

# An Interim Report by the Governor's Emergency Communications Taskforce

August 1, 2014



**Important information!**  
Please translate.

**Ważna informacja!**  
Prosimy postarać się o  
jej przekład.

**Enfòmasyon Enpòtan!**  
Tanpri fè tradui sa a.

**Informations importantes!**  
Prière de les traduire.

**Información importante.**  
Haga traducir esto.

**Informazioni importanti.**  
Farle tradurre.

**Informações importantes!**  
Favor mandar traduzir.

**Thông Tin Quan Trọng!**  
Xin nhờ người phiên dịch  
thông tin này



**State of Connecticut**  
Department of Emergency Services and Public Protection



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## I. Executive Summary

In March of 2014, Governor Malloy established a Task Force to “...evaluate the cost, benefit, efficiency, effectiveness and measurable performance of the existing communications methods used by the State,” and to develop best practices in communicating with its diverse residents, particularly with non-English speakers and individuals with disabilities or other functional needs<sup>1</sup>. The goal of the Task Force is to review and make recommendations on both emergency and non emergency communications. The Governor asked Commissioner Dora B. Schriro of the Department of Emergency Services and Public Protection to convene and chair the group.

Mindful that the traditional height of hurricane season in Connecticut runs from August to November, Dr. Schriro determined that an interim report on emergency communications, including a plan of action, should be submitted by August 1, 2014. This interim report describes what the Task Force has determined to date with regard to emergency communications. A full report covering both emergency and non-emergency communications will be issued no later than January 1, 2015. This document constitutes the report on emergency communications. The primary goal of the emergency communications portion of the Governor’s charge is to enhance preparedness and response in Connecticut by bolstering current best practices and implementing new practices to communicate successfully with all of the state’s residents during dangerous weather events, significant public safety threats and other emergency situations.

Recognizing that the most effective communications strategies are developed and implemented in collaboration and partnership with stakeholders, the Task Force is made up of a cross-section of representatives from state agencies, nonprofit organizations, the media, including Spanish and Portuguese media, as well as individuals from communities across Connecticut. [See Appendix A](#) for a list of members and contributors. To date, the Task Force has met as a full group four times, and has also

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<sup>1</sup> Functional needs is an inclusive term. The Federal Emergency Management Agency (FEMA) currently defines access and functional needs populations as those individuals who may have additional needs before, during, and after an incident in functional areas including, as examples: maintaining independence; communication; transportation; supervision, and; medical care. Individuals in need of additional assistance may include those who have disabilities; live in congregate settings; are elderly; are children; are from diverse cultures; have limited English proficiency, are non-English speaking or have other communications barriers, or; need transportation assistance.

convened as three subcommittees on a number of occasions, to gather information and develop data and recommendations on:

- Identification of Diverse Populations
- Identification of Optimal Communications Methods—both technical and “person-to-person”
- Best Practices and Next Practices

The Task Force identified a wide variety of groups of people who could benefit from specialized communications strategies, including the many persons who speak one or more of 300 primary languages and dialects other than English in Connecticut, including Spanish, Portuguese and various dialects of Chinese, as well as those persons with one or more functional needs. The Task Force, mindful of the need to reach all individuals in the state, explored alternative means of communicating such as faith-based and community-based groups. It also solicited information from power and communications utilities and other private sector entities about the ways in which these companies reach their customers for everyday purposes and in emergencies.

Finally, with the goal in mind of identifying methodologies to reach the most people in the most effective way, the Task Force has developed a set of recommendations and an action plan to accomplish these recommendations. These recommendations can be divided into five overarching categories, and include:

**1. Address diverse language issues in multiple ways, including engagement of private and public sector partners:**

- A sign language interpreter at every Governor’s press conference at the State Emergency Operations Center (EOC) for broadcast by the Connecticut Television Network (CT-N) (now in place);
- Create a pilot for Spanish translation services during an emergency, because it is the second most common language spoken in Connecticut after English;
- Educate all radio and television broadcasters on the availability of the Connecticut Television Network (CT-N) as a source of live feeds during activations of the State EOC;
- Develop universal visual signage and logos;
- Build on United Way 2-1-1’s role as the state’s 24/7 multi-lingual information and referral resource before, during, and after emergencies to streamline access to information;

- Engage specific organizations and private sector partners in emergency preparedness, particularly to assist in public messaging (e.g., power and cable utilities, CT Association of Nonprofits, CT Community Providers Association, Community Health Center Association of CT, the CT Association of Healthcare at Home, and the Brain Injury Association).

**2. Enhance public preparedness messaging and individual resilience, including:**

- Encourage the public to sign up for the state/local Emergency Notification System;
- Collaborate to disseminate general preparedness messages, including the message to “Check on your neighbors;”
- Public messaging at the local level regarding the percentage/number of functional needs individuals in each community, in order to encourage all people to realize that they are not alone and may feel safe in identifying themselves as needing additional assistance (self-identifying).

**3. Emphasize and support local planning and preparedness initiatives related to communicating with all community members, including:**

- Continue to support the establishment of Community Emergency Response Teams (CERTs) in all communities in the state, to include faith-based and neighborhood organizations, and CERTs that specialize in languages and/or functional needs;
- Continue to work with municipalities to:
  - Develop a strong emergency preparedness message to residents, including, for example, the creation of a home emergency preparedness kit that includes key contact information, medication and medical equipment back-up, etc..;
  - Enhance communications with residents on such crucial issues as where to find or how to access emergency shelter and transportation resources;
  - Identify community demographics, and include diverse groups in emergency preparedness planning;
  - Engage neighborhood and faith-based organizations in emergency planning and public messaging;
  - Include representatives from the diverse populations within each municipality in emergency planning, including convening a functional needs work group that can help to identify needs and implement solutions

to increase the flow of emergency preparedness, response, and recovery information to all members of the community.

**4. Enhance state agency communications resources to assist in emergency preparedness, response, and recovery messaging, including:**

- During emergencies, continue to create and publicize a dedicated disaster website at the state level, including describing multiple resources to receive information in different languages or by different means;
- Increase links on state and private sector websites to other websites that provide preparedness and emergency information in multiple languages and/or in multiple ways;
- Explore additional uses of the state’s Emergency Notification System; Identify and communicate with broad spectrum of media outlets, including ethnic and culturally diverse media outlets, CRIS radio for the blind, low power radio stations;
- Work with “purchase of service” state agencies (e.g., Department of Mental Health and Addiction Services, Department of Developmental Services, Department of Children and Families, Department of Public Health, Department of Housing, Department of Rehabilitative Services, Department of Social Services, Department of Aging) to use their email list serves to enhance emergency communication preparedness, response, and recovery messaging.

**5. Continue the work of the Governor’s Communications Task Force:**

- In order to implement these recommendations, the Task Force plans to continue to meet and work together as a subcommittee of the Division of Emergency Management and Homeland Security (DEMHS) Statewide Advisory Council. Specifically, under the National and State of Connecticut Response Frameworks, emergency management disciplines are organized at the federal, state, and local levels in what are known as Emergency Support Function (ESF) groups. Each discipline is identified by a different number. This Task Force will continue to meet as the statewide Emergency Support Function (ESF) 15 External Affairs working group. In addition, members of this larger ESF 15 group can be convened as a mission-centric Task Force to assist the Governor’s Unified Command to address public messaging issues that may arise during an emergency activation of the State Emergency Operations Center (EOC), which is the state’s central point of emergency management. This approach is consistent with the Governor’s Executive Order 34, requiring state agencies to comply with

the National Incident Management System (NIMS)<sup>2</sup> and also with existing procedures associated with activation of the State EOC.

