

Co-Creating Public Health Guidance with RIM Community Partners: A Checklist for Health Departments

The availability of accurate health information that is culturally and linguistically appropriate is essential to keeping communities safe and healthy. Messages may change rapidly depending on the topic, and some health departments may face challenges with developing health messaging that reaches all communities, particularly refugees, immigrants, and migrants (RIM). The engagement of community-based organizations (CBOs) and RIM community leaders is a great model that supports the co-creation and distribution of culturally and linguistically appropriate public health guidance. Community-based organizations play a critical role in delivering health information and services and developing health literacy skills.

This checklist identifies the steps to co-create culturally impactful and specific public health guidance working directly with community members. Consider the following actions for health departments when co-creating public health guidance directed towards RIM communities.

Identifying Community Partners

- Learn about existing community-based organizations, refugee resettlement agencies, federally qualified health centers (FQHCs), faith-based organizations, and grassroots organizations that work with RIM communities in your area
- Consult with a variety of partners, both internal and external, to identify RIM community leaders. If the department does not have a community liaison or community health worker, consider inviting staff from other local public health agencies, RIM community leaders, RIM business leaders, cultural and spiritual leaders, and healthcare personnel that represent the target audience

- Depending on the guidance that is being developed, the department should consider inviting additional experts in their field for technical guidance. For example: When developing funeral guidance for the Hmong community during the COVID-19 outbreak, the Minnesota Department of Health (MDH) invited Hmong spiritual leaders and funeral home directors to the group
- Include community members (e.g., clients, internal bi-lingual/cultural liaison, and anyone who might be impacted)
- Build, maintain, and sustain ongoing relationships to ensure accountability and transparency
- Be flexible with schedules/calls and adopt communication tools that will accommodate everyone
- Consider creating a permanent health department group such as a "Community Liaison Team" to meet and identify ongoing questions, misconceptions, and needs among the RIM community. The existence of this team will facilitate collaboration with CBOs and resettlement agencies
- Consider delineating partner roles with a Memorandum of Understanding (MOU). Still, it is not necessary - this can turn off people as it may be seen as a business (transactional relationship) versus a mutual relationship. It is not typically required if there is not a long term commitment and the participant is not getting a stipend
- Provide compensation through a stipend or gift card for community leader participation whenever possible

Developing Guidance

- Have designated point people on your team that partners can reach out to with questions or concerns. These people need to be comfortable troubleshooting and working with diverse communities. Community partners must know who they can easily connect to when something comes up

- Acknowledge barriers related to fear or mistrust of messaging and services provided by, or facilitated through, the government and ensure guidance is delivered through trusted RIM community leaders
- Share history and barriers related to fear or mistrust of messaging and services provided by, or facilitated through, the government and ensure guidance is delivered through trusted RIM community leaders
- Specify purpose, roles, outcomes, and how the guidance will help the community
- Facilitate sessions in different languages
- Acknowledge the importance of social connectedness and cultural traditions in RIM communities and families and the impact such guidance may have on individuals and their families
- Recognize members of the RIM community have the knowledge and expertise to have a genuine discussion about what their community needs and involve all partners during the decision-making process
- Be upfront and clear that the RIM community liaison team is the facilitator and coordinator of the messaging and that the health department is not the sole writer or owner of the guidance
- Hold several meetings, in-person or remote, with in-depth cultural discussions to facilitate guidance creation
- Recognize that the collaboration is not just about translating existing materials but co-creating so that messaging is culturally relevant, linguistically appropriate, accurate, and timely while respecting RIM community traditions
- Ensure plain language
- Work with CBOs, resettlement agencies, grassroots organizations, faith-organizations, community leaders and influencers, and other partners to distribute the messaging
- Be a hub for sharing all good messages and practices. It is essential to work as a liaison for the external partners to share what they have developed with others who may benefit