



Guidelines for Developing Traffic Safety Educational Materials for Spanish-Speaking Audiences



Developed by the
Educación de seguridad en el tránsito/Education in Traffic Safety project,
Education Development Center, Inc.

With funding from
AAA Foundation for Traffic Safety
FIA Foundation for the Automobile and Society
National Highway Traffic Safety Administration



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Web site URLs: All Web site URLs were verified at printing time. However, Web sites are continually changed and updated. If a URL does not work, please use your Web browser to search for the resource.

The Project and Authors

Guidelines for Developing Traffic Safety Educational Materials for Spanish-Speaking Audiences was developed as part of *Educación de seguridad en el tránsito/Education in Traffic Safety (EST)*, a two-year project conducted by Education Development Center, Inc. (EDC), in Newton, Massachusetts. EST's goal was to foster the development of effective traffic safety educational materials to serve the growing Spanish-speaking population in the United States.

The objectives of the project were to:

- Collect and describe existing Spanish-language traffic safety educational materials
- Develop these guidelines for creating culturally and linguistically appropriate educational materials for Latinos (this document)
- Use these *Guidelines* to develop one sample educational material (reproduced in Appendix E)
- Develop a Web site that contains these *Guidelines* and traffic safety resources for Spanish-speakers

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INTRODUCTION

Overview

These *Guidelines* were developed as part of a larger project, *Educación de seguridad en el tránsito/ Education in Traffic Safety (EST)*. The goal of the project was to foster the development of effective traffic safety educational materials to serve the growing Spanish-speaking population in the United States.

Guidelines for Developing Traffic Safety Educational Materials for Spanish-Speaking Audiences is designed for organizations seeking to create, or to help others create, culturally and linguistically appropriate traffic safety educational materials for Latinos.¹ The process outlined addresses primarily print materials such as brochures, posters, booklets, and *fotonovelas*.² It can also be used to develop videos, public service announcements, and other materials that promote safe driving, riding, walking, and biking.

These *Guidelines* cover the process of planning, creating, disseminating, and evaluating an educational material. They are designed to ensure that the final material meets three criteria:

- The traffic safety information presented is accurate.
- The target audience is appropriately addressed.
- Principles of effective health communication are used.

The nine steps in these *Guidelines* represent an ideal, comprehensive approach to developing a new material in Spanish. You should follow as many steps as your resources allow. This process requires more staff, time, and money than simply translating the text of an existing English material into Spanish. However, by following these steps you will produce a material that is more likely to resonate with your audience and to change your audience's safety-related knowledge, attitudes, and behavior.

Because organizations have limited resources, you likely will need to decide which topic or topics are most important for you to address by creating a new material. It is not necessary for every organization to develop a Spanish-language material on every traffic safety topic. Instead, you can work with other groups, share materials, and adapt one another's effective Spanish-language material for particular uses. Ultimately, creating a few high-quality materials that resonate with the intended audience is likely to prove more effective than producing a greater number of low-quality materials.

¹ We use the term *Latino* to refer to all people living in the United States who come from, or whose ancestors came from, Spanish-speaking regions of the world. See pages 6–7 for more information.

² See page 38 for a definition of this term.

Finally, realize that producing a brochure and putting it on a shelf or on your organization's Web site is unlikely to make a widespread and lasting impact on the behavior of the people whom you're trying to reach. The materials that you produce will be most effective if they are used as part of a broader and more sustained effort, by your organization and/or your community partners, to promote health and safety.

Although most of the demographic and cultural information in this document is specific to Latinos, the nine steps and much of the expert advice can be used to develop educational materials for other populations or materials that deal with other safety and health topics.

Why We Created These Guidelines

Motor vehicle crashes are the leading cause of death for Latinos between the ages of one and thirty-four (CDC 2005). Although Latinos have population-based traffic-related fatality rates similar to those of the general population, available data from travel surveys suggest that Latinos travel less than the general population, however, they experience greater risk when they travel. Baker (1998) reported this finding for Hispanic children and adolescents, and Braver (2003) reported similar findings for the adult men of Hispanic origin. Braver's findings also pointed to lower socioeconomic status as an important risk factor for all races and ethnicities, and noted that socioeconomic status fully explained "the excess mortality risk among Hispanic men relative to whites" (2003). Other studies have found that Latino children are less likely to use bicycle helmets, child safety seats, and safety belts (The Traffic Safety Center Newsletter 2003; Womack 2001; Matteucci 1995). Latinos have higher per-capita pedestrian death rates than the U.S. population as a whole (CDC 2005), and a study in California found the pedestrian injury rate among Latino children to be twice that of non-Latino white children (Agran 1998). Several studies indicate that alcohol plays a role in a greater proportion of fatal crashes involving persons of Hispanic origin than in crashes involving non-Hispanic whites (Voas 1998; Voas 2000; NHTSA 2002; Harper et al. 2000).

Reducing the toll of traffic injury requires a comprehensive approach that includes the "three Es" of injury prevention: education, engineering, and environmental modifications (e.g., building safer pedestrian walkways, eliminating pavement edge drop-offs, etc.), and the enforcement of effective laws. It is widely recognized that public health-and-safety efforts have greater success when they are tailored to the cultural norms, preferences, history, and experiences of the specific groups that they seek to influence. Several studies specifically discuss the importance of cultural appropriateness in programs and materials that address traffic safety issues among Latinos (Schiff and Becker 1996; NHTSA 1995; Harper et al. 2000; Agran 1998). Although many materials are available in Spanish, at least one study has revealed deficiencies in the accuracy and cultural appropriateness of many of these materials (Ross, Gallagher, and Miara 2002).

Although educational materials are only one component of a comprehensive traffic safety program, they are an important element if they are accurate and effective. Consider the following scenario:

Pedro, a young child, gets his first bicycle and is excited to ride it. His parents are recent immigrants to a large city in the United States, and a local health center gives them a brochure in Spanish about preventing bike injuries. The material is hard for them to understand.

For example, comfort padding, the English technical term that describes the padding in a helmet, is translated into Spanish as acojinado de confort, but it is not explained. The type of Spanish used is unfamiliar to Pedro's parents, and the brochure is written at a ninth-grade reading level, much too high given their limited literacy. The pages are filled with long paragraphs, and the printing is small. There are no pictures illustrating the proper way to use a helmet; the brochure's only picture shows a child riding a bike in a community that looks nothing like Pedro's urban environment. Finally, the information about how to adjust the helmet straps is incorrect.

In their home country, Pedro's parents never saw children using helmets. They want to keep their son safe, but they don't know what the information in the brochure means. As a result, Pedro rides his bicycle without a helmet, risking a head injury and violating his State's helmet law.

This scenario illustrates the challenges inherent in developing materials for non-English speakers from other countries. If your materials are to influence attitudes and change behavior, they must consider cultural and linguistic factors, contain correct information, and employ principles of effective health communication.

Intended Audience for the *Guidelines*

The vast majority of traffic safety materials for Latinos are produced by English-speaking or bilingual (English-Spanish) staffs of State or national organizations. Therefore, the primary audience for these *Guidelines* is English-speaking or bilingual staffs of state or national organizations that wish to produce traffic safety educational materials for Spanish-speakers living in the United States. Most of the recommendations in the *Guidelines* relate to the development of new materials, but we also discuss how to modify existing English and/or Spanish materials.

Although local organizations are not the primary target audience of the *Guidelines*, such groups will also find them useful. Local organizations will learn how to ensure the accuracy and appropriateness of an item for their audience and how to modify for their particular community materials that were developed for a broader audience.

Critical Expertise You Need

Developing an effective material for a Latino audience requires knowledge of traffic safety, Latino communities, and health communication. If you are a traffic safety or injury prevention professional, make sure you have expertise in the area for which you want to develop a material (e.g., pedestrian safety or child passenger safety), and then find partners who have an understanding of the Latino audience and expertise in health communication. Similarly, if you are an expert on Latino issues but you or your organization does not have expertise in traffic safety or health communication, collaborate with specialists in these areas. Finally, if you are a health communication expert and you do not have specific expertise in traffic safety and/or Latino issues, work with experts in those areas.

How We Developed the *Guidelines*

Project staff took the following steps to develop and refine these *Guidelines*:

1. We collected existing Spanish-language traffic safety materials and conducted a telephone survey of the developers of those materials. This enabled us to identify positive examples of materials and to capture lessons learned by the developers.
2. We examined existing research and national guidelines on cultural competency, in particular those of the National Center for Cultural Competence and the Education Resources Information Center (ERIC) Clearinghouse on Elementary and Early Childhood Education.
3. We convened the EST National Work Group, a group of national experts in traffic safety, Latino issues, and health communication, and took advantage of their expertise throughout the development process. We also relied on a panel of expert reviewers (see appendix A).
4. We pilot-tested and subsequently refined the recommendations by convening a community advisory group (WEST) in one community and working with its members to create a model educational material following the steps in an earlier draft version of the *Guidelines*. The model material is in appendix E.

Organization of the *Guidelines*

The *Guidelines* are organized into three main sections: Research and Planning, Creating Materials, and Dissemination and Evaluation. Each section includes specific action steps and supplemental information. A fourth section, Adapting Existing Materials, provides guidance on adapting existing materials for different audiences and on updating or improving materials. We recommend reading the entire document before you begin to develop your material.

In the *Guidelines* you will find four different types of information, each denoted by its own icon:



Basic steps: These are the nine steps you should follow in developing and disseminating a culturally and linguistically appropriate material for Latinos.



Resources: These include Web sites, research articles, key reports and documents, and relevant organizations and contacts. They are located in the appendices.



Quotes and advice: These are collected from several sources:

- Respondents to the EST telephone survey of developers of Spanish-language traffic safety materials (“EST Survey”). These developers were interviewed by EDC staff about the process they used to develop materials and the lessons they learned.
- Members of the EST National Work Group, who share their knowledge about the health-and-safety-related experiences, attitudes, and practices of Latinos.
- Staff from several national organizations and marketing firms who have experience working with community groups as part of the process of developing materials. These include EST staff who worked with the WEST group to develop a material.
- Researchers who have conducted focus groups and surveys related to traffic safety and injury prevention for the Latino community.



Samples of actual materials: These exemplify the recommendations in the Creating Materials section of the *Guidelines*.

Definitions

Cultural appropriateness: “The ability to relate and communicate effectively when individuals involved in the interaction do not share the same culture, ethnicity, language, or other salient variables” (Santos and Reese 1999).

Latino: In these guidelines, Latino is defined as people living in the United States who come from, or whose ancestors came from, Spanish-speaking regions of the world. The term *Hispanic* may be more familiar; however, based on advice from several sources, we use *Latino* in these *Guidelines* because it is considered to be more inclusive. Furthermore, many national and Federal initiatives refer to *Latinos* instead of *Hispanics*.

Debate: *Hispanic* or *Latino*?

There is no consensus in the United States about what term to use for people who come from Spanish-speaking countries or whose ancestors did. The following excerpts describe the debate.

The Tulane Hispanic Health Initiative states:

Today, the term *Hispanic* is used to include all kinds of persons from Spanish origin, [but] for some people in the United States, Hispanic is a more inclusive term because it does not [exclude people] who are from Spain or belong to countries whose language is not Spanish such as Brazil, Haiti, etc.; Hispanic is also a category used by the U.S. National Bureau of Census to refer to the different groups of Latinos living in the United States. Also, the National Institutes of Health prefers to use the term Hispanic origin more often than the Latino term. From this perspective the term Hispanic is widely used to write technical reports, and grants proposals; in other words, *Hispanic* is used as a more academic/technical term. On the other hand, *Latino* is probably the most popular term used by non-profit organizations, public health and medical professionals, newspapers, and popular magazines, to describe [Spanish-speaking] people living in the United States (Tulane Hispanic Health Initiative 2002).

In “Hispanic or Latino?” Lynet Uttal of the University of Wisconsin–Madison writes:

The term “Hispanic” has been widely criticized as a “government invention” that falsely homogenizes diverse groups of people. The major objection to this term is that it lumps together too many diverse groups, losing sight of distinctions between groups such as Mexican Americans, Puerto Ricans, and Cuban Americans. Another objection is that it emphasizes the European culture and ancestry and masks the African and indigenous cultures that are also part of the history of many of the

groups included under this umbrella term. . . . Despite these objections, the term has become popularly used by individuals to self-identify. . . . [The] term “Latino” is the most apolitical, generally accepted term you can use. This use of “Latino” covers all the people from Central and South American countries plus Puerto Rico, Cuba, Costa Rica, Dominican Republic, but not Spain (Uttal n.d.).

