

## Translation Engagement

Award category: Respect for Diversity, Inclusion and Culture Award

Organization name: Vancouver Coastal Health Authority

Nominee's name: Emina Dervisevic, Stephanie Massot, Charlene Chiang, Kim Alison Fraser, Catherine Loiacono, VCH Community Engagement

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**Names of IAP2 Members and Department: VCH Community Engagement, VCH Communications and Strategic Partnerships, Emina Dervisevic, Stephanie Massot**

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Title	Vancouver Coastal Health (VCH) Translation Engagement
Organizing Group Location	Vancouver Coastal Health Vancouver, Richmond, the North Shore, the Sunshine Coast, Whistler, Squamish, Bella Bella and Bella Coola.
Key Question/Problem	VCH delivers health services to about 1.25 million people – nearly a quarter of B.C.’s population. The geographic area covered by VCH includes 12 municipalities, four regional districts, and communities speaking a variety of languages. VCH did not have a centralized or standardized approach to translating materials across the diverse communities of care. Translation was done on a project-to-project basis and there was a need for a consistent approach.
Sample Methods	Methods: Interviews with leaders of community organizations and VCH physicians and staff with translation experience; Zoom focus groups with patients, families, general public and service providers; focus groups with speakers of other languages (Farsi, Mandarin, Cantonese); general population survey with a representative sample of respondents in areas served by VCH; a community conversation with Punjabi-speaking seniors, and a youth idea jam in collaboration with CityHive.
Results	The key findings from the engagement will directly inform the creation of a framework, which will guide standardization of translation practices across VCH. Also, the findings have informed the communications process and translation of information for the Phase 2 COVID-19 vaccine rollout. VCH is currently translating key information into 11 languages, regularly updating translated materials, recruiting volunteer cultural navigators speaking other languages at vaccination clinics, and closely working with settlement organizations to deliver information in languages such as Mandarin and Cantonese.
Impact Level Time Frame People Engaged Web Link	Residents with limited English fluency in areas served by VCH. Five months ~ 1,000 people engaged (910) <a href="https://engage.vch.ca/vch-translation-engagement">https://engage.vch.ca/vch-translation-engagement</a>

### The Problem and Challenge

The geographic area covered by Vancouver Coastal Health (VCH) includes 12 municipalities and four regional districts in the Coastal Mountain communities, Vancouver, North Vancouver, West Vancouver, and Richmond. VCH recognizes that its services and facilities lie on the traditional homelands of 14 First Nations communities. There are also three Métis Chartered communities within the VCH region.

Data shows that around 1 in 3 (30%) of BC residents have a mother tongue other than English or French. Based on 2016 Census, in areas served by VCH, 292,255 people have a language other than English most commonly spoken at home, and the top five languages are Cantonese (97,375), Mandarin (72,590), Farsi (15,310), Tagalog (14,940), and Punjabi (12,230). Provincial Language Service, the provincial organization that provides interpreting for medical appointments, on the other hand, shows that the top five languages requested in the VCH areas of service in 2020 were Cantonese, Mandarin, Punjabi, Vietnamese and Spanish.

VCH initiated a review of translation practices with the goal of supporting culturally safe care and improving access to health information. With the engagement of patients, families, the general public, organizations providing services to newcomers with limited English fluency and staff experiencing language barriers, VCH sought to learn how to reduce language barriers and how to facilitate better understanding and distribution of written materials. Engagement of diverse stakeholders responded to the engagement by identifying the greatest challenges with language barriers in accessing care, and highlighting opportunities to make improvements in the short and long term.

### The Role of Public Participation

The objective of the engagement was to INVOLVE patients/clients, members of communities with limited English fluency, as well as service providers by identifying:

- Ways to support culturally safe health care and improving patient/client access to health information through translation and interpretation;
- Language or hearing barriers that may impact access to health care; and,
- Ways to facilitate mutual understanding between patients/clients and health care providers for more effective care and positive health outcomes.

The decision statement was to receive input from stakeholders, complete a needs analysis, and based on the engagement findings, create a framework that would guide the centralization and standardization of interpretation and translation across VCH.

### Alignment with Core Values

The VCH translation engagement project plan strongly aligns with the IAP2 core values.

