

# Supporting Local and State Health Departments

## Recommendations for Effective Emergency Communication with Spanish and Chinese Speakers who have Limited English Proficiency (LEP)

*September 18, 2024*

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**HORP**  
HARVARD OPINION  
RESEARCH PROGRAM



**HARVARD T.H. CHAN**  
SCHOOL OF PUBLIC HEALTH

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# Special Thanks to Collaborators

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# Today: Twice the Fun!

- Harvard Opinion Research Team
  - Project Origin → Current Project
  - Key Learnings & Recommendations
- Frontline Team: Experience & Insights
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# Project Origin & Purpose

# Background:

## Health in Emergencies for People with LEP



~10% of U.S. population over age 5 has limited English proficiency (LEP)



Disproportionately vulnerable to negative health outcomes during outbreaks including higher incidence of infection and severe illness



Root causes beyond language: Structural – housing and work; Prior poorer health status and age; Socioeconomic status; Race and ethnicity – Racism; Behaviors embedded in sociocultural context



Communication particularly important opportunity in outbreaks



Extremely limited evidence to guide communication approaches



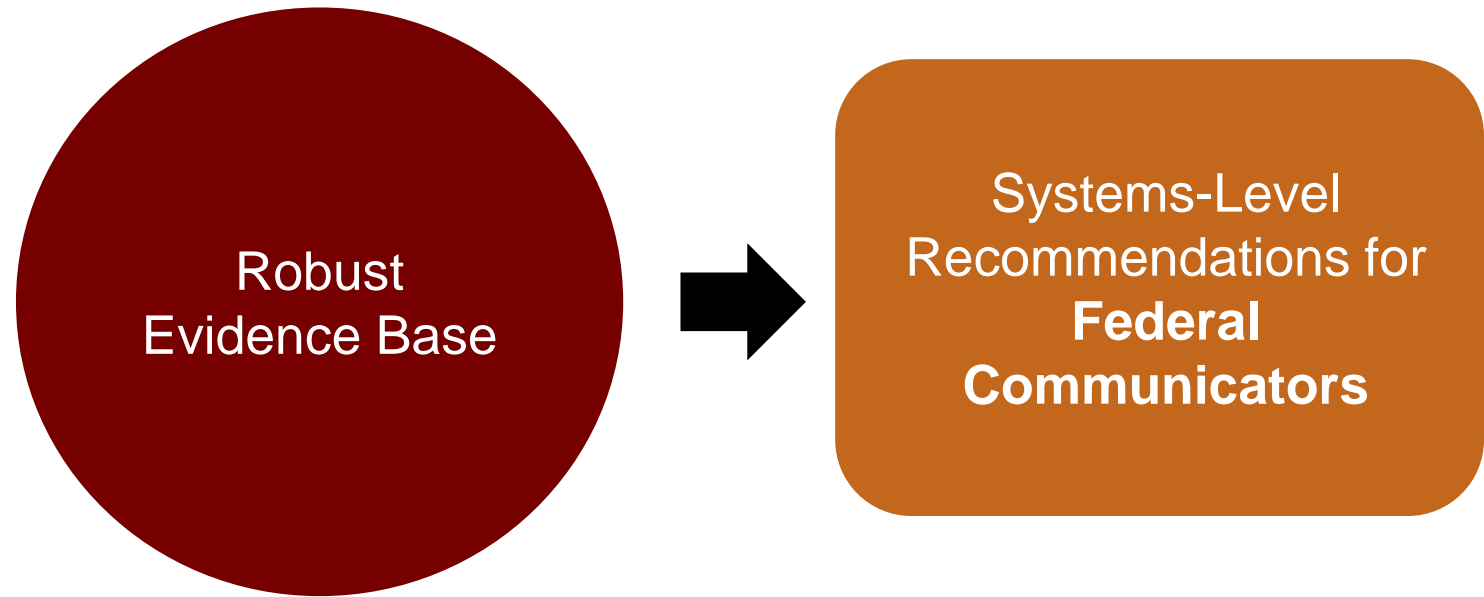
### COMMUNICATIONS FOR US POPULATIONS WITH LIMITED ENGLISH PROFICIENCY DURING INFECTIOUS DISEASE OUTBREAKS: A SCOPING REVIEW

