California's Emergency Preparedness Efforts for Culturally Diverse Communities:

Status, Challenges and Directions for the Future

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EXECUTIVE SUMMARY

Time and time again we have seen racial and ethnic minorities suffer disproportionately adverse outcomes in the wake of disasters across physical and social landscapes. This has been evidenced by the Loma Prieta and Northridge Earthquakes, the 2007 Southern California wildfires and countless other disasters in California, across the United States and around the world. Examining chronic and emerging barriers and challenges to meeting the emergency preparedness needs of culturally diverse communities, program and policy gaps, as well as promising practices and strategies to address identified priorities can assist in providing directions for future efforts at the state, regional and local levels. The purpose of this report is to provide a status report on related programs and policies, to map the current preparedness gaps with activities to address them and to identify efforts to integrate culturally diverse communities into emergency preparedness activities in California. While this report explicitly focuses on California, our methodological framework is intended to be relevant to other states and regions interested in conducting similar analyses for their diverse communities.

Methodology:

We used primary and secondary sources, as well as qualitative and quantitative methods, to provide a portrait of emergency preparedness efforts targeting culturally diverse communities in California. First, a literature review was conducted to examine how racial and ethnic minorities have historically faired in disasters in California. We identified barriers to preparedness at individual and institutional-levels, initiatives and programmatic strategies that were developed in direct response to past disaster outcomes, as well as policy gaps and priorities. We subsequently conducted a web-based review of sites originating from public and private sector emergency preparedness agencies at state, regional and local[1] levels throughout the state. We evaluated these websites to assess the extent to which their efforts were inclusive of the needs of culturally diverse populations according to criteria established from our literature review. Agency Web sites were grouped by geographic region to elucidate strengths and weaknesses across the state. To validate and add dimension to these findings, we conducted semi-structured telephone-based key informant interviews with 17 individuals representing a range of regions, sectors and areas of expertise. The interviews supplemented findings from the literature and web-based reviews and provided empirical examples of promising practices, barriers to preparedness and policy gaps.

Findings:

Research and interviews identified significant individual-level and institutional-level barriers adversely affecting the ability of culturally diverse communities to engage or be engaged fully in the spectrum of critical preparedness actions. Individual-level barriers included economic factors, lack of trust in emergency planning and response officials, language issues, as well as cultural and geographic isolation. Institutional-level barriers hindering agencies' ability to develop and execute culturally competent emergency preparedness strategies included insufficient funding, lack of community input in the development of plans, and limited collaboration between agencies and across sectors. Our findings also illuminated a range of

[1] "Local" as used in the context of this report refers to communities of concern, community/faith-based organizations, county departments and agencies and community service providers.

promising practices and strategies that agencies are implementing to address these barriers, the vast majority of which are taking place in the Bay Area and Southern California (included in Appendix B). Such methods include active collaboration with the local community throughout the planning process, recruitment of bilingual/multicultural staff, and conducting needs assessments.

Implications of Findings:

Our conclusions on the challenges and barriers inhibiting culturally diverse communities from engaging in preparedness activities and being fully integrated into emergency preparedness agendas in California reinforce the findings of a number of national studies. These findings indicate that challenges and barriers to preparedness among diverse communities are not new, but deeply rooted in social, economic, and political complexities. Thus the elimination of disparities in emergency preparedness among culturally diverse communities requires tailored strategies and demands the attention of, and collaboration between, public health officials, emergency managers, policy makers and all other entities involved in the development and implementation of emergency preparedness programs and curricula. Despite entrenched barriers to developing and implementing successful strategies, a number of promising practices and programs were identified that may serve as model initiatives. Findings and recommendations from this report may facilitate the development of culturally competent emergency preparedness activities and inform policy as well as the effective allocation of resources to address programmatic gaps and emerging priorities.

I. INTRODUCTION

Californians have a long history of coping with natural disasters. As was recently stated by Maria Shriver, First Lady of California, "…it's not a matter of *if* a disaster will strike, but *when*." Each year, on average, Californians face nearly 5,000 wildfires (CALFIRE, 2007), 15-20 earthquakes greater than magnitude 4.0 (USGS, 2008) and a range of other disasters including landslides, floods and winter storms, impacting the livelihood of millions. Populations are not affected equally by disasters and some are especially vulnerable before, during, and after. Racially and ethnically diverse communities, in particular, are often the hardest hit, experiencing disproportionately higher rates of injury, disease and death (Andrulis, Siddiqui and Gantner, 2007; Pastor et al., 2006; Fothergill et al., 1999).

With California's population experiencing significant growth in cultural and linguistic diversity, the need to make a concerted effort to address and integrate diverse communities across preparedness planning, response and recovery has never been more evident (we note that we use the term "preparedness" throughout this document to represent these phases). Over 40 percent of California's population is non-white, and some of the state's largest cities, including Los Angeles, Oakland, San Francisco, and Sacramento have a majority racial/ethnic population (U.S. Census Bureau, 2007). More than one in three Californians is of Hispanic/Latino origin, almost one in three is foreign born, 43 percent speak a language other than English at home, and one in five (almost 6.8 million) speaks English less than very well (U.S. Census Bureau, 2007). Furthermore, California is home to the "largest number of undocumented immigrants in the nation, an estimated 2.4 million" (Camarillo, 2007).

While it was in the wake of Hurricane Katrina that national attention was drawn to the plight of diverse communities in disasters, this phenomenon was not new to California. In fact, following such earthquakes as Whittier Narrows (1987), Loma Prieta (1989), and Northridge (1994), numerous reports transpired, all indicating the lack of awareness and inadequate capacity to respond to the specific cultural and language needs of racially and ethnically diverse communities (Fothergill et al., 1999; Pastor et al., 2006; Jones, 2007). More recently, a barrage of reports emerged in the aftermath of the Southern California Wildfires of 2007, echoing in many ways the disparities experienced by communities in the wake of Hurricane Katrina. As one report recently stated, "undocumented immigrants who have survived for years living along San Diego's hillsides and canyons [found] themselves left out of relief efforts in the Southern California fires" (Martinez, 2007).

Recognizing the state's long history of disasters and its large and rapidly growing racially and ethnically diverse population, California has devoted significant state, regional and community-based attention over the past two decades to tailor emergency preparedness and develop resilience capacity within diverse communities. Despite these efforts, however, a 2004 RAND study (Lurie, 2004) found that while California is recognized as "one of the best prepared states," its preparedness practices largely vary in scope and reach across agencies and regions. For example, in a case study of seven of California's 61 public health departments representing a wide range of diversity, "one health department [could] communicate health information in nine languages; another [could not] communicate in any language except English" (Lurie, 2004). A more recent report on Los Angeles County found that while agencies are increasingly translating

materials, only limited efforts have occurred to work more closely with racial/ethnic community groups and ethnic media in relaying important preparedness and warming messages (Cavanaugh, 2008).

Reports like these largely reflect the need to document and evaluate the current state of preparedness efforts at the local, regional and state level to drive the development and consistent implementation of culturally and linguistically appropriate preparedness services and practices to eliminate disparities for racial and ethnic populations. At the same time, they signal the need to identify gaps in current programs and policies and highlight priorities for future consideration. However, to date, little has occurred to review and assess the scope and value of state, regional and community-based initiatives—not in California, nor in other states across the nation— and few have focused on identifying gaps in services, strategies and policies that are critical to both assessing the effectiveness of current efforts and guiding future preparedness initiatives for diverse residents.

To this end, the Center for Health Equality at the Drexel University School of Public Health received support from The California Endowment and the U.S. Department of Health and Human Services' Office of Minority Health to conduct a review of California's current state, regional and local preparedness efforts to identify:

- Barriers and challenges to meeting the needs of racially and ethnically diverse communities;
- Specific programs and strategies for addressing these barriers and challenges; and
- Program and policy gaps and priorities to integrating these communities into preparedness planning and implementation.

Drawing from the RAND definition, emergency preparedness in this report refers to the capability of the public health, health care and emergency management systems, communities and individuals "to prevent, protect against, quickly respond to and recover from" emergencies and it involves "a coordinated and continuous process of planning and implementation" (Nelson, Lurie, et al., 2008). We use phrases such as *racially and ethnically diverse communities*, *culturally diverse communities*, *diverse communities*, and *racial/ethnic communities*, interchangeably to refer to a collective group of individuals associating with differing cultures, races, ethnicities, nationalities, languages, tribes and/or religions. These phrases are intended to also include immigrants and limited English proficient (LEP) populations.

II. METHODOLOGY

We used a multi-pronged approach to assess the current state of preparedness efforts for minorities in California and identify major barriers, programs, gaps and priorities for meeting their specific needs across the spectrum of emergency preparedness. Three activities framed the tasks undertaken as part of our assessment: (1) review of literature on preparedness focusing on California; (2) identifying and reviewing content of Web sites originating from government and private-sector state, regional and local organizations; and (3) conducting key informant interviews with individuals representing a range of sectors, priorities and expertise to preparing and responding to diverse communities. Table 1 summarizes our study design by methodology and objective. The sections that follow describe this design in further detail.

Table 1. Study Design by Methodology and Study Objectives

		Methodology		
		Literature Review	Web-based Review	Key Informant Interviews
Study Objectives	Barriers and Challenges	X		X
	Programs and Strategies	X	X	X
	Program and Policy Priorities	X		X

Complementing these methodologies, we convened two 90-minute panel sessions on October 17, 2008 in Los Angeles, California focused on California's state, regional and local preparedness efforts for culturally and linguistically diverse communities. These panel sessions sought to promote the exchange of experiences, ideas and practices to identify specific priorities and strategies for advancing preparedness of diverse populations across California and the nation. Panel session proceedings can be found in Appendix A and are discussed throughout this report.

A. Literature Review of California's Diverse Communities in Disasters

We conducted a review of literature focusing on California's current and historical disasters to: identify individual and institutional level barriers to integrating diverse communities in preparedness; document programs and strategies that have emerged in the wake of major catastrophes to address these barriers; and identify program and policy gaps as well as priorities.

We identified literature focusing on minorities in the context of disasters and emergencies in California through an iterative process. First, we conducted searches of the PubMed/Medline database as well as other online engines using a combination of key terms such as: race, ethnicity, minority, immigrant, language, culture, Hispanic, Latino, African American, Asian,

Native, disaster, emergency, preparedness, earthquake, flood, wildfire, California, Loma Prieta and Northridge. We also searched major government, for-profit and not-for profit, community-based, academic, and foundation Web sites for relevant reports and publications. For resources that were identified as being relevant to the theme and focus of our study, we reviewed their bibliographies for additional references. Included in our review are only those publications and peer-reviewed studies that explicitly addressed racially and ethnically diverse communities in the context of California's emergency and disaster events.

B. Web-based Review of California's Programs and Initiatives

We conducted a review of Web sites originating from public and private sector organizations at the state, regional and local levels across California to identify major programs and initiatives that address and/or explicitly focus on integrating racial and ethnic minorities into emergency preparedness planning and implementation.

Between June and August 2008, we identified Web sites originating from public health departments, emergency management agencies, community-based and faith-based organizations, health care centers, academic centers, foundations and funding agencies, and private for-profit and not-for-profit organizations across California providing information on emergency preparedness. Web sites were identified through a range of sources, including: recommendations from the National Consensus Panel on Emergency Preparedness and Cultural Diversity on organizations conducting work on the topic; searches of the aforementioned key terms on online search engines as well as online clearinghouse services (e.g., www.diversitypreparedness.org); and links provided by identified Web sites. A total of 148 Web sites met these inclusion criteria for further analysis.

Project staff reviewed each organizational Web site to identify the types of programs they offered to advance the preparedness of diverse communities. Programmatic areas that were particularly targeted in our review included:

- **Translation and Other Language Services:** Number of translated materials offered and the languages they are provided in, links to websites offering translated materials, and interpretation or translation services.

- **Training and education:** Courses, drills and other trainings for service providers and planners focused on cultural competence, language access issues, and other topics related to identifying barriers, challenges, and effective strategies for preparing and reaching racially and ethnically diverse communities.

- **Research and evaluation:** Assessments, surveys or research projects focused on eliciting the needs, beliefs, barriers and efforts to preparing and reaching diverse communities.

- **Collaboration:** Indication of collaboration with community-based organizations, ethnic media, community representatives and other community/cultural brokers.

- **Guidance on Promising Practices and Strategies:** Resources and publications focused explicitly on sharing challenges, successes and lessons learned as well as recommendations on promising programs and strategies for preparing and responding to diverse communities.

- **Funding:** Funding opportunities for providing services or conducting research and evaluation geared toward preparedness for racial, ethnic, immigrant and limited English proficient populations.

- **Advocacy and Policy Work:** Activities advocating for and advancing policy work related to preparedness of diverse communities.

Findings from the web-based review were categorized by 11 regional networks, as designated by the California Department of Public Health, to identify regions across California that are leading and lacking in efforts. These regional networks and their respective county breakouts are provided in Table 2. Organizations with efforts and resources targeting diverse communities in emergencies were included in an Environmental Scan to serve as a resource for state, regional and community agencies doing work in this area. The Environmental Scan can be found in Appendix B.

Table 2: Regional Networks, California Department of Public Health

Region	Counties
Bay Area	Alameda, Contra Costa, Marin, San Francisco, San Mateo, and Santa Clara
Central Coast	Monterey, San Benito, and Santa Cruz
Central Valley	Fresno, Kern, Kings, Madera, Mariposa, Merced, and Tulare
Desert Sierra	Inyo, Riverside, and San Bernardino
Gold Coast	San Luis Obispo, Santa Barbara, and Ventura
Gold Country	Alpine, Amador, Calaveras, El Dorado, Mono, Placer, Sacramento, San Joaquin, Solano
Los Angeles	Los Angeles
North Coast	Del Norte, Humboldt, Lake, Mendocino, Napa, and Sonoma
Orange County	Orange
San Diego & Imperial	Imperial and San Diego
Sierra Cascade	Butte, Colusa, Glenn, Lassen, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Tehama, Trinity

Selected programmatic areas (e.g., translation and training/education) were mapped using SmartDraw Graphics Software by region and the U.S. Census Bureau's Diversity Index to identify where resources and programs targeting diverse communities were located in relation to high and low diversity regions and counties. The Diversity Index is based on 2000 Decennial Census data for race and ethnicity and reports the percentage of times two randomly selected individuals differ by race/ethnicity within a particular county. A higher percentage indicates a more racially and ethnically heterogeneous region, while lower percentages indicate greater homogeneity.

C. Key Informant Interviews

To complement findings from the literature and Web site reviews, we conducted semi-structured telephone-based key informant interviews with 17 individuals representing a range of regions, sectors, expertise and priorities across California. Key informants were identified through various sources including: recommendations made by our sponsors, in particular The California Endowment; recommendations made by our National Consensus Panel on Emergency Preparedness and Cultural Diversity, in particular representatives from California; and our web-based review of organizations and programs. Throughout the interview process key informants also recommended individuals who could provide valuable information pertinent to our project. We subsequently followed up with these recommended informants via e-mail to request an interview.

