Engaging Community Partners to Support Equitable Crisis Response and Recovery

Culturally and linguistically appropriate services (CLAS) are services that are respectful of and responsive to individual cultural health beliefs and practices, preferred languages, health literacy levels, and communication needs. The HHS Office of Minority Health offers a set of action steps for operationalizing CLAS called the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care, or the National CLAS Standards. Standard #13 calls on organizations to “partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.”

Public health emergencies require collaborative efforts to ensure everyone has access to critical resources, services, and information. Community partnerships help your organization build trust, promote community decision-making and collaboration, and gather feedback to make improvements to response and recovery efforts. When you reach, engage, and empower underserved populations, you help drive equitable crisis response and recovery. Here are suggested strategies for engaging community partners.

**Identify the cultural and linguistic groups in your service area**

- Create or refer to a demographic profile of the service area, including languages spoken, socioeconomic status, age, race and ethnicity, and nationality
- Identify sources of vulnerability (e.g., low sources for credible information in the language of the group)
- Use these data to identify or prioritize the groups most at risk
- Recognize the diversity of norms, behaviors, and needs within each cultural group

**Foster relationships with leaders, stakeholders, and trusted messengers**

- Identify community leaders, stakeholders, and trusted messengers, such as faith leaders, radio or television personalities, community organizers, and community health workers
- Identify leaders at any key organizations representing or serving the prioritized social group(s) (e.g., community-based, grassroots, and faith-based organizations; health centers and health departments; community centers, schools, and universities; assisted living communities; public safety organizations)

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• Foster relationships with these leaders and stakeholders. Practice cultural and linguistic competency\textsuperscript{6,7}
• Develop collaboration or partnership agreements for work that is mutually beneficial

**Listen and learn**

• Gather information about each group’s vision and goals for response and recovery, as well as their concerns, information gaps and barriers, communication preferences, cultural factors, sources of mistrust, and strategies for building trust
• Convene meetings, forums, listening sessions, or focus groups
• Ensure cultural and linguistic appropriateness of these events by considering social values and norms, community power dynamics, and literacy needs and by holding events in the language(s) spoken by the community members\textsuperscript{8}
• Schedule events at a variety of times and places (including virtual meetings) to maximize community members’ availability and participation
• Demonstrate inclusiveness, transparency, accountability, and respect

**Engage community members in decision-making and action**

• Create community advisory boards and/or community liaisons to engage community members in:
  o Setting a vision and goals for response and recovery
  o Developing culturally and linguistically appropriate initiatives
  o Determining a plan of action
• Build community partnerships focused on supporting underserved community members to learn about capacities and vulnerabilities and help fill any identified gaps

**Create a community-driven, equitable response and recovery plan**

• Employ a Whole Community approach\textsuperscript{9} to engage and empower all parts of the community in the development and implementation of a response and recovery plan that is effective, inclusive, and culturally and linguistically appropriate
• Focus on developing a plan that:
  o Reflects the community’s vision and goals for a successful recovery
  o Meets actual community needs
  o Has broad community support and participation
  o Strengthens (and leverages) what already works well in the community
• Helps the community recover to a state that better addresses the vulnerabilities that drive inequities
• Ensures equitable access to all recovery resources

- Make sure the plan’s documents are readily available and accessible to community members.
- Develop documents in plain language,
- Provide different language translations and assistive technologies (for example, an audio reader for documents posted online)

Learn more

1. CDC’s Reaching At-Risk Populations in an Emergency
2. U.S. Census Bureau Data
3. U.S. Census Bureau Community Resilience Estimates
4. OMH/CDC’s Minority Health Social Vulnerability Index
5. ASPR’s Engaging Community-Based Organizations
6. OMH’s Cultural Competency Program for Disaster Preparedness and Crisis Response
7. ASPR’s Cultural and Linguistical Competency in Disaster Fact Sheet
8. HHS’ Ensuring Language Access and Effective Communication during Response and Recovery: A Checklist for Emergency Responders
9. FEMA’s A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways for Action
10. Federal Plain Language Guidelines