## II. State Demographics

The Task Force identified a number of groups that could benefit from diverse communications methods. Over 625,000 of Connecticut's 3.4 million residents were born outside of the United States, and over 300 languages or dialects are spoken here. Appendix B demonstrates the wide variety of languages spoken in Connecticut, including over 368,000 residents for whom Spanish is the primary language. The Asian American Pacific Affairs Commission reports that over 157,000 Asian Americans live in the state and that, within that population, estimates that there are likely at least 50 distinct sub-groups.

Appendix C describes additional groups for whom traditional communications methods may not be sufficient. Almost 11,000 people in Connecticut are listed on the Bureau of Education and Services for the Blind registry. The Department of Rehabilitation Services provided data that indicated that over 30,000 residents have been identified as deaf or hard of hearing.

It is not always easy for communities to determine the number of people who may use or need different methods of emergency communication. For example, individuals may not want to self-identify as needing additional assistance, and therefore it can be difficult to determine what additional communications methods would be most useful. Some data may be gleaned from other sources. For example, the federal Department of Health and Human Services has provided Connecticut with general information on the number of Medicare recipients; including data on the number of people using ventilators, oxygen concentrators, dialysis, and enteral feeding who are relying on Medicare payments for these services (the totals do not include private insurance, for example.) Recent data indicates that at least 16,000 Connecticut residents rely on this equipment. [See Appendix D.](#)

In addition to these groups, the Task Force also identified other populations that might need specialized messaging:

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<sup>2</sup> The National Incident Management System (NIMS) is a nationally-recognized system of incident command designed to standardize emergency response and management across the country. For more information, see <http://www.fema.gov/national-incident-management-system>.

- Other Disabled communities, including those with physical/mental disabilities,
- Persons who are homeless/ living in shelters,
- Residents of group homes or other institutional facilities,
- Immigrants and refugees and undocumented individuals,
- Home-bound individuals, including the elderly,
- Persons with low income,
- Individuals with difficulty reading, including people with low or no literacy,
- Commuters,
- Transients (tourists/visitors),
- Others dependent on Durable Medical Equipment (DME),
- Transient workers and
- Those without computers, access to the internet, television or radio.

As mentioned above, one of the biggest challenges is determining those who may need additional help, but who have not self-identified within one or more of these categories.

### **III. Current Public and Private Sector Communications Practices**

The Task Force identified existing opportunities and practices within both the private (both for-profit and non-profit) and public sectors, including infrastructure that is currently available to enhance emergency communications. Private sector representatives from power and communications companies shared current communications practices, including:

- the availability of translating services;
- bi-lingual service representatives or translations (language dependent on the demographics of the company's customers);
- bills in large print or Braille; closed captioning; equipment with large button remote controls, audio narratives;
- screen readers for web browsers; and, readable voice mail (transcript of voice mails sent by email.)

Some companies have allowed emergency preparedness messaging to be transmitted as an insert with their existing customers' bills or included with electronic billing. It would be useful to evaluate whether such messaging may be an effective means of communicating emergency information, as well as which companies might be in the best position to do so. For example, cable bills may go to a number of individuals within an apartment complex, while the electrical bill may go only to the landlord. Northeast



Utilities has messages prepared in advance in a variety of languages to inform people about threatening severe weather. [Appendix E](#) provides some examples of best practices that the Task Force reviewed, as well as some examples of communications tools from other jurisdictions.

The public and non-profit sectors have also established some critical communications practices and resources. The American Red Cross maintains a Disaster and Safety Library, a centralized web location where Red Cross preparedness resources in multiple languages are gathered: <http://www.redcross.org/prepare/disaster-safety-library>. The Library is available to any groups looking to communicate preparedness information on a wide range of topics. Most of the materials can be downloaded and easily reproduced or shared.

United Way 2-1-1 occupies a critical role as the state's 24/7 multi-lingual information and referral resource before, during, and after emergencies. In addition to providing crisis intervention and information on health and human services, United Way 2-1-1 services continue to be heavily utilized both online and by phone during disasters. For example, in previous disasters and emergency situations, 2-1-1 has provided, among other things: real time tracking and reporting of the trends and types of callers seeing assistance during emergencies, ensuring CT residents find shelter during cold weather events, relief from hot weather, storm damage reporting, handling calls and tracking volunteer assistance offers, reporting health related emergency cases to utility companies, disseminating preparedness materials to service providers, consolidating state agency emergency resource information for the public, pandemic flu vaccination information, connections to disaster case management services, and long term recovery resource access.

United Way 211 frequently handles calls from non-English speaking people through its third party vendor, Tele-interpret. [See Appendix G](#) for a breakdown of calls received in a one-year period. Within an average of 30 seconds, the interpreter comes on the call, which becomes a three-way call with the caller, the 211 call specialist, and the interpreter. United Way 211, Red Cross and other nonprofit agencies work together through Connecticut Volunteer Agencies Active in Disaster (CT VOAD). CT VOAD is an excellent resource for the dissemination of information.

Public state agencies also employ a number of effective messaging practices. For example, the Department of Public Health (DPH) has worked with other state agencies including DESPP/DEMHS to provide a *Guide to Emergency Preparedness* in many different languages. This guide has been widely distributed, including to local health departments. DPH can reach pockets of the population through these local health

departments as well as health-related community groups such as Asian Family Services. The DESPP/DEMHS Radiological Emergency Preparedness Unit (REP) Unit, which works with local, state, federal, and private sector partners including Dominion follows the Voter Registration Act of 1965 requirement that, if census data indicates that 5% or more of the population speak a particular language, the public information must be translated into that language. In the area around Millstone Nuclear Power Plant (Waterford, CT), Spanish has been identified as being spoken by more than five percent of the population and, therefore, the REP Unit provides Spanish materials both in the Emergency Preparedness Zone and in the Host Communities. REP also posts signs regarding evacuation routes and warning system to provide guidance for the transient tourist population. In addition, an annual survey card is sent to residents to identify functional needs, but very few – only about one percent – of the cards are returned.

The State 9-1-1 System uses a language service, Language Line, which is available to all Public Service Answering Points (PSAPs) to provide translation services during 9-1-1 calls with local and state law enforcement. PSAPs are the dispatch locations where 911 emergency calls are taken and responses are initiated. Statistics of requests for interpreters over a 12-month period indicated that there were over 4,300 calls for the service, with Spanish as the most often requested language, at over 3,800 requests, followed by Portuguese and Mandarin at approximately 100 requests each. See Appendix F.

Connecticut has the first-of-its-kind statewide Emergency Notification System (ENS) in place, which is also available free of charge for municipalities to use in times of emergency. Also known as CT Alert, the Everbridge ENS currently used by the State has the capability to track special needs of the public who opt in such as those individuals with hearing, visual, speech, mental health, physical (dialysis, oxygen tank, power dependent, refrigerated medications), and intellectual and mobility impairments.

At the time that the ENS was established, the Division of Statewide Emergency Telecommunications (DSET) chose not to utilize these special needs categories in the CT Alert System, at least in part because of a concern that simply by registering for alerts, an individual might expect that additional help would automatically be sent in an emergency. The Task Force has recommended that DSET explore the possibility of expanding the use of the ENS.