The sample of key informants included six private not-for-profits, three county public health departments, two local emergency management and response organizations, three community-based organizations, two state agencies and one academic researcher. Key informants represented four different regions across the state, including Central Coast, Bay Area, Central Valley and Los Angeles, as well as the state of California.

At the start of the interview, respondents were provided with an overview of the project and how the interview proceedings would contribute to the background report. They were also assured that their responses would be kept completely anonymous. To interpret the informants' responses within the context of their scope of work and responsibilities, introductory background questions were posed to elicit information about the role of the respondent's organization in advancing the preparedness of racially and ethnically diverse communities from before to after an event. We also asked respondents to describe the socio-demographic composition of the populations they work with or serve.

Following background questions, respondents were asked to draw on their knowledge, research or service experience to describe: (1) the barriers and challenges to fully meeting the needs of culturally diverse communities in an emergency; (2) the strategies their organization has adopted, particularly related to community engagement, training and education, research and evaluation, and collaborative partnerships; (3) the role that different sectors can play to better meet the needs of culturally diverse communities in an emergency; and (4) specific policy changes or resources that would enable organizations to better serve and reach these communities.

Qualitative data from each interview were coded, extracted, and analyzed manually according to themes that emerged within the context of each question. A thematic analysis was then conducted with the extracted data to categorize re-occurring and overarching themes expressed within the four major areas of questioning: challenges and barriers; strategies and practices; sector specific recommendations; and policy priorities. Qualitative data were further analyzed to identify sub-themes which were expressed across interview respondents.

III. FINDINGS

A summary of findings from the three methods employed in this study are displayed in Table 3 by study objectives. The sections that follow describe these findings in greater detail.

Table 3. Study Findings by Methodology and Study Objectives

STUDY OBJECTIVES	METHODOLOGY: Literature Review	Web-based Review	Key Informant Interviews
Barriers and Challenges	*Individual-level :* • Social and economic factors. • Trust and perceived fairness of government response. • Culture and language. *Institutional-level:* • Limited or lack of knowledge about diverse communities. • Limited culturally and linguistically appropriate services. • Lack of diversity among responders and service providers.	N/A	*Individual-level:* • Social and economic factors. • Trust. • Culture and language. • Geographic isolation. *Institutional-level:* • Limited funding, resources and support for culturally and linguistically appropriate services. • Lack of community input in planning. • Limited collaboration between agencies and across sectors.
Programs and Strategies	• Translated materials. • Tailored trainings provided by community representatives. • Active collaboration with communities.	• Online translated resources. • Courses addressing cultural and linguistic needs in broader discussions of vulnerable populations and community preparedness; drills engaging local community members. • Collaboration with communities and community representatives. • Community needs assessments. • A few reports providing guidance on lessons learned and promising practices. • Some funding opportunities.	• Establishing local planning committees and advisory groups comprised of community representatives. • Recruiting trusted representatives and bilingual/multilingual staff. • Conducting needs assessments, surveys and focus groups of communities.
Program and Policy Gaps and Priorities	• Planning at the local and neighborhood level, taking into consideration social, economic and political circumstances. • Including trusted community representatives and culturally and linguistically competent individuals in planning and response. • Evaluating language needs of community and ensuring proficiency and accountability of language services. • Encouraging regional collaboration and coordination. • Encouraging greater flexibility in allocating funds for innovative programs and strategies.	N/A	• Mandatory steering committees for state Office of Emergency Services comprised of community representatives. • Greater inclusion of neighborhoods and schools in planning and response activities. • Mandatory cultural competence training for emergency responders and service providers. • Greater coordination between public health/emergency management agencies and local/community agencies. • Greater flexibility for local and community agencies in allocating funds for innovative programs and strategies. • Increasing funding for culturally and linguistically appropriate services in emergency preparedness—e.g., cultural competence training, bilingual staff, printed translated materials.

A. Literature Review of California's Diverse Communities in Disasters

We reviewed literature focusing on California's major disasters and emergencies and their impact on racially and ethnically diverse communities, before, during and after. The following section describes findings from this review, focusing specifically on the major individual and institutional level barriers to incorporating diverse communities across preparedness planning and implementation as well as programs that have emerged and priorities that still remain to be addressed.

A.1. Individual Level Barriers to Preparing and Responding to Diverse Communities

While few, studies in the wake of the Whittier Narrows, Loma Prieta and Northridge earthquakes as well as the recent Southern California wildfires and other major disasters document a consistent set of factors that serve as barriers and increase the vulnerability of diverse communities across all phases of an emergency.

Social and Economic Factors. Literature on disaster vulnerability indicates that preexisting socioeconomic conditions play a significant role in the ability of individuals and communities to prepare for, respond to and cope with disasters (Masozera, Bailey and Kerchner, 2007). "People's needs are grounded in the nature of their lives before the disaster began; specifically, in their employment status, financial resources, social supports, legal entitlements and housing situation" (Bolin and Stanford, 1998). In the Fillmore and Piru regions of California where the Northridge earthquake struck, for example, Latinos were marginalized into low-wage agricultural employment, which produced a relatively large poor ethnic working-class population. These low-income communities were largely confined to substandard, unsafe housing, contributing to greater material losses, injuries and deaths during the earthquake and greater problems with homelessness after (Fothergill and Peek, 2004; Bolin and Stanford, 1998). Other barriers faced by low income diverse populations that increase their disaster vulnerability include: limited or lack of transportation for evacuation; limited financial resources to put together a disaster supply kit or take protective action; and low literacy and the related inability to fully comprehend disaster preparedness materials and warning messages.

Culture and Language. For racially and ethnically diverse communities, culture and language serve as significant barriers to effective preparedness, response and recovery from disasters. This has especially transpired in California's major disaster circumstances, particularly for immigrants, who have limited English proficiency, who may not be familiar with the U.S. culture, customs and service programs, and who may not receive information from mainstream media sources (Wang and Yasui, 2008; Bolin and Stanford, 1998).

Following the Whittier Narrows earthquake, for example, many Latinos reported that "English-language radio tended to have better information than the Spanish-language station; the sole Chinese newspaper was out of date and the Hispanic radio stations focused on human-interest stories which resulted in ethnic communities getting incorrect information" (Fothergill et al., 1999). Almost two years later, reports in the aftermath of the Loma Prieta earthquake echoed these complaints, indicating that warning messages were only relayed in English, and where

translations were provided, "they were not accurate or appropriate" (Fothergill et al., 1999). Reports of the lack of cultural awareness in response and relief were also abundant. For example, following Loma Prieta, individuals of Central American origin were reluctant to take shelter in National Guard tents as they reminded them of "death camps" in their native countries (Fothergill et al., 1999).

Still, more recently, in the wake of the Southern California wildfires (almost two decades later), numerous reports continued to cite the cultural and language barriers faced by racial and ethnic communities. Migrant farm workers in San Diego's hillsides and canyons, for example, are not only hard to reach physically, but are linguistically isolated. One recent report indicated that "indigenous Mexicans [in rural Southern California] who speak languages such as Mixteco are at high risk of being in danger because they don't understand warnings being given in English or Spanish and they are not likely to trust people unless they are approached speaking their language" (Martinez, 2007).

Trust and Perceived Fairness of Government Response. Low trust in warning messages and service providers also poses a significant barrier for racial and ethnic communities. Stories from California's major earthquakes and recent wildfires highlight the reluctance of minorities, particularly immigrants, to follow evacuation orders and access assistance programs (Mathew & Kelly 2008, Wang and Yasui, 2008 Nunez-Alvarez et. al 2007, Bolin and Stanford, 1998). Lack of trust in government and first responders is particularly rampant among undocumented immigrants who fear that interaction with government officials will lead to their deportation, thus making them hesitant to utilize disaster services and act in accordance with evacuation orders (Wang and Yasui, 2008, Muniz, 2006). A number of reports emerged following the 2007 wildfires in Southern California that described how undocumented immigrants were disproportionately affected as a result of their fear and lack of trust in government officials (Mathew and Kelly, 2008, San Diego Immigrant Rights Consortium et al. 2007).

Furthermore, recent studies show that racial and ethnic populations are less likely to believe that the government will respond fairly to their disaster needs. A 2004 study of Los Angeles County found that while 77 percent of whites perceived that the public health system would respond fairly in a bioterrorist event, only 63 percent of African Americans, 68 percent of Asian/Pacific Islanders, and 73 percent of Latinos shared this sentiment (Eisenman et al., 2004). In a similar study, four schools of public health conducted focus groups with different ethnic groups to assess confidence in government and emergency response systems. Findings indicated that ethnic minorities had lower levels of trust in government as well as their ability to respond in a disaster event. Findings also suggested the past experiences and feelings of discrimination contributed to perceptions of distrust (Wray et al., 2006).

A.2. Institutional Level Barriers to Preparing and Responding to Diverse Communities

A combination of factors within organizations and the broader public health and emergency management systems, which we term "institutional barriers", inhibit the ability to effectively reach and meet the needs of diverse communities from before to after an emergency.

Lack of Knowledge about Diverse Communities and their Distinct Needs. Misconceptions and lack of knowledge about the culturally specific needs of diverse communities impedes the ability of first responders and service providers, as well as the entire public health and emergency response system, to effectively deliver services. Areas in which knowledge is lacking include religious beliefs and customs, death rituals, and non-traditional medicine. A report recently issued by FIRE 20/20 examined the multicultural capacity of first responders to meet the needs of culturally diverse communities. Results indicated that 57 percent of the fire fighters polled (N=148) "strongly agreed" or "agreed" that they encountered cultural misunderstandings with providing services to diverse community members. These findings were validated in focus groups by community members who requested that first responders respect their values and customs (Fire 20/20, 2008).

Lack of Culturally and Linguistically Appropriate Services. Many studies have identified cultural and linguistic barriers as major impediments to effectively communicating with racially and ethnically diverse communities in disasters (Wang and Yasui, 2008, James et al., 2007, Muniz 2006, Bolton & Weiss, 2001, Fothergill et al. 1999). Despite legislation such as the Dymally-Alatore Services Act, which requires California state agencies to employ a sufficient number of qualified bi-lingual personnel, efforts to increase organizational linguistic competence are lacking because such legislation is not enforced (Asian Pacific Legal Center of Southern California & Asian Pacific Islander American Health Forum, 2006). According to one study, funds had been allotted for preparedness following the Whittier-Narrows earthquake, yet information about these efforts were only disseminated in English despite the language needs of the local community (Fothergill et al., 1999). Another source cites that signs stating the occupancy status of damaged buildings were only provided in English following the Loma Prieta Earthquake, despite the large number of multilingual individuals inhabiting affected neighborhoods (Pastor et al., 2006).

Still, more recently, a qualitative study which examined how immigrant populations fared in the recent wildfires, many respondents cited language as being a major barrier to communication. When bi-lingual staff was unavailable, children were often used as interpreters, raising a number of concerns about the accuracy of complex information being translated in critical situations (Mathew & Kelly, 2008). The same study found that many disaster service providers explicitly recognized the importance of delivering culturally competent services when working with culturally diverse communities, but few were provided with opportunities for cultural competence training (Mathew & Kelly, 2008). The need for cultural competence training for service providers is supported by results from a survey of first responders (N=739), of whom 46 percent "strongly agreed" or "agreed" that they were faced with communication issues when responding to culturally diverse populations (Fire 20/20, 2008).

Despite efforts by officials to provide translated disaster information, they have often been counter-productive and misleading as verbatim translations were used. Following the Whittier Narrows earthquake "Not for Occupancy" signs were posted on buildings in English and Spanish which translated to "Illegal Entry" (Pastor, 2006.).

Workforce Diversity. Racial and ethnic discordance between the local community and service providers that serve them potentially exacerbates existing trust, cultural, and language barriers.

As one study indicates, while 60 percent of the population affected by Loma Prieta in Watsonville was Hispanic/Latino, responders and relief workers were predominantly white (Fothergill, 1999). Other studies indicate that local, state, and federal agencies have an insufficient number of bi-lingual personnel to serve LEP populations (Pastor et al. 2006).

A.3. Programs and Strategies for Preparing and Responding to Diverse Communities.

A review of academic literature as well as reports and publications from government agencies, philanthropies, research institutes and others indicate that following California's wide range of disasters, and in particular the Loma Prieta earthquake, a number of programs and strategies emerged to address the needs of racial and ethnic populations in disasters. Many of these efforts, while promising and unique, largely exist in silos, with only a few organizations adopting and implementing them. The following are examples of the types of programs and strategies that we identified through our review:

Language Services and Translated Materials. Over the past few decades, several public health, first responder and emergency management agencies have started to provide online translated materials for multilingual populations (Mathew and Kelly, 2008). The majority of these materials, however, only exist in Spanish, with a few organizations across the state making concerted efforts to translate and provide resources in other commonly spoken languages. Our literature review also found that in California, public and private service provider agencies have differing multilingual capacities, with certain agencies being able to communicate messages in multiple languages (through printed materials and bilingual staff), and others not being able to communicate in any, despite large local LEP populations (RAND, 2004; Mathew and Kelly, 2008).

Collaborating with Community Organizations and Representatives. Studies in the wake of the Loma Prieta earthquake indicate that several public and private agencies across California adopted collaborative approaches to reaching diverse communities across the spectrum of preparedness priorities. Examples include Collaborating Agencies Responding to Disasters (CARD), The San Leandro Triad Alliance, The San Francisco Foundation, and The Fritz Institute. More recently, studies indicate that service providers are increasingly establishing relationships with ethnic media (Mathew and Kelly, 2008).

Culturally and Linguistically Tailored Programs. Our review found few training and education programs designed and tailored to California's richly diverse populations. For example, many local communities rely on the Community Emergency Response Team (CERT) trainings, developed in 1985 by the Los Angeles City Fire Department, for basic information on preparing and responding to emergencies (Mathew and Kelly, 2008). These trainings, while offered in many communities in Spanish, are limited in funding and staffing to provide training in other foreign languages. Nonetheless, there are examples of some local nonprofit organizations that have hired bilingual community liaison to reach out to specific cultural communities, particularly to provide basic preparedness education. These examples are few, however.

