



A Better Life? Getting it Right

We speak with Catalina Jaramillo of FactCheck.org and Nicolás Ríos of Documented about combating Covid misinformation directed at Latinos and Spanish-speaking immigrants, and to Daniel Le of Boat People SOS about his group's successful efforts to get Vietnamese Americans on the Gulf Coast to get the Covid vaccine.

Mia Warren: This is *A Better Life?* from Feet in 2 Worlds — a podcast where we explore how immigrant communities are impacted by the pandemic. I'm Mia Warren.

If you've had trouble finding reliable information about Covid-19 — about vaccines, about testing and masks, about the risks of being in a classroom or a restaurant — you're not alone. Since the coronavirus hit the U.S. in 2020, we've been surrounded by misinformation.

This year, we've seen misinformation on the safety of vaccines and cases of people self-medicating with dangerous and inappropriate drugs like Ivermectin, an anti-parasite drug for animals.

Now picture what it would be like if you don't speak English well or not at all, and you're trying to find information that will keep you and your family safe during the pandemic.

Immigrant communities are facing a tidal wave of misinformation about Covid, a lot of it on social media. There are also many efforts around the country to respond to misinformation with scientifically sound facts about Covid.

As misinformation plays out on social media, much of it impacting immigrant communities, who is winning this information battle? What are the unique ways that immigrants are affected by misinformation? And what's being done to get immigrants the information they need?

Joining me are Catalina Jaramillo and Nicolás Ríos. Catalina is a staff writer at FactCheck.org, who works in their Spanish-language service, fact-checking information about vaccines. She's also a former fellow with Feet in 2 Worlds. Nicolás is the audience editor at Documented and has reported on the impact of misinformation on immigrant communities in New York.

Catalina, Nico: welcome, and thank you so much for being here.

Nicolás Ríos: Thank you.

Catalina Jaramillo: Thank you, Mia, for having us.

Mia: Catalina, I want to start with a bit of a broader perspective. So, can you tell us a little bit about how misinformation impacts immigrant communities in the United States?

Catalina: Yeah. I think culture and language and access to information and trust, all of those play a big role. Immigrants, most of the time, don't go to the main English media to get their information.

A lot of the times, they might be living by themselves here in the U.S., so they are mostly in communication with their families back in their countries. They have a different way of consuming media. They tend to be more online because they live far from their family, so that's the way they connect with their families. So, therefore, they also get their information from social media.

There's more mistrust in the institutions here, especially because sometimes they are not documented.

Mia: Nico, how about in New York? I'm sure some of these issues that Catalina's talking about are applicable amongst immigrant communities across the country.

I'm wondering if there's anything specific to the area that you've uncovered in your reporting when it comes to this very broad question?

Nico: I would say that in general, what I've sensed in the last year and a half since the pandemic started, is that the information or disinformation that goes around in immigrant communities is super different than what you see on New York Times being debunked as fake news.

It's in another language, it's in all their apps, it's about things that are, like, culturally tied to the immigrant communities themselves.

Catalina: I think, like, if you compare an immigrant with someone who is tied in the society, has family, and has been here for a while, like it's, they're just like the perfect prey for misinformation because they don't have contacts, they don't have access to information.

They don't trust a lot of people, so they're kind of like in a lonely place. And that's when predators can, kind of like, be more effective, right. Because you don't have someone to ask or you don't, you could not read the media sometimes because you don't understand the language. And most of the information that immigrants are getting are through their cell phones, through social apps where they're more prey to misinformation and disinformation.

Also considering that a lot of the misinformation and disinformation is moderated by Facebook, for example, which is one of the big players, in different ways, depending on the language. I mean, we have a survey from Avaaz from last year, that said that Facebook detects like 30% of misinformation in Spanish compared to 70% of misinformation in English. And I work with that, and I know that because the misinformation that I see in English have, like, the alerts. It's like way more than when I go to the Spanish and I see like four or five things. And you know that there's way more, right.

So, of course, you're more prone to fall into this, especially when we're talking about disinformation.

Mia: That was one of my questions for you, was if one of you could talk about the difference between misinformation and disinformation? Just to get that clear.

Catalina: Misinformation is false information or information taken out of context without an intent, or even without, like, the sharer knowing that it's false or incorrect. So a typical example would be like your *tio*, your uncle, sending you something on WhatsApp about Covid vaccines or Covid or anything, right, without knowing that what they're spreading is false or incorrect, just because they just want to share it with you because they love you. They have, like, a good intention.