An additional emergency communications system is the Emergency Alert System (EAS), which is a national public warning system that requires broadcasters, cable television systems, wireless cable systems, satellite digital audio radio service (SDARS) providers, and direct broadcast satellite (DBS) providers to provide, among other things,

communications capability for the President to address the American public during a national emergency. The system is also used by state authorities to deliver important emergency information, such as AMBER alerts and weather information targeted to specific areas. The Department of Emergency Services and Public Protection is the state agency responsible for this function.

The Federal Communications Commission (FCC), in conjunction with Federal Emergency Management Agency (FEMA) and the National Oceanic and Atmospheric Administration's National Weather Service (NWS), implements the EAS at the federal level. The NWS develops emergency weather information to alert the public about imminent dangerous weather conditions. At the state level, the Governor or his designee may activate the EAS. The EAS has been used most recently by Governor Malloy when road conditions during a blizzard became life threatening

The federal government is instituting a communications system known as IPAWS, the Integrated Public Alert Warning System. The alerting standards for IPAWS (e.g., circumstances under which the system should be used) are determined in Connecticut by DESPP. IPAWS improves alert and warning capabilities by allowing authorities to deliver alerts simultaneously through multiple communications devices in an effort to reach as many people as possible to save lives and protect property. This includes the ability to send alerts to geographically targeted alerts via wireless cell broadcasts. IPAWS has the capability to be sent out in different languages, but the federal government does not provide the software or any other assistance to do the translations.

One of the most significant communications infrastructures in the state is CT-N, the Connecticut Television Network, which provides coverage of events occurring in state government. CT-N broadcasts from the State Emergency Operations Center when it is activated, including providing closed captioning and a pool feed for other networks. The network has the capacity to send out video/audio feeds to provide a live web stream from the State EOC, by providing the "embed" code. The stream can go out in a number of ways, including websites, Twitter feeds, etc... One of the highest numbers of visitations to use the CT-N feed occurred during the recent snow storms, tropical storms and hurricanes.

Finally, Connecticut has taken steps to bring functional needs planning and communications to the forefront of emergency preparedness through the recent statewide exercise held annually as part of the Governor's Emergency Planning and Preparedness Initiative. Since 2012, these exercises have increased preparedness for the next inevitable event. The most recent exercise was held on two separate days,

Saturday, June 21 and Monday, June 23, 2014, so that towns with largely volunteer staff would have a weekend day to participate. Thirty-four towns drilled on Saturday, and 132 towns and both tribal nations drilled on Monday. The exercise tested the state's Emergency Notification System—over 12,000 ENS messages were sent out. After action reviews will allow communities to identify challenges, share best practices, and map out next steps for improvement.

One of the main focuses of this year's exercise was functional needs planning and communications, particularly with regard to sheltering and evacuation. As part of the exercise, each municipality was encouraged to convene a mass care/functional needs working group in advance of the exercise. DEMHS provided the following information in one of several memos to municipalities regarding the exercise:

**2014 Statewide Exercise Best Practice:  
City of Bristol**

As part of this year's statewide exercise, the City of Bristol convened a functional needs working group that included city and state agency representatives, the American Red Cross, and community organizations such as the local housing authority, senior center, youth center, faith-based organizations, homeless shelters, a local hotel, and city youth and community services. As a result, the local emergency management director will be working with partners to update the Local Emergency Operations Plan, create surveys and wellbeing checks, and enhance contacts with functional needs and other service organizations.

“Depending on the size of your community, this working group may include, in addition to the usual Unified Command (emergency management, CEO, police, fire, school superintendent, etc...), local public health, emergency medical services, transportation companies, social services, day care centers, nursing homes and elderly housing representatives, Meals on Wheels, and local charitable groups.

Ask yourself, where can I get the most accurate information on the size of the functional needs population in my community, and who has the resources to assist in planning before, and responding to, an emergency? For example, how many childcare centers do you have within your jurisdiction?

Answer can be found:

<https://www.elicense.ct.gov/Lookup/LicenseLookup.aspx> - search on Child Care  
<http://search.211childcare.org/>”

“

### FEMA Definition of Functional Needs

The exercise made it clear that the concept of functional needs is a very broad one, providing this definition FEMA currently defines access and functional needs populations as those individuals who may have additional needs before, during, and after an incident in functional areas including, but not limited to: maintaining independence; communication; transportation; supervision, and; medical care. Individuals in need of additional assistance may include those who have disabilities; live in congregate settings; are elderly; are children; are from diverse cultures; have limited English proficiency, are non-English speaking or have other communications barriers, or; need transportation assistance.

Municipalities were encouraged to incorporate functional needs representatives into their emergency planning. Suggested issues for consideration by the functional needs working group included the following:

- How can you best collect data on the demographics and needs of your community? Talk to partners such as first responders (Fire, Police and EMS) and public health/social service agencies.
- What other partners should be at the table?
- Review the local Mass Care Annex for your municipality. Are there any updates or revisions that should be made? The local Mass Care template is located on the DEMHS website at [http://www.ct.gov/demhs/lib/demhs/eppi/leop\\_esf\\_6\\_mass\\_care\\_standards\\_guidelines\\_v\\_1.pdf](http://www.ct.gov/demhs/lib/demhs/eppi/leop_esf_6_mass_care_standards_guidelines_v_1.pdf).
- What other plans does your community have that might relate to these topics? For example, is there a Public Health Point of Distribution plan? For another example, have the nursing homes in your community enrolled in the Long Term Care Mutual Aid Plan?
- What resources are available in your community and how can you plan on their use during an emergency?
- Where are most of your residents located and where will you most likely need to supply resources such as transportation or food/water?
- Public Messaging:
  - How does the municipality's planning provide people with functional needs the opportunity to develop a personal emergency plan? For some planning examples for various groups, see: <http://www.getreadycapitolregion/>.

- What is the municipality's plan to provide people with functional needs information about the existence and location of accessible services in an emergency?
- What is the municipality's plan for canvassing or otherwise ensuring that people with functional needs-- who may be unable to leave their homes after a disaster—are able to access the services provided by the municipality after an emergency?
- How does the municipality's plan to distribute resources in the aftermath of a disaster provide for accessible communications at the points of distribution where resources are distributed?
- How can you use social media such as Facebook and Twitter to reach various groups in your community?
- Does the municipality's evacuation planning address the needs of people with disabilities?:
  - With respect to accessible transportation? (For example, are there plans in place to provide special transportation before, during, and after emergencies?);
  - With respect to high-rise evacuation?
- Does the municipality's shelter plans require that shelters be sufficiently accessible, both architecturally and programmatically, to accommodate people with functional needs in an emergency?
  - For example, access to the building, access to facilities within the building;
  - For another example, once an individual has entered the building, how will information be communicated to them?"

This exercise underscores the critical role that municipalities play in emergency planning and communications, as well as the support that the state can provide in the form of guidance and information.

#### **IV. Recommendations and Action Plans**

Perhaps the most important action item recommended by the Task Force is to continue meeting to plan and implement methods by which to accomplish the group's primary goal of enhancing communications with Connecticut's diverse population, particularly with non-English speakers and individuals with disabilities or other functional needs. As described in the Executive Summary, the infrastructure to continue and enhance these meetings is already in place through the DEMHS Statewide Advisory Council and the State Response Framework (SRF.) At the national, state, and local levels, under the National Incident Management System (NIMS), Emergency Support Functions (ESF) are an excellent means to develop integrated, coordinated planning by providing a structure through which subject matter experts within a particular discipline can collaborate. With the Governor's support after the recent severe storms, DEMHS established both ESF policy working groups under the Advisory Council and ESF Task Forces to assist the Governor's Unified Command in times of emergency. The Governor's Emergency Communications Task Force can be continued as the ESF 15 External Affairs Working Group, and can provide representatives as needed to support an ESF 15 Task Force during emergencies. By continuing to work with public and private partners, including radio, television, and other media outlets, the networking established by the Governor's Emergency Communications Task Force will enhance communications flow to all residents of Connecticut in times of crisis.