- 1. Public participation is based on the belief that those who are affected by a decision have a right to be involved in the decision-making process.**



## ਸਾਨੂੰ ਤੁਹਾਡੇ ਵਿਚਾਰ ਜਾਣਨ ਦੀ ਲੋੜ ਹੈ ਵੀ ਸੀ ਐੱਚ ਦੀ ਅਨੁਵਾਦ ਅਤੇ ਵੈੱਬਸਾਈਟ ਬਾਰੇ ਮੀਟਿੰਗ

ਵੈੱਬਸਾਈਟ ਕੰਸਟਰਕਸ਼ਨ ਪ੍ਰੋਜੈਕਟ (ਵੀ ਸੀ ਐੱਚ) ਦੇ ਮਹੱਤਵਪੂਰਨ ਪ੍ਰੋਜੈਕਟ ਸ਼ੁਰੂ ਕਰ ਰਹੀ ਹੈ - ਵੀ ਸੀ ਐੱਚ ਵੱਲੋਂ ਅਨੁਵਾਦ ਦੀ ਵਰਤੋਂ ਦਾ ਵਿਵੇਕ ਅਤੇ ਵੀ ਸੀ ਐੱਚ ਦੇ ਵੈੱਬਸਾਈਟ ਨੂੰ ਦੁਬਾਰਾ ਤਿਆਰ ਕਰਨਾ।

ਵੀ ਸੀ ਐੱਚ ਵਿਖੇ ਅਨੁਵਾਦ ਦੀਆਂ ਤੁਹਾਡੀਆਂ ਲੋੜਾਂ ਅਤੇ ਵੈੱਬਸਾਈਟ ਨੂੰ ਵਰਤਣ ਲਈ ਸਿਆਦਾ ਸੱਖਾ ਅਤੇ ਪਹੁੰਚਯੋਗ ਕਿਵੇਂ ਬਣਾਉਣਾ ਹੈ ਬਾਰੇ ਤੁਹਾਡਾ ਭਾਗੀਦਾਰ, ਸਾਡੇ ਅਨੁਵਾਦ ਦੀ ਵਰਤੋਂ ਵਿਚ ਸੁਧਾਰ ਕਰਨ ਵਿਚ ਸਾਡੀ ਮਦਦ ਕਰੋਗਾ ਅਤੇ ਇਹ ਪੱਕਾ ਕਰੋਗਾ ਕਿ ਸ਼ੁਰੂਆਤੀ ਜਾਣਕਾਰੀ ਲੱਭਣ ਲਈ ਸਾਡਾ ਵੈੱਬਸਾਈਟ ਵਰਤਣਾ ਸੌਖਾ ਹੋਵੇ।

ਆ ਰਹੇ ਫੋਕਸ ਗਰੁੱਪ ਵਿਚ ਤੁਹਾਡੇ ਵਿਚਾਰ ਸੁਣਨ ਦੀ ਸਾਨੂੰ ਤਾਂਘ ਨਾਲ ਉਡੀਕ ਹੈ। ਪੁੱਛੋਗਾ ਬਾਰੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਲਈ, ਕਿਰਪਾ ਕਰਕੇ [ce@vch.ca](mailto:ce@vch.ca) 'ਤੇ ਈਮੇਲ ਕਰੋ।

**ਪੰਜਾਬੀ ਵਿਚ ਫੋਕਸ ਗਰੁੱਪ:**

13 ਨਵੰਬਰ  
ਦੁਪਹਿਰ ਦੇ 1 ਵਜੇ ਤੋਂ 2:30 ਵਜੇ ਤੱਕ

**ਰਜਿਸਟਰ ਹੋਣ ਲਈ:**

ਈਮੇਲ: [humaira.imtiaz@southvan.org](mailto:humaira.imtiaz@southvan.org)

ਸਾਨੂੰ ਤੁਹਾਨੂੰ ਮਿਲਣ ਦੀ ਤਾਂਘ ਨਾਲ ਉਡੀਕ ਹੈ।



- Aboriginal Health engagement.