A.4. Program and Policy Gaps and Priorities

The tragedy of Hurricane Katrina in the Gulf region and the similar disproportionate devastation caused by the recent Southern California wildfires, provided a significant impetus for leading philanthropies, research institutes and advocacy groups across the state to investigate gaps and priorities for incorporating diverse communities across preparedness planning and implementation. For example, in January 2008, the Joint Center for Political and Economic Studies, with support from Policy Link and The California Endowment, held a disaster preparedness convening in Oakland, California of 30 experts and professionals representing a range of sectors, to discuss policy and program priorities for reaching vulnerable, and in particular low-income racial and ethnic populations. The Tomas Rivera Policy Institute and the Asian Pacific American Legal Center issued a report in June 2008 providing policy recommendations for service providers on incorporating and reaching urban immigrant communities in disasters in Southern California. These and others across the state have identified at least five major priorities for addressing the current gaps in preparedness programs, policies and services for diverse communities:

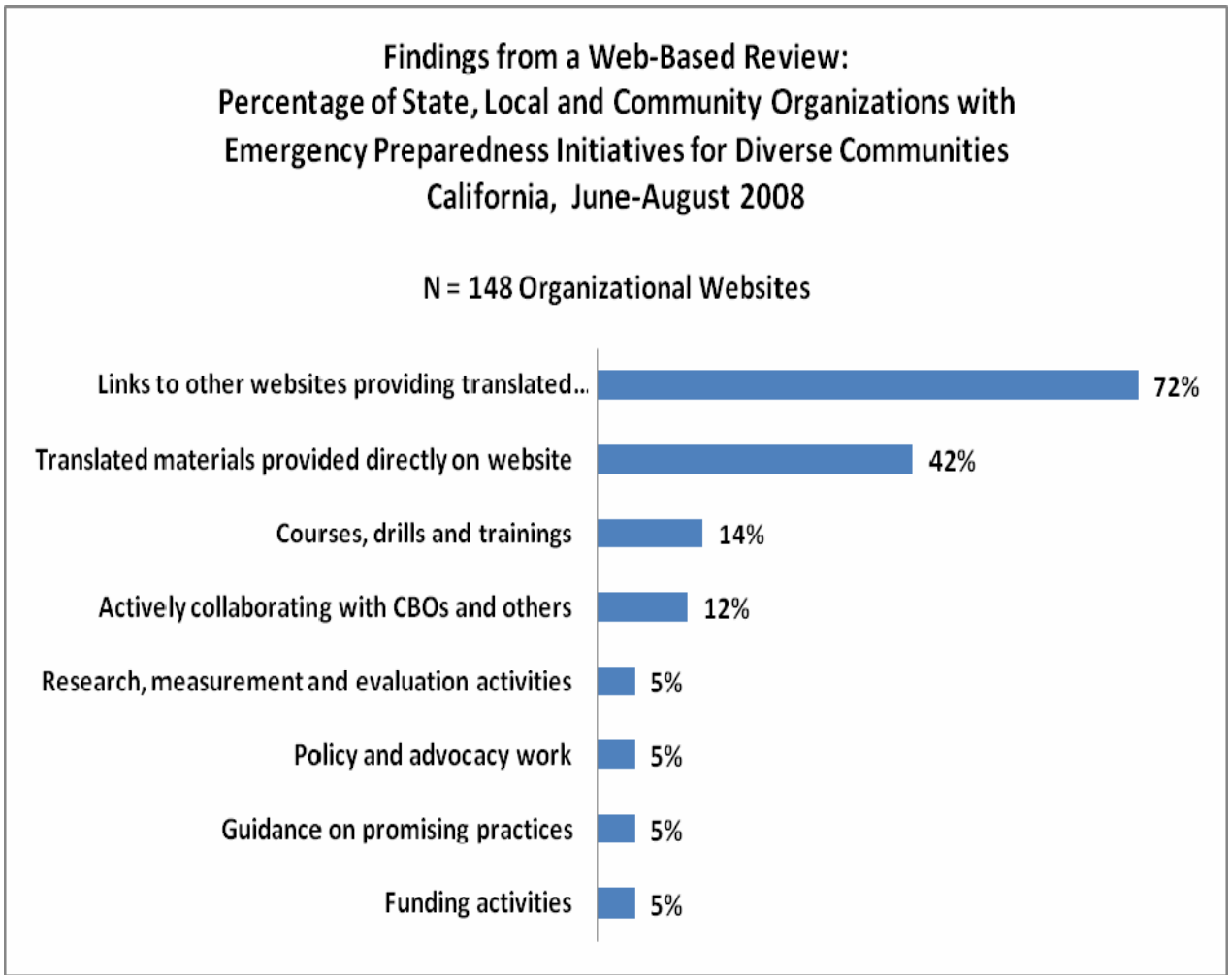
- Considering emergency preparedness planning and actions holistically within the social, economic and political contexts of individual communities and neighborhoods.
- Ensuring planning and response teams include trusted representatives from the community as well as individuals that are either reflective of or have cultural and linguistic competence.
- Evaluating language needs of communities and ensuring proficiency and accountability of language resources and services.
- Encouraging regional collaboration and the sharing and coordination of essential information, resources and services.
- Encouraging greater flexibility in funding from government and philanthropies to create innovative programs and strategies for reaching diverse communities in emergencies.

B. Web-based Review of California's Programs and Initiatives

Our review of organizations representing a range of sectors, regions and priorities in emergency preparedness, indicate that several programs and initiatives have emerged to target and serve the state's racially and ethnically diverse communities in times of emergencies. While we present findings here from our review of 148 organizations, our Environmental Scan provides (as of Fall 2008) a detailed database of 82 organizations, agencies and centers performing major work in this area, particularly efforts that target diverse communities and go beyond offering Spanish-language materials or links to external websites with foreign language resources. See Appendix B for the Environmental Scan.

In the following sections, we present findings from across California on initiatives focusing on seven programmatic areas—translation, training and education, research and evaluation, collaboration, guidance on promising practices, funding, and advocacy and policy. These findings are summarized in Figure 1 and for select program areas are mapped by region and the Census Bureau's Diversity Index.

Figure 1.

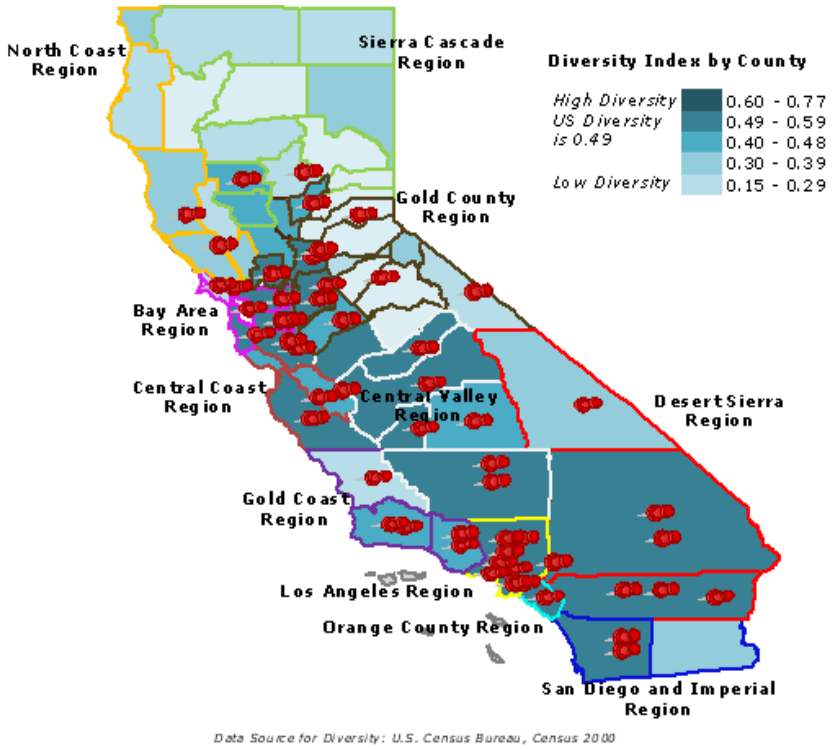


Translation and Other Language-Related Services. Of the organizations identified in our review, the large majority (72%) provide links to Web sites offering translated public education materials, including links to the California Department of Public Health, the Governor's Office of Emergency Services, the Centers for Disease Control and Prevention (CDC) Emergency Preparedness site, and the American Red Cross national site. Approximately 42 percent of organizations provide foreign language preparedness materials directly on their websites and about one in ten provides a foreign language version of their site. Of organizations providing translated materials, all provide Spanish-language resources, with about one in four providing materials in Vietnamese, Chinese and Tagalog. In addition to translated public education materials, a few organizations (7%) offer courses on preparedness in foreign languages and some (8%) provide language interpretation services, largely in the form of tele-interpreters.

In mapping the organizations that provide translated resources directly on their websites by region and the Diversity Index (see Figure 2), our findings reveal that these materials are readily available in many of the high diversity regions in Central and Southern California. While lower

in diversity, but certainly not homogenous, Northern regions, particularly counties located in the North Coast and Sierra Cascade, are largely lacking in online translated resources.

Figure 2.
Organizations across California that Provide Translated Materials Directly on their Web Sites, by Region and Diversity Index, June-August, 2008



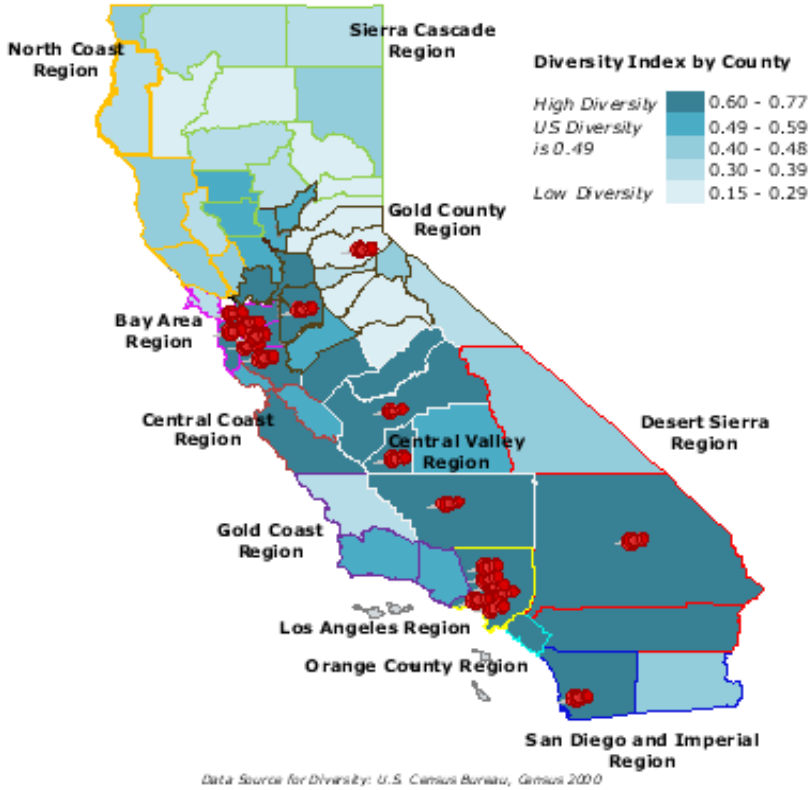
***Training and Education*.** Our web-based review revealed that about 14 percent of state, regional and local agencies offer courses, drills or other trainings for service providers and planners focused on cultural competence, language access issues, and other topics related to reaching diverse communities in disasters. The majority of organizations that address the needs of diverse communities in their courses and drills do so in broader discussions of "community preparedness" or "vulnerable populations". For example, the University of California-Berkeley has produced a series of educational presentations entitled "Disaster Preparedness for Vulnerable Populations" and the University of California-Los Angeles offers a course on "Program Planning in Community Disaster Preparedness," both of which address to some degree the needs of limited English proficient (LEP) and cultural minorities. The American Red Cross offers a course "Working with Total Diversity" which aims to train volunteers to work within a cultural competence framework; however not all local American Red Cross chapters provide this course. A few not-for-profit volunteer and community-based organizations, nonetheless, have embraced the American Red Cross' course curricula and provide some sort of basic information on reaching LEP populations.

From our review, organizations that emerged as having promising and even "model" programs of training and education include: Collaborating Agencies Responding to Disasters (CARD); Citizens of Oakland Respond to Emergencies (CORE); and NICOS Chinese Health Coalition's Chinatown Disaster Project. Collectively, these programs: work with community representatives in offering training; engage racial/ethnic groups in drills and exercises; and incorporate issues around language, culture and trust in emergency response scenarios.

In mapping regional and local training and education programs by region and diversity (see Figure 3), our findings reveal that densely populated high diversity regions across California, such as Bay Area and Los Angeles County, house most of these programs, with a few existing across other diverse regions—e.g., Central Valley and San Diego/Imperial. It is important to note that our web-based review did not identify programs in many of the other regions with moderate to high diversity (e.g., Central Coast and Desert Sierra). Furthermore, the northern regions (e.g., North Coast and Sierra Cascade) found a deficit of training and education programs geared toward preparedness for diverse communities.

Our web-based review also identified 221 Community Emergency Response Team (CERT) chapters across the state. CERT training programs are funded by the Citizen CORPS and delivered to community members through a team of local first responders who possess the skills and knowledge to instruct the sessions. In some instances, such as in Los Angles County, training curricula is available in non-English languages such as Spanish. Not all local CERT chapters have Web sites and the majority of those that do only provide minimal information. For these reasons the web sites of local CERT chapter were excluded from our web-based review.

Figure 3.
Organizations across California that Provide Training and Education on Diversity Preparedness, by Region and Diversity Index, June-August, 2008



Research and Evaluation. Our web-based findings suggest that approximately five percent of organizations across the state are involved in research and evaluation activities, such as conducting needs assessments, surveys, focus groups and interviews to elicit the needs of local racially and ethnically diverse communities as well as to assess the level of preparedness and effectiveness of programs in reaching these communities.

We found that the majority of organizations conducting research and evaluation studies are either at the state-level or originate from the Bay Area region, focusing largely on immigrant and LEP populations residing in Southern California and other urban communities. Examples of organizations leading or commissioning work in this area are: academic and research centers such as the University of California in Berkeley, University of California in Los Angeles, and the Tomas Rivera Policy Institute; foundations such as The California Endowment and The San Francisco Foundation; and non-profit entities such as the Fritz Institute and the Asian Pacific American Legal Center. Collectively, these organizations have focused their research activities on:

- Eliciting lessons learned from past disasters on improving language assistance, developing community partnerships, and involving diverse communities in disaster planning;
- Assessing disaster-related services in urban communities for immigrants;
- Identifying experiences of urban immigrants in preparedness, exposure to disaster education, knowledge of warning communication and preferred sources of information; and
- Identifying ways to engage community groups in emergency preparedness.

Guidance on Promising Practices and Strategies. Few state, regional and local resources and publications (5%) have emerged highlighting promising practices and strategies for preparing and responding to diverse communities. Where these resources do exist, they either originate from state-level agencies, private-sector research and advocacy entities, or local organizations in the Bay Area region. Examples of resources that have recently emerged include:

- *An Emergency Preparedness Compendium released by the Association of Asian Pacific Community Health Organizations* to highlight promising practices of Community Health Centers serving Asian American and Pacific Islander communities during emergency preparedness, response, and recovery phases.

- *A United Way of the Bay Area Report, "Ready or Not"* which highlights strategies for community based non-profits in the Bay area to serve vulnerable populations, including racial/ethnic, following a disaster.

- *Tomas Rivera Policy Institute and the Asian American Legal Council of Southern California's June 2008 Report* which identifies lessons learned from response efforts intended to serve Latino and Asian communities during the 2007 wildfires in Southern California.

Advocacy and Policy Work. About five percent of organizations in our review provide support for or focus their activities on advocating for policies to improve preparedness, response and recovery within racially and ethnically diverse communities. Examples of these organizations include: The Tomas Rivera Policy Institute; Asian American Legal Center of Southern California; The California Endowment; The San Francisco Foundation; The Fritz Institute; Asian and Pacific Islander Health Forum; Association of Asian Pacific Community Health Organizations; NICOS Chinese Health Coalition; and San Diego Immigrant Rights Consortium. The majority of the advocacy organizations identified have conducted research and developed background reports to guide and inform the decisions of policy makers. While the web-based review identified formal advocacy initiatives as such, our key informant interviews (discussed in the next section) revealed more informal advocacy relationships between organizations.