Another overall Task Force recommendation is to emphasize the Governor's message of "Check on your neighbor" both through state messaging and at the local level. The Task Force recognizes that everyone is a partner in emergency preparedness, and that community resiliency can be increased when everyone takes on a role. As part of this community involvement, the Task Force recommends the continued establishment of volunteer Community Emergency Response Teams (CERT), particularly those that focus on different languages, cultures, or functional needs.

The Task Force also recommends increasing the visibility and content of the State's existing preparedness website. Currently, the State has a hurricane preparedness website, and often sets up disaster-specific web sites as needed. The State's enhanced preparedness web site should be simple to navigate with information on what to do in the event of disaster or emergency, and with basic fact sheets or FAQs available in the state's top 10 most spoken languages other than English. Information could be provided in audio formats for those individuals who are blind or visually impaired and pre-recorded video American Sign Language interpretation for people who are deaf and/or hard of hearing. The Task Force recommends an additional section dedicated to disaster-related information for members of the special needs community with other physical disabilities.

Finally, enhanced emphasis on the 2-1-1 Infoline as a 24/7 multilingual resource, either online or by phone for emergency preparation information and disaster assistance information, will provide a recognizable means of information sharing with diverse communities. One of the national 2-1-1 tag lines is “*Get Connected. Get Answers.*” This could be customized for emergency/disaster focus with the messaging that will be developed. The 2-1-1 system can build on its role as the go-to (easy to remember) number/website for streamlined access to information and support before, during, and after emergencies.

The remaining Task Force recommendations can be broadly divided into the following three categories:

- Addressing Language and Cultural Differences
- Enhancing Planning and Communications with Functional Needs Communities
- Encouraging Self-Reliance and Preparedness

#### **A. Addressing Language and Cultural Differences**

Many recent studies, including a 2008 report by the University of Toronto, indicate that nearly all non-English/Spanish speakers depend on local “trusted sources” to gain information in emergency situations. Such trusted sources may include places of worship, community organizations, ethnic food markets, barber shops and hair salons, public libraries, social and cultural clubs and organizations, community centers, and day care providers. Flyers and other printed resources and local radio often reach these non-English/Spanish speaking communities effectively in non-emergency times, which will assist in developing resiliency and personal participation in pre-disaster preparation. For local messaging during emergencies, simple visual signage in different languages is recommended. General preparedness messages, including “Check on your neighbor,” should be disseminated in a variety of languages.

This need to collaborate with neighborhood and faith-based organizations in order to bring emergency messaging to the places where people of different cultures are most likely to congregate can be done through, among other methods: state agencies that work with the organizations; CT Volunteer Organizations Active in Disaster (VOAD); municipal emergency management, first responders and public health, and state media.



Identifying community leaders and volunteers for the creation of community teams [such as Community Emergency Response Teams (CERTs)] and providing training in physical spaces that are familiar would reinforce the “Check on Your Neighbor” message as well as to enhance the ability to answer questions and maintain printed material that is relevant to the local community. The ethnic media is a key partner in reaching out to neighborhood organizations. Localizing outreach will increase messaging to as many residents as possible.

An important tool is to develop and maintain a list of ethnic and culturally diverse media in all forms (e.g., print, radio, and television) in advance of emergencies, and provide them with access to information and possible resources. Most are equipped to translate quickly, and thus this communications flow is vital.

Low-power radio stations, church, mosque or temple bulletins, community newsletters, rural weeklies, regular messages from neighborhood associations, and targeted diverse and varied media are important tools to complement the information provided by major ethnic and English-speaking media, the major dailies or mainstream online aggregators. There is also wide usage of streamed internet radio from countries of origin – it would be useful to investigate whether there are ways to access those during times of emergency. Municipalities and state agencies can be encouraged to know and work collaboratively with *all* available media in emergency situations.

Recognizing that Spanish is the next major language in Connecticut after English, the Task Force recommends a pilot program of translation services with regard to preparing for an upcoming potential severe storm, as well as providing information during and after the storm. The Task Force sees a benefit in using certified translation services rather than computer-generated translation systems that often provide imprecise or inaccurate translations. In terms of language accessibility, the ability to find information about *where to go* for language translation may be more feasible than directly providing translation on the screen. Using the resources and knowledge of the state’s varied network of ethnic media may be helpful to determine how to implement this recommendation.

Since the establishment of this Task Force, in coordination with the CT Broadcaster’s Association, CT-N has met with television and radio engineers to investigate methods for widespread distribution of video and audio feeds from the Emergency Operations Center during state emergencies. Attendees in the meeting included engineering staff from at least 15 television and radio stations in the state. The goals for the meeting were: 1) to inform all radio and television broadcasters of the production elements being provided under the CT-N pool arrangements, 2) to brainstorm options for distribution of

video and audio during state emergencies and 3) to discuss technical options for creating live Spanish language translation during emergency briefings.

A follow-up conference call meeting was held on Wednesday, July 16, 2014, which included representatives from AT&T, Connecticut Broadcasters Association, the Connecticut Network (CT-N) and television broadcast engineers from several television stations. The goal for the meeting was to reach consensus on the most effective method for distributing CT-N pool feeds to all broadcasters. A letter is being drafted that can be sent to the Connecticut television station General Managers outlining the need, detailing the opportunity, and encouraging stations to authorize the expenditure necessary to connect to the new digital switch which CT-N is installing.

Upon completion of a transition to the new digital HD video switch, it is anticipated that CT-N will provide a live video and audio feed with closed captioning of all emergency briefing occurring in the Emergency Operation Center in Hartford. All television broadcast television stations that decide to connect to the AT&T digital video switch will have direct access to all events covered by CT-N. Radio stations may simulcast the telecast by accessing the audio portion from broadcasters, on cable from CT-N or through the live web-stream. CT-N can provide any media outlet with the required embed code necessary to simulcast the CT-N video web on their website, thereby greatly increasing the reach of these briefings beyond the traditional media outlets.

In addition, CT-N can work with United Way 2-1-1 to explore the possibility of using the 211 translating service to listen to and translate live feeds.

## **B. Enhancing Planning and Communications with Functional Needs Communities**

As indicated by the above summary of this year's statewide exercise, state and local officials are working in partnership with functional needs groups to address issues related to emergency preparedness, response, and recovery, including communications planning and implementation. Members of the functional needs community must be included in planning at the state and local levels.

The Task Force recognizes that identifying the number and type of functional needs present in any one community can be a difficult task. Disseminating generalized information regarding the number of individuals who may need assistance in an emergency may help to make others feel more comfortable to self-identify for the limited

purpose of emergency preparedness and response. Municipal officials must be supported by state and private partners to help identify the populations they serve. For example, state utilities can continue the practice of proactive outreach to customers that rely on medical equipment, with an immediate referral to the Red Cross if they need assistance during an extended outage.