Whereas disinformation is information that is intentionally false or intended to deceive or mislead. And that kind of intention can be because they want to obtain a benefit that could be a political benefit, social benefit, psychological benefit, or most of the times, economical benefit.

Nico: So we have in Documented, as context, we have a WhatsApp product in which people can talk to us one-to-one. It's in Spanish, it's for mainly undocumented people in New York.

So, people at some point, in April last year, like in one month into the pandemic, we asked them to, like, send us messages that you find suspicious. And they were all fake. Like, hey, at the time Trump was sending the stimulus checks and there were, like, a lot of messages being spread on WhatsApp about, like, the stimulus check could arrive to you even if you don't have paper, just click here.

And it was in Spanish, like, not dictionary Spanish. It was, like, more, like, conversational. And it took people to a link that was full of ads. You know, like my ad blocker would detect, like, 14 ads.

That was made for- to be distributed via WhatsApp. Because it's one message that is easily distributed, it was involved with pictures. It was, like, super good. Like whoever made that message knows how to work on WhatsApp to spread the word.

So, I would say that this time around, it was about like the fake news had the purpose of sending people in need to a website so this guy who made it makes 10 cents per click, you know? So, yes, I mean, fake news that are being spread around are very tied to each community.

The fake news or fake messages that are being spread in the Latino community in New York, they're tailored to a community, to their needs.

Mia: So it sounds like it's somebody who's may be embedded in the community, that can see what kinds of needs are cropping up, who may be taking that information and then spitting it back out as a form of- I mean, it's hard to know who these folks are, right?

Nico: And in these cases, it's just to make money. It was not even to scam people or to get their credit cards. It was just so people can click through.

Mia: Well, I want to get more of a sense of these types of examples. Catalina, if you could speak to this a little bit, I know you've worked a lot in correcting the record on vaccine information.

What kinds of misinformation have you come across in your work? What trends and things have you been observing in your work on vaccines?

Catalina: In Factcheck, for example, we have distortions of science, like posts that distort the science. And others that talk about the origins of Covid and how everything started.

How it is transmitted. Like, if like, for example, like if I put the vaccine that would somehow share to you some way. The existence and the virulence of SARS-CoV-2, the diagnosis and the tracing, prevention, like, the use of masks, right? Preventatives and treatment, vaccination, misrepresentation of government guidance. Like everything that is, like, tailored to what we were talking about, the mistrust of government.

I would say like most of the times they're very directed to emotions. Like they're made so you react to them in a way, and they're made for them to spread in social media.

So, for example, I'm thinking of one misinformation that has been spreading since the beginning, and it still goes around in different ways, which is like that it affects fertility, right? And it scares a lot of people, like, we've seen that a lot.

Then there's a lot of, like, for example, I'm also thinking of like the magic cure, right. There's like Ivermectin, there is Chloro. I mean, there's a lot of different ones, like eat garlic, you know, like there's all kinds of magical cures.

There's also like a lot of, kind of like, tied to nutrition. Of, like, what you don't want to put in your body, and what it is in the vaccine that you don't want to put in your body.

So it's appealing to these fears of putting things in your body. And then there's of course, all the conspiracies of this being an experiment of wanting to change your DNA or tracking you and having like this chip inside of you.

Nico:

Yeah. We sometimes make call-outs for people to send their suspicious messages.

And it's so- like what Catalina just said about the cures, about, for example... And I go back to what I was saying, that these messages are inherently tied to the community.

I was not getting, for example, from the Latino undocumented community in New York, fake messages about this hydroxychloroquine, you know, nothing of that. But a lot of herbs.

Or a lot of like, yeah, household things that you can do, like “look for a hair inside a Bible. And if you find it, you have to leave it like boiling in water, and that will cure you.”

We in Latin America, like, people that grew in the countryside, we are very used, because of indigenous culture, to like herbs that are medicinal, you know?

And we were getting a lot of those messages. Take this medicine. These are like some herb that will prevent you from happening. It's super tied to Latin American culture.

Mia:

I mean, like, this is so overwhelming to me right now. Just think- hearing about all the different categories that you have to create that are sorting out different types of misinformation.

I don't understand how you can keep track of your WhatsApp inbox at this point. I feel like just with my family alone, it's enough people that I'm talking to.

So, I'd love to know what are some of these challenges, for you two, as journalists in the face of this onslaught of misinformation?

How do you actually start to logistically go about correcting the record?