Collaboration. As collaboration with community has repeatedly been identified as central to serving and reaching minority populations in emergencies, we reviewed Web sites to identify organizations actively partnering with community-based organizations, ethnic media, community representatives and other community/cultural brokers to share resources and develop informed plans which are inclusive of the needs of the local community.

While our web-based review revealed that a little over one in ten organizations is actively collaborating, the actual number of individual collaborative partnerships is greater, as many community-based partners do not have Web sites and were thus excluded from our web-based review. A number of umbrella organizations, the majority of which are located in the Bay Area region, currently do coordinate emergency services between entities across sectors. These organizations provide guidance to community and faith-based organizations as to what to expect in the event of a disaster and develop emergency response plans which link traditionally isolated service providers. Examples of collaborative efforts to reach and meet the needs of diverse communities in disasters include:

- *Collaborating Agencies Responding to Disaster (CARD),* which trains and prepares community-based organizations for disasters with the mission of enabling them to continue to serve vulnerable populations following a disaster. CARD also works to link community-based organizations with state and county relief agencies, such as the Office of Public Health or Office of Emergency Services, to create emergency response plans which meet community-specific needs. CARD has chapters in Alameda, Contra Costa and San Francisco Counties. Findings from our web-based review indicate that the San Francisco CARD chapter is currently collaborating with thirty agencies. The contact information for each CARD chapter is provided in Appendix B.

- *The San Francisco Foundation*'s *FAITHS Program* was founded in 1993 to serve as a bridge between the philanthropic and faith-based communities. In collaboration with San Francisco CARD, the San Francisco Interfaith Council, Walter and Elise Haas Fund, the Bay Area chapter of the American Red Cross, and the San Francisco Office of Emergency Services, the FAITHS program has partnered with over 100 congregations to train and prepare them to serve vulnerable communities in emergencies. In May 2006 the FAITHS program and its partners led an emergency preparedness workshop for its participating congregations. In conjunction with the Koshland Program, a separate civic engagement initiative at The San Francisco Foundation, FAITHS plans to fund training programs for community stakeholders to enable them to better serve vulnerable populations following a disaster.

- *The Fritz Institute's BayPrep Program* seeks to address the emergency preparedness and response needs of vulnerable populations, including racial/ethnic minorities, by fostering cross-sector partnerships between not-for-profit, for-profit, philanthropic, and government entities. In 2007 BayPrep launched an extensive research study to assess the capacity of community and faith-based organizations in the San Francisco Bay Area to respond to disasters. By establishing baseline data on the readiness and capacity of these organizations, BayPrep plans to initiate partnerships across sectors to address gaps in planning and response.

- *Thrive Alliance's Emergency Services Task Force* was formed to increase emergency preparedness and response efforts of non-profit organizations and increase collaboration between these organizations and local response agencies in San Mateo County, such as fire departments and community emergency response teams (CERTs).

- *The Shasta County Cultural Awareness Council Action Plan*, encourages first responders to develop and maintain relationships with key individuals in culturally diverse communities by participating in local community meetings and attending community functions such as sporting events and cultural celebrations. The purpose of the Awareness Council is to establish and maintain lines of communication with community representatives of diverse populations in emergency and non-emergency situations.

- *The California Department of Public Health*, in March 2006, forged partnerships by bringing together members of the ethnic media to discuss plans and effective methods of communication to reach racially and ethnically diverse communities in a disaster.

Funding. Few opportunities for obtaining funding exist across the state to provide services or conduct research and evaluation on preparedness for diverse communities. Those identified include The California Endowment, The San Francisco Foundation, Grantmakers Concerned with Immigrant and Refugee Rights, The United Way of The Bay Area and the Sequoia Healthcare District. A number of these organizations provide funding opportunities in the context of support for community-based organizations that do not traditionally operate within the realm of disaster services. A more comprehensive description of these funding opportunities is provided in Appendix B.

C. Key Informant Interviews

To complement findings and add dimension to the literature and web-based reviews, interviews were conducted with key individuals representing public and private state, regional and local agencies concerned with or having authority and responsibility for preparing and responding to communities in emergencies. Interviews elicited feedback on: the barriers and challenges to preparing and responding to diverse communities; specific practices and strategies currently adopted by agencies to address these barriers; and recommendations for future programs and policies. The following narrative synthesizes results from 17 key informant interviews.

C.1. Individual Level Barriers to Preparing and Responding to Diverse Communities

Key informants identified four major individual-level barriers that impede the ability of planners, service providers and responders to fully engage and reach culturally diverse populations before, during and after emergencies. Responses indicate that these barriers do not exist independently of each other. Rather they are largely interrelated and exist in broader social, economic, and political contexts. The following section describes the major individual level barriers and challenges identified by respondents.

Social and Economic Factors. An overwhelming majority of respondents (n=15) explicitly expressed that they had difficulty engaging culturally diverse populations in the preparedness and response phases of an emergency due to the plethora of economic and social stressors which disproportionably overwhelm these communities. In particular, respondents cited a lack of financial resources among low income communities of color as impeding the ability to prepare disaster supply kits and take appropriate protective action, such as evacuating in case of a wildfire. As one informant said, "They can't even put food on the table and they know that they don't have the resources to evacuate in the case of an emergency." The inability to perform housing mitigation was additionally mentioned as many low-income minorities rent their homes and are thus prohibited from making structural modifications. Time was also cited as a resource that inhibited preparedness, as members of low-income racial and ethnic communities often work multiple jobs and are thus unable to participate in community preparedness education and training exercises. As one respondent put it, "These people [Hispanic/Latino immigrants] live very complicated lives; the nine to five lifestyle doesn't necessarily apply to them." Furthermore, respondents indicated that emergency preparedness was a very low priority for these communities. For example, one individual stated: "Low income minorities have too many other stressors to make preparedness a priority."

Limited Trust. A large majority of key informants (n=11) identified low trust in service providers and government officials to be a major impediment to understanding and adhering to preparedness actions. This sentiment was particularly evident in key informants from public agencies who cited pervasive distrust in uniformed first responders among immigrant communities, prompting a lack of compliance with recommendations from public agencies. Respondents mentioned that minorities tend to lack trust in the Office of Emergency Services

and its ability to meet their specific needs. One informant from a not-for-profit response agency stated they encountered considerable difficulty engaging culturally diverse communities in their preparedness programs because the local community assumed they were government officials.

Culture and Language. There was general consensus among respondents (n=8) that culture and language posed significant barriers. Perceived barriers included both language access issues and lack of knowledge about the customs and norms of diverse cultures. As one informant indicated in quoting a police officer, "We would love to connect with the [Chinese] community, but we don't know how." Another respondent emphasized the ambiguity and often misleading nature of verbatim translations: "The translation should say 'Store meat in the freezer', instead it reads 'Store elephant meat in the freezer." It was also mentioned that cultural and language barriers inhibited diverse populations from accessing recovery services which were available to them. As one informant stated in reference to the utilization of community health centers amongst Asian American immigrants, "If you can't communicate with the community they won't be aware of the resources available to them." The sheer number of languages and dialects across the state was additionally cited as a barrier in communicating with diverse populations even when concerted efforts were made to provide translated materials.

Geographic Isolation. Geographic isolation was also a salient theme amongst respondents. One informant cited the situation of communities in a region at elevated risk for natural and industrial disasters: "…people who live in North Richmond, West Contra Costa County, and in other low income and highly diverse regions are aware that they are vulnerable and fear ending up like Katrina victims."

C.2. Institutional Level Barriers to Preparing and Responding to Diverse Communities

Key informants also identified two significant barriers to preparedness and response at the organizational and systems level. These include:

Lack of Funding for Culturally and Linguistically Appropriate Services and Programs. There was consensus among respondents (n=9) that a lack of funding inhibited efforts to effectively engage and serve culturally diverse populations. In particular, respondents cited a desire to hire more bi-lingual and multicultural staff to engage the community, but were unable to do so due to limited budgets. Key informants also indicated having insufficient funds to produce emergency preparedness materials in multiple languages and to market and actively promote their services to culturally diverse populations.

Lack of Collaboration. Nearly half of the key informants (n=8) cited a lack of collaboration and coordination between and within organizations as a major barrier to fully meeting the needs of culturally diverse communities. Respondents indicated insufficient communication and sharing of best practices between community-based organizations (CBOs) and response agencies to collaboratively develop emergency response plans and preparedness training workshops. It was also mentioned that formal disaster preparedness plans tend to be esoteric and unclear to representatives of community-based organizations who are not familiar with the language and acronyms used in the field. Another concern that emerged was that agencies are often overly

territorial of their responsibilities and the populations they serve and are thus reluctant to embrace collaborative initiatives.

C.3. Programs and Strategies for Preparing and Responding to Diverse Communities

Key informants identified a range of programmatic efforts and strategies to address and overcome barriers to reaching culturally diverse populations in emergencies. Specifically, respondents were asked to describe their efforts across four major programmatic areas: community engagement; infrastructure support for culturally and linguistically appropriate services; research and evaluation; and building collaborative partnerships. There were a number of overarching strategies that were implemented by organizations from all sectors. Salient themes which were identified by informants for each area of practice are described in this section.

Community Engagement. There was agreement among interview respondents (n=7) that community engagement was invaluable to effectively meeting the emergency preparedness needs of culturally diverse communities. As one respondent stated, "Disaster preparedness in [our county] is a community effort, not an agency effort!" Key informants described a range of specific strategies which they and their organizations had recently employed to engage diverse communities. For example, three respondents cited having assembled advisory groups, comprised of appointed members from the local community, volunteers or representatives from community-based organizations, to guide and inform the development of emergency preparedness plans and training curricula as well as establish shared vision and mutual understanding surrounding preparedness objectives. A respondent from a County Public Health Department indicated that over 140 individuals served on their advisory committee, including members of the lay community as well local businesses such as Target and Wal-Mart. A few key informants, representing both private and public sectors, noted that they employed informal strategies to partnering with communities. For example, they cited attending cultural festivals, such as Cinco De Mayo; building cordial relationships with revered community and faith leaders; and arranging informal meetings with the local community to obtain a better understanding of their needs. As one individual explained, "As long as you understand people's culture and respect their cultural beliefs they will respond to you." According to respondents, these relationships foster trust and provide knowledge about the customs and social norms of the local community.

An academic researcher described successes associated with using *promotores* from the local community to facilitate focus groups and disaster preparedness training. Promotores are Hispanic/Latino outreach workers and health promoters from the local community. The informant described how promatoras were successful in recruiting participants and overcoming trust, cultural and linguistic barriers.

Infrastructure Support for Culturally and Linguistically Appropriate Services. Eight of the key informants indicated that they have actively recruited bi-lingual or multi-lingual staff, representative of the racial and ethnic composition of the community they serve. As one informant explained, "The County Health Department has a 'Reducing Disparities' initiative in

which one of the key principles is a diverse and culturally competent workforce." Another informant described how they strongly discourage employees who "sort of" speak a foreign language from practicing their skills with members of the local community as it can breed confusion and erode trust. Seven respondents described their efforts to engage culturally diverse populations in emergency preparedness training and response programs that were tailored to the needs of the community. One respondent from a local fire department who conducts Community Emergency Response Team (CERT) training described the importance of using members of the local community as interpreters when the training agency cannot afford to hire additional bi-lingual staff. A CERT trainer from a different organization described their use of headsets to provide training sessions in languages other than English. The majority of respondents who engaged diverse communities in training programs emphasized the importance of presenting training information in plain and simple language. Another respondent described the success of the 211 telephone service in providing current information to LEP populations.

Research and Evaluation. Six key informants described using tools of measurement to assess the vulnerability of culturally diverse communities and examine methods through which they could best be reached. Both a county public health department and a local fire department used survey techniques to assess levels of preparedness in culturally diverse and low income neighborhoods. Another respondent indicated that both survey methods and focus groups were used in community health centers to assess the needs of the patients around emergency medical and other services.

Collaborative Partnerships. Despite the expressed need among key informants for increased collaboration, our discussions revealed examples of partnerships that have emerged between and across agencies and sectors. First, the concept of community-based organizations serving as a source of information for public and private emergency planning and response agencies was a recurring theme throughout the interviews. As one respondent stated "[community based] not-for-profits provide the most valuable services to vulnerable populations on a day to day basis." This respondent also explained how their community-based organization was working with the county Office of Emergency Services to use GIS mapping to identify pockets of vulnerable populations. An academic researcher described a strong partnership between the university the county public health department through the research process and development of emergency preparedness curricula. Additional respondents described efforts in which they served as advocates for culturally diverse populations to have their needs better integrated into emergency preparedness and response plans. Two respondents, one from a private sector organization and one from a community-based organization, stated that they successfully advocated for public agencies to recruit more bi-lingual staff to meet the language needs of their communities. Another respondent described the process through which a county public health department successfully advocated for the county office of emergency services to make community engagement a higher priority: "as a result of this, the state emergency management agency is making a plan for a common partnership between [a not-for-profit response agency] and faith-based organizations for shelter, training, pet shelters, and registration for spontaneous volunteers."

Interview respondents also cited developing partnerships to share resources. Two respondents described the process through which they partnered with external organizations to provide

training sessions in languages other than English while another plans to reach out to academic institutions to have foreign language majors translate chapters of a training manual as part of their final project. Another respondent cited co-logoing translated materials as an effective method to share costs.

Finally, a recurring theme expressed by interview respondents was the need for representatives from different organizations to keep each other abreast of their emergency preparedness and response plans and appear as a cohesive unified front to the general public. As one respondent stated, "We work with all of these different entities to assure that we're all putting out the same message." Respondents across all sectors cited some form of collaboration with the Office of Emergency Services, emergency medical services, and community-based organizations. Two respondents described strategies to improve communication between community-based organizations and county agencies before, during and after emergencies. A respondent from a not-for-profit collaborating agency explained how they provided basic training on the National Incident Management System (NIMS) to community-based organizations so they are able to effectively communicate with the Office of Emergency Services in a disaster. This respondent, in addition to another informant, provided training and certification courses in amateur radio to enable isolated communities to communicate with official disaster response and relief agencies following a disaster.

C.4. Program and Policy Gaps and Priorities

Key informants identified a set of priorities for future programs and policies. The underlying premise for their recommendations was that needs specific to diverse cultures and neighborhoods should be accounted for throughout the policy development process from incipiency to implementation. As one respondent firmly stated, "Policy needs to be more community driven." The following are key areas of program and policy priority as identified by the informants:

Greater Collaboration across Agencies and Sectors. Throughout the interview process respondents from all sectors provided examples which alluded to the fact that fragmentation and lack of communication between organizations was a major impediment to effectively serving racially and ethnically diverse communities. While the need for greater collaboration between all agencies was emphasized, respondents particularly stressed the need for increased communication between community-based organizations and government agencies, such as county public health departments and offices of emergency services, as well as between the private sector and public agencies. As one respondent said in referring to the public/private sector gap, "It all comes back to positive relationships."