Many people use television as the main source of news in emergency situations. Assuring that these broadcasts can reach as many people as possible is important. Sign language interpreters, closed captioning and rolling banners are necessary for certain residents.

#### **Sign Language Interpreter During Emergencies**

The state has committed to having a sign language interpreter at the State EOC for every Governor's press conference during an emergency activation. It is also anticipated that CT-N's transition to High Definition will include the capacity for a second camera feed to be isolated on the sign language interpreter and inserted onto the screen in a secondary video window.

As described earlier, a strong set of visual images, graphics, aids and tools that are used consistently to communicate with the public various kinds of emergency situations, along with directions on how to respond safely, would be extremely helpful. The use of common visual elements removes most communication barriers – with the exception of individuals with visual impairment. An example of a common visual element is the use of an exclamation point to emphasize the critical nature of a message. See, for example, the CL&P scam alert card in Appendix E.

The ever-increasing methods of communication must also be utilized to their best advantage. Cell phones and other mobile devices are currently used to send weather and flood alerts: expanding that system to include other kinds of emergency messages would be a way to reach people who do not regularly access television or radio. Social media provides additional avenues of communication with the public.

When other means of communication are not available or are down because of the disaster, a simple, battery-powered or crank radio may be the best means of public messaging. It is important to include organizations like the Connecticut Radio Information Service (CRIS) in any dissemination plan.

Just as neighborhood and faith-based organizations can assist in planning, preparedness and response activities, reaching out to associations related to particular functional needs (e.g., CT Association of Nonprofits, CT Community Providers Association, Community Health Center Association of CT, the CT Association of Healthcare at Home, Brain Injury Association) will increase awareness and provide yet another means of communicating with specific groups of Connecticut residents.

### C. Encouraging Self-Reliance and Preparedness

The experiences of the last few years have taught us that although federal, state, local and private sector partners can and will provide aid to residents in disasters, there is also a need for people to plan and prepare for the next inevitable emergency. For persons with language barriers or functional needs, this may be particularly important.

Public preparedness messaging is key. The Task Force recommends using existing methods of communication to send information about preparedness that is geared toward those with functional needs and language challenges, including inserts in utility bills, cable bills, and notifications from state agencies such as Department of Social Service, Department of Children and Families, Department of Revenue Services, and Department of Motor Vehicles. One possible tool could be a what-to-do-in-emergencies wallet-card, distributed through paper or electronic utility bills. This card would be consistent in language and design with the overall messaging. This would encourage people to talk about preparedness with family, and if it included a request to encourage your neighbors to fill out their cards, it would reinforce the “Check on Your Neighbors” message.

At the local, state and federal level, emergency management professionals have consistently encouraged preparedness, including recommendations about having a basic home emergency kit (water, flashlights, batteries, first aid kit, etc.). See, for example, [www.ready.gov](http://www.ready.gov). It is sometimes a challenge to get people to think more proactively about emergencies, but is particularly important for people who may need special accommodations like refrigeration for medicine, power for medical equipment, etc. Working with neighborhood groups may help to bring this important message home.

CT DEMHS, in collaboration with FEMA and local school districts, administer a program known as “STEP” or Student Tools for Emergency Planning. See [www.fema.gov/student-tools-emergency-planning-step](http://www.fema.gov/student-tools-emergency-planning-step). The STEP program provides sixth graders with preparedness messaging and basic tools and educates, encourages, and empowers them to take an active, if not leadership, role in their family’s emergency preparations. Expansion of this or a similar program may be particularly helpful in immigrant and refugee communities where children may already act as cultural brokers for their older family members. The program can include having students create a “safety kit” of what they might need in case of an emergency while they are at school, or create a communication tool for their families to use in case of emergencies. A homework assignment could be to make a list for an “emergency preparation kit” for their family home.

## V. Conclusion

As the previous sections demonstrate, the Task Force realizes both the importance and the challenge of its mission. Many strategies and partners are necessary to address these communications issues and to effect change that is personal, cultural and institutional. These recommendations represent a significant starting point, and the continuation of this Task Force will ensure that this work will also continue.

The best emergency preparedness message is one that is positive, personal, responsible, compassionate, and realistic, rather than one that uses fear to motivate. Or, as someone who lived along the coast during Storm Sandy said, “I’m not ever leaving... at least not until my neighbor does.” Peer pressure can be a powerful motivating tool.

## **APPENDIX A: List of Task Force Members and Contributors**

### Chair:

Dr. Dora B. Schriro, *Commissioner, Emergency Services and Public Protection (DESPP)*

### Co-Chairs:

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Bob Labanara, *CT Conference of Municipalities*

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Mike Varney, *DESPP*

*Special thanks to Eric Scoville and Ken Dumais of DESPP/DEMHS for their technical assistance in the creation of this report.*

## APPENDIX B: Languages Spoken in Connecticut

\*Source: U.S. Census Bureau, 2010- 2012 American Community Survey

| Language Spoken in CT            | Estimate  | Margin of Error |
|----------------------------------|-----------|-----------------|
| Total                            | 3,387,266 | +/-264          |
| Speak only English               | 2,656,183 | +/-7,612        |
| Spanish or Spanish Creole:       | 368,384   | +/-3,964        |
| Polish:                          | 39,357    | +/-2,333        |
| Portuguese or Portuguese Creole: | 37,426    | +/-3,148        |
| Italian:                         | 36,507    | +/-2,107        |
| French (incl. Patois, Cajun):    | 35,163    | +/-2,412        |
| Chinese:                         | 27,043    | +/-1,897        |
| Other Indo-European languages:   | 14,363    | +/-2,347        |
| Asian languages:                 | 14,334    | +/-1,617        |
| French Creole:                   | 13,246    | +/-2,073        |
| Hindi:                           | 12,143    | +/-1,438        |
| Indic languages:                 | 12,020    | +/-1,680        |
| German:                          | 11,438    | +/-1,094        |
| Russian:                         | 11,359    | +/-1,555        |
| Arabic:                          | 10,578    | +/-2,095        |
| African languages:               | 9,590     | +/-1,430        |
| Greek:                           | 9,009     | +/-1,260        |
| Tagalog:                         | 8,745     | +/-1,230        |
| Vietnamese:                      | 8,471     | +/-1,463        |
| Urdu:                            | 6,638     | +/-1,659        |
| Korean:                          | 6,046     | +/-995          |
| Slavic languages:                | 4,782     | +/-641          |
| Gujarati:                        | 4,582     | +/-973          |
| Serbo-Croatian:                  | 4,212     | +/-1,044        |
| Laotian:                         | 3,674     | +/-899          |
| Japanese:                        | 3,076     | +/-637          |
| Hungarian:                       | 2,726     | +/-568          |
| West Germanic languages:         | 2,493     | +/-605          |
| Mon-Khmer, Cambodian:            | 2,348     | +/-721          |
| Scandinavian languages:          | 2,326     | +/-414          |
| Hebrew:                          | 2,306     | +/-615          |
| Persian:                         | 1,763     | +/-454          |
| Thai:                            | 1,628     | +/-677          |
| Other and unspecified languages: | 1,215     | +/-371          |
| Pacific Island languages:        | 819       | +/-295          |
| Armenian:                        | 713       | +/-297          |
| Yiddish:                         | 337       | +/-199          |
| Native North American languages: | 223       | +/-141          |



**APPENDIX C: CT Office of Policy and Management Demographics Information**

**Table 1: Foreign Born Population**

|   | <b>Estimated Population</b> |
|---|-----------------------------|
| Population born outside the United States | 625,024                     |

