

# Public Health Administrators' Perceptions of Community Diversity as Predictors to implement CLAS Standards (Culturally and Linguistically Appropriate Services) in Kentucky's Local Health Departments

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## Background

- The Centers for Disease Control and Prevention (CDC) clearly states the evidence that race and ethnicity correlates with persistent health disparities and addressing these inequalities must become a national priority.
- Health disparities and the burden of disease and death rates are higher among African Americans, Hispanics or Latinos, American Indians/ Alaska Natives, and Native Hawaiians and Other Pacific Islanders than the general United States population.
- The field of Cultural and Linguistic Competency in the public health system has gained national attention and has emerged as a strategy to eliminate racial and ethnic disparities by improving: access to and quality of health care, patient-provider communication, and health outcomes.

## Population Diversity

The growing population diversity in the US (2010 U.S. Census Bureau), poses major challenges in the provision of health care and public health services:

- The Hispanic and Asian populations grew fastest during the past decade in the U.S. (43% increase both).
- Hispanic population alone increased from 35.3 million in 2000 to 50.5 million in 2010.
- In Kentucky the Hispanic population grew more than 100% during the past decade (from 60,000 to 133,000).
- Hence, it is imperative for Local Health Departments (LHDs) to respond to the needs of the community, by incorporating effective cultural and linguistic competency policies.



## Research Objectives

- To assess public health administrators' perceptions of community diversity as predictors to implement CLAS services in Local Health Departments (LHDs) in Kentucky.
- Provide policy recommendations for program development to address the needs of diverse communities.

## Significance

- Strong evidence suggests that culturally competent care is the foundation to eliminate racial and ethnic health disparities (Brach & Fraser, 2000; Goode, et al., 2006; Betancourt et al., 2006).
- Adherence to Public Health Accreditation Board (PHAB) standards for the delivery of quality services as related to culturally and linguistically relevant approaches in the public health system. (Public Health Accreditation Board, 2009).

## Research Question

**Does the local health department administrator's perception of community population diversity predict the type of culturally and linguistically competent public health services?**

## Null Hypothesis Tested

*Local health department administrators' perception of community diversity does not predict the type of culturally and linguistically competent public health services.*



## Methodology

- Cross-sectional survey.
- Instrument: Self-Assessment Tool for CLAS Services in Local Public Health Agencies (USDHH).
- Study participants: Public health directors, Nurse Leaders, and Health Educators serving local health departments in Kentucky across 56 counties.
- Variables of interest: 1) Cultural competency training to staff; 2) Public health services offered to non-English Speaking clients.
- Community diversity examined: Hispanics, African Americans.

### Data analysis:

- Public health administrators estimated the percentage of the diverse population they serve. Scores from 1 to 11 were given to estimated percentages (perceived diversity score).
- Logistic regression was used to assess whether a dichotomous outcome (example: a culturally and linguistically competent public health service being performed) was predicted by a numeric variable (example: perceived diversity score).

Table 1: Demographic Characteristics Local health departments' administrators (n=106)

Variable	Public Health Director	Nurse Leader	Program Manager
	N = 35	N = 39	N = 32
Gender			
Male	14 (40%)	0	3 (9%)
Female	21 (60%)	39 (100%)	29 (91%)
Race Composition			
White	32 (91%)	37 (94%)	30 (94%)
African American	1 (3%)	1 (3%)	0
American Indian/Alaska Native	1 (3%)	0	1 (3%)
Asian	0	1 (3%)	0
Native Hawaiian/Pacific Islander	0	0	0
Hispanic Origin (Ethnicity)	1 (3%)	0	1 (3%)
Age Range			
28-30	0	0	2 (6%)
31-40	6 (17%)	9 (23%)	12 (37%)
41-50	13 (37%)	18 (46%)	5 (15%)
51-60	13 (37%)	10 (26%)	10 (30%)
61 or over	3 (9%)	2 (5%)	3 (9%)
Educational Status			
High School	1 (3%)	0	0
Some College	0	0	0
Associate Degree	1 (3%)	14 (36%)	1 (3%)
College Degree	12 (35%)	8 (21%)	17 (53%)
Registered Nurse	2 (6%)	6 (15%)	2 (6%)
Master's Degree	16 (46%)	8 (21%)	9 (28%)
Doctoral Degree	1 (3%)	1 (3%)	0
Professional Degree (Nurse Practitioner, MD, JD)	0	2 (6%)	2 (6%)
Other	2 (6%)	0	1 (3%)
Years working in Public Health			
Less than one year	2 (6%)	0	0
1-2 years	2 (6%)	1 (3%)	3 (9%)
3-4 years	2 (6%)	1 (3%)	2 (6%)
5-9 years	5 (15%)	5 (13%)	11 (33%)
10 years or more	23 (68%)	32 (82%)	16 (49%)
Missing answer	1 (3%)		

Table 2: Demographic Characteristics Local health departments' administrators (n=106)

Dependent Variable	Independent Variable	Director	Nurse	Program Manager
CLAS Services	Perceived Population Diversity	p value	p value	p value
Training provided by lecturers and experts	Hispanic	p=.537	p=.420	p=.266
Conferences	Hispanic	p=.765	p=.854	p=.165
Online training	Hispanic	p=.910	p=.026* (B=-.986)	p=.301
Academia partners	Hispanic	p=.815	p=.778	p=.647

Technique: Logistic Regression  
Cultural competency staff training in relation to perceived population diversity was significant associated with the Hispanic population.