The resounding consensus among key informants was that community- and faith-based organizations as well as neighborhood councils should play a more active role in disaster preparedness planning as they have the most intimate knowledge of the specific needs of their racially and ethnically diverse communities. Respondents offered a number of specific recommendations to encourage collaboration and coordination across agencies and sectors: establishing mandatory steering committees for emergency and public health agencies to ensure the inclusion of community representatives; giving a greater voice to neighborhood councils and schools; encouraging jointly funded projects; providing financial incentives for collaborative initiatives; and subsidizing travel expenses for meetings and conferences. Multiple informants

highlighted the importance of building cordial and personal relationships with their counterparts in different sectors as being invaluable to the development of successful and seamless emergency preparedness and response efforts.

Increased Flexibility for Program Development and Allocation of Funds. Multiple respondents expressed that organizations need to be given greater latitude in developing emergency preparedness and response plans as well as in their freedom to allocate funds as the needs of each community are unique. As one respondent said, "The state coming in and saying 'you need to do this' is like me telling a mechanic they have too much grease in their shop… it doesn't work." One informant from the private sector described a situation in which the most effective way to inform a culturally isolated community of a flood risk was through "Sister 'X' " of Church 'Y'. The informant advocated for the county office of emergency services to get her a pager and service subscription so she could promptly inform the local community when OES was aware that the area is at risk for flooding. OES was unable to embrace this innovation as it did not fall within their mandated scope of protocol. As one county public health official said, "We need to move away from the paternalistic view of preparedness… the county head just can't say 'this is what we're doing'… community input is necessary to engage the community."

It was also suggested that amendments be made to the Federal Tort Claims Act (FTCA) to expand and clarify the liability coverage of community health center physicians who wish to travel across state lines to provide services to culturally diverse populations following a major disaster. A respondent described how physicians of Vietnamese origin wanted to travel to the Gulf Coast region to assist the affected Vietnamese community but were unable to do so due to the ambiguity of current legislation in regard to malpractice coverage. There are currently bills in Congress, such as H.R.3962, which would expand coverage for community health center physicians to travel across state lines to aid response efforts.

Increased Funding for Specific Programs for Diverse Communities. Not surprisingly, the vast majority of respondents expressed that they could better serve diverse populations if more funding was available for them to do so. As one respondent pointed out, "funding is always an issue, that's a given right there." Specific recommendations for the re-allocation of existing funding included more support for regional conferences in which representatives from all sectors are present as well as direct funding for community and faith-based organizations. Another recommendation was the implementation of a mandate that requires all organizations that receive state funding to develop organizational emergency response plans.

IV. DIRECTIONS FOR THE FUTURE

This study was intended to provide a review and synthesis of information on the major barriers and challenges to integrating California's culturally diverse communities into emergency preparedness and a status report on current research and programs as well as gaps and priorities for addressing this issue across the state. Because the field is dynamic, we recognize that programs and initiatives in progress or in nascent stages, particularly state, regional and community efforts that are rapidly evolving may not be captured here. Furthermore, certain regional and local agencies may not be included in our web-based review, largely because they either do not have Web sites or do not reflect programmatic updates on their Web sites. Nonetheless, our review is the first of its kind, providing a point-in-time snapshot of California's emergency preparedness challenges, efforts and priorities. The methodologies employed in this study were intended to be complementary to capture and validate information from a range of perspectives and sources.

Our findings on the disparities, challenges and barriers encountered by California's culturally diverse communities before, during and after an emergency reinforce many of the findings from national studies conducted on this topic, including a study we published in *Health Affairs* in 2007 (Andrulis, Siddiqui and Gantner, 2007). Both reports stress that challenges and barriers to effectively preparing and responding to diverse communities are not new, but, instead, are deeply rooted in complexities that require specific attention and tailored strategies. Specifically, we identified barriers at two major levels—the individual and institutional. At the individual level, a combination of socioeconomic factors (e.g., poverty, low literacy, substandard housing conditions, and lack of transportation), culture and language, and trust inhibit effective preparedness, response and recovery for diverse communities. At the institutional level, it is the lack of knowledge, resources, funding and infrastructure support to provide culturally and linguistically appropriate services that impedes the ability of agencies and providers to effectively reach and have preparedness and response actions understood and adhered to by racial/ethnic populations. These conclusions and synthesis of recommendations from the field suggest at least five areas for concentrating future actions.

Coordination of Information, Resources and Services across Organizations, Sectors and Regions. Conclusions from our review and interviews as well as panels reinforce the need to harness and coordinate programs and share resources and information across organizations, sectors and regions. Through our web-based review, we identified a richness of programs and resources across the state that could offer opportunities for closing gaps and in effectively reaching diverse communities in emergencies (see Appendix B). However, as key informants indicated, these efforts are largely fragmented, existing in silos and will require extensive coordination. Respondents and panelists also acknowledged a disconnect in organizational culture and discomfort in working with organizations between sectors that inhibits coordination. For example, California has a wealth of advocacy groups, foundations and other agencies leading working on cultural and linguistic competence, such as the Asian Pacific Islander American Health Forum and the California Department of Public Health. These agencies can provide essential expertise and tools for integrating cultural competence into emergency preparedness. Furthermore, there is a need to share information on promising practices, successes and lessons learned to working with diverse communities in emergency situations across the state. Michael

Kleeman, a panelist at the October 2008 convening, a Senior Fellow at the University of California, San Diego, and National Chair of Corporate Operations for the American Red Cross suggested that there are a lot of promising practices and work to engage diverse communities, however a lot of good work is not published, disseminated or shared. While each community and its circumstances are unique, community organizations and local agencies can benefit from general information on what works and what does not work within diverse communities. Part of a coordination effort should also consider centralizing information, resources and services within the state, including for example, a centralized interpreter pool or database of vetted culturally and linguistically appropriate translated resources.

Infrastructure Support for Developing Culturally and Linguistically Appropriate Programs and Services. With decades of experience working with diverse communities, practitioners, advocates and researchers in the health care and public health fields highlight the importance of developing specific actions—such as increasing racial/ethnic diversity of the health care workforce and supporting health care providers and staff in providing culturally competent care—to reduce racial and ethnic disparities in health. The Institute of Medicine's watershed report, *Unequal Treatment*, found that more than 50 percent of providers believe that patients do not adhere to treatment because of culture and language barriers (IOM, 2001). Well established studies also suggest that adherence to treatment improves when practitioners are culturally competent as well as when patients and physicians are racially and ethnically concordant (Saha et al., 1999).

Despite such evidence and lessons from the health care and public health fields, however, our findings indicate that a lack of dedicated and flexible funding, as well as inertia within the system, impedes the ability of local emergency management agencies and first responder groups to embrace and integrate key principles of cultural and linguistic competence in their programs and services. Specific and important actions such as offering cultural competence training for first responders and service providers, diversifying the responder workforce to reflect the cultural and linguistic composition of communities, providing on-site interpreters, and evaluating and ensuring accountability of language resources and services, only scarcely exist across the state in the context of emergency preparedness and have been identified by key informants as well as other state-based studies as critical priorities for advancing the preparedness of diverse communities. Furthermore, the health care arena has made strides to embrace the federal National Standards on Culturally and Linguistically Appropriate Services (CLAS) issued by the U.S. Department of Health and Human Services' Office of Minority Health. With limited resources, agencies can at least begin to make an effort to ensure that basic principles identified in these standards are integrated into emergency preparedness plans and actions.

Collaboration between Public Health/Emergency Agencies and the Local Community to Foster Trust and Understanding. Our findings, as well as proceedings from the October 2008 panel sessions, indicate that collaboration with local community organizations and public agencies is key to fostering trust and understanding among racially and ethnically diverse communities. To this end, essential preparedness actions, such as risk communication, training and education, and measurement and evaluation, require the full and active involvement of diverse communities. For example, informing diverse communities about preparedness will require agencies and providers to work with community representatives to tailor messages, use

representative and trusted messengers and utilize channels such as ethnic media, to result in populations that are knowledgeable and willing to undertake and adhere to recommendations.

While some organizations in California have established themselves as trusted resources in the community for preparedness, response and recovery, particularly in the wake of the Loma Prieta earthquake, others are still facing significant challenges to achieving this objective. Nonetheless, efforts do exist that demonstrate promise. For example, CARD is a program that has both built trust with its constituents and used its status in the local community as a fulcrum to encourage partnerships between community-based organizations and the public sector. In addition to coordinating efforts between community-based organizations in the Bay Area, CARD has been instrumental in acting as a liaison between community-based organizations and county public health/emergency management agencies. By providing culturally competent services and building enduring relationships with community-based organizations they have opened doors to community/public sector partnerships which may have otherwise remained closed. Similarly, the NICOS Chinese Health Coalition, a community-based and culturally-focused health institution in San Francisco's Chinatown, partners with local public and private responder agencies to coordinate an annual large-scale disaster drill in Chinatown. This multi-organization and multi-sector exercise brings together members of the local community, community-based organizations, and the public sector to simulate a disaster response scenario. Through this process the local community gains trust in service providers and relationships are formed between community-based organizations and public sector agencies. Additionally, the Alameda County Department of Public Health's City-County Neighborhood Initiative (CCNI) is a leading example of a public sector agency reaching out to collaborate with community-based organizations. CCNI is a collaborative partnership between the Alameda County Department of Public Health, City of Oakland Neighborhood resident groups, community-based organizations, as well as other public sector entities and academic institutions. CCNI works to address the underlying causes of health disparities, including emergency preparedness and disaster outcomes, by working intimately with local communities to increase leadership skills and social capital. Encouraging agencies to forge such collaborative partnerships is essential to developing shared objectives around priorities, building trust, and ensuring recommendations are understood, accepted and followed.

Tailoring Emergency Preparedness Plans and Actions to the Broader Social, Economic and Political Circumstances of Communities. A resounding theme among key informants and California panelists at the October 2008 panel meeting was the need to consider and develop emergency preparedness plans and actions within the broader social, economic and political contexts of communities. This is especially important as a recent body of evidence suggests a strong interplay between racial and ethnic disparities and social determinants of health and well-being. Literature suggests that it is often low-income communities of color, who lack financial resources to develop emergency supply kits and take needed protective action as well as reside in substandard housing and neighborhoods with other social stressors such as crime and violence that experience the disproportionate burden of emergencies across all phases (Fothergill, 1999; Pastor et al., 2006).

Additional literature indicates that low-income minorities, particularly immigrants, are more likely to lack means of personal transportation and rely on public transit as their primary mode of

transportation (Blumenberg & Kimiko, 2007). These circumstances may auger dire consequences for these communities in the event of a disaster requiring a large-scale evacuation. A report recently issued by the Transit Research Board examined the role public transportation systems could play in evacuating critical areas in the event of a disaster. The report assessed the current capacity of public transportation systems in the Los Angeles—Long Beach—Santa Ana region and found that, while the major transit providers in each municipality had their own emergency response plans, there was no coordinated plan suited to execute a large-scale evacuation across county lines. The report also acknowledged that geographically isolated immigrant communities, often with limited English proficiency, would be largely reliant on public transportation to evacuate at-risk areas. A Los Angeles Metro Transit Authority (MTA) official indicated that Foothill Transit, a bus service for 21 municipalities and unincorporated areas in Los Angeles County, has the potential to be instrumental in serving these communities during a disaster and that MTA was working with city and county officials to coordinate services (Transit Research Board, 2008). Such calculated planning efforts, which account for broad social and economic issues, are crucial to meeting the needs of diverse communities.

Issues related to racism and immigration status among diverse communities also contribute to sentiments of fear and distrust. These sociopolitical issues shape the disaster outcomes of undocumented workers as they are reluctant to take part in evacuations overseen by uniformed officials and utilize disaster services, thus risking life and limb for fear of deportation. This scenario demands a thoughtful re-evaluation of policies that require identity checks in exchange for the receipt of disaster services and regulate the presence of immigration enforcement officials at emergency service centers.

These and other broader issues must be considered in any specific strategy to reach diverse communities before, during and after an emergency and foster understanding and adherence. Additionally, research and evaluation should look beyond barriers to preparedness and assess community assets and resources, such as the role of community/faith-based organizations, to develop informed strategies that are tailored to the needs of the local community.

Assuring Sufficient, Sustainable, and Flexible Funding Opportunities to Meet the Needs of Diverse Communities. Federal funding for state and local emergency preparedness initiatives increased sharply following the events of September 11, 2001, only to decrease 25 percent since 2005 (Trust for America's Health, 2008). Despite these fluctuations California has continued to keep preparedness a priority. The California Emergency Management Agency (CalEMA) allocated 3.7 percent of its total budget to preparedness in fiscal year (FY) 2008-09, up from 2.4 percent in FY 2007-08 (CalEMA, 2009).[2] With looming state budget deficits and a dismal national economy it is crucial that funding is sustained for critical efforts to meet the needs of diverse communities and flexibility is provided within funding streams to allow for preparedness funding to achieve a maximum return.

Our findings indicate that issues related to a lack of flexibility in the ability to allocate preparedness funds pose significant institutional barriers to developing and tailoring programs to reach and meet the needs of diverse communities in disasters. Key informants suggested that

[2] It should be noted that these figures represent CalEMA's budget and do not for account for preparedness funding which is distributed directly to state, local, and city public health departments.

funding was lacking to hire bilingual staff, provide cultural competence training, tailor and print materials in multiple foreign languages, and other related efforts. Additional evidence suggests that inconsistencies in funding between years limit the ability of agencies to hire and train new staff to implement programs. Rigid stipulations concerning the time period to spend funds also inhibit the ability of agencies to recruit, hire, and train qualified staff within the allotted time frame (NACCHO, 2007; Trust for America's Health, 2008). Representatives from local public agencies also indicated that they were largely constrained in their freedom to disperse and allocate funds. Recognizing that community organizations and local agencies are most intimately involved in preparedness and response activities, public and private funding agencies could encourage if not require organizations to form community partnerships as part of their funded deliverables. This would open opportunities for organizations to work with communities and tailor emergency preparedness to their specific and distinct needs. Furthermore, advocacy groups, research institutes and philanthropies should ensure that their work highlighting the gaps and priorities to preparing and responding to diverse populations is made publicly available to raise attention and awareness of the importance and urgency of this issue.

Results from our review of programs, gaps and critical priorities across California reinforced the importance of many of the findings and conclusions we have found in other areas of the country and from our National Consensus Panel on Emergency Preparedness and Cultural Diversity.[3] We hope that these results and recommendations offer directions for future research, initiatives, and policy development for those committed to creating healthier and more secure communities for all residents in this richly diverse state.