Core Principles

EST staff and the Work Group agreed on a set of principles to steer the development of the *Guidelines*:

- To be most effective, developers should collaborate with appropriate partners and stakeholders throughout the process to ensure that the materials resonate with the audience, resulting in a change in behavior.
- Community input is essential in creating educational materials. Developers must collaborate with community-based partners throughout the entire process of development and dissemination. Developers must also solicit input from potential users of the material via focus groups, pilot testing, and other measures. Although Spanish-speaking professionals can provide useful guidance, the input of the actual audience is key. Professionals are likely to be more educated and acculturated than a typical member of the target audience; their preferred word choice, language, and style may not reflect those of the audience.
- Developers must be mindful that Latinos in the United States are a diverse group. Latinos come from many different places and have differing levels of education and literacy skills. Some Latinos live in homes where English is the primary language, others reside in Spanish-speaking households, and others use both languages at home. Religions, beliefs, length of time spent in the United States, and in some cases, legal status, also vary widely. Just as no single English educational material will be effective with all English-speakers, no single Spanish educational material will be effective with all Spanish-speakers.
- Acculturation to American norms occurs along a continuum. Individuals may be acculturated in some ways (English language ability, American dress, etc.) yet may prefer to receive health education information from within their own community. For example, some people who have lived in the United States for many years and appear to be very acculturated may get their news from Latino media sources rather than from mainstream American media.
- Whether creating new materials or adapting existing ones, developers must ensure that the materials use words that the audience can understand and must ensure that the materials are in tune with the audience’s values and culture. Creating original materials, in Spanish, for the specific audience, is the best way to ensure this.

-
- It is a waste of money, time, and other resources to create materials that do not resonate with the audience; this often occurs when an English-language material is translated into Spanish without seeking audience feedback or adapting the message for that particular audience. It is probably more cost-effective to create a few materials that are culturally and linguistically appropriate for the target audience. Developers should be selective in which topics they address, and collaborate and share materials with other developers.

RESEARCH AND PLANNING

Before you begin to develop your materials, define the scope of your work. Answering the following questions will help you make key initial decisions:

1. What topic will you address and what audience will you try to reach?

To determine which topics need to be addressed, review data describing the most prevalent types of traffic injuries and the groups most at risk. Define the parameters of the audience you intend to reach. For example:

- *Geographic locale:* Do you intend to target a diverse Spanish-speaking population across the county, or the population of your city or county? Does your target audience¹ live in an urban area or a rural area?
- *Heritage:* Is your audience primarily composed of persons of similar heritage, or is it more heterogeneous? In the case of foreign-born persons, it is important to consider both country of origin and whether persons come from an urban or a rural background.
- *Age, gender, etc.:* Do you intend to target young children, 16–17-year-old males who are just beginning to drive, parents of young children, grandparents, mature adults in general, or some other specific group defined by age and/or gender?

If you are developing a national material, your target audience is likely to be defined by age and/or gender or by urban/rural locale, rather than by ethnic heritage. If you are developing a material that is local in scope, your target audience is likely to be from a particular country of origin. You may refine or expand your target audience as you move through the process of research and planning and as you identify partners and groups in particular need of educational materials. The *Guidelines* offer recommendations for appropriately targeting both diverse and specific audiences.

¹ The term *target audience* refers to the audience for which a material is intended.

How WEST Chose a Community

We selected Holyoke for several reasons: EDC was already familiar with this community, having worked there on a previous project called “Kids in the Back”; the community wanted to address traffic safety issues affecting Latinos in their locality; and the project’s senior research assistant worked in the area and had contacts with professionals and residents who were interested in this project.

—EST staff

2. Can you use existing materials? Many Spanish-language materials on traffic safety topics already exist; you should examine these before deciding whether to create something new. You can view the list of existing materials identified by the EST project on the AAFTS Web site (www.aaafoundation.org/projects/index.cfm?button=EDCintro).²

- If you decide to use an existing material, see the Adapting Existing Materials section of this document. It describes how to determine which aspects of an existing material you may need to update or modify and how to revise the material so that it will be effective with your target audience.
- If you decide to create a new material, follow the nine steps of the *Guidelines*. The first three steps show you how to work with partners to research and understand your audience, the topic, and the principles of effective health communication.

Why NHTSA decided to develop new materials rather than adapt existing ones for a child passenger safety project

Recognizing Latino children are at great risk of injuries and deaths from traffic crashes, NHTSA provided funding to the National Latino Children’s Institute to develop a culturally and linguistically sensitive program to increase child passenger safety device use by young Latino parents and their extended families. Rather than translating or adapting English language materials, the NLCI developed the “Corazón de mi vida” (You are the heart of my life) program, which captures the essence of child passenger safety for Latinos.

—Robin Mayer, NHTSA

² Note that these materials have not been evaluated by AAFTS.



Identify Key Partners

To develop an accurate and effective traffic safety material, whether for a national or a local audience, you need to be familiar with three subjects:

- Traffic safety
- Effective health communication
- Your target audience

Few people are experts in all three areas. Find partners who can provide background and guidance in the areas outside of your expertise. You will draw on these experts throughout the process of developing your materials. You may also decide to co-produce the material with one or more of your partners, which can result in wider dissemination of the materials and reduce costs. The following are the types of partners you will need.

Traffic Safety Experts

Although you may have extensive knowledge about traffic safety, you will probably benefit from consulting others with more specialized expertise in the specific subject area that your material addresses, both to ensure the accuracy of the information presented in your material and to enhance the credibility of your material. This is especially important if you are developing a material that addresses a highly specialized topic, such as child passenger safety. Requesting their input, and possibly their collaboration, at the outset, will improve your material and build your ties to other organizations.

Health Communication Experts

You will need information about effective health communication techniques. These techniques include the way you convey your message, the graphics and format, and the way the materials are used (e.g., as part of a larger intervention or as a standalone effort). Certain communication approaches and formats are especially effective for audiences with low literacy. Information about these practices is available from organizations that specialize in health education and/or those who develop materials for audiences with low literacy or for those learning English as a second language. If your target audience is national in scope, you might want to collaborate with communications or public relations firms that routinely develop such materials for Spanish-speakers.

Identify Key Partners

Latino Culture Experts

You will need partners who are knowledgeable about Latino culture and health as well as partners who can provide access to your target audience. If your audience is broader in scope than a single community or a fairly homogeneous region, you will need to understand multiple subcultures, (e.g., Mexican, Colombian, Salvadoran) to ensure the final product will resonate equally well among all subcultures within the intended audience. You will find it most helpful to collaborate with both national and local Latino organizations and individuals.

- National Latino organizations understand effective ways to reach Latino audiences, know about existing educational resources for those audiences, and are familiar with examples of successful health-promotion strategies.
- Local Latino organizations include groups or agencies that serve the Latino community, such as health centers, local public health departments, youth-serving organizations, or service agencies. They also include local coalitions organized to address traffic safety and/or Latino health and safety issues, or individuals active in these areas. WEST, the community advisory group we convened in Holyoke, Massachusetts, is an example of a local Latino organization. The professionals and community leaders who staff these groups may be able to provide relevant information about the communities they serve, including information about social, economic, and environmental factors (e.g., attitudes toward law enforcement, distribution of incomes, availability of sidewalks) that may impact traffic safety needs and behaviors. In addition, you will be able to work with these local leaders to solicit input directly from community residents. You should draw on the knowledge of these local partners at least twice: at the beginning of the development process (in “Step 2: Understand Your Audience”) and after you have created a draft of your material (in “Step 7: Obtain Feedback from Your Audience and Partners”).

How to Identify Local Partners

If you do not have existing relationships with local groups, consider the following strategies to identify local partners:

- Ask your national Latino partner organization to draw on its community connections.
- Contact your state or local affiliates, chapters, or agencies and ask them to identify local organizations that work with the community members you are trying to reach.
- Work with your health communications partner or marketing firm, which will likely have experience in convening and soliciting feedback from community groups.
- Place notices on your electronic mailing lists, Web site, newsletters, and other venues to solicit interested local partners.



For a list of potential partners, see appendix B, step 1.

How Two National Organizations Identified Local Partners

Education Development Center, Inc.: To develop a pedestrian safety material for Holyoke, Massachusetts, the EST senior research assistant, who lived in Holyoke, spoke with colleagues and others in the community who had expertise in traffic safety, public health, and Latino health issues and invited them to participate in a community advisory group. The group included representatives from the local SAFE KIDS coalition, a trauma center, and community service agencies. This is an example of bringing people together and developing your own group.

The National Latino Children's Institute (NLCI): To develop “Corazón de mi vida,” we collaborated with several organizations. For traffic safety information, we worked with the Governor's Highway Safety Office in Texas, consulted the state child passenger safety coordinator, and got help from our funding source, NHTSA. To make sure that “Corazón de mi vida” would be effective with a variety of groups across the country, we worked with our Promesa partners. These are community-based organizations that serve Latinos and are recognized as exemplary models of what works in the Latino community. Promesa programs have shown that health and social conditions can be improved when culturally appropriate strategies are used for outreach and services. In our grants to community-based organizations, we include small stipends for setting up focus groups, community meetings, and child passenger safety events. We also ask the staff in these organizations for feedback. They always tell us what they think! Here's the most important point: When developing partnerships it is crucial that you allow your partners—small local organizations—to be part of the solution. You have to use a peer-to-peer model. You can't just have the CEO of a company talking to the president of another organization. It's the workers in an organization who can tell you what their clients want and need.



Understand Your Traffic Safety Topic

2a Review Data on the Scope of the Problem

Whatever your focus, you first need to understand the scope of the injury problem and the factors that contribute to it, both in general, and more importantly, for your specific target audience. A variety of local, state, and national data is available on motor vehicle, motorcycle, bicycle, and pedestrian injuries among Latinos, as well as on risk factors such as impaired driving and nonuse of safety belts and helmets.

For selected statistics and data sources on the traffic safety problem among Latinos, see appendix B, step 2a.

2b Review the Research on Preventing Traffic Injuries

The information your material presents should be based on research about the following:

- the actions that individuals can take to reduce their risk of injury
- the programs and policies that best facilitate those actions

Individual Actions

Your familiarity with the research on actions that individuals can take to reduce their risk of injury (e.g., using safety belts, wearing bike and motorcycle helmets, using appropriate child safety seats, or not drinking and driving) will ensure that your material provides the most current and accurate information possible.

Effective Policies and Programs

Encouraging and facilitating safe behavior requires a variety of strategies, which are most effective when used in combination. Strategies can be categorized according to the “three Es” of injury prevention:

- Education: Educating the public and professionals on ways to reduce traffic injuries (by means of materials, trainings, etc.)
- Engineering and environmental changes: Modifying the environment (e.g., making roads safer or adding bike lanes) and making safety devices available (e.g., bike helmets and child safety seats for low-income families)
- Enforcement and legislation: Enacting and enforcing laws (e.g., those related to safety belt use and impaired driving)

For sources of information on effective strategies to reduce the risk of traffic injury, see appendix B, step 2b.

Make sure that your research is current. For many traffic safety topics, especially child passenger safety, recommendations change rapidly as new research becomes available (e.g., guidance on the use of latches and tethers to secure child safety seats and the importance of rear-facing seat positions for infants). Also be sure to consider state and local traffic laws, which change every year in some jurisdictions.

—EST National Work Group

2c Refine Your Topic

Through research and meetings with your partners in the early stages of the project, you may decide to refine or modify your topic. For example, you might initially plan to address underage drinking and driving, but then decide to expand your focus to include other important topics that affect your audience, such as speeding and distracted driving. Or, after finding that infant seats are already in wide use among your target audience but booster seats are not, you might decide to narrow your focus from child passenger safety in general to booster seats in particular. You might also need to refine your target age group based on the groups you find to be most at risk of injury.



Understand Your Audience

Your material will be most effective if it appropriately targets the intended audience—whether it is a narrowly defined group, such as Colombian American teenagers living in East Boston, Massachusetts, or a heterogeneous national audience. You will need to learn key demographic information about your audience and become familiar with the audience’s knowledge, attitudes, beliefs, and experiences related to health and safety in general and to traffic safety in particular. If your audience is diverse, you will need to develop messages that resonate with all of the subcultures. If you are targeting a broader audience, seek information from as many stakeholders as possible representing a variety of groups.

Work with your local Latino partners to learn about your target audience in two ways:

- Obtain input from *members of your local partner’s organization*. These individuals are likely to be professionals and community leaders.
- Ask your local partner to contact *people in the community* for their input. Conduct focus groups, informal interviews, or surveys of community residents. You can carry these out yourself, draw on students or community volunteers, or use the services of marketing or health education organizations that have used these methods.

It is important to note that once you conduct research to understand a particular audience, that same research can be used to develop additional materials for the same audience. This is especially important if you have budget constraints.

For resources on conducting focus groups, see appendix B, step 3.

Planning and Recruiting Focus Groups

Because EST staff did not have expertise in conducting focus groups, we hired an organization that would train our bilingual staff in conducting groups and assist us in developing questions and planning the groups and would co-facilitate the sessions.

