



Enhancing Disaster Resilience in Racially & Ethnically Diverse Communities

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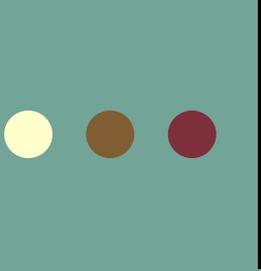
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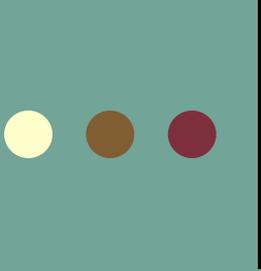


Overview

- Challenges to Enhancing Disaster Resilience in Diverse Communities
- National Consensus Panel on Emergency Preparedness and Cultural Diversity
- Application of Guiding Principles & Action Steps to Enhance Community Resilience
- National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities

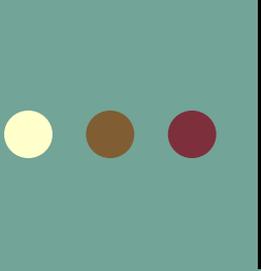


Challenges to Enhancing Disaster Resilience in Diverse Communities



Individual-Level Barriers*

- Socioeconomic factors
 - Preparedness not a priority
 - Lack of personal transportation
 - Substandard housing
- Culture and language barriers
 - Unable to understand disaster warnings
 - Misinterpret verbatim translations
 - Geographic/cultural/linguistic isolation
- Distrust of messengers and service providers
 - Fear of deportation among undocumented immigrants
 - Turbulent relationships with local law-enforcement officials
- Reliance on non-mainstream sources of information
 - Family members/social networks primary sources of information
 - Ethnic media outlets



Institutional-Level Barriers*

○ Knowledge

- Limited knowledge about diverse communities, their cultures, circumstances, and distinct needs

○ Community input

- Minimal collaboration between local community members and public agencies in planning process

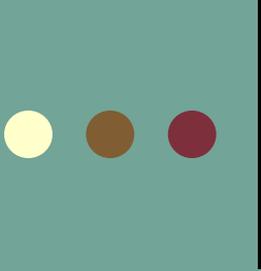
○ Infrastructure

- Limited support to provide culturally and linguistically appropriate services (e.g., workforce diversity, availability of on-site bilingual interpreters, and cultural competence training for service providers)

*Source: Andrulis, DP., et al. (2007). Preparing Racially And Ethnically Diverse Communities For Public Health Emergencies. *Health Affairs*; Andrulis, DP., et al. (2009). *California's Emergency Preparedness Efforts for Culturally Diverse Communities: Status, Challenges, and Directions for the Future.*



National Consensus Panel on Emergency Preparedness and Cultural Diversity



Panel's Mission & Objectives

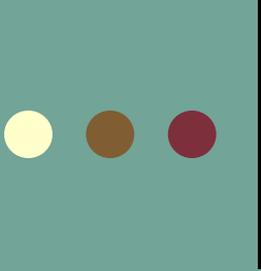
- Initiated in 2007 with support from USDHHS/Office of Minority Health.
- Panel's Mission: Provide guidance to national, state, and local agencies and organizations on developing strategies to advance preparedness and eliminate disparities for racial/ethnic minorities across all stages of an emergency.
- 34 national, state, and local organizations representing:
 - Emergency Management and Homeland Security
 - Healthcare and Public Health
 - Crisis Communication
 - Racial and Ethnic Communities
 - Cultural Competence and Disparities Reduction

National Consensus Statement*

The integration of racially and ethnically diverse communities into public health emergency preparedness is essential to a comprehensive, coordinated federal, state, tribal, territorial and local strategy to protect the health and safety of all persons in the United States. **Such a strategy must recognize and emphasize the importance of distinctive individual and community characteristics such as culture, language, literacy and trust, and promote the active involvement and engagement of diverse communities to influence understanding of, participation in and adherence to public health emergency preparedness actions.** Additionally, this strategy must acknowledge the critical commitment to developing effective and sustainable services, programs and policies and building mutual accountability. Only through these comprehensive, unified efforts can we work to counter the legacy of racial and ethnic disparities and ensure that quality and equality for all communities form the foundation of the Nation's planning for any and all public health emergencies.

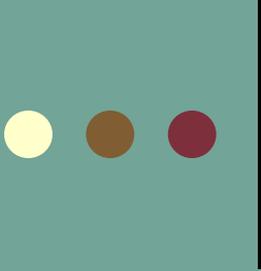
*Abridged version included in Institute of Medicine Report: Altevogt, BM. et al. (2009). *Guidance for Establishing Crisis Standards of Care for Use in Disaster Situations: A Letter Report.*

Core to this statement and the Panel's work is building community resilience through the involvement and engagement of communities.



Guiding Principles

- 1: **Identifying, locating and maintaining a profile** of diverse racial/ethnic, immigrant, and limited English proficient (LEP) populations within the community.
- 2: **Establishing sustainable partnerships** between community representatives and the public health preparedness system to assess, build, and sustain trust with diverse racial/ethnic, immigrant, and LEP populations.
- 3: **Engaging community representatives** to design, implement, and evaluate emergency risk communication strategies, ensuring that they are culturally and linguistically appropriate.
- 4: **Developing and testing drills and exercises that reflect the community** and incorporate scenarios that explicitly take into account situations involving culturally and linguistically diverse populations.