Mary G. Findling, Hannah L. Caporello, Rebekah I. Stein, Carrie G. Wade, Keri M. Lubell, Lisa Briseño, and Gillian K. SteelFisher

Health Security  
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# Foundational Project: Federal Focus

**Understanding Information Needs and Communication Channels Among  
Limited English Proficiency Populations to Inform Emergency  
Communication Recommendations for Infectious Disease Outbreaks**



# Evidence Base: Approaches

- **Language Focus**

Largest groups with LEP – Spanish and Chinese Speakers

- **Participants**

Centrality of people with LEP, but multiple perspectives – those who support information exchange

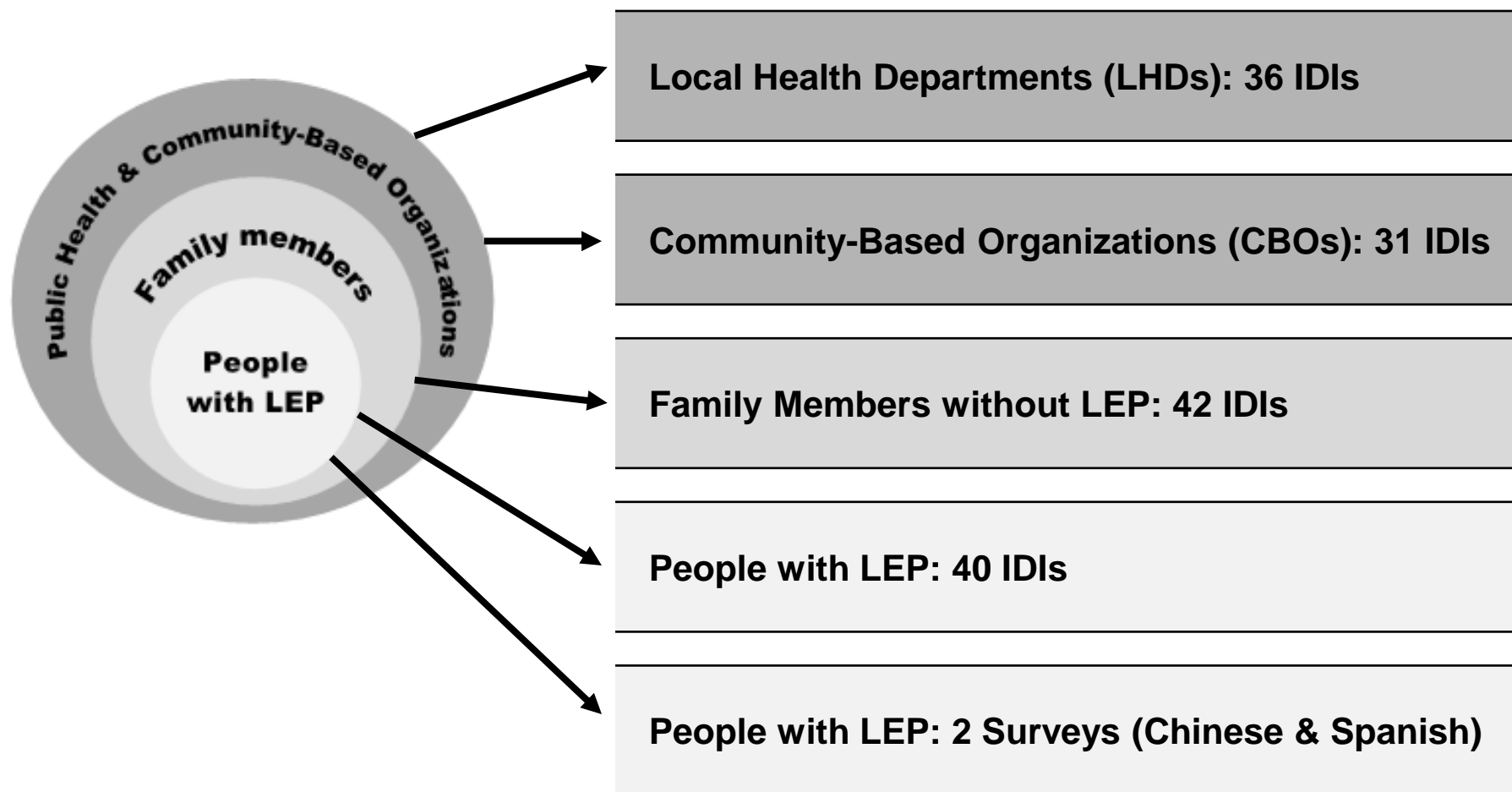
- **Methodology**

Mixed methods to provide quantitative inputs and contextual granularity

- **COVID Context**

Opportunity to pivot and get immersive experience

# Evidence Base: Robust Research





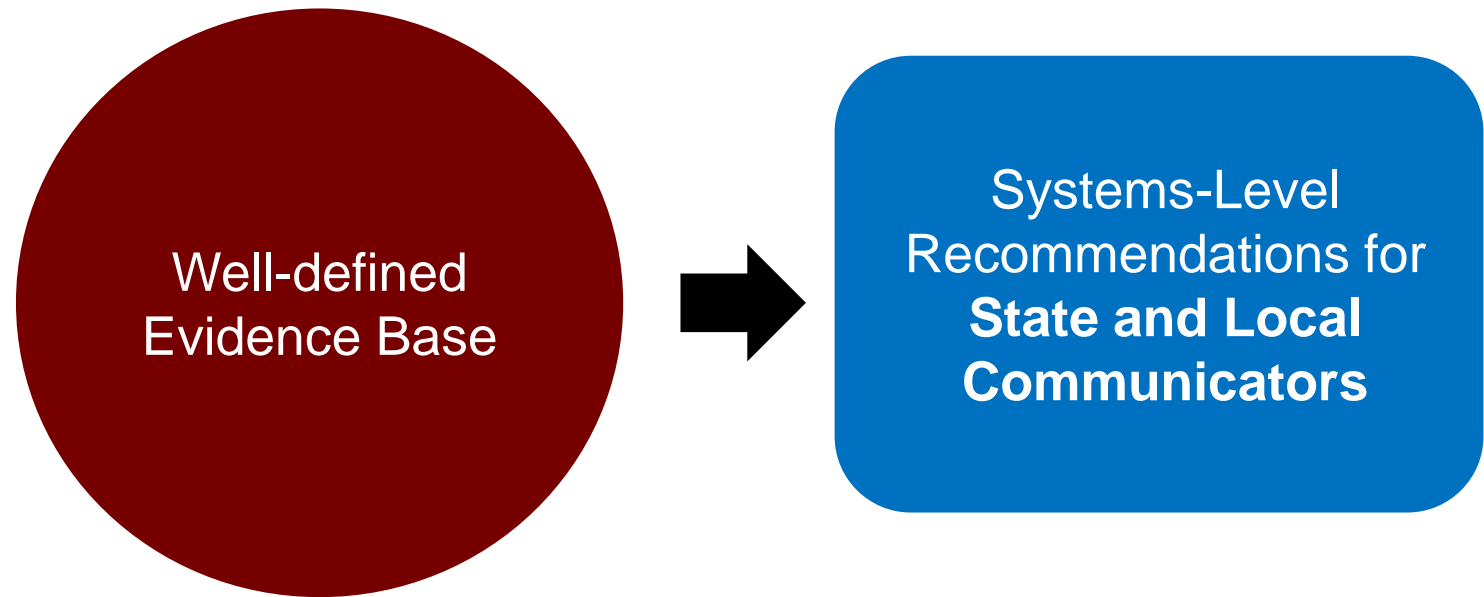
# Key Findings → Need for LHD Focus

- **Centrality of local communications**
- **Distinct local context**
- **Richness of local activities**
- **Urgency**