. . . To prepare for the focus groups, we followed these steps:

- 1. Determined our questions according to the information we wanted to obtain*
- 2. Contacted the WEST group to help recruit participants*
- 3. Provided stipends of \$25 for each participant, with an additional \$10 for people who needed child care assistance*
- 4. Reserved three sites that were centrally located, accessible by public transportation, and well known to residents*

—EST staff

Planning and Recruiting Focus Groups

Public relations firms plan and implement focus groups all the time. Logistically, we start by developing criteria for participation (between certain ages, years in the United States, income level, occupational level, etc.). You could go to the YMCA and ask the first 20 people you see, but are they the clientele you're looking for? We think about where people meeting our criteria are likely to be found. Then we contact those places—such as community-based organizations and churches—to recruit and see if we could post a flyer at their location or put information in their newsletter.

We found that for every one qualified person we get at a focus group, it takes three hours worth of time in calling and recruiting. It takes around thirty hours to get a group of 10, but you need to secure 12 people because some won't show up. In addition to the time it takes to find and contact relevant organizations, it takes about a week of full-time work for one staff person per focus group.

If you do focus groups at different times, like for pre- and post-testing, you would want different people at each group so they have a fresh perspective. Ideally, you want people who represent your target audience and are not familiar with the issue or material.

—Brandon Alvarez-Montgomery, *The Media Network*

At the beginning of our projects, we do focus groups in various cities to find out what communities have most in common. You can never address all their differences; you have to find what the communities agree on.

We went to our Promesa partners for help setting up 12 focus groups, in places as varied as the Bronx; Brownsville and Del Rio, Texas; and Los Angeles. When we went there, they told us which countries the majority of the audience came from. So we knew we were talking to different groups. We had a set of questions we used with each group. We had our child passenger safety consultant help us develop the questions: What is the situation? Why aren't kids in safety seats? What would change people's behaviors?

—National Latino Children's Institute

Understand Your Audience

Planning and Recruiting Focus Groups

Working closely with community-based partners provides many benefits —access and understanding, insights based on front-line experience, learning from prior efforts, and much more. Engaging community-based partners for research, however, should be done carefully. There have been too many instances where focus group have not produced sound research. The problems include biased respondent recruitment, site selection that inhibits open or frank discussion, influential individuals sitting in on focus groups and dominating the discussion, and moderators leading discussions primarily to validate pre-formed opinions. If the intent is to conduct good research, it is important to have professional guidance and to maintain objectivity.

—Carlos Arce, Ph.D., NuStats

3a Understand Your Audience's Demographics

It is important to understand background information about your audience, such as urban or rural origin, their countries or origin, socioeconomic status, literacy levels, degree of acculturation, and familiarity with motor vehicle traffic. Such information will help you hone your message. For example, if you are developing a child passenger safety material for families that you know have low incomes, you should provide information on obtaining low-cost or free child safety seats. If you are developing a pedestrian safety material for an audience that you know is urban, you will provide information on traffic signals and crosswalks. If you are developing a material for a community of recent immigrants who are likely unfamiliar with pertinent traffic laws, the material should include information about these laws.



The Importance of Understanding Demographics

Our research on Mexican and Central American immigrants has shown that for written communications (brochures, print ads, usage and installation instructions, etc.), the most severe barriers or challenges are about literacy, education, and cultural familiarity, rather than the specific words used in the materials. If you know that members of your audience come from a rural background and have had little or no schooling, that is far more valuable than knowing their country of origin, as far as predicting understanding of and conforming to good traffic safety behavior. Based on that knowledge, messages can be tailored to provide the necessary context that can aid understanding. —Carlos Arce, Ph.D., NuStats

For sources of information on demographics, see appendix B, step 3a.

3b Understand How Your Audience Views Health Issues

Although your material will focus on traffic safety, it is useful to examine research about the general health-related knowledge, attitudes, behavior, and experiences of Latinos, all of which will be relevant to the way your audience perceives traffic safety information.

It is inadvisable to make many generalizations about this diverse community; however, researchers and practitioners have reached some conclusions about the health knowledge and behavior of Latinos, which you can use as a starting point for generating your own findings and ideas. (Unless otherwise indicated, these comments are from the EST National Work Group.)

- *Knowledge, attitudes, and behavior vary based on age, gender, length of time in the United States, and other factors.*
- *Other problems that communities are experiencing—poverty, lack of resources, illness, etc.—may lower the priority of traffic safety.*
- *Some Latinos mistrust both the government and law enforcement officials.*
- *Latino immigrants are more likely to get their news from television and radio than from newspapers (LCAT and Midwest Latino Health Research 2001).*
- *Values important to many Latinos include family, respect, community, and love of their country of origin.*
- *In focus groups, Latinos said that family members (spouse, mother, and children, in that order) have the greatest influence on them. (LCAT and Midwest Latino Health Research 2001).*

Understand Your Audience



For sources of additional information on Latinos and health-related issues see appendix B, step 3b.

3c Understand How Your Audience Prefers to Receive Health Information

Knowing how your audience prefers to receive information will help you plan the dissemination of your material. Here are some factors to consider:

Trusted Messengers

Who will your audience trust to deliver a traffic safety message? Find out who would be the most effective messenger for your audience and try to partner with that person or group. For example, would it be more effective to have a member of the clergy, a teacher, a school nurse, or a community health educator deliver your message?

Existing Networks

Think about where your audience lives, works, and socializes, and the services they currently use. For example, if you are targeting parents of Latino children ages four through eight for a child passenger safety campaign, consider the following questions: Do the children attend after-school programs? Does the target audience attend neighborhood health festivals? Are the parents members of community organizations?

Preferred Methods

Find out what methods your audience considers most trustworthy. Would they prefer a brochure, a game, a simple checklist, or a *fotonovela* accompanied by a workshop? Do they prefer that you go to their homes (e.g., for a “baby safety shower”) to demonstrate the safety product and discuss the problem?

3d Understand How Your Audience Views Traffic Safety Issues

Your material will be most effective if it addresses the actual traffic safety-related knowledge, experiences, and beliefs of your target audience. In some cases, newly arrived immigrants may be familiar with motor vehicle traffic in general, but unfamiliar with United States traffic laws and customs; applying behaviors from their country of origin in the U.S. may be frustrating and dangerous. In other cases, immigrants from rural communities may be largely unfamiliar with motor vehicle traffic in general, and thus have little prior knowledge or experience upon which to draw when interacting with traffic as a driver or as a pedestrian in the U.S. Recognizing these differences is often the first step in altering the perceptions and behaviors of your target audience.

You will want to know how your audience answers the following questions:

- What is the scope of the injury problem you are addressing (e.g., pedestrian, bike, motor vehicle, or impaired-driving-related injuries)?
- Why does this type of injury happen? Who is responsible?
- How can this type of injury be prevented? Who can play a role? What can they do? Would certain changes to the environment or laws, or access to safety equipment and information make a difference?
- Why don't individuals, groups, or governments take these actions?
- What kind of prevention messages, images, and words would be compelling?

The following information is not intended to be complete or to apply to all Latinos, but rather to encourage you to consider factors that may influence your audience with regard to the traffic safety topic you selected. (Unless otherwise indicated, the information below is drawn from the EST National Work Group.)

Latinos, Traffic Laws, and Law Enforcement

- *Newly arrived immigrants may be unfamiliar with this country's laws and sanctions.*
- *Due to their immigration status, many Latinos cannot apply for a driver's license or sit for the written exam. Thus, they have not seen or studied the written booklet on driving laws and policies (LCAT and Midwest Latino Health Research 2001).*
- *Enforcement of traffic safety laws in the United States may differ from enforcement in a Latino's country of origin.*
- *"It's the law" should not be dismissed, as it can be a powerful motivator in any message relating to traffic safety issues. There is a strong, healthy respect for the law and for authorities, even if it is sometimes linked to fear of them. For undocumented immigrants, obeying the law is even more important, as these individuals may believe that being caught for breaking a traffic law could lead to immigration problems.*

—Carlos Arce, Ph.D., NuStats

Latinos, Safety Belts, and Child Passenger Safety

- *Latinos report several factors that affect their use of safety belts, including public safety campaigns about the importance of the belts, their belief that the belts can save lives based on hearing real-life stories, and their fear of being sent back to their countries of origin due to their immigration status (LCAT and Midwest Latino Health Research 2001).*
- *Primary safety-belt laws (in which police can stop a driver for not using a safety belt) appear to be even more effective among Latinos than among non-Latinos (Davis et al. 2002).*
- *Some Latinos believe that a child is safest in his or her mother's arms, because she can comfort or protect the child in the event of choking or another health problem (I. Rodríguez, pers. comm.).*
- *A Texas-based project found that Latino parents preferred child passenger safety seats that had been blessed by a priest (M. Stowe, pers. comm.).*
- *Some Latino men hold the belief that wearing safety belts implies that they are not in control of the car.*
- *Some people cannot afford child safety seats; when the seats are affordable, people are more likely to use them.*
- *Strong child passenger safety laws are an effective catalyst for changing behavior. Some parents who would otherwise not secure their children in child safety seats are prompted to do so if it is required by law (Ross et al. 2004).*
- *Sometimes a pickup truck is the only vehicle used by an entire family and may not have room for child safety seats. Older vehicles often have worn or damaged safety belts (I. Rodríguez, pers. comm.).*

Latinos, Speeding, and Impaired Driving

- *Some Latinos hold cultural beliefs about spontaneity. For example, often Latinos don't plan to see one another—they just stop by to socialize. It's hard to plan for a designated driver when the socializing, (which can involve drinking) is unplanned (LCAT and Midwest Latino Health Research 2001).*
- *Latino male focus-group participants report that many Latino men avoid driving under the influence because doing so might affect their freedom, their ability to financially support a family, or their driving privileges (Lee, Rivera, and Raftery 2001).*
- *Many Latin American countries do not have speed limits. What U.S. citizens consider 'aggressive driving' may be more common in many Latin American countries.*

Latinos and Pedestrian Safety

- *In many Latin American countries, there are no crosswalks or laws related to pedestrian safety.*
- *U.S. signage for crosswalks, railroad crossings, Do Not Enter, and the like are different from those in many other countries.*

General Issues Related to Traffic Safety

- *Owning a car in the United States is an important status symbol for many immigrant groups, including Latinos.*
- *Latinos, like most people, believe that they will never be involved in a crash, thinking, "I've taken chances in driving and haven't gotten hurt up to now; I'm blessed—this won't happen to me."*
- *Cultural or religious beliefs can be interpreted by Latinos to mean that one is destined either to be safe or not to be safe (I. Rodríguez, pers. comm.).*

For sources of additional information on Latino traffic safety knowledge, attitudes, and behavior, see appendix B, step 3d.



CREATING MATERIALS

Once you have developed a good understanding of the traffic safety topic and the audience you plan to address and have become familiar with the basic principles of effective health communication, you will be ready to use this knowledge to develop your material.

To exemplify points made in the recommendations, this section uses excerpts from several of the nearly 200 Spanish-language traffic safety items developed by local, state, and national organizations and collected by EST staff. Inclusion does not necessarily mean that EST endorses the accuracy and/or cultural appropriateness of the entire material.

4a Make Sure That the Traffic Safety Content Is Accurate

Draw on your research about traffic safety (described in the Research and Planning section) to be sure that you are presenting the most current and research-based recommendations.

Examples of Materials That Include Accurate Traffic Safety Information

“Los asientos de seguridad y sus hijos, 6 consejos útiles para que los niños pequeños viajen seguros” (2003)

This tri-fold brochure was developed by the Iowa Governor’s Traffic Safety Bureau. An English version, titled “Buckle Up, Kid! 6 Cool Tips to Keep Your Toddlers and Children Riding Safe!” is also available. This material gives parents helpful and accurate technical information on ways to keep toddlers and children safe while they are riding in a car. It also uses photos to illustrate the information presented. The following sections of the selected material contain accurate information about child passenger safety:

To refine the safety messages in the material, we consulted NHTSA. A staff member from NHTSA’s regional office was on-site for our photo shoot to ensure that all the behavior portrayed was consistent with pedestrian safety research.

—EST staff



- “Children between 40 and 80 pounds and under 4’9” tall (usually 4 to 8 years old) should always ride in a booster seat.”
- “A booster seat makes the vehicle’s lap/shoulder belts fit correctly: low over the hips and upper thighs and snug over the shoulder.”
- “Kids over 80 pounds and 8 years old can use lap/shoulder belts without a safety seat if they are tall enough to sit with their knees bent at the end of the seat without slouching. Fit the belt low over the hips and tight and snug over the shoulder.”