Source: 2012 American Community Survey 1-year Estimates, [www.census.gov/acs](http://www.census.gov/acs)

**Table 2: Foreign Languages**

| <b>LANGUAGE SPOKEN AT HOME</b>       | <b>Estimate Population</b> |
|--------------------------------------|----------------------------|
| Population 5 years of age and older  | 3,397,277                  |
| English only                         | 2,641,980                  |
| Language other than English          | 755,297                    |
| Speak English less than "very well"  | 288,142                    |
| Spanish                              | 381,942                    |
| Speak English less than "very well"  | 158,059                    |
| Other Indo-European languages        | 260,515                    |
| Speak English less than "very well"  | 84,834                     |
| Asian and Pacific Islander languages | 77,976                     |
| Speak English less than "very well"  | 34,280                     |
| Other languages                      | 34,864                     |
| Speak English less than "very well"  | 10,969                     |

Source: 2012 American Community Survey 1-year Estimates, [www.census.gov/acs](http://www.census.gov/acs)

**Additional Disability Information from OPM:**

**Blindness** - there are **10,751** people in Connecticut on the BESB (Bureau of Education and Services for the Blind) blind registry. These individuals are legally blind (vision of 20/200 or vision with a very restricted field).

**Deaf and Hard of Hearing**: Department of Rehabilitation Services (DORS) provided the following information, for a total of approximately **32,340** with a hearing impairment.

| Deaf and Hard of Hearing (HOH) (no breakdown) | # Deaf consumers who rely on visual communication | # of HOH or Oral Deaf Consumers | # of Deaf Blind consumers |
|---|---|---------------------------------|---------------------------|
| 1057  | 11479   | 19503                           | 301                       |

**Telephone Communications:**

Based on a recent article in the New London Day, one third of households have a traditional phone service. However, this may not include the number of people who have telephone service through their cable provider.

## APPENDIX D: Public Health Medicare Demographics from Federal Health and Human Services Assistant Secretary for Preparedness and Response

### LOOKBACK REFERENCE DATES

| Specification         | Date Range                  |
|-----------------------|-----------------------------|
| 90 Day lookback Range | Jul 20, 2013 - Oct 18, 2013 |
| 1 Year Lookback Range | Oct 18, 2012 - Oct 18, 2013 |
| 3 Year Lookback Range | Oct 18, 2010 - Oct 18, 2013 |

### SUMMARY COUNTS

| State | Number of Medicare Beneficiaries | # ESRD (90-day lookback) | # Ventilator (1-year lookback) | # Concentrator (36-mo lookback) | # Enteral Feeding (1-year lookback) |
|-------|----------------------------------|--------------------------|--------------------------------|---------------------------------|-------------------------------------|
| CT    | 404,800                          | 2,883                    | 1,096                          | 11,676                          | 585                                 |

### METHODOLOGY OVERVIEW

Medicare population is restricted to alive beneficiaries as of September 1, 2013 who are enrolled in Medicare Fee for Service (FFS) parts A and B.

### NOTES

All cells with counts with cells from 1-10 have been replaced with 11. □

Ventilator, concentrator, and enteral feeding users are included in counts only if they are not residing in a nursing home.

Summary counts on the Overview Tab reflect the actual number of Medicare beneficiaries living in each zip code. That is, if a zip code included only one Medicare beneficiary we would include in the summary counts only one individual and not the masked [11 replacement] count.

### DATA DESCRIPTION

**End-Stage Renal Disease (ESRD)—Dialysis—Facility & At-Home DME Data:** This data is comprised of all Medicare FFS beneficiaries that have been identified as having received dialysis treatment in an outpatient facility or using at-home dialysis DME in the past 90 days. Please note that Medicare requires all ESRD patients that use at-home dialysis DME to also identify a dialysis facility where they can obtain dialysis at should their equipment not function.

**Oxygen Durable Medical Equipment (DME) Data:** This data is comprised of Medicare FFS beneficiaries that have been identified as living at home (i.e. not a LTC/nursing home) and having either an oxygen concentrator or a ventilator. The reimbursement cap period (look back) for oxygen concentrators is 36-months and 12 months for ventilators.

**Additional Oxygen DME Information:**

An **Oxygen concentrator** extracts and concentrates oxygen from the air and delivers it to the patient via tubes or masks. Concentrators may be used to provide life-maintaining/saving oxygen 24-7 or in some cases are used during different periods of a day to provide supplemental oxygen required for certain respiratory conditions.

A **Ventilator** provides life-maintaining/saving oxygen for an individual 24-7.

**Enteral Feeding DME Data:** This data is comprised of all Medicare FFS beneficiaries that have been identified as living at home (i.e. not a LTC/nursing home) and using at-home enteral feeding DME. The reimbursement cap period (look back) for enteral feeding DME is 12 months.

**Additional Enteral Feeding DME Information:**

An **enteral feeding** tube is a medical device used to provide nutrition to patients who cannot obtain nutrition by mouth, are unable to swallow safely, or need nutritional supplementation. □

**APPENDIX E—Best Practice Examples**

**Figure 1**

**Examples of Multilingual Instructional Guides:**

**Haga decisiones saludables en su selección de pescado**  
 Utilice esta tabla para obtener los beneficios de comer pescado y reducir el riesgo de exposición a químicos  
**Una guía para las mujeres y los niños**

| Consuma 2 comidas a la semana de:   | Consuma 1 comida a la semana de:   | Evite  |
|---|--|--|
| Salmón (salvaje) ♥<br>Trucha ♥<br>Caballa de Atlántico ♥<br>Lenguado y platija ♥<br>Pescadilla ♥<br>Perca<br>Bacalao<br>Abadejo<br>Tilapia<br>Arenque<br>Atún ligero (enlatado) | Salmón (de granja)<br>Hipogloso<br>Filete de atún<br>Atún blanco (enlatado)<br>Pargo rojo<br>Siluro (degranja) | Pez espada<br>Tiburón<br>Lubina rayada<br>Azulejo<br>Caballa rey |

**Mariscos:**  
 ostra  
 camarón  
 almeja  
 ostiones  
 lagosta

Departamento de Salud Pública de Connecticut  
 Llame gratis al 1-877-458-FISH (3474)      Sitio web: [www.ct.gov/dph/fish](http://www.ct.gov/dph/fish)  
 Los pescados con los corazones ♥ pueden ser comidos más que dos veces a la semana.

---

**MAKE HEALTHY FISH CHOICES**  
 Use this chart to get the benefits from eating fish and reduce the risk to chemicals  
**A Guide for Women & Children**

| Eat 2 meals a week:  | Eat one meal a week:   | AVOID:  |
|--|--|---|
| Atlantic Mackerel ♥<br>Salmon (wild) ♥<br>Flounder ♥<br>Light Tuna (canned)<br>Haddock<br>Herring<br>Cod<br>Perch<br>Tilapia | Halibut<br>Catfish (farm-raised)<br>Red Snapper<br>Salmon (farm-raised)<br>Tuna Steak<br>White Tuna (canned) | King Mackerel<br>Shark<br>Striped Bass<br>Swordfish<br>Tilefish |

**SHELLFISH:**  
 Clams  
 Lobsters  
 Oysters  
 Scallops  
 Shrimp

CONNECTICUT DEPARTMENT OF PUBLIC HEALTH  
 Call Toll Free: 1-877-458-FISH (3474)      Website: [www.ct.gov/dph/fish](http://www.ct.gov/dph/fish)  
 Fish with hearts ♥ can be eaten more than twice a week.