The 12 focus groups included participants with varying interests and needs, including:

- VCH Patient and Family Experience Council (PFEC) (November 18, 2020)
- Mandarin-speaking members of public and service providers (December 1, 2020)
- Farsi-speaking newcomers and members of public (December 8, 2020)
- Service providers (two focus groups – November 23 and December 18, 2020)
- General public and Community Engagement Advisory Network members (CEAN) (four focus groups – November 19, November 21, November 25, December 2, 2020)
- Seniors (December 11, 2020)
- VCH staff (December 16, 2020)
- Cantonese-speaking members of public and service providers (January 7, 2021).

<sup>1</sup> Online engagement session with youth.

<sup>2</sup> CityHive is a non-for-profit organization specializing in engaging young people in civic processes.

<sup>3</sup> Neighbourhood houses are organizations that provide local community programs and services to address local needs, such as recreation programs, daycares for working parents, English as a second language, adult literacy classes, etc.

The engagement project was initiated with the creation of a working group with member representatives of settlement organizations and VCH leadership as well as medical staff with translation experience. The working group provided advice on engagement planning and stakeholder mapping process and supported planning of engagement with communities with limited English fluency.

The project sought to involve diverse communities that rely on translation materials to access health care and service providers because they witness first-hand the challenges that people with limited English fluency face when trying to access care.

The engagement consisted of:

- General population survey (800 responses)
- One-on-one interviews with key stakeholders (13 interviews)
- Focus groups (12 focus groups)
- Idea jam<sup>1</sup> with youth (organized in collaboration with CityHive<sup>2</sup>)
- Community conversation with senior Punjabi-speaking women at South Vancouver Neighbourhood House (SVNH)<sup>3</sup>

## **2. Public participation includes the promise that the public's contribution will influence the decision.**

The foundation of this engagement project is the promise to all involved stakeholders and general public that their contribution will directly influence the creation of the framework – the resulting document, which will guide the standardization of translation practices across VCH.

The public input received through this engagement has already influenced the translation process for all communications materials created for Phase 2 of the COVID-19 vaccination rollout. Based on the input received across all engagements, public health information was determined to be one of the top three most important types of health care information to translate. VCH is currently translating key public health information into 11 languages: Arabic, simplified and traditional Chinese, Punjabi, Farsi, French, Korean, Spanish, Tagalog, Vietnamese and American Sign Language: <http://www.vch.ca/about-us/news/news-releases/vch-opens-covid-19-vaccination-clinics-to-eligible-seniors-and-indigenous-people-on-march-15>

## **3. Public participation promotes sustainable decisions by recognizing and communicating the needs and interests of all participants, including decision makers.**

The three recommendations that came out of the engagement are some of the biggest challenges for translation at VCH:

- the amount of health care information that needs to be translated
- the diversity of languages spoken by communities served by VCH.
- what and how much to translate

These are difficult decisions that must be informed by rigorous research and continuous engagement. The engagement findings have also outlined ways for translation efforts at VCH to be efficient, sustainable, and nimble in order to provide translation where the need is greatest. The findings uncovered that the most important information to translate is not the information about different conditions, diseases and illnesses, which individuals could find on websites in other languages. But, anything that provides communities with clear steps on how to access services and navigate the health care system is most crucial to translate, like how to access primary care or a family as the first step in connecting patients with health care services. Once connected to primary care, people have ways to connect to other levels of health care. Another area highlighted in the findings is public health. Certain communities with limited English fluency are disproportionately affected by COVID-19 and the only way to address this is to tailor communications to those specific communities.

## **4. Public participation seeks out and facilitates the involvement of those potentially affected by or interested in a decision.**

The focus groups were promoted widely through VCH communications channels. The Community Partner Update (a newsletter that is sent to more than 400 VCH community partners providing community services to new Canadians), CEAN in Between newsletter (weekly newsletter that is sent to the VCH Community Engagement Advisory Network – a network of patient advisors and volunteers), VCH social media channels, such as Facebook, Instagram and Twitter, and VCH websites. The focus groups were also promoted with the help of the working group members, who represent leaders at organizations such as MOSAIC, S.U.C.C.E.S.S., Immigrant Services Society of BC (ISSBC), SVNH, Collingwood Neighbourhood House, InterCultural Online Health Network (iCON) and VCH departments providing services to diverse communities.