Develop Your Message and Content

“Camina con inteligencia, Virginia” (2001)

This tri-fold brochure, developed by the Virginia Department of Public Health, presents accurate facts, uses simple and clear language, and displays the text in a bullet-point format. The following examples from the brochure contain accurate information about school bus safety:

“Los niños deben:

- *Estar parados por lo menos 10 pies (3 metros) o cinco pasos grandes de distancia del camino mientras que esperan el autobús.*
- *Subirse al autobús solamente cuando esté totalmente detenido.*
- *Cruzar la calle por delante del autobús nunca por detrás.*
- *Estar alerta!”*

Children should:¹

- Stand at least 10 feet (3 meters) or about five large steps away from the road while they wait for the school bus.
- Board the bus only when it has stopped completely.
- Cross the street in front of the school bus, never behind it.
- Be alert!

“Un casco de calce perfecto; 7 pasos fáciles de seguir” (2001)

This colorful, four-fold brochure was developed by the Oregon Department of Transportation with translation by Spanish Communications Group. For each step, the instructions are clear and easy to read, and illustrations show what is being described. The following excerpt provides accurate information about bike helmets.

- *“Mídete la cabeza para tener un tamaño aproximado. Pruébate el casco para asegurar que te calce cómodamente en la cabeza sin balancearse de un lado a otro.”*

Measure your head so you have the approximate size. The right helmet should fit comfortably without moving from side to side.²

¹ English translation by EST staff.

² English translation by EST staff.



- “El casco debe quedar horizontal sobre la cabeza cubriendo la frente hasta una distancia de dos dedos de las cejas.”

The helmet should rest horizontally about two fingers over the eyebrow.

- “Centra la hebilla izquierda bajo el mentón. En la mayoría de los cascos, las tiras del mentón se pueden mover desde la parte de atrás del casco para alargarlas o acortarlas.”

Center the left buckle under your chin. In most helmets, the chin straps can move from the back of the helmet to make them longer or shorter.



“Hechos que lo hacen pensar; 50 cosas que deben saber sobre el alcohol” (2001)

This tri-fold brochure was developed by Journeyworks Publishing in Santa Cruz, California. An English version entitled “50 Things You Should Know about Alcohol” is also available. The brochure presents accurate information using simple language. Here are some examples:

- “Dos de cada cinco personas en los Estados Unidos estarán en un choque relacionado con el alcohol en algún momento de sus vidas.”

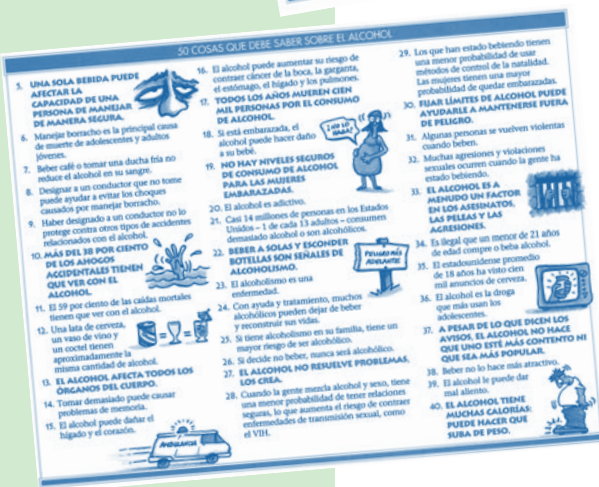
Two out of five people in the United States will become involved in an alcohol-related crash at some time in their lives.

- “Manejar borracho es la principal causa de muerte de adolescentes y adultos jóvenes.”

Drunk driving is the number one killer of teens and young adults.

- “Una lata de cerveza, un vaso de vino y un coctel tienen aproximadamente la misma cantidad de alcohol.”

A can of beer, a glass of wine, and a mixed drink all have about the same amount of alcohol.



4b Present Content in a Way That Is Culturally Appropriate

As you develop your message and content, combine your knowledge of the audience (as described in the Research and Planning section) with your knowledge of traffic safety. Here are some examples, based on the research presented in Step 3:

- Because personal relationships and community are important to many Latinos, include stories about real people and use spokespersons who have been personally affected by the issue. Rather than describing a crash per se, describe the impact of hurting someone; instead of raising the fear of being convicted for impaired driving, raise the fear of harming someone by drinking and driving (LCAT and Midwest Latino Health Research 2001; Lee, Rivera, and Raftery 2001).

Develop Your Message and Content

- Consider whether your audience views police officers positively or negatively. If, for instance, they report negative associations with law enforcement personnel, and you want to educate about penalties for certain behaviors, it probably makes sense to have a person who had received the penalty talking about it rather than a police officer. Or you may want to focus on health and safety rather than on law enforcement.
- If you are presenting an enforcement-based message (e.g., *Drunk Driving Over the Limit. Under Arrest.*), portray law enforcement personnel with positive, unthreatening body language.
- Because rates of safety belt use among Latinos appear to be higher in States with primary enforcement of safety belts (i.e., where motorists can be stopped for not using safety belts), materials destined for distribution in those States should include information about primary enforcement laws.
- Recent immigrants may be unfamiliar with the United States traffic safety system, so you should describe ways in which the system is different from the one in their country of origin. In some cases, recent immigrants from rural communities may have little or no prior experience with motor vehicles in general or with roads as they exist in the United States. For instance, they may not know that in the United States, just because a pedestrian is breaking the law does not give drivers the right of way. Or they may not know that at a multi-way stop sign, when vehicles arrive at the same time, the vehicle to the right has the right of way.
- Because recent immigrants may not know where to go for help in obtaining safety devices such as child safety seats or bike helmets, or whom to call about unsafe roadways and sidewalks, include this kind of contact information in your material.
- Research suggests that families have a big influence on many Latinos' behavior. For parents, create messages that stress the value of family, such as "Buckle up to protect yourself and keep your kids safe."
- Write messages in a positive way. For example, instead of saying, "Don't drink and drive," say "Protect yourself—drive sober."
- Research shows that many Latinos are unfamiliar with the concept of designated drivers. Describe the role of designated drivers, explain how to anticipate and plan for driving home from drinking events, and provide guidance in how to designate someone in the group to be the sober driver (LCAT and Midwest Latino Health Research 2001).



Examples of Materials That Present Information in a Culturally Appropriate Manner

Por nuestra seguridad (2002)

This twenty-minute video was developed by El Pueblo, Inc., in North Carolina with funding from the North Carolina Governor's Highway Safety Program. It is in Spanish with English subtitles. The video makes a number of points in a culturally appropriate way. It tells the story of a new immigrant family (Miguel, Elena, and baby Maria) from Mexico that comes to live with family members in North Carolina. Throughout the video, Miguel and Elena are reminded by their family members about the importance of using their safety belts, putting their baby in a child safety seat, and driving sober. Even though the messages are often about law enforcement, the information is given by a family member who cares about the newcomers' safety.

Navigating the system. Because Miguel and Elena are unfamiliar with the State's legal and administrative system, family members walk them through the steps of getting a driver's license. José, a cousin, explains to Miguel that he needs to have insurance on the car he is going to drive. José also says that Miguel needs to have a valid form of ID, a birth certificate, or a Social Security number. José tells Miguel that he will have to take a written exam and a driving test and that he should study the driver's manual in Spanish. Ana, José's wife, says to Miguel, "Now we have to remember that we are not in our home country. Here the traffic laws are very strict."³

The impact of individual actions on the family. At one point in the story, Miguel finds himself at a bar with some co-workers and decides not to drink because he knows the consequences of drinking and driving. His friend Raúl chooses not to listen to Miguel's advice about driving under the influence, drinks, and gets into a crash. Miguel visits Raúl in the hospital and tells him that he thought Raúl was going to die. To this Raúl replies, "Miguel, this is worse—the doctors say that I won't walk again. If I just listened to you, if I had done what you had said. . . . Now I don't know how I am going to support my family. I am going to be a burden for them. I would have preferred to die."

"Los brazos de una madre no son siempre el lugar más seguro" (2002)

This two-sided educational card about child passenger safety was developed by the Indiana Governor's Council on Impaired & Dangerous Driving. The Spanish and English versions, one on each side, have different photographs and messages. In the English version a law enforcement message reads, "Buckle Me Up Properly. That's the Law." The Spanish material focuses instead on health and safety. The material says "*Los brazos de una madre no son siempre el lugar más seguro*," which means, roughly, "A mother's arms are not always the safest place."⁴ The material recognizes that some Latinos think that holding a child in one's arms while riding in a vehicle is safe, and it aims to dispel that belief while recognizing that Latino parents want to keep their families safe.



³ Quotations are taken from the video's English subtitles.

⁴ English translation by EST staff.

Develop Your Message and Content



“¿Qué pasa si me para un policía u otro oficial de la ley?” (2001)

This bilingual brochure was developed by NHTSA. The title, “What happens if I’m stopped by an officer of the law?” illustrates the importance of bilingual materials. One EST survey respondent who developed a traffic safety material shared the following story:

“I was informed of one situation where a State trooper in Virginia made a stop. The driver had a copy of the brochure, and he did not speak English. The driver was pointing out a specific paragraph in the Spanish version of the document to the non-Spanish-speaking trooper and [pointing] to the trunk of his vehicle. The trooper scanned the English version, found the paragraph in question, and asked the driver to step out of the vehicle and open his trunk. Located in the trunk was the driver’s hunting rifle. The paragraph indicated that if the driver has a weapon, [he or she] should inform the police officer. The trooper expressed gratitude that they were able to communicate (somewhat) via the brochure and avert a possibly escalating situation.”

5a Write Rather than Translate

The ideal method of developing Spanish-language materials is to write the material in Spanish, rather than translate from English. Word-for-word translation from English is the least desirable method of developing a Spanish language material. It will not capture the meaning of all the essential points and can project an “afterthought” approach.

According to *Hablamos Juntos*, a Web site with resources on writing materials specifically for Latinos, “Translation is about much more than replacing a set of words in one language with a set of words in another. It is a communication activity that must convey the intended meaning, not simply the words. The culture and communication style of Spanish speakers differ from those of native English speakers and can affect their understanding of materials originally written for an English-speaking audience” (Hablamos Juntos 2005).

If you are creating Spanish and English versions at the same time, use the process of *transcreation*. That is, develop the general ideas and messages you want to convey. Then, using the input you have collected from your target audience, write text that is appropriate for your English-speaking audience and different text (if warranted) for your Spanish-speaking audience.

5b Find a Good Writer

The task of finding a writer for your educational material is not a simple one. Consider the following points:

- A person who speaks Spanish is not necessarily a Spanish writer. Writers receive specialized training in sentence construction, tone, grammar, and many other dimensions of writing.
- There is more to writing materials in English and Spanish than simply translating them from one language to the other. Your writer should have training beyond skills in basic translation from English to Spanish.
- Writers may work as freelancers or as part of marketing or public relations organizations. Some of these organizations specialize in reaching diverse audiences and/or have a social marketing focus on prevention-oriented topics such as traffic safety. These organizations can often provide other useful services such as focus-group planning and implementation, concept development, layout, design, editing, and printing.

Use Accurate, Simple, and Appropriate Language

Job Qualifications

The two most important criteria to look for in a writer are:

- Experience writing in Spanish
- An understanding of your audience's culture and language

Other useful expertise for a writer to have includes:

- Native Spanish-speaking ability, although this is not essential if the writer is fluent in Spanish and understands the nuances of the Spanish language and Latino culture
- Health communications or marketing experience
- Experience with injury prevention or other public health issues

Where Can You Find a Writer?

There are several ways to locate writers. Contact membership agencies that specialize in social marketing and/or Spanish-speakers. Be aware that they will typically give you only their list of members. Examples include the American Association of Advertising Agencies, The Public Relations Society of America, and the American Marketing Association. Search for freelance writers through organizations such as the National Association of Science Writers or through the Internet. Contact the developers of materials you think are well written and/or attractively designed; find out which writer they used or ask them for recommendations. After you have the names of several writers, plan to interview at least two or three and to review samples of materials they have written. If they have written bilingual materials, ask them how the Spanish and English versions differ. If they simply translated the Spanish from the English without any linguistic or cultural adaptation, they may not be the writers who can best serve you.

Identifying a Good Spanish Writer

We use our staff's creative minds. We always look for people in the field to get the appropriate and most up-to-date technical language for the topic we are addressing. In the case of "Corazón de mi vida," we drew on the expertise of several traffic safety experts whose primary language was Spanish.

—National Latino Children's Institute

Identifying a Good Spanish Writer

In our experience, finding a writer was a difficult task. We advertised the position and made personal contacts with the State and local health departments, multicultural Web job search engines such as latpro.com, advertisement and public relations agencies, and organizations represented by WEST. Several trained translators and writers expressed interest in this project; however, they did not feel comfortable with all its aspects: writing, message development, and cultural marketing. We finally found a media consulting company that specialized in working with various cultures. It had expertise in traditional and social marketing, and experience working in the Latino community. One of our sponsors helped defray the costs of working with this group.