Catalina: Yeah, it's basically taking a claim and you almost become like a private investigator going back to where does this started? And who spreaded this? And why?

And then what the claim actually is saying. Is it correct? Does it lack context? Is it partly correct and partly incorrect? Is it already in a scientific publication and what kind of scientific publication?

So going to that source is most of the time what we do. And it takes a lot of time, like, and the information is very technical and it's science. So it's never a hundred percent, one thing. It's always open to new information.

So it's difficult for people to understand or to ask people like, hey, like read the study, actually. Because the study is complex and it's difficult for them to understand. And nobody actually has the time to get in.

So it's very challenging. The amount of time that you can take to debunk something that somebody wrote in two paragraphs, just because it's emotional and it just says something like, "yeah, the vaccine will make you infertile. Because "difficult word," "difficult word," I told you." You know, like that spreads so easily.

Whereas like us trying to go and understanding what they actually said and why is it wrong or it lacks context. It takes a lot of time.

Mia: You know, I feel like very often in immigrant communities, there can just be a lack of access to correct in-language information to start with. So is misinformation filling that gap? Is it not just an issue of bad information, but also no information?

Nico: So, sometimes information gaps come from public programs themselves, you know. The bureaucracy gets too bureaucratic that then basically you get these gaps and you see, you get people that are trying to fill the gaps and charging for that.

Mia: So it sounds like it's not just misinformation happening in a vacuum. There's actually information gaps that already exist.

And Catalina, I'd love to hear from you about vaccine access. You know, in the spring of last year, I've heard a lot, we've all read a lot about how there have been access issues. Was that a problem in the spring? How did you see that playing out in your work?

Catalina: I think there are so many things that played into the vaccination.

The number one reason actually, that people are not vaccinating, that I've read, is because of fear of secondary effects that you might get from this vaccine and any other vaccine, right? Like headaches, fatigue, sometimes fever.

So people are also afraid that those effects would make them lose work and they cannot afford it. Especially if you hear that, like through misinformation, that these effects are bigger than they actually are. You're more afraid of not, like, I cannot afford to take the vaccine if I'm going to lose a day of work or two or more.

And then there's all this, what we've spoken more about, like fears and trust of the government. Are they going to ask for my documentation? Is this an experiment, right? I mean, minority populations in this country have often been abused and are in situations where thinking something like that, is not, like, out of the question. Like, it's something

that we relate to. So it's not crazy to think that this could be an experiment or something like that.

Fortunately, we're seeing more people get vaccinated, through different kinds of efforts coming from the community and from the government. According to a recent survey by the Kaiser Family Foundation, the percentage of Coronavirus vaccine, at least in Hispanic adults in the U.S., reached 73% in September, which is an increase of 12% from July.

Mia: Even as a journalist, it can be really hard to navigate these systems. I know how that goes.

When I'm trying to get a Covid test in New York, there seems to be a lot of different systems that I can go through. And I've kind of just developed my own way of getting a test.

Have you found centralized places or resources where people can find information that you've been recommending to communities that you've been working with?

Nico: There is a lack of centralized information for immigrant communities in New York.

Not only about Covid, but about, like, centralized information for immigrants. Because we found that, at least in New York, immigrant communities are really siloed. The immigrants from the state of Oaxaca, Mexico, don't really talk with the immigrants of the state of Quintana Roo. And Mexican immigrants don't really have the same organization with immigrants from Ecuador, you know?

So the information that gets shared in one organization or community doesn't really make it to the other one.

And people were in need of, like, information about trustworthy lawyers, how to access health, mental health as an undocumented person.

And then, with Covid, people were afraid to go and get tested because of insurance. If they got positive, would they have to end hospitalized? Would they have to pay for it? So like the state of New York and the city of New York had to make it really clear that it was all safe regarding, like, immigration information. And money-safe regarding not being in debt for the rest of your life.

So we created one. DocumentedNY.com/guide

It was just explainers on how to get the Covid test, what happens if you test positive. Things like that were actionable, useful for immigrants. There were no places, one-stop-shop for that.

Catalina: As Nico is promoting his workplace, I also want to do that. [FactCheck.org](https://factcheck.org)

We are making a lot of effort to translate all the stories. And we invite all the media in the states and in Latin America and in Spain to just take our content and just republish it.

And we work in alliance with different media. Like with Univision, which has El Detector, which is a great source also of information and of simple information. We do videos. And a lot of other fact-checking organizations are also trying to do a lot of, like, a little bit what you said before, how to make this simple. So we do videos. In FactCheck, we also do videos, we do threads online.