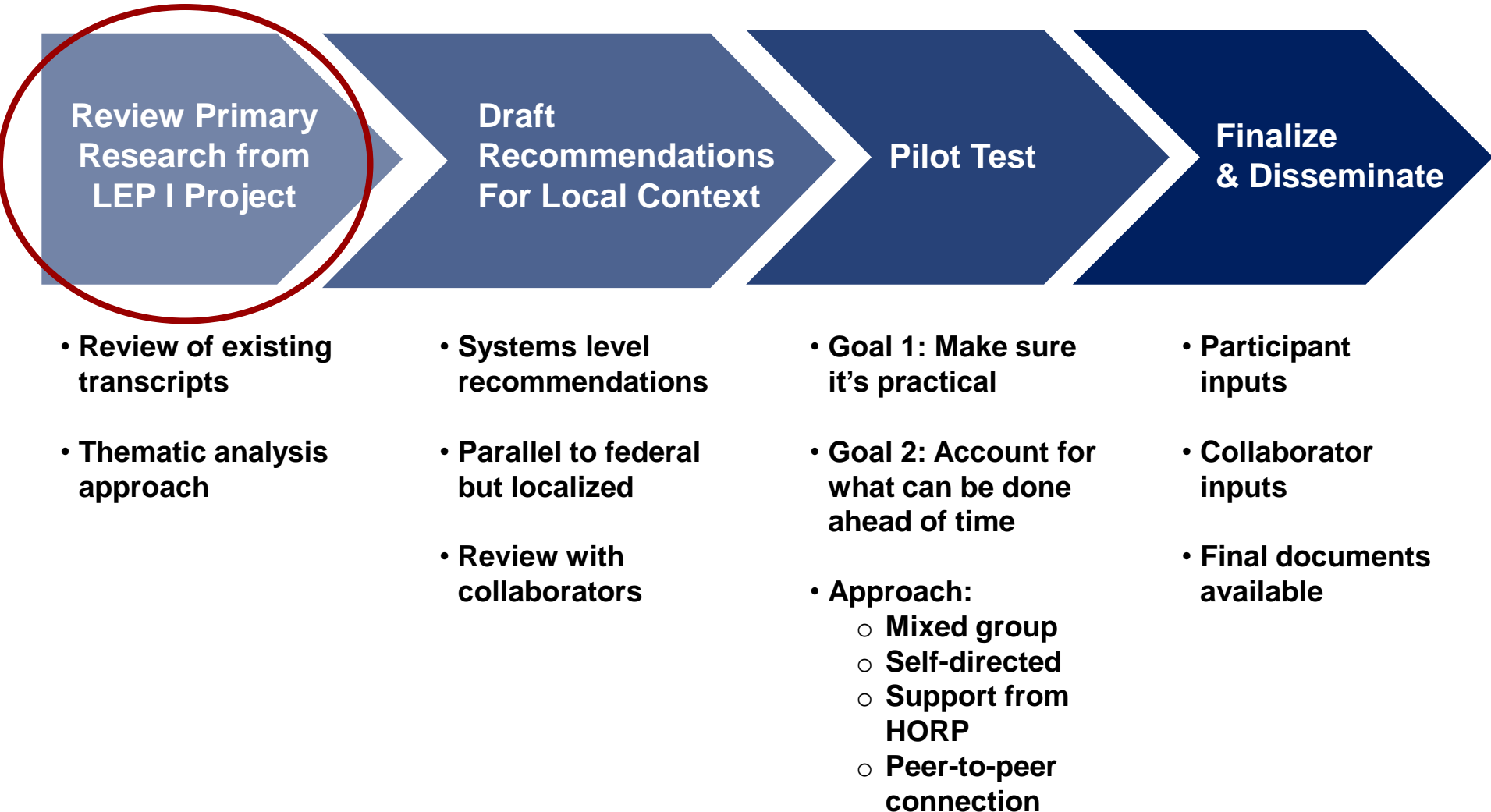
# Current Project: State and Local Focus

**Identifying Emergency Information Needs and Communication Channels for Reaching At-Risk Populations with Limited English Proficiency (LEP):**