—EST staff

5c Pay Attention to Word Usage

Regardless of whether your material is directed to a homogeneous Latino audience or a more diverse population, it should use clear and accessible language that respects grammatical standards and regional variations in vocabulary (Watson 2005). If you are writing for a multi-State or national audience, eliminate regional variations or colloquialisms to ensure that a wide audience will understand the material.

Consider the following tips as you carefully choose your words:

- Traffic safety terms must be accurate and understood by your audience. Define any terms that might be unclear, such as *safety belt*, *booster seat*, *blood alcohol content*, or *DUI*.
- Don't use words that are too technical or complicated. In English, for example, there are ways to express concepts using casual rather than complicated words:

car instead of *automobile*

light instead of *traffic signal*

safety belt instead of *shoulder harness belt*

bike instead of *bicycle*

Using Spanish words that convey an informal tone can make your material more engaging and convincing, as well as easier to understand.

- Avoid slang. *Slang* is defined as “language particular to a specific group; informal non-standard vocabulary composed typically of coinages, arbitrarily changed words, and

Use Accurate, Simple, and Appropriate Language

extravagant, forced, or facetious figures of speech” (Merriam-Webster’s Collegiate Dictionary 2003). It is often short-lived, easily sounds outdated, and can be misunderstood. Furthermore, if the material is intended for a national audience, slang terms will probably not be understood by the entire audience.

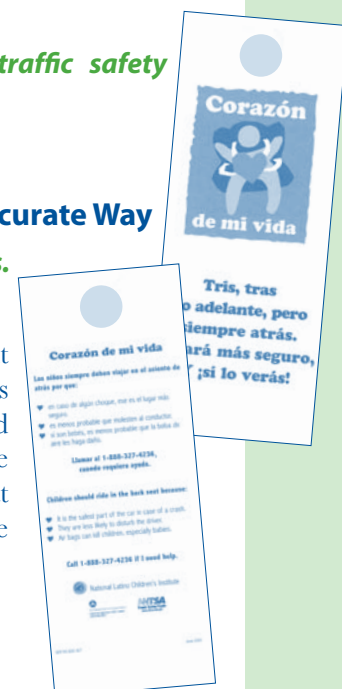
- Pay attention to the way in which your audience uses words. Many experts advise that if you have a heterogeneous audience, it is better to select words that are easily understood by many Spanish-speakers, sometimes referred to as *Pan-Hispanic* words. If your audience is a local or homogeneous community, you should use words that are particularly familiar to them.
- Be aware that not all groups share the same sense of humor. Although a phrase may be funny or cute to one Latino group, another might not perceive it the same way.
- Consider whether you want to use *tú*, the informal form of “you,” or *usted*, the more formal, respectful form. Your choice will depend on how familiar you want the tone of your material to be. If you are speaking to elderly persons or persons of authority, it is customary to use *usted* unless asked specifically to use *tú*.
- Remember that words that rhyme in English will probably not have the same effect when translated directly into Spanish (e.g., *Click It or Ticket*).
- In any language, health and safety messages have the greatest impact when they are repeated in various formats, such as a poster, a public service announcement, and a brochure. Also, messages are most effective when they direct the audience to take an action (“Buckle Up Every Trip, Every Time”) rather than simply give information (“Safety Belts Save Lives”) (R. Mayer, personal communication).
- Finally, remember that the best way to ensure that your words—especially traffic safety terms—will be effective with your target audience is to ask members of that audience for feedback, such as through pilot tests, focus groups, and interviews.

For recommended definitions of words commonly used in traffic safety educational materials, see appendix C.

Example of a Material That Uses Language in a Simple, Accurate Way

“Corazón de mi vida, Tris, Tras; No adelante, pero siempre atrás. Estará más seguro, Y si lo verás!” (2003)

This two-sided hanging card is part of the “Corazón de mi vida” kit developed by the National Latino Children’s Institute. This material uses accurate and appropriate language, which is clearly not a word-for-word translation from English. It uses Pan-Hispanic language that is accessible to all Spanish-speakers. This material was created in a bilingual format with English on the reverse side, which can facilitate broader use of the material. It also uses simple text and is written at a low literacy level.



Example of Differences in Word Usage

“Click It or Ticket”

Below are Spanish translations of “Click It or Ticket” taken from several different materials. They are written here exactly as they appeared in the original material. EST staff then translated them back into English, with the following results:

- “*Te abrochas o te multan*”
You buckle yourself or you get a ticket [present tense]
- “*Abrochado o multado*”
Buckled up or ticketed
- “*Abróchese el cinturón o sufra la sanción*”
Buckle your belt or suffer the sanction [command form]
- “*Abrochado o arrestado*”
Buckled up or arrested

More Advice on Usted vs. Tú

The challenge is whether to use the formal usted or informal tú. This is where most organizations/companies fall flat. They want to be respectful, so they do it all in usted. But it’s an immediate red flag to the target audience that the developer doesn’t know them. For serious topics and for older audiences, the formal may apply. But for a peer or young audience on topics like impaired driving and pedestrian safety, you want to talk in a more familiar, intimate way. If you are listening to a McDonald’s spot, they say “Do you want to supersize those?” Using usted, the equivalent would sound something like, “Sir, would you prefer to upgrade your large carbonated beverage and your fried potatoes?” It’s correct, but it’s just not how people talk—not just the formality, but also the blandness. You want to ensure, when you’re expending the resources to do this, that your audience feels it was written for them, produced for them, created for them. If they don’t, it’s not effective.

—Brandon Alvarez-Montgomery, *The Media Network*

Use Accurate, Simple, and Appropriate Language

Whether you use tú or usted, it's important to be consistent throughout your material. Mixing the two forms demonstrates poor understanding and fails to communicate effectively with the audience. Often, the usted form is better because it conveys respect and a formality that can make social communications involving desirable behaviors more credible and authoritative.

—Carlos Arce, Ph.D., NuStats

Although the two quotes above may appear to differ, the important point is that there are many nuances to consider. Deciding between *tú* and *usted* is not a trivial matter and must be considered carefully.



Combine your knowledge of your audience with principles of effective health communication. Consider pictures and other graphics that will be appealing and compelling and a format (e.g., video or posters) that will adequately convey your message. Your resources, target audience, and topic will dictate the format of your material.

For sources of information on effective health communication, see Appendix B, Step 6.

The following formats have been effective with Latino audiences:

Materials that have English and Spanish text side by side: Some readers enjoy these because they provide an opportunity to practice English-reading skills. In addition, members of a family might be at different levels of learning English; a bilingual material could be relevant for more people in the same family.

Methods of portraying people: Choose faces that look like those of the target audience, faces of people in the community whom the target audience knows and respects (e.g., a religious or community leader), popular celebrities (but make sure that the celebrities practice the intended traffic safety behavior), and photographs of real people rather than drawings.

Images of scenes and activities that are familiar to the audience: For example, images of soccer, a popular sport in Latin America, may be more appealing to your audience than images of American football.

Sensitivity in use of graphics: Make sure that the graphics are respectful and do not portray negative images, such as driving under the influence of alcohol or other drugs.

Inclusive graphics: If the whole family is being targeted, don't forget to include grandparents in your images. Many Latinos live in extended families, and grandparents may be the primary caregivers for young children.

Radio: Radio can help you reach a broad audience at relatively low cost.

Radio has many benefits—and also some inherent challenges, specifically, which Spanish dialect you want the speaker to use. Different dialects are spoken in different countries and different regions of the same country; hence Latinos of diverse origins use a variety of dialects and pronunciations. If your audience is from a specific country, you will probably want someone from that community as the radio voice. Also, consider what station you want to play your message, what time of day, and on what program.

Use Culturally Appropriate Format and Graphics

More Information on Using Radio

Unlike TV, radio is inexpensive and it can be run on batteries. . . .

Unlike print media, radio does not require its audience to be literate.

Unlike outreach workers, radio transmission quickly reaches people immediately regardless of difficult terrain, lack of roads, or poor transportation. (Becker 1998)

Fotonovelas: *Fotonovelas* are comic books that use photos of real people. They have been used in many public-health campaigns to reach Latino immigrants with low literacy (LCAT and Midwest Latino Health Research 2001; Moreno 2005). For an example of a *fotonovela*, developed by the WEST group, see appendix E.

More Information on Fotonovelas

Fotonovelas are often used to reach newly arrived immigrant audiences whose literacy is low. A report on Latino health stated: “Most participants liked the use of fotonovelas to educate people. One woman said, ‘I like the fotonovela style because it presents the information that is similar to our lifestyles.’ Another said she liked this format because it is short and to the point. The participants were asked whether they liked a style that used photographs or one that used drawings; the results were mixed. Some liked the seriousness conveyed by photographs. Others said that they liked the more lighthearted approach of caricatures or comical drawings.” (Moreno n.d.)

Fotonovelas are effective because they “show the desired behavior and can encourage the intended audience to view this behavior as more socially acceptable. Moreover, the illustration of the process of trial and error which is an important part of behavior change can assist the audience in developing skills necessary for behavior modification.” (Becker 1998)



Examples of Materials That Use Appropriate Format and Graphics

“A todos nos gusta reunirnos con amigos. Pero piensa en las consecuencias.” (2003)

This *fotonovela* was developed by Mecklenburg Safe Communities and the Carolinas Center for Injury Prevention and Control. A poster version is also available. This public awareness campaign exemplifies the use of culturally appropriate graphics. Each page of the booklet contains a photo of real people who look like the intended audience and a sentence describing what is pictured. The characters’ dress and appearance are realistic. The photos clearly tell the story of what can happen when you drink and drive. This material is appropriate for audiences with low literacy, because the pictures alone show the consequences of driving under the influence.



“5 Preguntas/5-Step Test; Para determinar si su hijo debería usar un asiento ‘booster’” (2003)

This two-sided bilingual card was developed by the California State Automobile Association, which got the information from SafetyBeltSafe U.S.A. It has an easy-to-read format that gives the audience clear instructions. This material asks parents yes-or-no questions to help them determine whether their children need to ride in a booster seat, for example:

- “Does your child sit all the way back against the auto seat?”
- “Do the child’s knees bend comfortably at the edge of the auto seat?”
- “Does the belt cross the shoulder between the neck and the arm?”

“Abrocha tu vida” (2003)

This public service announcement (PSA) or *radionovela* (a story with short episodes to be played on the radio) is broken up into eight sixty-second episodes. The material was developed in Spanish by the Car Safety for Latino Children Coalition of the Harborview Injury Prevention and Research Center in Seattle, Washington. It exemplifies several of the recommendations in these Guidelines: (1) it was created in Spanish rather than translated from English, (2) its format is innovative, and (3) it emphasizes key points in an appealing manner. Each episode talks about the importance of using safety belts and child safety seats. The



Use Culturally Appropriate Format and Graphics

episodes are designed as a series involving the same family members who learn about child safety seats and, in turn, teach their family and friends. At the end of each episode, a catchy and positive jingle is played to reinforce the safety message: “*Abrocha tu vida, abrocha el corazón, abróchalos es por protección.*” The rough word-for-word English translation is “Buckle your life, buckle your heart, buckle them up, it is for their protection.”⁵ Unlike the Spanish jingle, the English translation does not rhyme and therefore is less catchy. The radio PSA is an innovative format that reaches Latinos at all literacy levels, and the importance of child passenger safety is emphasized repeatedly throughout the several episodes, which can help listeners retain the message.

Suggestions for Format and Graphics

- *Use photos or graphics that the community can relate to. Keep materials simple. Have graphics [that] work for everyone.*
- *As long as all the people don’t look like they are blond and blue-eyed, it should be okay. The material should reflect a broader [more diverse] audience.*
- *Some Latino communities are fearful of the police because they may have had a bad experience with law enforcement in their own countries. If we were to create a new material, we would not use a picture of a police officer; instead, we might use a picture of a safety belt. We also learned that in the future we need to provide a simple message that is easy to understand.*

—EST survey respondents

Participants in our Holyoke, Massachusetts, focus groups told us that, in general, they liked materials that were short and to the point and which grabbed the reader’s attention with colorful images. They also preferred photographs to cartoons or drawings. Participants did not like materials with a small font, long words, and a lot of text.

—EST staff

⁵ English translation by EST staff.



Solicit Feedback from Your Audience and Partners

This step cannot be overemphasized. Have the item reviewed by the your traffic safety, health communications, and Latino partners to ensure technical accuracy, effectiveness, and cultural appropriateness.

In addition, turn again to the community partners whose input you sought at the outset of the development process. Ask for their help in ensuring that the draft material is appropriate for your target audience. As described in “Step 3: Understand Your Audience,” you should obtain feedback from professionals and community leaders and also, through them, from community residents themselves. To obtain feedback from professionals and local leaders, use a set of structured interviews, surveys, or in-person meetings. To obtain information from community residents who are representative of your target audience, conduct focus groups, sponsor informal *pláticas* (discussions), or use a simple survey tool at a health fair, a child passenger safety checkpoint (where parents bring their safety seats to be checked for correct installation), a health center waiting room, a shopping mall, etc.