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[3] The National Consensus Panel on Emergency Preparedness and Cultural Diversity is comprised of 34 leading national, state and local public and private organizations representing public health, health care, emergency management, homeland security, cultural competence, and minority communities across the country. The Panel was created by the Drexel University School of Public Health's Center for Health Equality, with support from the U.S. Department of Health and Human Services Office of Minority Health, "to provide guidance to national, state and local agencies and organizations on the development of effective strategies to advance emergency preparedness and eliminate disparities for racial and ethnic communities across all stages of an emergency event." In June 2008, the Panel released a National Consensus Statement and Guiding Principles on Emergency Preparedness and Cultural Diversity. For more information on the Panel and its work, see http://publichealth.drexel.edu/che/Current_Projects/69/.

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VI. APPENDICES

Appendix A. California State/Regional and Local Panel Proceedings on Emergency Preparedness and Cultural Diversity

A. Background and Overview

As evidenced by Hurricane Katrina and more recently, the California wildfires and Hurricane Gustav, racially and ethnically diverse communities are particularly susceptible to gaps in emergency planning, programs and policies, and largely bear a disproportionate burden of adverse outcomes. While emergency preparedness has moved to the forefront of national, state and local priorities, specific efforts and resources to address the distinct needs of racially and ethnically diverse communities continue to lag behind. To address this shortfall in programs and policies, the Center for Health Equality (CHE) at the Drexel University School of Public Health received support from the U.S. Department of Health and Human Services' Office of Minority Health (HHS/OMH) to convene a national panel of experts representing a breadth of perspectives and fields—e.g., public health, health care, emergency management, racial/ethnic communities, cultural competence, and others—to develop a national agenda and a core set of priorities as well as specific guidance on integrating racially and ethnically diverse communities into emergency preparedness planning and implementation. Following their first meeting in Washington, D.C. in September 2007, the panel, formally known as the National Consensus Panel on Emergency Preparedness and Cultural Diversity (NCP), issued a consensus statement and guiding principles, stressing that coordination in working with diverse communities is key to success and concluding that their active involvement and engagement is essential to their understanding of, participation in and adherence to recommended actions.

In October 2008, NCP convened for a second time in Los Angeles, California to develop specific action steps to operationalize priorities and strategies outlined in the consensus statement and guiding principles, as well as add a regional and community dimension to national recommendations. To this end, and with joint support from The California Endowment and HHS/OMH, on October 17, 2008, CHE hosted two 90-minute panel sessions (as part of its larger NCP meeting) focused on California's state, regional and local preparedness efforts for culturally and linguistically diverse communities. California, a state often characterized as "minority-majority" and vulnerable to a range of natural disasters, has devoted significant attention at the state, regional and local levels to tailor emergency preparedness and develop resilience capacity within diverse communities. By creating a forum to explore current efforts, these panel sessions sought to promote the exchange of experiences, ideas and practices to identify specific priorities and strategies for advancing the preparedness of diverse populations across California and the nation.

The first panel session focused on state/regional agency efforts, challenges and priorities for integrating diverse communities into planning and implementation, while the second session featured discussions around empowering and engaging local communities and building resilience

capacity. Each panelist in both sessions was asked to make a brief presentation on their current efforts and experiences to incorporating diverse populations in planning and implementation and discuss promising practices, successes and lessons learned before the National Consensus Panel as well as other regional and local representatives with an applied focus on diversity and preparedness issues across California.

The following proceedings provide a summary of the two panel sessions, synthesizing themes and conclusions from presentations made by panelists and highlighting their recommendations.

B. State/Regional Panel Session

The first 90-minute panel session convened state/regional public health and emergency management representatives with the purpose of discussing and identifying strategies and priorities for integrating diverse communities into preparedness planning and implementation.

Wendel Brunner, Director of Contra Costa County Public Health Department. Wendel Brunner, with years of experience working on health disparities issues in California, emphasized the importance of actively engaging culturally and linguistically diverse communities. He stated, "We have to engage these communities not just around the disaster that will occur in 30 years, but all the issues that are important in their lives, and in doing this we can build trust within communities." In discussing "all the issues" Brunner stressed the need to understand the inequities and social and economic conditions of diverse communities and tailor community programs accordingly. He affirmed that "low-income and minority communities do not spend a lot of time organizing into Community Emergency Response Teams (CERTs)" and that emergency planners need to: build on existing community structures and organizations; integrate emergency preparedness into daily routines; work with trusted community institutions, such as churches; and engage community residents, such as church participants and ministers, in trainings for emergency response.

Muntu Davis, Deputy Health Officer of Emergency Preparedness, Alameda County Public Health Department. Muntu Davis opened his talk by stating "preparedness is about building community resilience." He specifically outlined a number of strategies for state/regional public health and emergency management agencies to consider in supporting communities to build their resilience capacity. These included: offering leadership training to members of the community so that they can serve in the event of a disaster or emergency; running emergency preparedness and response drills and exercises across communities with differing needs and social and economic circumstances actively involving and engaging community members in the process; and providing opportunities for communities to establish a shared vision and mutual understanding around preparedness objectives (e.g., inviting community members to participate in planning or advisory committees). Davis also spoke at length about the need to address "daily stressors" within communities (e.g., poverty, violence and poor health) to build resilience capacity for disaster situations.

Paul Jacks, Director of BayPrep, Fritz Institute. Paul Jacks, former Deputy Director in the Governor's Office of Emergency Services (OES) and recipient of the California Emergency

Services Association President's Award for outstanding contributions to emergency management in California, focused his talk on the importance of engaging and involving the non-profit sector from emergency preparedness planning through response and recovery. Jacks highlighted the discomfort that exists within the emergency management arena to working with non-profit organizations. He suggested that while public health agencies have made significant progress in bridging to non-profits and community organizations, the emergency management field remains far behind, with agencies only recently realizing their crucial role. In referencing the National Incident Management System (NIMS), Jacks stated that "while the framework recognizes the need to involve and engage non-profits, philanthropies and communities, there have been few real efforts." He further suggested that "there are millions of committees" that seek to develop strategies for engaging and involving communities; however, he stated that the solution exists not in creating more committees, but in developing innovative ways to reach communities such as developing sustainable partnerships and collaborations with non-profits, philanthropies and community-based organizations who are intimately knowledgeable about these communities and trusted by them. He emphasized the need to assess the capacity of non-profits to serve in emergency situations as these entities play key roles before, during and after an event.

Jacks concluded by providing a brief overview of the BayPrep Initiative, citing that this effort would fill a significant void in research on disaster response capacity of non-profits and philanthropies. He asserted that as part of this initiative, the Fritz Institute would lead the nation's first study on baseline resilience of non-profit organizations and provide evidence-based recommendations on how to strengthen their capacity to serve as first responders. He further asserted that one of the key objectives of the Institute and the Initiative is to "serve as a national model for how the non-profit sector can more effectively partner with uniformed first responders and the city and state infrastructures in serving local citizens in disaster situations."

Michael Kleeman, Senior Fellow, University of California-San Diego and National Chair of Corporate Operations, American Red Cross. Michael Kleeman echoed previous panelists and underlined the need to bridge to organizations that are trusted, representative and knowledgeable about their local community. He suggested that the key is to "empower" these organizations to serve in disaster situations, providing them with appropriate preparedness, response and recovery training and educational materials. He further highlighted the need for emergency management and public health agencies to work with ethnic media to reach culturally and linguistically diverse communities; however, Kleeman stressed that agencies largely lack knowledge and guidance on "how best to work with the media." Kleeman also spoke at length about the fragmented nature of the field, citing that there are a lot of promising practices and work to engage diverse communities, however a lot of good work is not published, disseminated or shared (for reasons that may include limited funding, limited staffing resources or simply a lack of focus on this issue in the research arena). Kleeman additionally emphasized that the field of public health has a lot to offer to emergency preparedness, but fostering community preparedness occurs through a process very different from an inoculation program.

Anna Long, Chief of Staff, Los Angeles County Public Health Department. Anna Long, the final panelist, highlighted the Los Angeles County Public Health Department's current and promising emergency risk communication efforts targeting racially and ethnically diverse communities. She first presented findings from formative research conducted by the Department

to lay the foundation for developing targeted disaster education programs. Specifically, findings from the *Public Health Response to Emergency Threat Survey* found that:

- Non-White racial/ethnic groups and non-English speakers are less prepared as compared to Whites and English speakers.

- More Latinos and Asian/Pacific Islanders report their workplaces as not being prepared compared to Whites. Non-English speakers also report that their workplaces are less prepared.

- A greater proportion of Latinos, African Americans and Asian/Pacific Islanders describe their communities as not prepared.

Based on these findings, Long stated that the Department developed a series of outreach campaigns and materials to educate culturally and linguistically diverse communities on emergency preparedness. For example, the "Just Be Ready Prepare Together" Campaign utilized a multi-cultural approach which specifically: engaged racial/ethnic community organizations in Los Angeles County to develop and test educational materials intended to be culturally and linguistically appropriate; marketed messages through ethnic media and public relations outlets; and disseminated materials through various channels and modes of communication (e.g., schools, community events, area health offices, community-based organizations, flyers, and pamphlets). Long also described a unique collaborative effort which bridged maternal, child and adolescent health (MCAH) resources with emergency preparedness to reach culturally diverse and at-risk women. The collaboration trained MCAH nurses on providing emergency preparedness education to mothers, provided at-risk mothers with information on building an emergency kit and family communications plan, and developed a guide for children, "A Children's Primer on Emergency Preparedness," in 11 foreign languages to reach families with young children. Long additionally discussed the possibilities of engendering household preparedness through children, as she stated, "if you want to reach the parents go through the kids." Finally, Long described the Department's Pandemic Flu Preparedness Effort, a multi-cultural grassroots campaign targeting thirteen at-risk groups, including several racial/ethnic subgroups. The campaign sought to deliver messages within targeted communities to ensure their understanding, participation in and adherence to recommended preparedness and response actions.

C. Local Panel Session

The second 90-minute panel session convened representatives from community-based and not-for-profit organizations to discuss and identify strategies for engaging local communities across the spectrum of emergency preparedness.

***Lynn Fritz, Chairman, Fritz Institute*.** As founder of the Fritz Institute, Lynn Fritz opened the session with a summary of the Institute's mission and major efforts. He described the Institute as bringing together non-profits, government agencies, academia and corporations around the world "to innovate solutions and facilitate the adoption of best practices for rapid and effective disaster

response and recovery." Fritz reiterated the Institute's commitment to assessing the capacity of community-based organizations in disasters and developing innovative solutions to engage diverse and underserved communities. He stated that the key to success are "bottom-up strategies" which ensure that communities are truly "part of the solution and not just being told they are part of the solution." Fritz went on to explain that despite a growing consensus that community-based organizations are vital emergency preparedness and response activities, little evidence-based research exists as to the role they play when disaster strikes. In response to this gap in knowledge, Fritz described research being led by the institute to better understand the function and resilience of community-based organizations in disasters.

Red Godfrey, Assistant Director of Emergency and Disaster Response, American Red Cross Greater Los Angeles. Red Godfrey described the regional role of the American Red Cross Los Angeles Chapter prior to, during and after an emergency event, including highlighting efforts such as: disaster response and assistance; blood collection and distribution; health and safety education and training; and emergency communications. She highlighted several challenges to preparing and responding to racially and ethnically diverse communities and provided examples of efforts currently underway to address them. In particular, Godfrey stressed the challenge of recruiting volunteers who are representative of the local community. She stated: "Do we look like the communities we serve? No. Are we trying? Yes. Will we get there? Yes." As part of a regional effort to increase diversity and language capacity within the Los Angeles Chapter, employees are required to learn Spanish through free Spanish courses provided during work hours. The local chapter has also been involved in outreach activities in an attempt to recruit more diverse and representative volunteers. The local chapter has also been pursuing "proactive community partnerships" particularly with faith-based organizations as another strategy to ensure community involvement and buy-in. Furthermore, Godfrey spoke about racial/ethnic disparities in blood donation, particularly highlighting low donation patterns among African Americans. She stated that "while the blood bank was invented by an African American, there remains a strong cultural bias against blood donations within that community."

Konane Martinez, Assistant Professor of Anthropology and Health Projects Coordinator, National Latino Research Center, California State University of San Marcos. Konane Martinez, a medical anthropologist, presented a case study on emergency preparedness of farmworker communities in San Diego County, focusing in particular on Latino migrants and farmworkers who were disproportionately and negatively impacted by the October 2007 wildfires. Martinez presented select findings from a study documenting experiences of these communities during and following the fires. She highlighted the following:

- Farmworkers had a tenuous relationship with emergency service providers.
- Culturally and linguistically appropriate services and resources for farmworkers were largely lacking.
- Emergency service providers lacked cultural and linguistic competency to effectively and appropriately communicate with Spanish-speaking and Mexican Indigenous farmworkers.

- Farmworkers fearful of deportation did not evacuate in mandatory evacuation zones.

- Farmworkers had limited knowledge about emergency relief services, eligibility and how to solicit assistance.

Based on findings, Martinez outlined a set of recommendations and next steps for improving preparedness, response and recovery efforts within farmworker and migrant communities. She stressed in particular the need to: develop culturally and linguistically appropriate outreach and streamlined information; advance and adopt policies prohibiting the presence of uniformed officers in evacuation centers; coordinate and develop relationships between community coalitions representing farmworkers and agencies, local officials, governments and relief agencies; build community capacity; and provide cultural and linguistic competence training to providers serving farmworker communities. Martinez also emphasized the need to map and profile communities, including not only basic demographics but community assets and resources.

D. Themes and Conclusions

A number of common themes and priorities emerged from these panel proceedings on integrating culturally and linguistically diverse communities into emergency preparedness at the state, regional and local levels. Here we summarize these themes, incorporating feedback from audience members, and in particular comments from the National Consensus Panel.

Engaging Communities and Building Partnerships. Panelists in both sessions reaffirmed the need to bridge to diverse communities and organizations that are representative of, knowledgeable about and trusted within communities to proactively engage them in planning, implementation and evaluation of preparedness, response and recovery actions. As part of this engagement process, panelists outlined a set of strategies that local public health and emergency management agencies can take to involve and empower communities and build resilience capacity. These include: building on existing public-private partnerships such as those formed to address community health concerns and other non-emergency issues; offering leadership and volunteer training to community members; involving community members in drills and exercises that reflect their community's unique economic and social circumstances; inviting community representatives to serve on planning and advisory committees thereby encouraging a shared understanding of objectives; and partnering with ethnic media outlets within the community.

Addressing Social Determinants and the Broader Community Context. Another resounding theme among panelists and the audience was the need to address emergency preparedness in the broader community context. Racially and ethnically diverse communities that disproportionately experience negative outcomes from emergencies are often vulnerable before an event—e.g., living in substandard housing conditions, lacking transportation for evacuation and being more concerned about daily disasters such as unemployment, violence and crime. Thus panelists suggested, and National Consensus Panel members concurred in their responses, that any strategy to prepare and respond to diverse communities must fully consider the social and economic circumstances of a community. For example, any outreach or educational material on putting together an emergency toolkit should include items which are easily identifiable,

affordable and accessible to low-income diverse communities. Furthermore, emergency exercises and drills should reflect the local community and include scenarios which are tailored to each community's unique circumstances.