**Supporting Local Health Departments in Effective Communications with Spanish and Chinese Speakers with LEP**



# Process Overview



# A Continuum of Effective Communication

## Four central and interrelated characteristics

1. **In-language:** Variety of materials - adapted to different dialects, formality, and literacy levels
2. **Culturally appropriate and resonant:** Across all features: types of images and examples, framing of advice, the means of dissemination, and forums
3. **Locally relevant:** Accounting for specific community needs and context, including heterogeneity of Spanish and Chinese-speaking populations
4. **Trusted:** Perceived as accurate and being shared in good faith

## *Continuum of Effective Communication:*

Communication increasingly meet the true need:

*In-language*

*Culturally appropriate and resonant*

*Locally relevant*

*Trusted*

# Approaches to Communicate Effectively: LHD Strategies to Move Along the Continuum

★ **Strategy 1:** Ensure Prioritization of Communication Efforts for Communities with LEP

★ **Strategy 2:** Ensure Sufficient and Appropriate Staffing

**Strategy 3:** Develop and Sustain Relationships with CBOs

**Strategy 4:** Develop and Sustain Relationships with Other Public Health Agencies

**Strategy 5:** Develop and Sustain Relationships with Other Government Agencies and Representatives

**Strategy 6:** Create Reliable Relationships with Media

**Strategy 7:** Ensure Administrative Readiness

# Strategic Area 1:

## Ensuring Prioritization of Communication Efforts for Communities with LEP

# Key Findings Gleaned from Foundational Research: Ensuring Prioritization of Communication Efforts for Communities with LEP

- Staff Aligned with Leadership Inside the Organization
- Staff Leveraged External Pressure from Elected Officials or Others Outside the Organization
- Staff Held Up Formal Standards and Mandates
- Staff Showcased Data

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*You know, that [Spanish campaign] happened because we have a new director of communications...and [she] sent me a flyer and some tweets that she wanted to get translated...I spent three hours to get it right back to her...She was like, "Oh, this is amazing work." I was like, "Hey, I would love to have a Teams call with you"...So I waited thirty days...I planned this out very well. I saw all of the [materials] in English. And then I reached out to her. I said, "Hey, have you thought about doing [this] in Spanish at all?" She was like, "I actually have it on my radar. Would you mind doing it?" [And] I was like, "Absolutely not." [LHD 335]*



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*Our agency [is] an accredited health department. We had had to meet certain criteria for the Public Health Accreditation Board, which has built in its metrics [for] health equity. Health equity was not always a priority of public health...It became more overt, where it necessitated health departments to demonstrate what they're doing to communicate with vulnerable populations, and...to consider it every time...So our health department had some advantages that regard. [LHD 301]*

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# Learnings from Pilot Test:

## Ensuring Prioritization of Communication Efforts for Communities with LEP

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- Staff Held Up Formal Standards and Mandates
- Staff Showcased Data
- **Staff Sensitized Program Colleagues to Communication Team Successes and Services**
  - Shared updates with colleagues in vertical programs (e.g., maternal health)
  - Made program staff more aware of possibilities as well language-specific services (e.g., translation)
  - Helped foster broader support for creating materials for communities with LEP routinely, and support reflected up to leadership

# Learnings from Pilot Test:

## Ensuring Prioritization of Communication Efforts for Communities with LEP

### Overarching Reflections from Pilot Test Participants:

- Tactics were often more feasible and more successful when there was a relevant “policy infrastructure” in place ahead of time
- Policy infrastructure makes explicit the responsibilities of the LHD to communities with LEP, such as language requirements, translation and interpretation protocols, as well as specific staff roles and responsibilities
- Advocating for, developing, and implementing these policies can therefore be worthwhile to pursue in the preparedness phase

# FINAL RECOMMENDATIONS: Garner Broader LHD Support for Prioritizing Communication Efforts for Communities with LEP

*Reach out regularly to LHD leadership on communication efforts*

 *Sensitize program staff to communication team successes and services*

*Review state and local rules, regulations and laws about language access*

*Review available data about the impact of the public health emergency on communities with LEP – or the broader racial/ethnic groups of which they may be a part*