As described in “Step 3: Understand Your Audience,” conduct these groups or surveys yourself, ask your local partner to do so, or hire a marketing or health communications organization with experience in pilot-testing educational material. Some of the questions you may want both professionals and community residents to answer are:

- Is the message clear? What are the main points?
- Is the message relevant for the community?
- What new information is provided? What behavior could it change, and why?
- Is the language appropriate, clear, and respectful? What terms are unclear?
- Are the graphics and design appealing?

Discuss all of the feedback you receive with your national, State, and local partners, and make necessary changes.

It is very important to acknowledge the role of your community partners in creating the material. Consider including your partner organization’s name or individual names on the final material to highlight their participation. This shows respect for your partners and can encourage them, and other Latino organizations, to become more involved in future traffic safety efforts. It also adds credibility, showing that the material was created using input from people who are familiar with the audience. It is a win-win technique for all involved.

Now you have created a final version. Celebrate your accomplishments! Remember to acknowledge all the people who helped create the material.

Solicit Feedback from Your Audience and Partners

Sample Feedback from Pilot Tests

- *This piece was too long. Latinos like question-and-answer format. . . . People want quick information, but they also want details. People like colorful materials; they like bilingual materials. People want to know about the law.*
- *The term asiento elevado [booster seat] is unknown in the community; that is why we now use asiento elevado booster.*

—EST survey respondents

How National Organizations Pilot-Test Materials with Multiple Audiences

After we had a draft of “Corazón de mi vida,” we pilot-tested it in several communities. We went back to our Promesa partners to set up focus groups. We also surveyed people at child passenger safety checkpoints. We found out what worked and what didn’t. Then we revised it and pilot-tested it again. One important thing we learned was to make the kits flexible, so that leaders can adapt it for audiences in different communities.

—National Latino Children’s Institute

The health education publisher Channing Bete uses surveys to pilot-test new items. See the findings from two studies of the materials Channing Bete developed:

- http://preview.channing-bete.com/CBC/484662a_teeneff.pdf
- http://preview.channing-bete.com/CBC/482371a_adulteff.pdf



DISSEMINATION AND EVALUATION

Your material is finished, but your job is not done. How your material is distributed will strongly influence how your audience perceives it. In addition, evaluating your material will tell you whether it accomplishes your goal. Finally, you'll want to review and update your material to be sure that it remains current.

Effectively Disseminate Your Material

The following dissemination strategies can increase the likelihood that your material will reach and have an impact on its intended audience:

- Ask for reinforcement of your messages by sources of information seen by your audience as credible and trusted, for example, community leaders, schools, health care professionals, radio, television, and faith-based institutions. Your partners may be able to advise you about whom the audience sees as credible sources, and you will already have collected much of this information during “Step 3: Understand Your Audience.”
- Coordinate dissemination with other agencies that distribute traffic safety materials (e.g., the State highway-safety office, local health departments, and police departments).
- Distribute materials through programs used by your audience, for example, prenatal classes, English classes for speakers of other languages, WIC programs (the Supplemental Nutrition Program for Women, Infants, and Children), pediatric programs, Head Start, child care agencies, drug and alcohol programs, multidisciplinary mental health agencies, local business associations, community volunteer groups, local consumer product-safety offices, local public health-insurance programs, and local civic organizations.
- Use innovative methods of distribution, for example, inserting safety messages into the State driver’s manual or property tax bills, or on Web sites.
- Your material is much more likely to be effective if it is part of a broader initiative to change traffic-related behavior. Include the material in larger programs or campaigns, for example, community booster-seat promotion, law enforcement and public health initiative to reduce impaired driving, or school-based pedestrian safety programs.



Evaluate and Review Your Material

Although this is the last step listed in the Guidelines, measuring the effectiveness of your material should be part of your development strategy right from the start. Evaluation can help you track your outreach efforts, discover dissemination problems early, make corrections, and find out whether your material has the desired effect. The results can help you improve future materials. Regardless of your budget, some level of evaluation can and should be done.

9a *Determine the Type of Evaluation You Will Do*

The type of evaluation you choose will depend on your resources, staff availability, the requirements of your organization, and your overall goals in developing and disseminating the material. In general, there are two ways to evaluate the material:

Process Evaluation

Process evaluation assesses how a material is being distributed, whether it is reaching the targeted audience, and whether you are receiving requests for more materials. It helps you determine what percentage of the audience actually receives the material. Is it more or less than expected?

Impact Evaluation

Impact evaluation assesses a material's effectiveness in producing a desired change in the knowledge, attitudes, or behavior of the target audience. For example, was there an increase in the number of parents who are aware of the law requiring that children ride in booster seats? Impact evaluation determines how well a program is changing knowledge, attitudes, or behavior. Such changes seldom occur if a material is used in isolation without being part of a larger injury-prevention program, and furthermore, such changes are often short-lived and do not lead to measurable longer-term reduction in injuries. In a full-scale evaluation of a program, one would ideally want to measure the program's impact on knowledge, attitudes, and behavior. Expecting more than a short-term behavior change (or even being able to detect a change) from an isolated material, such as a brochure, would be unrealistic. However, if the materials are part of a larger program targeting a specific community, an impact evaluation might be able to assess the effects of several different components of the program (e.g., educational materials, increased law enforcement activity, etc.) simultaneously.

9b *Determine the Goal of Your Evaluation*

The next step is to define exactly what you are going to measure. The following are examples of goals you might want to achieve with your material and questions you can ask to determine whether you are actually achieving them.

- **Goal:** To determine whether you are reaching the target audience
 - ◆ Is the material available at locations accessible to the target audience?
 - ◆ How many places distribute your material (e.g., schools, health care providers, library story hours, and auto dealers)?
 - ◆ Has the material been placed in a visible location?
 - ◆ How many members of the target audience do these distribution points serve?
 - ◆ Are providers complying with the planned distribution of material? Do they routinely distribute to everyone or to just a few people as time permits?
 - ◆ How many units of the material have been distributed?
 - ◆ Have you received requests for more materials? How many?
- **Goal:** To determine how the target audience responds to the material
 - ◆ Do audience members remember the material?
 - ◆ Do they read the material thoroughly or do they skim it?
 - ◆ Do they bring the material home or do they discard it?
 - ◆ Do they pass the material along to other members of their community?
 - ◆ Have they talked to a child or other family member about it?
 - ◆ Do they feel that the material is culturally appropriate?
 - ◆ Do they feel that the material comes from a credible source?
 - ◆ Do they understand the contents of the material?
- **Goal:** To determine the total cost of producing and distributing the material
 - ◆ How much staff time was devoted to community meetings, focus groups, pilot testing, and dissemination?
 - ◆ How much staff time was used to research and write the content and develop the graphics?
 - ◆ What was the cost of writers, designers, and other professionals?
 - ◆ What in-kind services were provided and what is their monetary value?
 - ◆ What additional funds came from the community?
 - ◆ What were the mailing costs?

Evaluate and Review Your Material

- **Goal:** To determine whether those who have received the material have increased their knowledge, changed their attitudes, or changed their behavior
 - Did audience members learn new information about the causes of traffic injury or steps they can take to prevent injury, deaths, tickets, and/or arrests?
 - Did they learn about new contacts or resources?
 - Did the material change their attitudes about the causes of injuries or how to prevent them?
 - Do they report their intention to change their behavior (e.g., put child in a booster seat or cross the street in a crosswalk)?

Keep in mind that providing one-time, stand-alone educational materials that are not part of a larger strategy is seldom effective in changing attitudes and behavior. Short-term knowledge gain and/or self-reports of change are probably the most that you can expect from an isolated education material.

Once you know the questions you want answered, you are ready to develop tools and procedures to collect this information.

9c Collect Data for the Evaluation

Process Evaluation

Process evaluation depends on accurate record keeping. For example, it's important to record the number of copies distributed to various organization as well as requests for additional copies. You might also want to conduct brief telephone interviews with the people in the organizations distributing the material, recording responses on a written form you create for this purpose. Another method of collecting data is to hold focus groups of individuals who are distributing or receiving materials. Without incentives, mail surveys usually generate few responses unless there is active follow-up via telephone, mail, or e-mail.

To determine the level of interest in your materials, consider distributing it in waves to organizations that will be providing it to your target audience. Send a limited number to these organizations and keep track of subsequent requests, so that you can precisely gauge how many units are being used.

Impact Evaluation

To assess knowledge, attitudes, and self-reported behavior, you can use short surveys, actual observations of behavior (e.g., use of child safety seats), or more complex pre-tests and post-tests. Choosing an appropriate method is critical for determining the impact of your material. Too often, unrealistically high hopes about the impact and poorly conceived approaches lead to a finding that there is no detectable impact. If you think you may need

a consultant to assist with the evaluation because your staff lacks experience or time, involve the consultant in the process as early as possible. Choose a consultant who has performed these types of evaluations before, such as one of the following:

- An author of an evaluation paper in the literature
- A health education researcher from an academic setting
- An agency that has implemented a program similar to yours
- A professional organization such as the American Evaluation Association
- The director of your State or local health department's injury-prevention program (See www.stipda.org and www.naccho.org.)
- Your NHTSA regional office

Test the data-gathering instrument before you begin officially collecting your information.

9d *Report the Findings*

After you have compiled and analyzed the data, write a report describing the results of the evaluation. This document could be as simple as a few pages for a process evaluation, or as extensive as a 100-page report or journal article for a large-scale impact evaluation. Having a written report will be helpful if you plan to update the material in the future, if others use or adapt the material, or if you need to decide whether to print more copies.

Whether you find that your material was effective or ineffective in influencing your audience's knowledge, attitudes, or behaviors, that information can be useful for you and your colleagues. You have an opportunity to contribute to the traffic safety and injury prevention fields by sharing your results. In *Traffic Safety in Communities of Color*, Gantz et al. (2003) say that "ongoing data collection and analysis are necessary to inform interventions and efforts. More research is specifically needed to understand past traffic safety successes so that these successes can be extended."

9e *Continue to Review Your Material for Accuracy and Relevance*

To ensure that your material stays up-to-date, you should:

- Have traffic safety experts periodically review information about laws, new technology, and new audiences in your community of interest.
- Collect feedback from your users.

Be prepared to revise your material if warranted based on the feedback you receive from experts or from your audience.

For resources on evaluation, see appendix B. Step 9.



ADAPTING EXISTING MATERIALS

This section outlines the issues to consider when modifying an existing material. There are many ways to adapt materials. You can adapt them for new target audiences, such as a different age group or speakers of a different language. You can change a local material for a wider audience or localize a national material, perhaps with new graphics or facts specific to the new target audience. Modifying a material instead of creating a new one can save time and money. Appendix F describes the process by which the *fotonovela* developed by WEST for one specific Massachusetts community was adapted subsequently to serve a nationwide audience.

Adapting from English to Spanish. You may have developed or obtained a material in English that deals with a topic not available in Spanish and appears to be worthwhile. To create a Spanish version, you need to determine the following:

- Is the content still accurate?
- Does the material use effective health-communication techniques?
- Has the material been effective?
- Is the material appropriate for your intended audience (e.g., demographic targeted, language level, etc.)?

Adapting Spanish materials. Many traffic safety materials are available in Spanish. A list of those identified by the EST project in 2005 appears on the AAAFTS Web site: www.aaafoundation.org.⁶ Remember, though, that a material is not necessarily effective for Latinos simply because it is written in Spanish, and that it may be appropriate for some communities but not for others. If your organization is a national or State agency, you may want to modify a material developed for one community (e.g., Mexican Americans in the Southwest) for use in another community (e.g., Puerto Ricans in the Northeast), or you may want to adapt it for a broader audience. If your organization is local, you may want to modify a national material for your particular community.

The following steps will help you determine whether to go ahead with an adaptation and how to carry it out.

⁶ Note that the EST staff did not evaluate the content or appropriateness of these materials.

1 **Contact the Original Developer**

Although knowing something about the process used to create an existing material is not essential, such knowledge can help you focus your efforts and determine how far you need to go in evaluating the existing material, before adapting it for your needs. If possible, contact the developers of the material and determine the extent to which they followed the recommendations in the *Guidelines*.

Ask the developers the following questions:

Audience

- Who was your target audience?
- Why did you want to develop a material for that group?

Partners

- Who were your partners?
- Did you have partners that were knowledgeable about Latinos, traffic safety, and health communication?
- Were your Latino partners representative of the target audience?

Accuracy

- What sources did you use for traffic safety information?
- How did that information affect the development of your material?