Poynter has the international fact-checking network, which is an alliance of different fact-checkers from all the world who are debunking all this disinformation in all the languages that you can think of.

So going to Poynter and IFCN you'll find a lot of information in different languages.

There are a lot of places that you can go to from governmental websites, such as the CDC. The CDC has a lot of the information in Spanish. So CDC in Spanish is a great information resource.

It's a collaborative effort. We're all trying to, kinda like, push the correct information out.

Mia:

I want to go back to something Nico, that you said earlier, which was about home remedies being really popular in Latin American communities and how that's been a really common response you've been seeing throughout the pandemic.

I'm wondering how we respond to these types of things as second-gen immigrants or kids of immigrants?

My aunt and uncle in Korea are always sending all these boxes to my mom with various home remedies. I don't know how to sort out what these are. I don't know. I don't really know how to figure out what they are and the language barrier is definitely an issue for me.

How do we sort of make sure that our families are being safe in this situation while also understanding that a lot of this comes, as you said, you know, from a lot of indigenous communities, these things are really baked generationally into our practices.

I'm just curious about how you've heard people dealing with that? How you might deal with it in your own family?

Nico:

It's hard, you know. We try just to go back to science and, like, show that, tell them that it's not working.

Something that I had to recognize, those guys that make fake news, is that they know how to damn well, how to distribute it. So we are trying to mimic and copy where we think they do well, which is distribution.

And people are maybe not reading articles. We're journalists here making articles because we read articles, but not necessarily other people do, you know? That's especially critical in immigrant communities because not necessarily people actually read. Starting with that problem.

So we tried to mimic distribution strategies from fake news, which is basically sending memes or slides via WhatsApp. So we basically took one of our explainers, hired a Latino cartoonist. And he made that article into four slides. And then we distributed that. And then we heard that people were actually distributing that out.

Catalina:

And in terms of what people can do also before they spread misinformation. It's just, like, think a little bit before you hit reply and send like the number three-thousandth meme that you send that day, right.

It's just, like, try to read beyond the headline. If you can go to the study and check whether it actually says, and check the sources.

Who is pushing this and why? Like try to go a little bit more critically of why this information is being spread and is it actually correct or not? Is it actually helpful or not?

Mia: We're recording this now in mid-October 2021. You two have now been working on these issues for a long time. It feels like more than a year and a half, but- since the pandemic started.

I'm wondering how you're feeling about where we're at now with misinformation, with access to vaccines? Overall, are you feeling optimistic about the future as we go into this winter?

What's 2022 going to look like? Obviously you can't predict the future, but after having done this work, this very difficult work, for such a long time, where are your heads at now?

Catalina: I started working on this in the beginning of this year. I was a radio reporter before, here in Philly. And, actually, when they hired me, I was like, "oh, like the vaccine is already out. There's not going to be a lot of misinformation." The worst happened already. I felt like last year was like the big misinformation spread. And I was so wrong.

Misinformation works in this way that is crazy. I mean, I was just working on a story that was something that was spread in May and then corrected. And then it's like, it's been fact-checked by everyone and retracted by the people who said it.

And it doesn't matter, like it keeps coming. It's like that game of whack-a-mole, it's just like you kick one, it comes from another place. I don't know, it's like the same thing over and over. So I'm not very optimistic.

I think misinformation, unfortunately, is here to stay. I think the challenge is how do we enable and empower people to fight this better? And get better at discerning, like this is something that is misleading.

And one of the things that we are doing, for example, is like instead of starting with the misinformation in your story, just start with the correct information, always.

It's funny that this is so similar to how viruses spread. The spreading of misinformation is just like a virus spreads, it just needs a host and it just multiplies forever. And the way to fight it, and it's like, kind of like this vaccine.

Once the people already know the truth or the correct information, they are better prepared to, kind of like, face the disinformation. Which is why we work as journalists, right.

Nico: I agree with everything that Cata said. I don't think this is going away anytime soon. And I think that what we can at least train people to do is to be as suspicious as we journalists are.

Mia: Well, thank you so much, Nico and Catalina for being here, for sharing your perspectives. I think it's going to be really valuable for our listeners.

So thanks for being here.

Catalina: Thank you, Mia.

Nico: Thank you.

Mia: That was Catalina Jaramillo at FactCheck.org and Nicolás Ríos at Documented. To find links to their work, as well as links to the resources they mentioned, go to our website, ABetterLifePodcast.com.

