La salud en mis manos: Localizing Health and Wellness Literacies in Transnational Communities through Participatory Mindfulness and Art-Based Projects

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Introducción

The images in Figures 1 and 2 are scans from a bilingual (Spanish and English) scrapbook created by participants at La Escuelita, an after-school health and wellness literacy program for youth and families hosted in the binational and bicultural community of El Paso, Texas, which sits on the Mexico/US border. The composition in Figure 1, titled “verduras” (vegetables), includes two images cut out from magazines representing various vegetables that participants found to be new or interesting during the program, including “la berenjena” (eggplant). Two captions accompany the images; the first reads, “me llamaba la atención la berenjena, pero no la había probado. Hoy en clase hicimos berenjena con tomate y cebolla y me gustó” (“The eggplant seemed interesting to me, but I hadn't tried it. Today in class we made eggplant with tomato and onion and I liked it.”). The second caption reads, “chayote no lo he probado aún” (“I haven’t tried chayote squash yet”). In Figure 2, youth are gathered around a table where they are experimenting with pre-Hispanic superfoods during a workshop at La Escuelita. The handwritten caption reads, “Espirulina, Chia, y Amaranth” (“Spirulina, Chia, and Amaranth”).

Fig. 1: Tasting Verduras (Vegetables) at La Escuelita.

Fig. 2: Learning about Indigenous Herbs.
Collectively, Figures 1 and 2 represent both the content of La Escuelita as a health and wellness literacy program that values and centers cultural knowledges and histories (e.g., incorporating Indigenous herbs and workshops on home cooking), as well as the participatory, community, and art-driven methodologies through which our participants build and document their program experiences (e.g., creating bilingual scrapbooks, recipes, and activities). By building culturally localized understandings and applications of health and wellness literacy, La Escuelita illustrates how health and wellness programs can be both created for and by cross-cultural, bi- and transnational, and bi- and multilingual communities. This program provides a model for contextualizing care in local cultures through community-driven methodologies, echoing the emphasis on epistemology, culture, principles, practices, and discourses that is central to ongoing research in the rhetoric of health and medicine (RHM) (Scott, Segal, Keranen 2).

Cultural Localization in Healthcare

Technical communication and RHM scholars such as Agboka (32), Ding (130), St.Amant (65), Sun (459), and Rose et al. (10) argue that not enough attention has been given to ways patients and health practitioners use and develop health and wellness literacy materials in and across their own contexts and cultures. For example, Huatong Sun explains that, in technical communication, localization experts focus most of their attention on the delivery aspects of technology, i.e., visual and functional design elements and ignore the “concrete cultural realities including the messiness and complexities of local contexts... and the actual practice of social activities...” (459).

Work in health and wellness literacy access also supports these claims (See Condit and Parrott; Parker and Kreps; Segal; Sundar et al.), as does recent RHM scholarship, which encourages researchers to further consider culturally-localized practices and their role in effective health-related interactions (See Gonzales and Bloom-Pojar). As Agboka (32), Cobos et al. (140), and Rose and Racadio (8) illustrate, community-driven, participatory methodologies are important when researchers work with racially and linguistically diverse communities whose health, medical information, and cultural practices have been historically erased, ignored, and colonized through Western paradigms.

Background on La Escuelita

La Escuelita is an after-school program engaging five to eight transnational families that move regularly between their homes in El Paso, Texas, and Ciudad Juarez, Chihuahua, Mexico. The program, which started in 2012 through an interdisciplinary collaboration between university and housing authority partners, takes place in public housing community spaces in El Paso. La Escuelita activities have previously been funded by two university seed grants and are currently partially funded by a CCC Research Initiative Grant. One of the deliverables for this grant was the creation of a website depicting localized health and wellness literacy based on participant interests, activities, and research. This website, currently under construction, is a first step toward presenting a counterculture technological mediation of health and wellness. In essence, it depicts localized perceptions of the health and wellness topics covered in La Escuelita.
La Escuelita builds culturally localized health practices that honors participants’ transnational backgrounds and heritage (See Dura et al.). Program activities include cooking, yoga and other mindfulness workshops, and art-based projects such as collaborative painting. These hands-on activities are selected and facilitated collaboratively by families and university partners who take turns guiding 90-minute weekly sessions. Throughout the majority of these activities, participants move fluidly between different varieties of Spanishes and Englishes. Most researchers on the project are bilingual to some extent; however, bilingualism is not our only means of connecting with participants. Structuring activities like family gatherings where we share traditions and stories while doing other tasks “en confianza” (Alvarez 219) enables us to find common ground through lived experiences.