To seek out and facilitate the involvement of those potentially affected or interested in translation services, VCH hosted a focus group with a Farsi-speaking facilitator, a focus group with a Cantonese-speaking facilitator, a focus group with a Mandarin-speaking facilitator, and the team joined a weekly meeting of senior Punjabi-speaking women with the help of a Punjabi-speaking facilitator. VCH also collaborated with CityHive to host an idea jam with youth, and organized separate sessions with seniors, service providers, staff, patient and family

advisors, as well as general public.

In addition to all the qualitative engagement techniques, VCH also collaborated with Mustel Group Research to plan, design and implement a general population survey that sought input from a representative sample of communities served by VCH. In addition to English, the survey was available in Simplified and Traditional Chinese, Punjabi and Farsi, and 119 respondents completed the survey in a language other than English.

In the majority of engagement sessions, the project team also sought input on the VCH website redevelopment as the two projects had some overlap in scope. Also, as part the VCH website redevelopment engagement project, the engagement team collaborated closely with Aboriginal Health to organize three talking circles and one interview with Indigenous staff, service providers and community members, and these sessions provided an Indigenous perspective on languages, use of languages and display of First Nations languages on the website and in VCH materials.

## 5. Public participation seeks input from participants in designing how they participate.

Public participation sought input from participants in designing how they participate in four ways:

- A working group was created to seek early input into the engagement design and stakeholder mapping.
- Several members of the working group were also involved in the simplification, review and testing of the general population survey questions once the survey was translated into simplified Chinese, traditional Chinese, Punjabi and Farsi, and all members of the working group were involved in promotion of the engagement opportunities.
- Thirteen pre-engagement one-on-one interviews were conducted with key stakeholders (including nine working group members) to receive early input into:
  - what stakeholders will be impacted / perceived to be impacted by the project,
  - what information people would need to be able to meaningfully participate,
  - what would be recommended ways to receive input from diverse communities,
  - how best to reach communities with limited English fluency and workers providing services to newcomers.

The input received through key stakeholder interviews directly informed the engagement and session design.

- All engagement sessions were followed by online evaluations where participants could provide a review of the session they participated in and input on how the engagement sessions could be improved. The evaluations helped the engagement team review the design of sessions and adapt the sessions when required. The input from the evaluations informed the change in facilitation of breakouts in focus groups (when required, more time was provided in breakouts to give participants a chance to think about and respond to all questions), the introduction of a speaking order and provision of questions in advance (so that participants would have sufficient time to consider responses).

## 6. Public participation provides participants with the information they need to participate in a meaningful way.

The engagement team created a comprehensive communications strategy to ensure that participants had the information in different languages before the engagement. Posters were translated into Farsi, Punjabi, traditional and simplified Chinese. Project descriptions and questions (in different languages) were sent to participants in advance of the sessions. Four sessions were facilitated in languages other than English so that participants with limited English fluency could ask questions and provide input in their primary language. The general population survey was provided in five different languages. Follow-up information with participants in focus groups, idea jam, community conversation and interviews included notes from the session and provided information about next steps in the engagement.



### 我们需要您提供意见 VCH 网站参与和翻译

温哥华沿岸卫生局 (VCH) 将开始进行两个重要项目 — 重新设计 VCH 网站和检讨 VCH 翻译实务。

您就这两个项目所提供的意见，将有助我们改进翻译工具，并且确保我们的网站是一个易于浏览、用户友好的资源。

我们将主办 Zoom 焦点小组，以听取我们所服务的多元社区的意见。我们期待在即将举行的焦点小组会议上听到您的意见。要报名参加焦点小组或询问有关这些项目的问题，请发送电邮至 [ce@vch.ca](mailto:ce@vch.ca)。

#### 普通话焦点小组：

12月1日 下午 5:00 至 6:30

#### 报名参加：

电邮：[ce@vch.ca](mailto:ce@vch.ca)

我们期待与您会面。

The communications strategy was influenced by the findings in the pre-engagement phase and it ensured that participants in the engagement understood the outcomes the project was trying to achieve and what was expected from participants to contribute to the project. In line with the recommendations from key stakeholders, questions were prepared in advance so that participants could prepare for sessions and the engagement team provided a project background and context at the beginning of each session so that participants had clear expectations about the deliverables. The team also clearly outlined how the project scope at the beginning of each session.