We're going to take a quick break. When we come back, we'll speak with someone who worked with Vietnamese-Americans along the Gulf Coast, leading those communities to have one of the highest vaccination rates across the country.

Stay with us.

Ad Break

Mia: This is *A Better Life?* from Feet in 2 Worlds. I'm Mia Warren.

Before the break, we heard about the prevalence of misinformation about Covid and the impact it can have on immigrants. For organizations on the ground working with immigrant communities, it can be challenging to get the right information to the people that need it.

In Alabama, upwards of 90% of the Vietnamese-American community had already gotten their vaccinations by June of 2021. Compare that to the state's low vaccination rate — only 34% of all Alabamians had gotten their shot at the time.

What was the recipe for success in the state's Vietnamese community? How did people learn about where to get their shots, as well as accurate information about vaccine safety and efficacy?

Joining me now is Daniel Le, Branch Manager of Boat People SOS Gulf Coast — one of the organizations working with the Vietnamese-American community in Alabama and Mississippi.

Danny, welcome, and thank you so much for being here.

Daniel Le: Thank you so much for having me.

Mia: Danny, can you tell us more about Boat People, SOS? Who do you work with and where are these communities located?

Danny: Yes, Boat People SOS is a Vietnamese national organization with 41 years of track record.

Currently we have six different branches across the U.S., and two of those branches here in the Gulf Coast, which [are] located in Mississippi, Biloxi Mississippi, and one in Bayou La Batre, Alabama.

Our mission statement is to advocate, equip and organize Vietnamese-American families in the pursuit for a life, liberty, and dignity. And over the past 16 years we here in the Gulf Coast, we've been assisting the Vietnamese community from recovery from Katrina as well as the recent BP oil spill. And this past year, we devote(d) a lot of effort to assist the Vietnamese community with the pandemic.

Mia: What are some of the challenges in reaching the Vietnamese-American community in your area? Can you talk about what that looks like?

Danny: Here in Mississippi, the primary three counties that have Vietnamese communities residing is Jackson, Harrison, and Hancock county. And some of them are in rural areas, where the Vietnamese communities are residing.

We don't have social media. We don't have ethnic media in this area such as TV or radio broadcasts similar to a larger city like in Houston's, in Orange County, California, where there's radio broadcast and TV broadcast in Vietnamese, where they'd be able to get information in a timely manner.

And so it's a challenge for us to reach out to those who live far away from our office. Where, you know, they don't have a means to connect, such as social media or in email, you know, platforms. We have to rely on flyers, word of mouth, using what we call (is) the peer companions, where we have community members acting as a peer-support that can reach out to people who may not be able to get in touch with us.

We have to do door-to-door canvassing or using faith-based organization, the churches in town, as a way to reach out to the hard-to-reach populations.

Mia: I was curious how important is it to work with these communities as a trusted organization, as you're describing, versus information that may be coming from other places like local news or social media? How do you get the best information out there?

Danny: So, I think it is important that accurate information is being disseminated, and who's that information from? Whether, you know, if it's come from us, Boat People SOS, I think it is a trusted source and they're more likely to heed those informations.

75% of our community members have limited English proficiency. 50% percent of those people are illiterate in their own language. Which is- they can't write or read in Vietnamese. So, listen to the news or other platform may not be feasible for them. They would not be able to understand, you know, what information are being disseminating. So relying on us [to] provide the accurate information is critical in terms of their recovery.

Like I mentioned earlier is that, you know, most of these people don't have access to social media or don't know how to utilize social media. So we have to come out with a different strategy [on] how to reach out to them.

Mia: What is your community's usual relationship to information and politics? And has that created certain issues and challenges that you've had to navigate, during the pandemic?

Danny: It's sad to say that the local government does not have a relationship with our community. Even though we are trying to reach out to the local government to be part of the solution or to hear what the issues our communities is confronting.

I guess it's because our numbers is not as great as compared to other bigger cities, such as Houston, Atlanta, or Orange County. But, yes, the information usually is not being translated into appropriate languages and disseminated to the community.

Whatever information they receive or that they understand, it usually comes from us. We are the [ones] who gather critical formation, translate into Vietnamese, and then we disseminate it, you know, to an outlet. Whether it's, you know, flyers, or go to the church and temple and make an announcement. Or having a town hall meeting style to inform

the community's members about some of the developments or some of the new information that become available.

So, they basically is relying on us to provide accurate information and how they utilize those information to their benefit.