Appropriateness of the content and format for the audience

- What sources of information did you use to understand your audience?
- Did you obtain input from the audience, both at the outset and for the final draft?
- What methods did you use to obtain feedback?
- What did you learn from the audience?
- How did the audience's input affect the material's content?
- How did their input affect the material's format?

Language

- Was your material developed in Spanish or translated from English?
- If it was developed in Spanish, what were the writer's qualifications?
- If it was translated from English, was this done by a professional translator?

Adapting Existing Materials

Dissemination and evaluation

- How did you disseminate the material?
- Did you evaluate the material? If so, did your evaluation address the following elements?
 - Process: How many were distributed? To whom?
 - Impact: Did the audience learn anything from the material? If so, what? Did you obtain feedback from professionals or the target audience? If so, what were the results?

2 *Draw on Traffic Safety, Latino, and Health Communication Partners*

Use the information in “Step 1: Identify Key Partners” to determine the types of partners you will need. Find partners who have native Spanish-language skills and are knowledgeable about the culture and values of your intended audience. Also involve partners with expertise in health communications and traffic safety.

3 *Ensure the Material’s Technical Accuracy*

Review the guidance and supplemental information in “Step 2: Understand Your Traffic Safety Topic” to determine whether the traffic safety information in the material is accurate and up-to-date. If you were able to contact the original developer, examine the sources of information they used and search other sources of information for corroborating or conflicting facts. You may need to update or expand certain information to make it accurate.

4 *Make Sure the Content and Format Are Appropriate for the Target Audience*

It is very important that you obtain feedback on the current version of the material from representatives of your target audience before you begin modifying it. You should also obtain feedback on your draft of the modified material to ensure its cultural appropriateness.

The extent to which you need to alter the material to make it appropriate for your target audience depends on the original development process. If you determine that a material was created in Spanish in accordance with the recommendations outlined in the *Guidelines*, you need only to confirm that the material is appropriate for your particular audience. To determine this, do the following:

- Obtain feedback on the material from representatives of your target audience, as described in “Step 7: Solicit Feedback from Your Audience and Partners.”

- After determining the content is accurate and appropriate, make any necessary changes in, for example, the contact information or photos, that will help the material suit the new audience.

If you are creating a Spanish version of an English-language material, if you are starting with a Spanish version that was developed without using the recommendations in the *Guidelines* (e.g., the developer translated word for word from English, if the developer of the original material did not obtain input from the target audience during development), or if you do not know how the material was developed, follow these steps to ensure that the content and format are relevant for your target audience:

To ensure that the content is culturally appropriate

- Gain a general understanding of your audience by reviewing the background information on Latinos and traffic safety provided in “Step 3: Understand Your Audience.”
- To determine whether the concepts in the original material are likely to resonate with your audience, consider the ideas in “Step 4b: Present Content in a Way That Is Culturally Appropriate.”
- Modify the content to make it more appropriate. For example, you may decide to expand text explaining safety-belt laws, if your audience is unfamiliar with this information. In an English-language brochure on impaired driving, you might change the text warning that a conviction will impact one’s driving to an example of how a conviction has affected a hypothetical person or family similar to a member of your target audience.

To ensure that the format and graphics are culturally appropriate

- Use the recommendations in “Step 6: Use Culturally Appropriate Format and Graphics” to determine whether your material is likely to be effective with the target audience.
- Make modifications if necessary. For example, you might use new photos of community scenes familiar to your audience.

5 Create an Effective Spanish Version of the Material

If you are starting with an English version, the key is to interpret the information, not to translate it word for word. If the material is already in Spanish, it still may need to be totally rewritten or edited, or, depending on the process used in the original development and on feedback you receive from your target audience, it may not need to be changed at all. To find a writer and ensure that you are using language correctly, follow the guidance in “Step 5: Use Accurate, Simple, and Appropriate Language.”

Adapting Existing Materials

When adapting a national organization's Spanish-language material for a local audience, try to retain the tagline that captures the campaign's theme and the graphic design associated with the campaign. Retaining these elements will reinforce the message of the national campaign for those audience members who are exposed to both local and national messages. NHTSA uses this strategy as part of its *Click It or Ticket* campaign, by providing local organizations with the *Click It or Ticket* tagline in English and “*Abrochado o Multado*” in Spanish.

6 Obtain Input on the Spanish Version from the Target Audience and from Your Partners

To ensure the final Spanish material will be effective with your target audience, follow the guidance in “Step 3: Understand Your Audience” and obtain feedback from representatives of your target audience. As described in “Step 7: Solicit Feedback from Your Audience and Partners,” it's also important to obtain feedback on the content, format, and language in the draft and make changes if necessary.

7 Disseminate and Evaluate Your Material

To disseminate and evaluate your material, follow the procedures in “Step 8: Effectively Disseminate Your Material” and “Step 9: Evaluate and Review Your Material.”

For traffic safety terminology and taglines which should be consistent throughout your material, see appendix C.

Some organizations just get something from someone else, slap their logo on it, and hand it out. Usually this is not sufficient to really reach your audience. You have to do the work [to understand the audience]. Go to the community. Write in their culture. Handing out paper alone is not enough.

—EST survey respondent

Example of Adapting an English Material for a Spanish-speaking Audience

We did a poster on child passenger safety for NHTSA, with a picture of a white girl on a stool at a counter washing a glass. The tagline in English was “If you give your kid a boost to reach the sink, why not give her a boost to protect her safety?” Our task was to take this message in English and make it relevant to the Spanish-speaking audience, using language that communicated the meaning while paying attention to the audience’s culture so that it was relevant to them. One cultural difference from the English version that we were aware of from our research and experience with Latinos was that many parents wouldn’t leave their child alone in the kitchen with glass. She’d be with her mother, so that’s how we showed her in the Spanish version. We used a different kitchen and different lighting to present a softer feel. And in terms of language, the word boost doesn’t translate into Spanish, so we wrote a different tagline and used another word that made more sense.⁷

—Brandon Alvarez-Montgomery, *The Media Network*

⁷ Copies of the posters can be found at: http://www.nhtsa.dot.gov/people/injury/childpsCPSWheelPlanner2005_spanish/images/lores/sink_Posterlores.jpg



APPENDICES

Appendix A: People Involved in Developing the Guidelines

This document was developed by EDC under the guidance of the Work Group members—experts in traffic safety, Latino culture, and developing culturally appropriate materials—who provided ideas and feedback in person, by phone, and in writing.

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Expert Reviewers for Educación de seguridad en el tránsito

The EST Guidelines reviewers are experts in traffic safety, Latino culture, and developing culturally appropriate materials. They provided ideas and feedback via e-mail. The expert reviewers were:

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Appendix B: Resources

Step 1: Potential Partners

Listed below are some potential resources, categorized by the topic and scope of their organizations. This list is not intended to be comprehensive.

Organizations with Traffic Safety Expertise

National Organizations

AAA www.aaapublicaffairs.com

AAA Foundation for Traffic Safety www.aaafoundation.org

Insurance Institute for Highway Safety www.iihs.org

Mothers Against Drunk Driving www.madd.org

National Highway Traffic Safety Administration (NHTSA) www.nhtsa.dot.gov

National SAFE KIDS Campaign www.safekids.org

State, Local, or Community Organizations

Hospital community outreach departments

Governor's Highway Safety Representative. Contact the Governor's Highway Safety Association: www.ghsa.org

Local AAA affiliate www.aaapublicaffairs.com

Local health department. Contact the National Association of County and City Health Officials: www.naccho.org

Physicians associations

State and Local Bike/Pedestrian Coordinators www.walkinginfo.org/insight/links_cord/cord_index.cfm

State health department injury prevention program. Contact the State and Territorial Injury Prevention Directors Association: www.stipda.org

State or local office of public safety

State/local Emergency Medical Services office. Contact the National Association of State EMS Directors: www.nasemsd.org

State/local Safe Kids Coalitions. Contact Safe Kids Worldwide: www.safekids.org

Other Agencies

Depending on your topic and audience, you may also want to partner with agencies with expertise in your specific traffic safety topic, for example:

American Association of Retired Persons

Bike/pedestrian safety organizations

Child-passenger safety technicians

Substance abuse prevention agencies

Youth development agencies

Organizations with Knowledge of the Latino Community

The national Latino organizations listed below have Web sites that list State and local affiliates that may serve as partners.

National Organizations

ASPIRA www.aspira.org

Congressional Hispanic Caucus Institute www.chci.org

HispanicOnline.com www.hispaniconline.com

MANA National Latina Organization www.hermana.org

National Alliance for Hispanic Health www.hispanichealth.org

National Council of La Raza www.nclr.org

National Latino Children's Institute www.nlci.org

National Latino Council on Alcohol and Tobacco Prevention (LCAT)
www.nlcaltf.org

United States Hispanic Chamber of Commerce www.ushcc.com

State, Local, or Community Organizations

Community health centers and clinics

Community-based Latino health or cultural organizations

Faith-based organizations

Local housing authority or low-income housing programs

Migrant workers organizations (such as farm workers associations)

Pre-school and after-school programs (such as YMCAs, YWCAs, Girls Inc., and Boys and Girls Clubs)

Organizations with Health Communication Expertise

People or organizations with health communication expertise often require a fee for their consultation; those groups are excluded from this list. The following Web sites provide information, advice, publications, and other free resources.

National Organizations

American Public Health Association's Health Communication Working Group

www.hehd.clemson.edu/Publichealth/PHEHP/HealthComm/WEBCOMG4.htm

Hablamos Juntos, which provides many resources on written materials specifically for Latinos www.hablamosjuntos.org/mission/latinos.asp

National Hispanic Medical Association www.nhmamd.org

National Institute for Literacy www.nifl.gov/nifl

The Plain Language Association International www.plainlanguagenetwork.org

This organization also provides online training www.plainlanguagenetwork.org/plaintrain/

Social Marketing Institute www.social-marketing.org

Society for Public Health Education www.sophe.org

The society also has a Web site on unintentional injury www.sophe.org/ui/index.html

State, Local, or Community partners

Community colleges

Healthy People 2010 State contacts www.healthypeople.gov/HPScripts/StateContact.asp

Health educators

Health educator training programs

Hospital community outreach departments

Nursing schools

Universities

Resources on Developing Community Partnerships

Healthy People 2010 is a key resource on developing community coalitions. It includes tips, action steps, suggestions for potential partners, resources, examples from the field, and lists of state representatives who can advise you on collaboration.

www.healthypeople.gov/state/toolkit/partners.htm

Here are some other resources for developing community partnerships:

COMING TOGETHER—Building Community Collaboration and Consensus

www.communitycollaboration.net/index.htm

The Community Tool Box at the University of Kansas www.ctb.ku.edu

Health Educator's Toolbox from the State of Washington http://www3.doh.wa.gov/here/howto/HERE_ToolListing.aspx

NHTSA's Safe Communities webpage www.nhtsa.dot.gov

The Nonprofit Risk Management Center's fact sheet on community collaboration www.nonprofitrisk.org/mc/collab.htm

Partnering with State Highway Safety Offices: Tips and Tactics for Success

www.nhtsa.dot.gov/people/outreach/TipsandTactics/index.htm

Step 2a: Sources of Data on the Traffic Safety Problem among Latinos

The Centers for Disease Control and Prevention's (CDC) Web-based Injury Statistics Query and Reporting System (WISQARS) provides fatality data on a state-by-state basis, as well as estimates of national-level injury data.

www.cdc.gov/ncipc/wisqars/default.htm

State health departments usually have demographic and health status data for Latino populations (contact the epidemiologist).

Local police, health, and Emergency Medical Services departments and/or hospitals may have data on your specific audience.

State Highway Safety Offices may have data specific to your state www.ghsa.org

NHTSA has the following resources:

Seat Belt and Hispanic Report 2003 <http://www.nhtsa.dot.gov/people/injury/airbags/buckleplan/seatbeltshispanic2003/index.htm>

Facts About Drinking and Driving and Hispanics [http://www.nhtsa.dot.gov/people/injury/alcohol/HispanicsFctSht\(11_20\).pdf](http://www.nhtsa.dot.gov/people/injury/alcohol/HispanicsFctSht(11_20).pdf)

Fatality Analysis Reporting System provides crash-, vehicle-, and person-level data on all motor vehicle crashes occurring on roadways customarily open to the public and resulting in a death within 30 days of the crash. www-fars.nhtsa.dot.gov

Multicultural outreach pages www.nhtsa.com/multicultural/

Step 2b: Sources of Information on Effective Individual and Programmatic Strategies to Reduce the Risk of Traffic Injury

AAA Exchange www.aaaexchange.com

AAA Foundation for Traffic Safety www.aaafoundation.org

American Academy of Pediatrics www.aap.org

CDC National Center for Injury Prevention and Control www.cdc.gov/injury

Children's Safety Network www.childrenssafetynetwork.org

Safe Kids Worldwide www.safekids.org

NHTSA www.nhtsa.dot.gov

Patrick, K., and F.D. Scutchfield, eds. 2001. Reducing Injuries to Motor Vehicle Occupants: Systematic Reviews of Evidence, Recommendations from the Task Force on Community Preventive Services, and Expert Commentary. *American Journal of Preventive Medicine* Vol. 21, No. 4S.