Providing Culturally and Linguistically Appropriate Services. A reoccurring theme among panelists was the need for regional public health and emergency management agencies as well as non-profit organizations to provide culturally and linguistically appropriate information, resources and services. To this end, panelists emphasized the need to increase diversity among responders by recruiting and training members from the local community as well as the need to provide cultural competency training for service providers. The need to provide culturally competent translated materials, as opposed to verbatim translations, was also stressed by a number of the California panelists. To avoid the development of inaccurate and misleading translations, community representatives should be involved in the development and vetting process of translated materials. Panelists additionally attested to the need to deliver emergency preparedness information through trusted and preferred channels of communication, such as the ethnic media.

*Appendix B. Environmental Scan of California's State, Regional and Local Programs Addressing Emergency Preparedness for Racially and Ethnically Diverse Communities**

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Statewide				
72 Hours.Org	Website: http://www.72hours.org/	Offers an emergency preparedness website entirely in multiple languages and provides additional information in Russian and Vietnamese	Translated materials	Not-for-profit
Asian American Legal Center of Southern California	Asian Pacific American Legal Center 1145 Wilshire Blvd, 2nd Floor Los Angeles, CA 90017 Phone: (213) 977-7500 E-mail: info@apalc.org Website: http://www.apalc.org/	The Asian American Legal Center of Southern California provides legal assistance and serves as an advocate for Asian Pacific Americans. They co-authored the report "Disaster Preparedness in Urban Immigrant Communities: Lessons Learned for Recent Catastrophic Events and Their Relevance to Latino and Asian Communities in Southern California" (http://demographics.apalc.org/wp-content/uploads/2008/07/disaster-report_final.pdf).	Measurement and evaluation, policy and advocacy, promising practices	Not-for-profit research
California Alliance of Information and Referral Services (CAIRS 211)	Website: http://www.cairs.org/211.htm	Provides disaster information in a variety of languages and recently issued a report (http://www.cairs.org/211/docs/3YearReportfinal081008.pdf) examining what languages their services were most frequently accessed in by region.	Language interpreters	Statewide telephone service

Organization	Contact Information	General Description	Programs Offered	Type of Organization
California Department of Public Health	Phone: (916) 650-6416 E-mail: webinfo@dhs.ca.gov Website: http://bepreparedcalifornia.ca.gov/EPO/	Offers translated materials in 12 languages and hosted an ethnic media roundtable discussion for emergency preparedness for pandemic flu to discuss the information needs of various ethnic communities and lessons learned from past experiences with state agencies (http://bepreparedcalifornia.ca.gov/epo/pressroom/mediakits/ethnicmediart.htm.	Collaborative initiatives, translated materials	State Agency
California Governor's Office of Emergency Services	California Governor's Office of Emergency Services 3650 Schriever Ave Mather, CA 95655 Phone: (916) 845-8510 Website: http://www.oes.ca.gov/	Issued a guide for emergency managers to meet the needs of vulnerable populations in a disaster (http://www.oes.ca.gov/Operational/OESHome.nsf/PDF/Vulnerable%20Populations/$file/Vulnerable%20Populations.PDF) and provides disaster preparedness information in 7 languages.	Collaborative initiatives, promising practices, training and education, translated materials	State Agency
California Safe Corps	Phone: (310) 445-2668 Website: http://www.californiasafecorps.org/	California Safe Corps provides emergency preparedness training through American Red Cross course curricula to underserved and vulnerable populations, including non-English speakers.	Training and education	Not-for-profit
California Volunteers	Website: http://www.californiavolunteers.org/	Entire website available in Spanish (http://www.californiavolunteers.org/espanol/index.asp).	Collaborative initiatives, translated materials	State volunteer agency
Native American Alliance for Emergency Preparedness	Phone: (619) 808-8965 Email: lgresham@mail.sdsu.edu Website: http://www.naaep.org/index.html	Provides online tools, training opportunities, and promising practices to better prepare Native American reservations for public health emergencies (http://www.naaep.org/DisasterPrep.html).	collaborative initiatives, promising practices, training and education	Intrastate collaborative

Organization	Contact Information	General Description	Programs Offered	Type of Organization
The California Endowment	The California Endowment 1000 North Alameda St. Los Angeles, CA 90012 Phone: 1(800) 449-4149 Website: http://www.calendow.org/	Provides funding for a number of research oriented projects relating to emergency preparedness and vulnerable populations. Most recently TCE sponsored a series of papers and a convening of experts to discuss lessons learned from Hurricane Katrina.	Collaborative initiatives, funding, measurement and evaluation tools, policy and advocacy, promising practices	Private sector philanthropic
The Tomás Rivera Policy Institute	The Tomás Rivera Policy Institute University of Southern California School of Policy, Planning, and Development Ralph and Goldie Lewis Hall 650 Childs Way, Suite 102 Los Angeles, CA 90089-0626 Phone: (213) 821-5615 E-mail: trpi@info Website: http://www.trpi.org	The Tomás Rivera Policy Institute is a not-for-profit research institute with a focus on Latino communities. They co-authored the report "Disaster Preparedness in Urban Immigrant Communities: Lessons Learned for Recent Catastrophic Events and Their Relevance to Latino and Asian Communities in Southern California" (http://demographics.apalc.org/wp-content/uploads/2008/07/disaster-report_final.pdf).	Measurement and evaluation tools, policy and advocacy, promising practices,	Not-for-profit research
The UC Berkeley Center for Infectious Diseases & Emergency Readiness	Phone: (510) 643-4939 E-mail: cidp@berkeley.edu Website: http://www.idready.org/index.php	Offers a course on emergency preparedness for vulnerable populations (http://www.idready.org/webcast/spr07_webcast.html#VulnerablePopulations) and issued a report on lessons learned from hurricane Katrina (http://www.acphd.org/AXBYCZ/Admin/DataReports/ood_lessons_katrina.pdf).	collaborative initiatives, measurement and evaluation tools, promising practices, training and education	Academic
UCLA Center for Public Health and Disasters	Website: http://www.cphd.ucla.edu/	Offers numerous courses on community emergency preparedness and a hazard risk assessment tool to identify community vulnerabilities (http://www.cphd.ucla.edu/).	measurement and evaluation tools, training and education	Academic

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Region I: North Coast Region				
Grantmakers Concerned with Immigrants and Refugees - GCIR	P.O. Box 1100 Sebastopol, CA 95473-1100 Phone: (707) 824-4374 Fax: (707) 581-1716 Website: http://www.gcir.org/	Was recently the co-sponsor of the report "Integrating Immigrant Families in Emergency Response, Relief and Rebuilding Efforts" (http://www.gcir.org/system/files/Integrating+Immigrant+Families+in+Emergency+Response%2C+Relief+and+Rebuilding+Efforts.pdf).	Funding, policy and advocacy, promising practices	Private sector advocacy
Region II: Gold County Region				
American Red Cross: Sacramento Sierra Chapter	8928 Volunteer Ln. Suite 100 Sacramento, CA 95826 Phone: (916) 368-3131 Fax: (916) 368-3130 Website: http://www.sacsierraredcross.org/	Offers Working with Total Diversity Course which "focuses on the conversational skills participants will need to be effective in working and serving in diverse communities." (http://www.sacsierraredcross.org/Education/course.aspx?c=3915).	Training and education	Private sector volunteer agency
American Red Cross: San Joaquin County Chapter	San Joaquin County Red Cross 747 N Pershing Ave Stockton CA 95203-5152 Phone: (209) 466-6971	Provides translator materials in five languages (http://www.sanjoaquincounty.redcross.org/index.php?pr=Disaster_Services).	Translated materials	Private sector volunteer agency
Calaveras County	Calaveras County Department of Public Health 891 Mountain Ranch Road San Andreas, CA 95249 Phone: (209) 754-6460 Toll Free: (800) 754-8889 Fax: (209) 754 1709 Website: http://www.co.calaveras.ca.us/cc/Departments/PublicHealthDepartment.aspx	Calaveras County is seeking input from key stakeholders in the community to develop a multi-hazard mitigation plan.	Collaborative initiatives, language interpreters	County agency
Citizen Corps: Sacramento Region	1000 River Walk Way Carmichael, CA 95608 Fax: (916) 876-9714 Website: http://www.sacramentoregioncitizencorpscouncil.org/	Provides translated materials in six languages (http://www.sacramentoregioncitizencorpscouncil.org/).	Translated Materials	Federally supported volunteer training

Organization	Contact Information	General Description	Programs Offered	Type of Organization
El Dorado County	Website: http://www.co.el-dorado.ca.us/publichealth/	El Dorado County provides a matrix of online training opportunities including one which focuses on the needs of culturally diverse populations, risk communication, and community preparedness (http://www.co.el-dorado.ca.us/emd/Disaster/emerg_trainings.html).	Training and education	County agency
Sacramento County	Website: http://www.sacdhhs.com/article.asp?content=320	Provides translated materials in six languages (http://www.sacdhhs.com/article.asp?ContentID=1624).	Translated materials	County agency
San Joaquin County	Website: http://www.sjcphs.org/	Provides translated materials in four languages as well as Spanish language telephone service (http://207.104.50.39/oes/virus%5Fflu/flu%5Ftips.htm).	Language interpreters, translated materials,	County agency
Solano County	Website: http://www.co.solano.ca.us/emergencies/default.asp	Provides translated materials in four languages (http://www.solanocounty.com/depts/oes/disaster/brochures.asp).	Translated materials	County agency
Yuba County	Emergency Services 915 8th. St., Suite 117 Marysville, Ca 95901 Phone: (530) 749-7520 Fax: (530) 749-7524 Website: http://www.co.yuba.ca.us/	Provides translated materials in two languages (http://www.co.yuba.ca.us/departments/OES/default.aspx).	Translated materials	County agency
Region III: Sierra Cascade				
Butte County	202 Mira Loma Drive Oroville, CA 95965 Phone: (530) 538-7581 Website: http://www.buttecounty.net/publichealth/	Provides translated materials on West Nile Virus in two languages (http://www.buttecounty.net/publichealth/cder/wnv.html).	Translated materials	County agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Shasta County	2650 Breslauer Way Redding, CA 96001 Phone: (530) 225-5591 Toll Free: (800) 971-1999 Fax: (530) 225-3743 Website: http://www.co.shasta.ca.us/html/Public_Health/ph_index.htm	The Cultural Awareness Action Plan assures that first responders develop positive relationships with members of ethnically diverse communities and work in collaboration with the local community to improve service delivery (http://www.co.shasta.ca.us/Departments/Sheriff/actionplan.htm). The county public health department also has a telephone consultation service in two non-English languages.	Collaborative initiatives, language interpreters	County agency
Region IV: Bay Area				
Alameda County	Alameda County Public Health Department 1000 Broadway Suite 500 Oakland, CA 94607 Phone: (510) 267-8000 Fax: (510) 267-3212 Website: http://www.acphd.org/	The City-County Neighborhood Initiative (CCNI) is a collaborative partnership between the County Public Health Department and a number of community-based organizations in the Bay Area. The CCNI works to address the underlying causes of health disparities through community capacity building (http://www.acphd.org/healthequity/ccni/index.htm). The Bay Area Regional Health Inequities Initiative (BARHII) is a collaborative of eight health departments, including Alameda County, to understand racial and ethnic inequalities in health. In collaboration with the UC Berkeley School of Public Health, the County Public Health Department issued a report on lessons learned from hurricane Katrina (http://www.acphd.org/AXBYCZ/Admin/DataReports/ood_lessons_katrina.pdf). Translated materials are also provided in four languages.	collaborative initiatives, measurement and evaluation tools, promising practices, translated materials	County agency
American Red Cross: Bay Area Chapter	American Red Cross Bay Area Chapter 85 Second Street, 8th Floor San Francisco, CA 94105 Phone: (415) 427-8000 Website: http://www.redcrossbayarea.org/	Has version of website dedicated to Asian community preparedness (http://www.redcrossbayarea.org/preparedness/acp/acp.htm) and Latino community preparedness (http://www.redcrossbayarea.org/preparedness/latino.htm).	Collaborative initiatives, language interpreters, training and education, translated materials	Private sector volunteer agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
American Red Cross: Santa Clara Valley Chapter	Website: http://scv-redcross.org/openrosters/view_homepage.asp?orgkey=1463	Provides translated materials in 15 languages.	Translated materials	Private sector volunteer agency
Asian and Pacific Islander Health Forum	Asian & Pacific Islander American Health Forum 450 Sutter Street, Suite 600 San Francisco, CA 94108 Website: http://www.apiahf.org	The Asian & Pacific Islander American Health Forum (APIAHF) is a national advocacy organization dedicated to promoting policy, program, and research efforts to improve the health and well-being of Asian American, Native Hawaiian, and Pacific Islander communities.	Policy and Advocacy	Private sector advocacy
Association of Asian Pacific Community Health Organizations (AAPCHO)	Website: http://www.aapcho.org/site/aapcho/	Issued an emergency preparedness compendium highlighting promising practices in disaster preparedness, response, and recovery affecting Asian American and Pacific Islander communities (http://www.aapcho.org/altruesite/files/aapcho/EP/EP_Compendium.pdf).	Collaborative initiatives, policy and advocacy, promising practices	Community health origination coordinating agency
Center for Volunteer and Non-Profit Leadership of Marin	555 Northgate Drive San Rafael, CA 94903 Phone: (415) 479-5710 Fax: (415) 479-9878 E-mail: info@cvnl.org Website: http://www.cvnl.org/community/disaster_prep.html	Coordinates volunteer agencies and language interpreters in disaster response scenarios in Marin County.	Collaborative initiatives, language interpreters	Community-based coordinating agency
Citizens of Oakland Respond to Emergencies (C.O.R.E)	1605 Martin Luther King, Jr. Way Oakland, CA 94612 Phone: (510) 238-6351 E-mail: core@oaklandnet.com Website: http://www.oaklandnet.com/fire/core/about.html	CORE manuals are available in two non-English languages to facilitate training in culturally diverse communities. Bilingual translators and interpreters are also available to provide CORE training to non-English speaking communities in Oakland.	Collaborative initiatives, language interpreters, training and education	Community-based volunteer training

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Collaborating Agencies Responding to Disaster C.A.R.D. (Alameda County)	CARD: Collaborating Agencies Responding to Disasters 1736 Franklin Street, Suite 450 Oakland, CA 94612-3456 Phone: (510) 451-3140 Fax: (510) 451-3144 E-mail: cardcanhelp.org Website: http://www.firstvictims.org/	Prepares local community groups to participate in emergency response and recovery efforts for vulnerable populations including those with limited English proficiency.	Collaborative initiatives, training and education	Community-based coordinating agency
Collaborating Agencies Responding to Disaster C.A.R.D. (San Francisco County)	San Francisco CARD 1675 California Street San Francisco, CA 94109 Phone: (415) 955-8946 Fax: (415) 982-0890 Website: http://www.sfcard.org/	SF CARD works with human services agencies that work with vulnerable populations by helping these agencies survive disasters, continue to provide services to their clients, and manage resources for long-term recovery.	Collaborative initiatives, training and education	Community-based coordinating agency
Collaborating Agencies Responding to Disaster C.A.R.D. (Contra Costa County)	Contra Costa County Card 1736 Franklin Street, Suite 450 Oakland, CA 94612-3456 Phone: (510) 451-3140 Fax: (510) 451-3144 E-mail: cardcanhelp.org Website: http://www.preparenow.org/cccard.html	Supplies tools, knowledge, and resources to help agencies involved in disaster planning for vulnerable populations.	Preparedness library of resources	Community-based coordinating agency
Contra Costa County	Contra Costa Public Health Division 597 Center Avenue, Suite 200 Martinez, California 94553 Phone: (925) 313-6712 Fax: (925) 313-6721 Website: http://www.cchealth.org/	Language Assistance Services Program provides health interpreters in nine languages (http://www.cchealth.org/services/refugee_health/language_assistance.php). Portions of the county website are available in Spanish.	Language interpreters, translated materials	County agency
NICOS Chinese Health Coalition	NICOS Chinese Health Coalition 1208 Mason St. San Francisco, CA 94108 Phone: (415) 788-6426 Website: http://www.nicoschc.org/	Organizes San Francisco Chinatown disaster drill.	Collaborative initiatives, policy and advocacy, raining and education	Community-based health advocacy