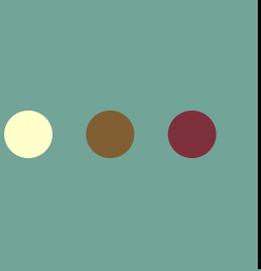


Guiding Principles

- 5: **Building capacity** within the public health preparedness system to respond to unique needs of diverse communities.
- 6: **Measuring and evaluating emergency plans and actions** from preparedness to recovery, ensuring the active involvement of participants from the public health preparedness system and the community in a continual process of review.
- 7: **Coordinating information, resources, and actions** within and across organizations as well as with diverse communities in a concerted effort to maximize compliance and adherence to preparedness practices.
- 8: **Ensuring the availability of funds** to develop and sustain services, programs, and policies that strengthen diverse communities' ability to prepare and respond to as well as recover from emergency events.

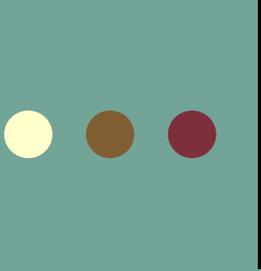


**Application of the National
Consensus Panel's Guiding
Principles to Enhance Community
Resilience:
H1N1 Scenarios**



Action Steps for Operationalizing Guiding Principle 2 & Building Community Resilience

- *Guiding Principle 2: Establishing sustainable partnerships between community representatives and the public health preparedness system to assess, build, and sustain trust with diverse racial/ethnic, immigrant and populations with LEP.*
- **Action Step 1:** Inviting individuals from diverse communities to participate in developing, implementing, and evaluating plans and programs.
- **Action Step 2:** Engaging community members and representatives in innovative ways to build partnerships and foster mutual trust and respect.



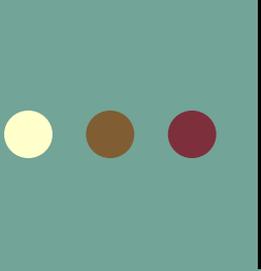
Action Steps for Operationalizing Principle 3 & Building Community Resilience

- Guiding Principle 3: *Engage community representatives to design, implement, and evaluate emergency risk communication strategies and ensure they are appropriate to the community's culture, language, and values.*
- **Action Step 1:** Developing risk communication strategies which utilize trusted voices, multiple modes of communication, and culturally and linguistically appropriate content.
- **Action Step 2:** Collaborate with community representatives to test and evaluate risk communication strategies, to ensure their cultural and linguistic appropriateness.



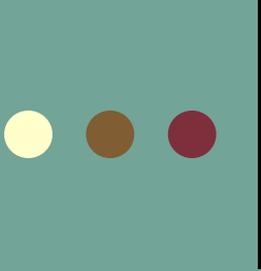
**National Resource Center on Advancing
Emergency Preparedness for Culturally
Diverse Communities**

www.DiversityPreparedness.org



National Resource Center

- Offers a central database of resources on emergency preparedness for diverse communities
 - Over 500 annotated English-language resources
 - Translated materials in 58 languages
 - Information on promising practices and lessons learned
 - Courses, drills, and training programs
 - Assessment tools
 - Research articles
 - Policy documents
- Provides a forum for exchange of information
 - Bi-monthly e-newsletter
 - Voices from the field
 - Option to submit new resources
- Supported by USDHHS/Office of Minority Health



National Resource Center's Response to H1N1

- Initial response to H1N1 outbreak (Spring 2009)
 - Actively collaborated with partners (e.g., National Council of La Raza, ECHO Minnesota) to centralize translated materials and other H1N1 planning resources for racially/ethnically diverse communities
 - Created H1N1 webpage and disseminated information via website, e-mail, and Twitter
- Website traffic during H1N1 outbreak
 - Traffic increased 400% in first week of outbreak
 - Traffic increased 600% in second week of outbreak
 - Most dramatic increases in user volume from areas with highest H1N1 incidence rates (e.g. Texas, New York)
- Continued Response to H1N1 Pandemic
 - Translated H1N1 materials in over 20 languages
 - Updates on webcasts and training opportunities

www.DiversityPreparedness.org

National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities



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Welcome to the National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities, developed by the [Drexel University School of Public Health's Center for Health Equality](#), with support from the [HHS Office of Minority Health](#).

H1N1 Update: With vaccine production in its early stages, federal and global officials are taking steps to prepare for a heightened H1N1 outbreak with the onset of flu season in the Northern Hemisphere this fall. The [CDC](#) has estimated that up to 40% of the U.S. workforce could contract the virus if vaccination efforts are ineffective. [WHO](#) officials consider asthma and diabetes to be risk factors associated with the disease, conditions which are disproportionately prevalent among African Americans in the U.S. For more information on the H1N1 update [CLICK HERE](#).



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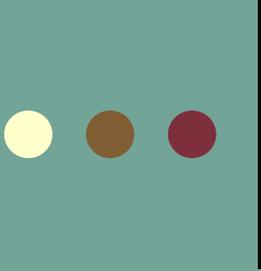
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To view past and current DiversityPreparedness.org E-Newsletters [CLICK HERE](#).

Influenza A H1N1: For a comprehensive list of resources and translated materials on H1N1 (swine flu) [CLICK HERE](#).



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