Mia: I want to talk a little bit about the vaccination rates because I know you've had such success with getting high numbers in the community.

What kinds of methods did you use to reach out to folks to get them signed up, to actually get shots in arms?

Danny: When the pandemic hit last year, you know, during the height of the pandemic our community was really taken aback in terms of, you know, information. What type of information was being disseminated.

It took us a little bit of time for us to really gather the correct information. Mostly from CDCs and from Mississippi Health Department or Alabama Health Department. Those information being, you know, being translated into Vietnamese. Once we get information to the community, we, you know, we held a couple of the town hall-style Zoom meetings with other community leaders to explain to them about, you know, this Covid-19 information.

We also work with healthcare providers. You know, bring them in and have a question and answers with community leaders about what are the benefits of vaccination and how is that going to impact their lives moving forward.

So once the community understand all those information, when vaccination was available, they were the first one to go and get in line to get the shot.

Mia: So what I'm hearing is that there's a lot of trust placed in community leaders. What kinds of folks are these?

Danny: So we got leaders from deep in range. From the church, from the temple, from the fishing community, as well as from the young professionals. You know, people in their twenties to thirties who have a vested interest in the community wanting to advance the growth of a community, wants to increase the voice of our community.

Mia: So this summer we saw huge numbers of Covid infections in the deep south, especially with the rise of the Delta variant. And I'm wondering, what's the vaccination rate like in your communities versus the state at large? Right now.

Danny: Alabama Vietnamese community has grown 90% rate of vaccinations, similar in Mississippi as well. You know, the last I checked, I believe is about 80 to 90% of vaccination rate for the first and second shot.

Mia: You know, I want to kind of get a sense of, do you feel that you've protected your communities?

Knowing that, you know, there's a 90% vaccination rate in your communities, but the state overall is still quite low. Now, you know, we just looked up these numbers and saw that Alabama is ranked 47th out of 50 states in terms of numbers of vaccinations, ahead of only three other states.

Have you been hearing at all a sense of frustration from folks in your community about the hesitance, the vaccine hesitancy rate overall in the state?

Danny: Absolutely. I mean, we as staff here don't understand why people still have questions or even hesitant about taking a vaccine. We have seen the, you know, the proof and evidence that the vaccine does work.

We can go back to a couple of months ago, where the vaccination rate was really high, and 90% of those people who were hospitalized were people who were unvaccinated.

So, yes, we're all frustrated. We want to get out of this pandemic. We want to get back to pre-pandemic life again. But if the rate continues to be this low, it's going to continue to stretch out and then it's gonna add more stress to our community. And to the rest of the world.

Mia: Do you have any lessons from your work that you'd like to share in reaching communities that may be dealing with misinformation? Or communities where people still aren't vaccinated?

Danny: Well, I think that the lesson learned is that, you know, we need to hear from the community. You know, we're not here to impose or tell them what they need to do. We always use a strategy where we do [a] community assessment. We ask [the] community what are some of the issues are? What the challenges are? What are the important issue that they need to address? So we take those issues and we, you know, we develop plans or program to address those needs.

We don't believe in top-down. We believe in from everything community-driven, you know. And we need to include community members as part of the solution. I think that's one of the things that our local government is lacking, is to understand and listen to the communities. They assume this is what we need, but those needs may not be necessary as the needs of a community.

And another thing is trust. You know, do what you say, say what you do. I think this is important. As we learn over the years since Hurricane Katrina, there was a lot of promises about recovery. A lot of promises about helping the community, but those were empty promises. And as time goes, people were just, I guess, tired of hearing those promises and they no longer trust in the government, trust in, you know, anyone that promises something that never delivered.

So, I think if you promise something, you need to deliver that. And I think, you know, that is one of the critical issue that has not been addressed with our community and the city officials.

Mia: Where can people find out more about Boat People SOS and your work?

Danny: Yes, we do have a website www.BPSOS.org.

Mia: Great, Danny, thank you so much for joining us today. It's been a pleasure speaking with you.

Danny: Thank you. Thank you so much for having me.

Mia: That was Daniel Le with Boat People SOS Gulf Coast. You can find more information about their work on our website, abetterlifepodcast.com.

This episode was produced by Quincy Surasmith, who is also the executive producer of *A Better Life?*

Jocelyn Gonzales is our technical director. Our editor is John Rudolph. Alejandro Salazar Dyer is our director of marketing. And Katelynn Laws is our intern.

Our theme music and original score are by Fareed Sajan.

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I'm Mia Warren. Thanks for listening.

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