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Preparenow.org	Website: http://www.preparenow.org	Provides translated materials in six languages and coordinates community-based, local government, and neighborhood organizations.	Collaborative initiatives, training and education, translated materials	Community-based coordinating agency
San Francisco County	Website: http://www.sfgov.org/site/oes_index.asp	Language assistance services available in three languages.	Language interpreters	County agency
San Leandro Triad Alliance	Website: http://www.ci.san-leandro.ca.us/slemervulnerable.html	Coordinates not-for-profit agencies to meet the need of vulnerable populations, including LEP communities, in a disaster.	Collaborative initiatives	Multi-sector coordinating agency
San Mateo County	Website: http://www.smhealth.org/smc/department/home/0,.1954_2139.00.html	Provides facilitator guide to a course on vulnerable populations and language barriers (http://www.co.sanmateo.ca.us/vgn/images/portal/cit_609/23/7/690973761Facilitator%20Tool%20-%20Special%20Needs.pdf).	Training and education	County agency
Santa Clara County	Website: http://www.sccgov.org/portal/site/phd/	Provides translated pandemic influenza materials in three languages (http://www.sccgov.org/portal/site/phd/agencychp?path=%2Fv7%2FPublic%20Health%20Department%20(DEP)%2FPandemic%20Influenza) and has partnered with schools in the region to provide emergency preparedness training.	Collaborative initiatives, translated materials	County agency
Santa Clara County: Collaborative Agencies Disaster Relief Effort (C.A.D.R.E.)	Phone: (408) 247-1126 ext. 302 E-mail: cadre@vcsv.us. Website: http://www.vcsv.us/cadre.shtml	Coordinates volunteer agencies and language interpreters in disaster response scenarios in Santa Clara County.	Collaborative initiatives, language interpreters	Community-based coordinating agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Sequoia Healthcare District	525 Veterans Blvd Redwood City, CA 94062 Phone: (650) 599-9850 Fax: (650) 482-6056 Email: info@sequoiahealthcaredistrict.com	The Community Grants Program offers funding opportunities for non-profit organizations leading innovative programs designed to achieve health, wellness, and disease prevention in southern San Mateo County (http://www.sequoiahealthcaredistrict.com/grants.html).	Collaborative initiatives, funding	Private sector philanthropic
The Fritz Institute	Website: http://www.fritzinstitute.org/	The BayPrep program seeks to improve disaster preparedness in vulnerable communities by coordinating faith-based and community-based organizations (http://www.fritzinstitute.org/prgBAPI.htm). The Fritz institute has also launched a study to assess how ready community-based and faith-based organizations are for disasters.	Collaborative initiatives, funding, measurement and evaluation tools, policy and advocacy, promising practices,	Private sector philanthropic
The San Francisco Foundation	The San Francisco Foundation 225 Bush Street, Suite 500, San Francisco, CA 94104 Phone: (415) 733-8500 Website: http://www.sff.org/	The FAITHS Program (http://www.sff.org/programs/social-justice/faiths-program/?searchterm) and The Koshland Program (http://www.sff.org/programs/koshland-program/koshland-program/?searchterm) are community based initiatives in the Bay Area to strengthen resilience and increase preparedness in vulnerable communities.	Collaborative initiatives, funding, measurement and evaluation tools, policy and advocacy	Private sector philanthropic
Thrive: The Alliance of Non-profits for San Mateo County	P.O. Box 132 San Carlos, CA 94070 Phone: (650) 766-1162 Email: info@thrivealliance.org Website: http://www.thrivealliance.org/index.htm	The Emergency Services Task Force facilitates cross-sector collaborations and emergency preparedness trainings to community-based organizations serving vulnerable populations, including racially and ethnically diverse communities.	Collaborative initiatives, policy/advocacy	Community-based coordinating agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
United Way of the Bay Area	221 Main Street, Suite 300 San Francisco, CA 94105 Phone: (415) 808-4300 Fax: (415) 856-0991 Email: contact@uwba.org Website: http://www.uwba.org/	Issued report on the ability of not-for profit community-based organizations to serve vulnerable populations after a disaster (http://www.uwba.org/about/press/2007-2 2_Ready%20or%20Not_Executive%20Summary.pdf).	Collaborative initiatives, funding, measurement and evaluation tools, policy/advocacy, promising practices	Private sector volunteer agency
Region V: Central Coast Region				
No programs on diversity and preparedness identified.				
Region VI: Central Valley Region				
American Red Cross: Fresno Madera Chapter	Fresno-Madera Chapter 2002 N Fine Ave Fresno CA 93727 Phone: (559) 455-1000 Website: http://www.fresnomaderaredcross.org/	Offers community disaster preparation class which teaches how to convey disaster education specific to the needs of the local community.	Training and education	Private sector volunteer agency
American Red Cross: Kern Chapter	5035 Gilmore Avenue Bakersfield, CA 93308 Website: http://www.kernredcross.org/Home.asp	Provides training opportunities in Spanish (http://www.kernredcross.org/ClasesenEspanol.asp).	Training and education	County agency
American Red Cross: Merced and Mariposa Counties Chapter	Merced-Mariposa Counties Office 301 West 18th St., Suite 104 Merced CA 95340 Website: http://www.mmarc.org/	Provides training opportunities in Spanish	Training and education	Private sector volunteer agency
Fresno County	Website: http://www.co.fresno.ca.us/countypage.aspx?id=16319	Provides translated materials in two languages (http://www.co.fresno.ca.us/DepartmentPage.aspx?id=2082).	Translated materials	County agency
Kings County	Website: http://www.kingscountybt.com/CountyKings/default.htm	Offers crisis and emergency risk communication course which emphasizes the importance of accounting for cultural differences (http://www.kingscountybt.com/CountyKings/Documents/Conference%20Calendar.pdf).	Training and education	Private sector volunteer agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Region VII: Los Angeles Region				
American Red Cross: Greater Long Beach Chapter	Greater Long Beach Chapter of the American Red Cross 3150 East 29th Street Long Beach, CA 90806 Phone: (562) 595-6341 Fax: (562) 424-2821 Website: http://www.greaterlongbeachrc.org/	Provides translated materials in two languages and offers six courses in Spanish (http://www.redcrosslb.org/Education/catalog.aspx?c=498).	Training and education, translated materials	Private sector volunteer agency
American Red Cross: Greater Los Angeles Chapter	Website: http://redcrossla.org/	Entire website available in Spanish (http://www.cruzrojaamericana.org/) and offers community disaster education course that emphasizes the importance of selecting culturally appropriate messages.	Training and education, translated materials	Private sector volunteer agency
American Red Cross: Rio Hondo Chapter	Website: http://www.cchealth.org/	Offers two courses in Spanish (http://www.arcriohondo.org/Education/catalog.aspx).	Training and education	Private sector volunteer agency
American Red Cross: Santa Barbra County Chapter	2707 State Street Santa Barbara, CA 93105 Phone: (805) 687-1331 Website: http://www.sbredcross.org/	Established "Hispanic Outreach Taskforce" to recruit bi-lingual Spanish speaking volunteers (http://sbredcross.org/pdf/Newsletter01-2007.pdf#search='hispanic%20outreach) and offers six courses in Spanish.	Collaborative initiatives, language interpreters, training and education	Private sector volunteer agency
American Red Cross: Santa Monica Chapter	Phone: (310) 394-3773 Website: http://www.redcrossofsantamonica.org/	Offer Working with Total Diversity Course which "focuses on the conversational skills participants will need to be effective in working and serving in diverse communities" (http://www.redcrossofsantamonica.org/Education/course.aspx?c=5209) as well as three courses in Spanish (http://www.redcrossofsantamonica.org/Education/catalog.aspx?c=587).	Training and education	Private sector volunteer agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
CERT Los Angeles	Community Emergency Response Team Unit, LAFD Disaster Preparedness Section Phone: (818) 756-9674 E-mail: lafdcert@lacity.org E-mail: cert-la@usa.net Website: www.cert-la.com	Provides translated materials in eighteen languages (http://www.cert-la.com/education/OtherLanguages.htm) and offers training curricula in Spanish.	Training and education, translated materials	Community-based volunteer training
City of Los Angeles Emergency Management Department	200 N. Spring Street, Room 1533 Los Angeles, CA 90012 Phone: (213) 978-2222 Website: http://www.lacity.org/emd/	Offers translated materials in two languages (http://www.lacity.org/emd/).	Translated materials	City agency
Dare to Prepare	Website: http://www.daretoprepare.org/	Offers translated materials in six languages (http://www.daretoprepare.org/languages.html).	Translated materials	Countywide preparedness initiative
Los Angeles County	Public Health Emergency Preparedness Hotline Phone: (866) 999-LABT Website: http://publichealth.lacounty.gov/eprp/	Offers translated materials in 11 languages (http://publichealth.lacounty.gov/eprp/media/index.htm).	Translated materials	County agency
Region VIII: Gold Coast Region				
San Luis Obispo County	Phone: (805) 781-5011 Website: http://www.slocounty.ca.gov/page8402.aspx	Language assistance services available in Spanish.	Language interpreters	County Agency
Region IX: Desert Sierra Region				
American Red Cross: Inland Empire Chapter	202 West Rialto Avenue P.O. Box 183 San Bernardino, California 92408 Phone: (909) 888-1481 Fax: (909) 888-3741 E-mail: arcinlandempire@verizon.net Website: http://www.arcinlandempire.org/	Provides direct link to Spanish language website.	Translated materials	Private sector volunteer agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
American Red Cross: Riverside County Chapter	PO Box 55040 Riverside, CA 92517-0040 Phone: (951) 656-4218 Fax: (951) 656-4329 Website: http://www.riversidecounty.redcross.org/	Provides direct link to Spanish language website.	Translated materials	Private sector volunteer agency
Inyo County	207A West South Street Bishop, CA 93514 Phone: (760)-873-7868 E-mail: inyohealth@qnet.com Website: http://www.countyofinyo.org/publichealth/index.php	Provides pandemic influenza information in nine languages (http://www.countyofinyo.org/publichealth/individualandfamily/index.php).	Translated materials	County agency
San Bernardino	351 N. Mt View Avenue San Bernardino, CA 92415-0010 Phone: (800) 782-4264 Website: http://www.co.san-bernardino.ca.us/pubhlth/	Provides translated materials in two languages as well as telephone interpretation services in Spanish (http://www.co.san-bernardino.ca.us/pubhlth/directory_Programs_spn.htm).	Language interpreters, translated materials	County agency
Region X: Orange County				
ListoOC.org	Website: http://www.listooc.org/	Comprehensive Spanish language emergency preparedness website.	Translated materials	Not-for-profit
Region XI: San Diego & Imperial Region				
American Red Cross: San Diego and Imperial Counties Chapter	3950 Calle Fortunada San Diego, CA 92123 Phone: (858) 309-1200 Website: http://www.sdarc.org/Home/tabid/36/Default.aspx	Entire website is available in Spanish as are nine training opportunities.	Training and education, translated materials	Private sector volunteer agency

Organization	Contact Information	General Description	Programs Offered	Type of Organization
Casa Familiar	119 West Hall Avenue San Ysidro, CA 92173 Telephone: (619) 428-1115 Website: http://www.casafamiliar.org/index1.html	Community based organization that serves Spanish speaking communities in the San Diego area.	Language interpreters, translated materials	Community-based organization
Community Housing Works	4305 University Avenue Suite 550 San Diego, CA 92105 Phone: (619) 282-6647 Website: http://www.chworks.org/	Provides housing opportunities for low-income communities.	Training and education	Community-based organization
National Latino Research Center	National Latino Research Center Cal State San Marcos Kellogg Library 4410 333 S. Twin Oaks Valley Road San Marcos, CA 92096-0001 Phone: (760) 750-3500 Fax: (760) 750-3510 E-mail: nlrc@csusm.edu Website: http://www2.csusm.edu/nlrc/	Released report "San Diego Firestorm 2007: Fire Impact on Farmworkers & Migrant Communities in North County" (http://www2.csusm.edu/nlrc/publications/Reports/NLRC%20Wildfires%20Report%202007%20Rev.pdf)	Collaborative initiatives, measurement and evaluation tools, policy and advocacy, promising practices	Academic
San Diego County	1600 Pacific Highway San Diego, CA 92101 Website: http://sdpublic.sdcounty.ca.gov/portal/page?_pageid=93,298385&_dad=portal&_schema=PORTAL	Provides translated materials in eleven languages and entire website is available in Spanish.	Translated materials	County agency
San Diego Immigrant Rights Consortium	Website: http://www.immigrantsandiego.org/index.html	Issued report on immigrant response to the 2007 wildfires in Southern California (http://www.immigrantsandiego.org/files/Final%20Report%20-%20Firestorms%2011-07.pdf).	Collaborative initiatives, measurement and evaluation tools, policy and advocacy, promising practices	Not-for-profit advocacy collaborative

Organization	Contact Information	General Description	Programs Offered	Type of Organization
**Note this scan does not include organizations that only provide Spanish-language materials. Organizations identified through our review that only provide Spanish-language preparedness materials include: Statewide: California Department of Forestry and Fire Protection, California Volunteers, California West Nile Virus Website, Region I: North Coast: Sonoma County, American Red Cross: Sonoma and Mendocino Counties, Mono County, Placer County, Region II: Gold County: Tulare County, Stanislaus County, Region III: Sierra Cascade: Glenn County, NorCalBT, Region IV: Bay Area: Marin County, Region V: Central Coast Region: Monterey County, San Benito, American Red Cross: Monterey- San Benito Counties Chapter, Region VI: Central Valley Region: Kern County, Madera County, Region VII: Emergency Network Los Angeles, American Red Cross: Arcadia Chapter, American Red Cross: Claremont Chapter, American Red Cross: Greater Los Angeles Chapter , American Red Cross: Santa Barbra County Chapter, Region VIII: Gold Coast Region: Ventura County, City of Thousand Oaks, Santa Barbara County, American Red Cross: San Luis Obispo County Chapter, Region IX: Desert Sierra Region: Riverside County, American Red Cross: Riverside County Chapter*				