Table 3: Public health services to address services for non-English Speaking clients in relation to perceived population diversity.

Dependent Variable	Independent Variable	Director	Nurse	Program Manager
CLC Practice	Population Diversity	P value	P value	P value
Bilingual/bicultural staff	Hispanic	p=.024 (B=1.52)	p=.017 (B=.779)	p=.126
Provide Translation services	Hispanic	p=.612	p=.030 (B=.710)	p=.799
Hire interpreters	Hispanic	p=.009 (B=2.714)	p=.007 (B=1.255)	p=.154
Use telephone interpretation services	Hispanic	p=.138	p=.277	p=.381
Train staff	Hispanic	p=.951	p=.057 (B=.574)	p=.602
Bilingual signage	Hispanic	p=.248	p=.071** (B=.526)	p=.578
Media in languages other than English	Hispanic	p=.147	p=.041 (B=.687)	p=.230

Technique: Logistic Regression.  
Services for non-English speaking clients in relation to perceived population diversity were significant associated with the Hispanic population.  
\*\*P value .071 shows a trend toward statistically significant association.

Table 4: Practices to address services for patients with low literacy skills and patients with disabilities, in relation to perceived African American population makeup

Dependent Variable	Independent Variable	Director	Nurse	Program Manager
Cultural and Linguistic Competency Practice	Population Diversity	P value	P value	P value
Print materials in easy-to-read low-literacy picture and symbol formats	African Americans	p=.646	p=.985	p=.640
Materials in alternative formats (audiotape, Braille, enlarged print)	African Americans	p=.873	p=.478	p=.096* B=.643
Approaches to share information with individuals who experience cognitive disabilities	African Americans	p=.972	p=.346	p=.828
Signage	African Americans	p=.846	p=.752	p=.662

Technique: Logistic Regression  
\*p value = .096 shows a trend toward statistically significant association.

## Limitations of the Study

- Self-reported survey
- Assessment was conducted by interviewing solely LHDs administrators. Participation of the entire staff would improve results.

## Results

- Public health administrators invited to participate: 159
- Survey Response Rate: 67%
- Total Participants: 106.
- Public Health Directors: 35
- Nurse Leaders: 39
- Program Managers: 32

### Hispanic population

- A statistically significant association was found between Nurse-perceived Hispanic population makeup and utilization or implementation of cultural competency online training tools and web resources (p=.026). **See Table 2.**

- Various CLAS Public health services related to serve the non-English speaking population were statistically significant associated with the perception of the Hispanic population as follows, see **Table 3:**

- Employing/contracting bilingual/bicultural staff (p=.024 public health directors; p=.017 nurses).
- Spanish translations services (p=.030 nurse leaders)
- Hiring interpreters (p=.009 public health directors, p=.007 nurses); and
- Ethnic media advertisements (p=.041 nurses).

### African American population

- There is a trend toward a significant association between Program Manager-perceived African American population makeup and availability of materials in alternative format, with such materials more often available when program managers perceive African American population makeup was larger (p=.096). **See Table 4.**



## Implications for Policy and Public Health Practice

- Public Health services should be delivered effectively based on the needs of culturally diverse groups, including but not limited to ethnic and racial minorities, persons with low-literacy skills, limited English proficiency (LEP) patients, and rural residents. In addition, special groups such as gays, lesbians, transgender, and persons with disabilities are to be considered.
- The implementation of CLAS practices would facilitate agencies to comply with federal regulations (Title VI of the Civil Rights Act).
- The practices of CLAS standards and the promotion of diversity in the public health workforce may allow state and local health departments to adhere to the National Public Health Accreditation Board (PHAB) for ensuring a culturally and linguistically competent public health system.

## Conclusions

- Local health departments' administrators across Kentucky have initiated and have implemented policies that comply with the CLAS Standards to address the need of the growing population diversity in the state.
- Nurses may be more likely to implement or rely on online training tools in response to a large Hispanic population makeup than Directors and Program Managers.
- The role of the Nurse in local health departments is more likely to impact and influence decision making regarding CLAS practices, due to the various statistically significant results.

*Acknowledgments: This study was supported by the Kentucky Department for Public Health Office of Health Equity.*