Methodologies for Participatory Health and Wellness Literacy

For the 2017–2018 school year, participants chose to focus on learning about nutrition, health, and wellness. We began the year’s activities with inquiring about participants’ cultural knowledges, languages, and practices relative to home remedies, recipes, and medicinal herbs. Members of La Escuelita researched practices that could positively impact their health and wellness. Instead of embracing traditional coding methods, throughout program activities, participants worked as researchers of their own learning. They created scrapbooks, videos, and other media that represent their ongoing understanding of health and wellness, which they then shared with us through guided discussions and focus groups. As Rose and Cardinal explain, participatory methods “invite research participants to co-create meaning” so that participants directly “drive design decisions or direction” (10). Further, as Alvarez advocates, this is even better if done in spaces of trust where participants feel at home (220). Through our collaborative conversations and activities, two major themes emerged that encouraged health and wellness literacy learning for participants.

**Theme 1: Participatory Art and Cooking as Paths to Re-Valuing Heritage and Re-Framing Wellness**

The video excerpt portrays a discussion of major lessons for La Escuelita participants. These lessons include eating healthy fruits and vegetables and strategies for making home remedies and recipes. The video also illustrates the methods through which health and wellness literacy is practiced in the program, specifically, through art and cooking that position learning as a community and historically based practice.

In one of the most salient Escuelita sessions, a bicultural health educator explained that the amaranth seed; which was a major element of the daily diets of the Nahuatl-speaking...
world, or Latin America, before the conquest; is now a coveted superfood in mainstream America. Amaranth was outlawed during Spanish colonization, but it continues to be a sacred seed in Nahua communities. The seed is no longer illegal, but, for most Escuelita participants, knowledge of its existence and uses had been forgotten through colonization. In their scrapbooks and focus group discussions, participants expressed that the preparation of licuados, or smoothies, with amaranth and other Mexican superfoods (chia and spirulina) during La Escuelita sessions reinvigorated their interest in the past and brought to the fore the fact that their ancestors had healthy practices, which participants could incorporate and sustain at home for health and wellbeing (See Figure 2).

Theme 2: Self-Awareness, Self-Expression, Confianza, and Healthier Habits through Mindfulness

During monthly check-in focus groups at La Escuelita, participants expressed interest in learning about yoga and meditation as a way to cope with daily stressors. Most participants had heard of but hadn’t practiced yoga and meditation. The positive impact of yoga and mindfulness practices on mental health is well documented in medical and health literature, specifically, in reducing anxiety, stress, and depression—all factors that are common in our Escuelita community and other historically marginalized communities. Although yoga is not a heritage-based practice for participants or university partners, we saw this as an opportunity to talk about heritage in the context of cross-cultural learning. Our guide for yoga sessions was one of the present authors who has practiced and taught yoga for over ten years in Mexico and the U.S. and who introduced yoga sessions with a conversation about the origins of the practice and an acknowledgment of past teachers. Since yoga can be defined as a system of movement and breathing exercises meant to foster the mind-body connection (Verrastro E1), our sessions included child-friendly body movement, walking and sitting meditation, and meditative eating and painting. Through mindfulness activities, participants were able to tune into themselves, trust the space they were in, develop confianza (trust), express fears and share aspects of their daily lives, and explore healthier eating habits, particularly by connecting these practices with art and cooking.

Affordances and Recommendations

The materiality of localized health and wellness literacy work, such as what takes place at La Escuelita, cannot be overemphasized. Participants of La Escuelita are expert navigators. They negotiate their lives with institutions in two countries: schools, medical providers, work environments, tax systems, customs, and transportation. Rarely, however, are participants (and border residents like them) (1) asked how they experience health and wellness, (2) asked what they know about
heritage-based practices, or (3) asked what they are interested in learning. Thus, La Escuelita is an embodied, nontraditional rhetorical practice in relationship with the land it currently inhabits and tied to its historical, cultural past.

At its core, La Escuelita’s community-driven orientation embodies the Nahuatl concept in ixtli in yollotl, which is a collective of people who gather to learn and pass on inherited wisdom (Leyva 96). In ixtli and yollotl is a knowledge-making concept that centers community and the understanding that we are related (Ríos 86), and that our individual health and wellbeing are inherently tied to the wellness of our communities and our lands. This relationality is critical to research focused on cross-cultural notions of healthcare in TC and RHM, which we argue should be conducted with and by communities in local spaces. An emphasis on local knowledge and relationality can and should guide the contextualization of healthcare within and across cultures.

At La Escuelita, culture consists of everyday practices shaped by collective traditional beliefs and attitudes passed down from generation to generation and expressed organically by members of a community. Members participate in activities and events that reclaim, embrace, and promote shared cultural experiences that solidify traditions. Meeting our participants with institutionalized health and wellness literacy materials and traditional research practices that ignore our daily realities would undoubtedly yield surface-level, temporary results. Through the wisdom of La Escuelita participants, we learned the importance of centering community histories, experiences, and labor as expertise critical to the success, ethics, and longitudinal potential of any contemporary healthcare program.

Notes

1. We draw on Rose and Racardio’s extensive definition and discussion of transnationalism as an important concept that complicates simplicity in technology design.
2. We have been working with the current group of five families since 2014. In previous years, we rotated in and out of different housing communities, but since 2014, we’ve taken a longitudinal approach to our work and research in this context.
Works Cited


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About the Authors

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