridad,
Cristina