Figure 2

Example of Multilingual Informational Planning Guides:

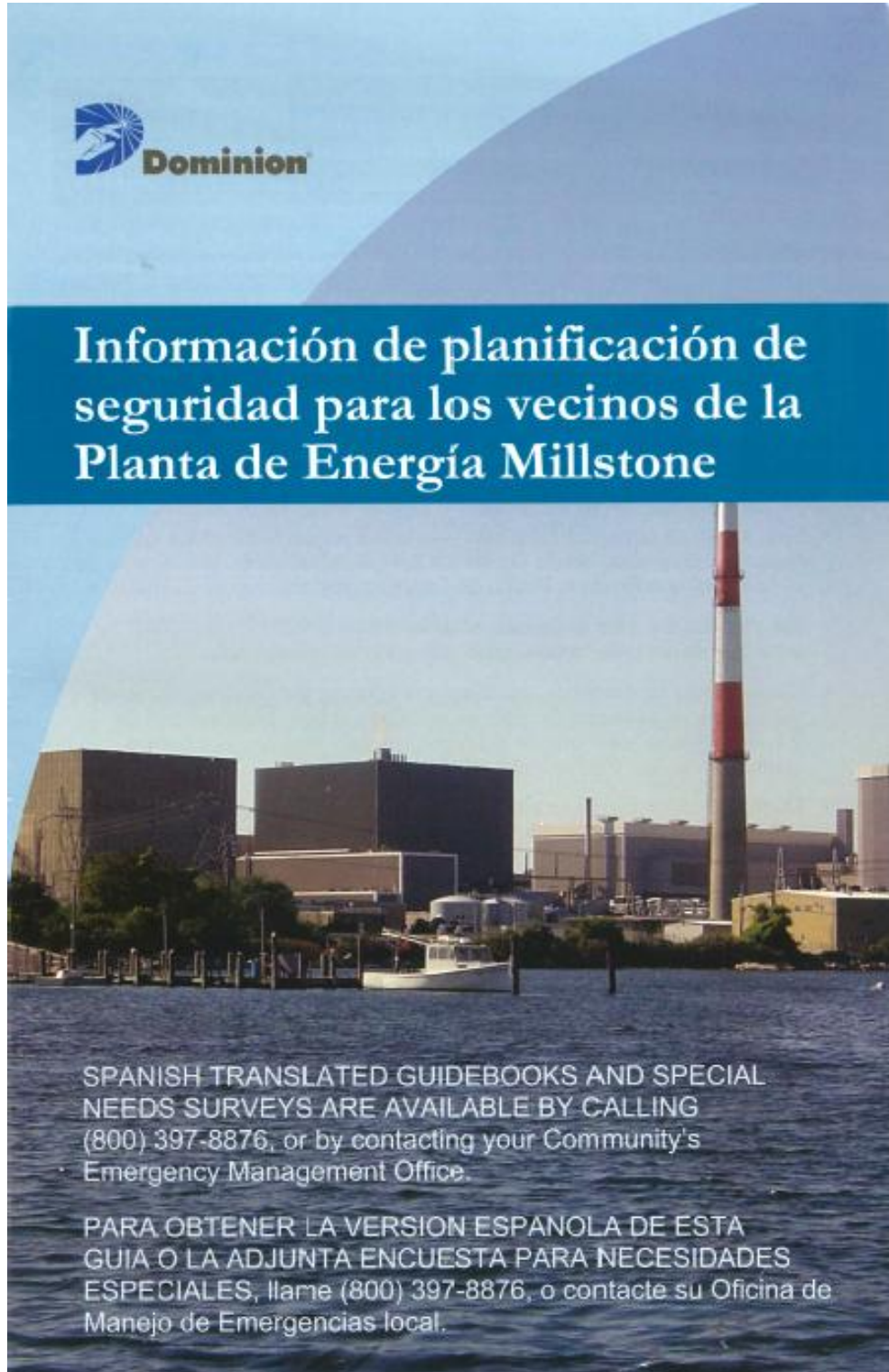


Figure 3

Example of Multilingual Warnings and Important Information:

**Connecticut Light & Power**  
A Northeast Utilities Company

**IMPORTANT INFORMATION!**

Connecticut Light & Power (CL&P) has received reports of people knocking on residents' doors claiming to be from the company, asking for bill payment. CL&P is reminding customers to be cautious of visitors claiming to be from the utility company. CL&P does not go door-to-door asking for payment and all employees carry a company-issued photo identification badge.

Customers should remember to:

- Decline any door-to-door request for payment. If the person claims to have a badge, call CL&P directly at **(800) 286-2000** to confirm the person is an employee.
- Never provide payment or personal information such as a utility account number or social security number to any unsolicited visitor.
- Report any scam incident to your local police immediately.

**Informations importantes!**  
Prière de les traduire.

**Información importante.**  
Haga traducir esto.

**Informações importantes!**  
Favor mandar traduzir.

**Informazioni importanti.**  
Farle tradurre.

**Ważna informacja!**  
Prosimy postarać się o jej przekład.

**Thông Tin Quan Trọng!**  
Xin nhờ người phiên dịch thông tin này

重要資訊! 請翻譯。  
重要信息! 請翻譯。

**Enfòmasyon Enpòtan!**  
Tanpri fè tradui sa a.

Figure 4

**Example of Factsheets in Multiple Languages:**

<http://www.kingcounty.gov/healthservices/health/preparedness/disaster.aspx>

**Public Health - Seattle & King County**

You're in: [Public Health home](#) » [Emergency preparedness](#) » [Disaster preparedness](#)

### Disaster preparedness fact sheets and flyers

- [Carbon monoxide fact sheets and flyers](#) (available in multiple languages)
- [Cleaning a house after a flood](#)
- [Cleaning basements after a flood](#)
  - [Chinese](#)
  - [Korean](#)
  - [Russian](#)
  - [Somali](#)
  - [Spanish](#)
  - [Vietnamese](#)
- [Cleaning indoor sewage spills](#)
  - [Chinese](#)
  - [Korean](#)
  - [Russian](#)
  - [Somali](#)
  - [Spanish](#)
  - [Vietnamese](#)
- [Emergency toilets](#)
- [Disinfection of private wells](#)
  - [Chinese](#)

Figure 5

Example Website:

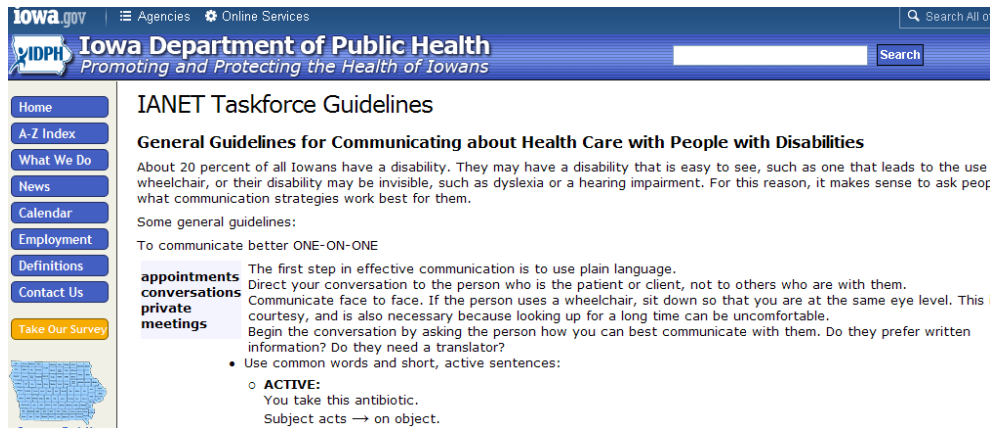
<http://www.utah.gov/beready/index.html>