## 7. Public participation communicates to participants how their input affected the decision.

The project team has created a project page on the new VCH engagement (Engagement HQ<sup>4</sup>) platform – Engage VCH: <https://engage.vch.ca/vch-translation-engagement>. This project page will serve as a

<sup>4</sup> Engagement HQ is an online engagement platform by Bang the Table, a company that specializes in delivering online tools to more than 750 organizations worldwide.

place for updates about the next phases and announcements of project milestones. The project team is finalizing the engagement report and once completed, the report will be posted on this project page.

The project team has already reported to the working group members on the preliminary results of the engagement and at the next working group meeting, the team will present the final report and findings.

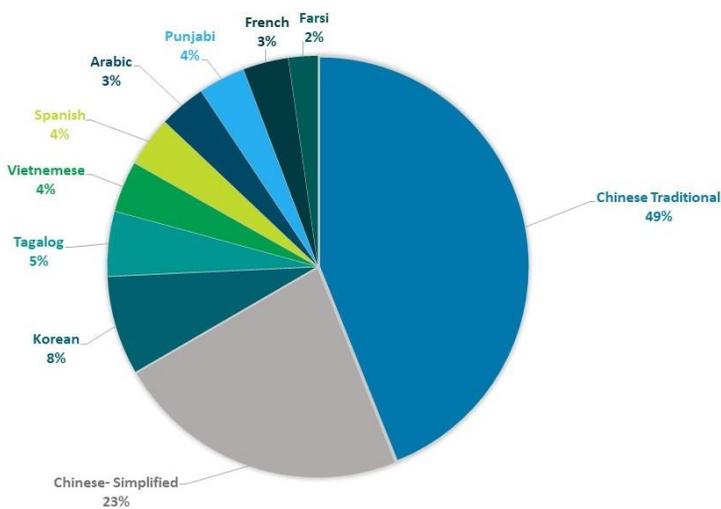
All participants in the engagement will be notified by email once the findings of the engagement are ready to be shared, and they will be invited to stay updated about the project and the upcoming framework on the Engage VCH project page. Internal staff, medical staff, as well as all external stakeholders will have an opportunity to provide input on the draft framework as part of the next stage of the project.

The participants in the engagement have also been added to ongoing Community Partner Updates with links to newly translated materials about COVID-19. As a direct result of this engagement, VCH has been translating Phase 2 COVID-19 vaccination information into 11 languages: Arabic, American Sign Language (ASL), simplified Chinese, traditional Chinese, Farsi, French, Korean, Punjabi, Spanish, Tagalog, and Vietnamese: <http://www.vch.ca/about-us/news/news-releases/vancouver-coastal-health-invites-the-next-age-group-to-book-a-covid-19-vaccination-appointment>

The new approach to translation has increased access to communities with limited English fluency. From March 1 to 18, 2021 there have been 1,465 downloads of material translated into traditional Chinese.

The breakdown per language in terms of access to translated information online is represented by the pie chart on the left.

**Access to COVID-19 translated materials on the VCH website – by language**



### Creating Relationships and Building Trust

This project has deepened the relationships between VCH and community organizations providing services to newcomers and other people with limited English fluency. The project has been designed in partnership with the leaders of settlement organizations and as key stakeholders, they have been involved in every phase of the project.

VCH immediately implemented the learnings from the engagement by committing to timely and continuous translation of all Phase 2<sup>5</sup> vaccination rollout materials into 11 languages. Also, VCH has explored ways to provide translation and cultural navigation

through volunteers at vaccination clinics, and explored ways to deliver both culturally appropriate information and customized approaches to vaccinating Chinese-speaking seniors in Chinatown.

<sup>5</sup> Phase 2 was the second out of four phases in the British Columbia’s COVID-19 Immunization Plan. It lasted from February to April 2021.