*Make connections with elected officials who represent communities you aim to serve*

*Develop internal policies and protocols that codify these actions*

# Strategic Area 2:

## Ensuring Sufficient and Appropriate Staffing

# Key Findings Gleaned from Foundational Research: Ensuring Sufficient and Appropriate Staffing

- Staff Hired from the Communities Served
- Staff Spent Time in the Community
- Staff Wanted and Sought Emergency Communication Training
- Staff Borrowed Others from the Organization to Help
- Staff Brought on Community Workers
- Staff Hired Firms Specialized in Serving Communities with LEP



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*I'm the link between [the local health department] and the community. I grew up in China...So, I'm very familiar with Chinese culture, and I know those people...Because I have been going the community doing different kind of presentations...people trust me. ...[Staff from the community], we are the bridge. We know the community, what they need, and we provide the feedback to health department. Then they develop something to help the community. [LHD 312]*

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*One of the things that has been very effective for me and for my program is to go out there and be seen and be active...So if we're having an event, I'm not out here just barking out orders...During the event, I'm there. I'm talking to people. I'm doing registration. I'm walking around, and I'm engaging with people, so that they know who I am. [LHD 331]*

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*We don't have enough people to do what needs to be done. And so [a bilingual staff member] conducts those interviews for us. We develop our social media materials. And they're frequently translated into Spanish. The reason I have to say frequently [and not always] is because I have to ask people to stop doing their work...basically to do my work. [LHD 302]*

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*[Community workers] have a trusting relationship with the community, something that us as administrators...are never gonna have, to be honest. They are the forefront in the trust. They know their community well. They know the...leaders. They know the people that run the neighborhoods. They know the people that live in the neighborhoods. They have this trusting [relationship], almost like family. [LHD 332]*

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# Learnings from Pilot Test: Ensuring Sufficient and Appropriate Staffing

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- Staff Hired Firms Specialized in Serving Communities with LEP
- **Staff Supported Current Employees with Language Skills**
  - Found ways to develop and utilize the language skills of current staff – while ensuring appropriate compensation and recognition
  - Noted that organizing these employees – for example, with standing workgroups or committees – may allow for more effective translation and interpretation, as well as bilingual event staffing, which is appealing to senior leadership

# FINAL RECOMMENDATIONS:

## Support Effective Staffing

***Hire bilingual and bi-cultural staff from the communities you serve, when feasible***

**➔ *Support staff who have language skills***

***Bring on community workers***

***Spend time in the community***

***Seek out communication training when you can***

***Hire a firm specialized in serving communities with LEP***



# Real-Life Stories

★ **Strategy 1:** Ensure Prioritization of Communication Efforts for Communities with LEP

★ **Strategy 2:** Ensure Sufficient and Appropriate Staffing

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**Strategy 7:** Ensure Administrative Readiness

# Resources

## Publications

- ❖ SteelFisher GK, Caporello HL, Stein RI, et al. Developing Infectious Disease Outbreak Emergency Communications for Populations With Limited English Proficiency: Insights to Sustain Collaborations Between Local Health Departments and Community-Based Organizations. *Am J Health Promot.* Published online August 19, 2024. doi:10.1177/08901171241273349
- ❖ Findling MG, Caporello HL, Stein RI, et al. Communications for US Populations With Limited English Proficiency During Infectious Disease Outbreaks: A Scoping Review. *Health Secur.* 2023;21(6):489-499. doi:10.1089/hs.2023.0050
- ❖ SteelFisher GK, Caporello HL, Lubell KM, et al. Getting Critical Information During the COVID-19 Pandemic: Experiences of Spanish and Chinese Speakers With Limited English Proficiency. *Health Secur.* 2022;20(4):273-285. doi:10.1089/hs.2021.0218

## Website

<https://www.hsph.harvard.edu/horp/supporting-people-with-limited-english-proficiency-during-infectious-disease-outbreaks/>

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