Figure 6

Examples of Accessibility Tools for Special Needs:

[http://www.idph.state.ia.us/bh/ianet\\_guide1.asp](http://www.idph.state.ia.us/bh/ianet_guide1.asp)



<http://www.co.cameron.tx.us/emergency/deaflink.htm>





## APPENDIX F: Interpreter Services Requested for 9-1-1 Dispatch Calls

| Language       | Number of Calls (March 2013-March 2014) |
|----------------|---|
| Spanish        | 3866                                    |
| Tagalog        | 4                                       |
| Mandarin       | 100                                     |
| French         | 19                                      |
| Arabic         | 27                                      |
| Russian        | 31                                      |
| Farsi          | 3                                       |
| Portuguese     | 106                                     |
| Polish         | 48                                      |
| Turkish        | 6                                       |
| Vietnamese     | 20                                      |
| Italian        | 14                                      |
| Serbian        | 1                                       |
| Haitian Creole | 12                                      |
| Cantonese      | 6                                       |
| Amharic        | 1                                       |
| Hindi          | 4                                       |
| Albanian       | 8                                       |
| Swahili        | 6                                       |
| Tigrinya       | 5                                       |
| Korean         | 10                                      |
| Gujarati       | 1                                       |
| Urdu           | 7                                       |
| Hmong          | 1                                       |
| Hungarian      | 3                                       |
| Bulgarian      | 2                                       |
| Sinhalese      | 1                                       |
| Laotian        | 3                                       |
| Karen          | 1                                       |
| Susu           | 1                                       |
| Akan           | 2                                       |
| Serbian        | 1                                       |
| Greek          | 1                                       |
| Japanese       | 2                                       |
| Thai           | 3                                       |
| Cambodian      | 3                                       |
| Dutch          | 1                                       |

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|                 |             |
|-----------------|-------------|
| Bosnian         | 1           |
| French Canadian | 1           |
| Chin            | 1           |
| Mandingo        | 1           |
| <b>TOTAL</b>    | <b>4334</b> |

**APPENDIX G: United Way Language Line Analysis**

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**United Way of Connecticut Language Line Analysis**

**Number of Calls By Program and Language**

July 2012 - June 2013

|                | 211   | C4K   | CDI | Child Care | EBT | EMPS | Financial Stability | FS Waterbury | HUSKY | MedConn | Totals |
|----------------|-------|-------|-----|------------|-----|------|---------------------|--------------|-------|---------|--------|
| Spanish        | 5,125 | 1,439 | 119 | 121        | 438 | 165  | 294                 | 27           | 1,371 | 2       | 9,101  |
| Portuguese     | 19    | 113   | 14  | 6          | 5   | 2    |                     |              | 31    |         | 190    |
| Haitian Creole | 7     | 74    | 3   |            |     |      |                     |              | 3     |         | 87     |
| French         | 9     | 33    | 3   | 1          |     |      |                     |              | 2     |         | 48     |
| Arabic         | 17    | 7     | 13  | 2          |     | 2    |                     |              | 5     |         | 46     |
| Albanian       | 18    | 10    | 1   | 1          |     |      |                     |              | 7     |         | 37     |
| Mandarin       | 8     | 8     | 7   |            |     | 1    |                     |              | 2     |         | 26     |
| Vietnamese     | 8     | 2     | 1   |            | 2   | 1    | 3                   |              | 9     |         | 26     |
| Urdu           | 5     | 6     | 2   | 2          |     |      |                     |              | 7     |         | 22     |
| Polish         | 5     | 4     | 1   |            | 1   |      |                     |              | 9     |         | 20     |
| Swahili        | 12    | 5     |     | 1          |     | 1    |                     |              |       |         | 19     |
| Turkish        |       | 14    |     |            | 1   |      |                     |              | 1     |         | 16     |
| Karen          | 2     | 6     | 4   |            |     |      |                     |              |       |         | 12     |
| Hindi          | 4     | 1     | 1   |            |     |      |                     |              | 4     |         | 10     |
| Bengali        | 2     | 1     | 3   |            |     |      |                     |              | 2     |         | 8      |
| Italian        | 4     | 2     | 1   |            |     | 1    |                     |              |       |         | 8      |
| Cantonese      | 2     |       |     |            |     | 1    |                     |              | 4     |         | 7      |

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|                    |              |              |            |            |            |            |            |           |              |          |              |
|--------------------|--------------|--------------|------------|------------|------------|------------|------------|-----------|--------------|----------|--------------|
| Farsi              | 1            | 4            |            |            |            |            |            |           | 1            |          | 6            |
| Korean             | 2            |              |            |            | 1          | 2          |            |           | 1            |          | 6            |
| Russian            |              |              | 3          |            |            |            |            |           | 2            |          | 5            |
| Gujarati           |              | 1            |            |            |            |            |            |           | 3            |          | 4            |
| Somali             | 1            | 1            | 2          |            |            |            |            |           |              |          | 4            |
| Bosnian            | 1            | 1            |            |            |            |            |            |           | 1            |          | 3            |
| Cambodian          | 1            | 2            |            |            |            |            |            |           |              |          | 3            |
| Hmong              |              |              |            |            |            |            |            |           | 3            |          | 3            |
| Nepali             | 1            | 1            | 1          |            |            |            |            |           |              |          | 3            |
| Ukrainian          |              |              | 1          |            |            |            |            |           | 2            |          | 3            |
| Bulgarian          | 2            |              |            |            |            |            |            |           |              |          | 2            |
| Japanese           |              | 2            |            |            |            |            |            |           |              |          | 2            |
| Mongolian          |              |              | 1          |            |            |            |            |           | 1            |          | 2            |
| Thai               |              |              | 1          |            |            |            |            |           | 1            |          | 2            |
| Akan               | 1            |              |            |            |            |            |            |           |              |          | 1            |
| Amharic            |              | 1            |            |            |            |            |            |           |              |          | 1            |
| Burmese            |              |              |            |            |            |            |            |           | 1            |          | 1            |
| Croatian           | 1            |              |            |            |            |            |            |           |              |          | 1            |
| German             | 1            |              |            |            |            |            |            |           |              |          | 1            |
| Greek              |              |              |            |            |            |            |            |           | 1            |          | 1            |
| Patois             |              | 1            |            |            |            |            |            |           |              |          | 1            |
| Punjabi            | 1            |              |            |            |            |            |            |           |              |          | 1            |
| Romanian           |              |              |            |            |            |            |            |           | 1            |          | 1            |
| Serbian            |              |              | 1          |            |            |            |            |           |              |          | 1            |
| Tibetan            |              |              | 1          |            |            |            |            |           |              |          | 1            |
| Tigrinya           | 1            |              |            |            |            |            |            |           |              |          | 1            |
| <b>Grand Total</b> | <b>5,261</b> | <b>1,739</b> | <b>184</b> | <b>134</b> | <b>448</b> | <b>176</b> | <b>297</b> | <b>27</b> | <b>1,475</b> | <b>2</b> | <b>9,743</b> |