How we have implemented CLAS Standard 8 in FACES of Miami
System of Care Transformation Project

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Standard 8: Provide easy-to-understand print and multimedia materials and signage in the languages used by the populations in the service area.

Guiding Strategies from CLAS:

1. Plain language, clear communication and information design (HHS ODPHP, 2010)

2. Translate materials and evaluate the quality of these translations (Wilson-Stronks & Galvez, 2007).

3. Develop materials in alternative formats (The Joint Commission, 2010).

4. Test materials with target audiences to check
   - content that might be embarrassing or offensive,
   - cultural practices that provide more appropriate examples,
   - whether graphics reflect the diversity of the target community

FACES Multilingual Social Marketing

- Websites
- Facebook
- Art & performance
- Fotonovelas
- Radio stories with images

Multilingual social marketing: the web

- Separate but related websites created for
  - FACES of Miami
  - Youth M.O.V.E. through the arts
  - Federation of Families Miami-Dade Chapter

- All pages are trilingual and linked to each other

Agenda for this section

- Principles from CLAS Standard 8 that guided our work
- Multilingual Social Marketing
  - Process and products
  - Importance of understanding your audience
  - Obtaining Cultural and Linguistic insights
  - Translating insights into messages
  - Practical exercise
Multilingual social marketing

- FB pages for FACES of Miami, Federation of Families and YouthM.O.V.E. through the Arts.
- Several members have admin. rights and all members are encouraged to share and post on our walls
- We try to reach all our audiences in with their languages and cultural cues
- We also use Twitter, YouTube and Instagram with youth, mostly in English
Multilingual social marketing:

- Strong emphasis on art as therapeutic activity and vehicle for expression and advocacy.
- Stigma reduction messages communicated through art.
- High quality artistic activities including:
  - Youth M.O.V.E. Community Choir
  - Bilingual sociodrama: ¿Qué pasa familia?
  - Dance: salsa group (YM) and Haitian folkloric dance (FOF)
  - Yellow bus mural (and many more)

Multilingual social marketing: Fotonovelas

- **Fotonotele** = graphic stories in comic book format using photos and dialogue.
- Started as photographic stills of popular films of the 1940’s, flourished in Latin America in the 1950’s and 1970’s and spread north to U.S. Hispanic communities.
- Have been used widely to disseminate education materials on multiple topics to Latinos in underserved communities to address barriers to health care in limited English proficiency (LEP) and low-literacy groups.
- The fotonovela works well as a culturally informed health tool because it combines visual elements and short, simple text which reflect common social experiences of the targeted audience.
- Its wide acceptance and ease of use makes the fotonovela an efficient alternative to wordy brochures for communicating health and safety messages to Spanish-dominant communities.

Writing the Fotonovelas

- FOF members and the social marketing committee engaged members of the targeted group to **capture the dialogue** of cultural stigma about mental health and substance abuse services.
- With help from graphic designer, used photographs and simple short text bubbles to convey educational messages with a familiar, conversational tone.
- Social marketing staff and family members were equal participants in the development of the storylines, dialogue, and characters.
Fotonovela development process

- Community residents were invited to participate as writers, actors, and gave a very positive response.

- After photos were formatted and fit into the comic book format, several feedback and editing sessions were conducted to ensure the stories were realistic, relevant, understandable, and acceptable to the target audience.

- Though the fotonovelas depict real situations recounted by family members, actors were used for purposes of representation.

- Two stories were produced in full color, with English and Spanish versions for each. (Written first in Spanish, then translated to English)

STIGMA REDUCTION
Fotonovela

Multilingual social marketing: Radio stories

- Two radio story scripts were developed with the participation of families from the Haitian community.

- Using the same method as with the photo stories, the families collaborated to reveal how these challenges occur within their community.

- 1st story touches on the issue of depression in youth and how families address the issue face the challenge with their culture.

- 2nd story discusses the issue of mental illness (bipolar) and substance abuse and how families deal with the challenge within their culture.
Haitian Radio Stories

- Scripts were written in Haitian-Creole by social marketing staff based on community discussions and then reviewed by community members.
- Haitian-Creole speaking staff and family members volunteered to record voices at university recording studios.
- Stories were illustrated to accompany audio on YouTube, and excerpts were played on Haitian Radio stations in May 2014.

Now you give it a try...

Story Development Exercise

Instructions

- Read the educational or stigma reduction message assigned to your group.
- Find plain language ways to communicate the idea in a simple and accurate way.
- Read the cultural insight(s) based on participatory research with our target audience.
- Discuss what this means in terms of addressing the topic.
- Complete the worksheet and draft your graphic story.

Sample Exercise #1

Message: There is a difference between feeling sad and clinical depression. Persistent long term sadness could be a sign of clinical depression. Therapy can help and some people need medication to feel better. Some people need medication to fully deal with depression. Left untreated, clinical depression in teens can lead to more serious self-harming behaviors, sexual risk and drug abuse.

Cultural Insight: How can teenagers be depressed if they don’t have any real problems. This country makes children feel that all their little problems need “treatment.” We need to make youth stronger to face their problems because they only get worse. They need to have faith in God and in themselves. Parents are the ones who really need help; they are the ones with the real problems. Haitian people don’t commit suicide and don’t cut themselves. It’s just not in our culture. That is an American thing.

Story Development Questions

- Who is your audience for this story?
  - Youth, parents, providers, other family members, friends, etc.
- Who would realistically be talking about this issue that could serve as role models?
- Where would this dialogue take place?
- What characters would be involved in the dialogue?
- What character(s) will represent the undesirable behavior, and which will represent the desirable behavior?
- What is the take-away message for this scene?
Sample Exercise #2

Message: Young people today encounter illegal drugs from a very early age. As early as elementary school, dealers get children to try drugs and sell them. It is important to speak to kids about drugs so they are prepared to respond. Parents need to prepare children to face these risks and be vigilant of friends, activities and signs of substance use and abuse.

Cultural insight: Kids use drugs in this country because parents have to work and can’t supervise them. The loss of the extended family means that kids don’t feel they have people looking after them, and they want to grow up before their time. Searching through kids’ stuff is not disrespectful, but it’s useless because they will hide drugs outside the home.

Sample Exercise #3

Message: There are complementary and alternative approaches that could be useful to relieve anxiety and prevent depressive symptoms, and these are rarely spoken about between providers and consumers. Our program has launched an effort to encourage consumers and providers to ask each other about CAM wellness approaches.

Cultural insight: Many Latino families are intrigued by CAM such as massage, aromatherapy, meditation, yoga, etc. and would love to try it, but feel they are hard to find and expensive. Some are worried these practices may go against their religious beliefs. May have tried natural and spiritual treatments but think providers will find them superstitious.