VCH has also been sharing Community Partner Updates twice a week with the Ministry of Health updates, updates on vaccinations and information about the Phase 2 immunization. The Community Partner Updates include resources in different languages and are shared with more than 400 email addresses in the communities VCH serves: housing organizations, settlement organizations, municipalities, business improvement organizations, community centres, school districts and more. The updates have established a direct link for VCH to share the most recent and relevant information in the most represented languages, and for community partners to stay informed and provide input into VCH engagement projects. (<http://www.vch.ca/Documents/COVID-19-Daily-Update-Mar-03-2021.pdf>).

VCH has also collaborated with S.U.C.C.E.S.S. and hosted webinars in Cantonese and Mandarin to provide information about COVID-19 and respond to any questions from Cantonese- and Mandarin-speaking communities.



Community partners updates reach 400 organizations



VCH continues to reach the diverse communities we serve with translated materials in 10 languages as well as American Sign Language



VCH is hosting webinars in language with subject matter experts and building vaccine confidence

## Evaluation Process

The evaluation process is embedded in the engagement and is planned at different stages of the project.

An evaluation survey was shared after most of the engagement sessions. An example of the survey can be found here: <https://hrsurveys.vch.ca/Survey.aspx?s=0831caadde784228b59175413bfb7d8f>. Thirty-two percent of participants completed the survey, and the majority of respondents rated the engagement positively:

- 92.31 percent of respondents agreed or strongly agreed the format of the engagement event was appropriate;
- 92.59 percent of respondents thought the amount of time allocated for questions, answers and discussions was adequate;
- 92.31 percent of respondents agreed or strongly agreed the goals of the project(s) were clearly explained<sup>6</sup>;

<sup>6</sup> As mentioned above, to avoid engagement fatigue, most of the in-person Zoom engagement sessions combined discussions for two VCH engagement projects: engagement on translation practices and engagement on the VCH website redevelopment as two projects overlapped in scope. The evaluation survey reflected this.

- 81.48 percent of respondents agreed or strongly agreed they had the information they needed to meaningfully participate;
- 96 percent of respondents agreed or strongly agreed they felt heard and engaged; and,
- 92.31 percent of respondents agreed or strongly agreed attending the engagement event was a good use of their time.

The project team also reported back to working group members with a presentation on preliminary findings and received very positive feedback on the engagement process and the richness of findings.

The project team is planning to complete three other evaluations: evaluation of engagement process and findings, evaluation of the draft framework and evaluation of resulting changes in translation practices.

All evaluation reports will be shared with stakeholders on the Engage VCH project page: <https://engage.vch.ca/vch-translation-engagement>.

### Uniqueness of the Project

The uniqueness of this engagement project stems from the special circumstances in which the project took place as a result of the COVID-19 pandemic. Despite the preference for in-person sessions among speakers of other languages with limited English fluency and organizations involved in pre-engagement, the design of the engagement had to take into consideration COVID-19 restrictions and find creative ways to capture input from communities with limited English fluency by adapting the approach. The engagement had to consider the lack of access to technology among community members, lack of experience with technology among seniors with limited English fluency and plan sessions that were accessible but exclusively online.

Based on recommendations from the pre-engagement interviews, the engagement team increased the number of sessions with staff of community organizations providing services to people with limited English fluency as they could share their direct experience of barriers with translation among their clients. With the help of the leaders at SVNH, the engagement team was able to join a weekly meeting among senior Punjabi-speaking women as they had been coached by SVNH staff on how to access Zoom for their weekly meetings. Also, the engagement team successfully used the online survey, telephone and Zoom technology to complete all planned engagement. VCH was able to advance the project despite the challenges brought on by the pandemic and has been able to use the findings from the engagement to improve access to translated materials in order to share timely, important and relevant information about the COVID-19 immunization.

### Independent References

- Kiran Malli, Director, Provincial Language Service, Provincial Health Services Authority, [kmalli@phsa.ca](mailto:kmalli@phsa.ca)
- Sherman Chan, Director, Family and Settlement Services, MOSAIC, [schan@mosaicbc.org](mailto:schan@mosaicbc.org)
- Chris Friesen, Director, Settlement Services, Immigrant Services Society of BC (ISSBC), [chris.friesen@issbc.org](mailto:chris.friesen@issbc.org)