Step 3: Understand Your Audience

Sources of Information on Conducting Focus Groups

Morgan, D.L., R.A. Krueger. 1998. *The Focus Group Kit*. California: Sage Publications. A set of six short books that take you through the focus-group process. The books include: *The Focus Group Guidebook*, *Planning Focus Groups*, *Developing Questions for Focus Groups*, *Moderating Focus Groups*, *Involving Community Members in Focus Groups*, and *Analyzing and Reporting Focus Group Results*.

Stevens, P.E. 1996. Focus Groups: Collecting Aggregate-Level Data to Understand Community Health Phenomena. *Public Health Nursing* 13(3): 170–6. This article discusses the potential benefits of focus groups when studying community health. It explores the advantages and uses of a focus group as well as purposes and processes of focus-group facilitation. It goes on to explain how to analyze focus-group results, their limitations, and their implications for health planning.

Step 3a: Information on Demographics

NHTSA has collected demographic data on the major Latino populations and countries of origin, organized by state; contact a NHTSA regional office for more information: <http://www.nhtsa.dot.gov/nhtsa/whatis/regions/index.cfm>

The U.S. Census Bureau also provides demographic information:
www.census.gov/main/www/cen2000.html

Step 3b: Sources of Information on Latinos and Health-Related Issues

Organizations

ASPIRA: www.aspira.org
Congressional Hispanic Caucus Institute: www.chci.org
HispanicOnline.com: www.hispaniconline.com/res/res/org_ix.html
Latino Issues Forum: www.lif.org
League of United Latin American Citizens: www.lulac.org
MANA National Latina Organization: www.hermana.org
National Alliance for Hispanic Health: www.hispanichealth.org
National Association of Hispanic Nurses: www.thehispanicnurses.org
National Council of La Raza: www.ncl.org
National Hispanic Council on Aging: www.nhcoa.org
National Hispanic Medical Association: www.nhmamd.org
National Latino Children's Institute: www.nlci.org
National Latino Council on Alcohol and Tobacco Prevention (LCAT):
www.nlcalt.org
Pan American Health Organization: www.paho.org

Resource Materials

2002 National Survey of Latinos, conducted by the Pew Hispanic Center and the Kaiser Family Foundation: www.kff.org/kaiserpolls/pomr031704pkg.cfm
Aguirre-Molina, M., C.W. Molina, and R.E. Zambrana. 2001. Health Issues in the Latino Community. San Francisco: Jossey-Bass.
Doty, M.M., and B.I. Ives. 2002. Quality of Health Care for Hispanic Populations: Findings from The Commonwealth Fund 2001 Health Care Quality Survey. New York: The Commonwealth Fund. www.cmwf.org/usr_doc/doty_factsheethis.pdf
Iannotta, J.G. (Ed.). 2002. Emerging Issues in Hispanic Health: Summary of a Workshop. Washington, DC: National Academies Press. www.nap.edu/
Urrutia, M. 2004. The State of Hispanic America 2004: Latino Perspectives on the American Agenda. Washington, DC: National Council of La Raza.

Step 3d: Sources of Information on Latino Traffic Safety Knowledge, Attitudes, and Behavior

NHTSA has the following resources:

Facts About Drinking and Driving and Hispanics: [www.nhtsa.dot.gov/people/injury/alcohol/HispanicsFctSht\(11_20\).pdf](http://www.nhtsa.dot.gov/people/injury/alcohol/HispanicsFctSht(11_20).pdf)

Gantz, T., D.R. Ragland, E.J. De La Garza, and L. Cohen. 2003. Traffic safety in communities of color. Institute of Transportation Studies U.C. Berkeley Traffic Safety Center.

The Latino Council on Alcohol and Tobaccos (LCAT), and Midwest Latino Health Research. 2001. Traffic Safety in Latino Communities: Focus group results with Latino immigrants in the three U.S. Cities.

Lee, B., I. Rivera, and S. Raferty. 2001. Final report on twelve focus group discussions with African-Americans and Hispanics to evaluate drinking and driving campaigns. Ogilvy Public Relations.

Multicultural outreach pages: www.nhtsa.com/multicultural/

Seat Belt and Hispanic Report 2003

www.nhtsa.dot.gov/people/injury/airbags/buckleplan/seatbeltshispanic2003/index.htm

Step 6: Sources for Principles of Effective Health Communication

- AMC Cancer Research Center, in cooperation with Centers for Disease Control and Prevention. 1994. Beyond the Brochure: Alternative Approaches to Effective Health Communication. www.cdc.gov/cancer/nbccedp/bccpdfs/amcbeyon.pdf
- Bronheim, S., and S. Sockalingam. 2003. A guide to choosing and adapting culturally and linguistically competent health promotion materials. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. http://gucchd.georgetown.edu/nccc/documents/Materials_Guide.pdf
- Center for Substance Abuse and Prevention Technical Assistance Bulletins store.health.org/catalog/results.aspx?h=publications&topic=101
- Centers for Disease Control and Prevention, and Agency for Toxic Substances and Disease Registry. 1999. Simply Put: Tips for Creating Easy-to-Read Print materials Your Audience Will Want to Read and Use. Atlanta: Centers for Disease Control and Prevention.
- Clearinghouse on Elementary and Early Childhood Education Guidelines eecearchive/digests/1999/santos99.pdf
- Doak, C.C., L.G. Doak, and J.H. Root. 1996. Teaching patients with low literacy skills. Philadelphia: J.B. Lippincott.
- Fenton Communications. 2001. Now Hear This: The Nine Laws of Successful Advocacy Communications. Washington, DC: Fenton Communications. www.fenton.com/pages/5_resources/pdf/Packard_Brochure.pdf
- Hablamos Juntos www.hablamosjuntos.org/
- National Cancer Institute. 1994. Clear and Simple: Developing Effective Print Materials for Low-Literate Readers. Bethesda, MD: National Cancer Institute. www.cancer.gov/cancerinformation/clearandsimple
- National Institutes of Health, National Cancer Institute. 2002. Making Health Communications Programs Work. Bethesda, MD: National Cancer Institute. www.cancer.gov/pinkbook
- Public Health Foundation. 2002. The Healthy People 2010 Toolkit. Washington, DC: Public Health Foundation. www.healthypeople.gov/state/toolkit/
- Root and Stableford, Write It Easy to Read: A Guide to Creating Plain English Materials (1998).
- Social Venture Partners www.svpseattle.org/resource_libraries/Marketing/marketing.htm
- Virginia Adult Education Health Literacy Toolkit www.aelweb.vcu.edu/publications/healthlit/
- Washington State Department of Health. 2000. Guidelines for Developing Easy-to-Read Health Education Materials. <http://www3.doh.wa.gov/here/howto/images/easy2.html>

Step 9: Resources on Program Evaluation

- Goodyear, L., and Bohan-Baker, M., eds. 2001. The Evaluation Exchange: Vol. VII, No. 1. Harvard Family Research Project. www.gse.harvard.edu/hfrp/eval/archives.html
- A Guide to Evaluation Primers, produced by the Association for the Study and Development of Community for The Robert Wood Johnson Foundation
www.rwjf.org/files/publications/RWJF_ResearchPrimer_0804.pdf
- Thompson, N.J., and H.O. McClintock. 2002. Demonstrating Your Program's Worth: A Primer on Evaluation for Programs to Prevent Unintentional Injury. Atlanta: Centers for Disease Control and Prevention. www.cdc.gov/ncipc/pub-res/dypw/
- U.S. Department of Transportation. 1999. The Art of Appropriate Evaluation: A Guide for Highway Safety Program Managers. Washington, DC: U.S. Department of Transportation, National Highway Traffic Safety Administration.



Appendix C:

Glossary of Spanish Traffic Safety Terms

Appendix C: Glossary English to Spanish

English	Spanish	Category
3 point restraints	Cinturón de seguridad de 3 puntos	Belts
Adjustment cushions	Almohadillas de ajuste	Bike/Ped
Air bag	Bolsa de aire	Belts
Air bags on and off switches	Interruptor para activar o desactivar las bolsas de aire	CPS
As a pedestrian make eye contact with the driver	Como peatón haga contacto visual con el conductor	Bike/Ped
Automatic windows	Ventanas automáticas	CPS
Automobile safety	Seguridad automovilística	General
Automobile, car, passenger car	Automóvil/ carro/ vehículo/ auto	General
Baby	Bebé	General
Back seat/ rear seat	Asiento de atrás OR Asiento trasero	CPS
Be safe be seen	Por su seguridad, haga que lo vean OR Por su seguridad, déjese ver	Bike/Ped
Being thrown out of the vehicle	Ser expulsado del vehículo	Belts
Belt path	Ruta o trayectoria del cinturón de seguridad	CPS
Bicycle	Bicicleta	Bike/Ped
Bike helmet, motorcycle helmet, helmet	Casco protector	Bike/Ped
Blood alcohol content (BAC)	Concentración de alcohol en la sangre OR Nivel de alcohol en la sangre	DUI
Booster seat	Asiento elevado [Booster seat]	CPS
Brain injury	Lesión cerebral	General
Brochure	Folleto	General
Buckle up	Abróchate el cinturón	Belts
Buckle up	Abróchese el cinturón/ abróchese- Spanish formal" you" tense of the verb	Belts
Buckle up!	¡Abróchate el cinturón de seguridad!	Belts
Bumper	Parachoques	General
Cause of Death	Causa de muerte	General
Center of the back seat	El centro del asiento trasero	CPS
Child passenger safety	Seguridad del niño como pasajero OR Seguridad del pasajero niño	CPS
Child passenger safety (cps) technician	Técnico de seguridad especializado en el pasajero niño	CPS
Child safety seat/ Child restraint	Asiento de seguridad para niño	CPS
Child seat checkup	Revisiones de los asientos de seguridad para niños CPS	CPS
Click It or Ticket	Abrochado o Multado	Belts
Collision	Colisión	General
Combination safety seat	Asiento de seguridad de uso múltiple	CPS
Confiscate	Confiscar	General
Convertible child safety seat	Asiento de seguridad de niño convertible que se instala mirando hacia atrás o hacia delante	CPS
CPS Fitting Station	Estación para instalar asientos de seguridad para niños	CPS
Crash	Choque General	General
Curb	Cuneta	Bike/Ped
Dashboard	Panel de instrumentos OR Tablero de instrumentos	General
Designated sober driver	(Conductor/ Chofer) designado sobrio	Bike/Ped
Driver	Conductor/ Chofer	General
Drunk driving	Manejar en estado de ebriedad OR Manejar borracho	DUI
DUI- Driving under the influence of alcohol and/or other drugs	Conducir ebrio o drogado OR (Guiar/ Conducir/ Manejar) bajo la influencia del alcohol o las drogas	DUI
DWI- Driving while intoxicated	Manejar (intoxicado/ en estado de ebriedad)	DUI
Enforcement	Aplicación de la ley	General
Environmental conditions	Condiciones ambientales	General
Forward-facing child safety seat	Asiento de seguridad para bebe instalado mirando hacia adelante	CPS
Friends don't let friends drive drunk	Amigos no dejan que los amigos manejen borrachos	DUI
Front headlights	(Focos/ Luces) delanteras	General
Front seat	Asiento delantero	CPS
Get out of the way	Salgase del camino	Bike/Ped
Guidelines	Guías/ Directivas/ Consejos/ Pasos a seguir	General
Hand-me down seat	Asiento de segunda mano	CPS
Hand-outs	Folleto/ Materiales impresos comunicados	General
Harness	Arnés	CPS
Impaired driver	Conductor bajo la influencia del alcohol o las drogas OR Conductor ebrio o drogado	DUI
Injuries	Lesiones	General

Appendix C: Glossary English to Spanish (continued)

English	Spanish	Category
Injury facts	Datos sobre lesiones	General
Intersection	Intersección	General
Integrated seat	Asiento de seguridad del niño integrado al asiento del vehículo	CPS
Intoxicated individuals	Individuos en estado de ebriedad o individuos ebrios OR Individuos en estado de embriaguez	DUI
Jump seat	Asiento plegable en la camioneta	CPS
Know the facts or suffer the consequences	Conoce la (realidad/ verdad) o sufre las consecuencias OR Conoce la realidad o atente a las consecuencias	General
Label/ Warning label	Etiqueta/ Etiqueta de Advertencia	CPS
Lap belt	Cinturón de seguridad de regazo	Belts
Latch system (Lower Anchorage and Tethers for Children)	Sistema con anclaje inferior y correas de seguridad para niños	CPS
Manufacturer	Fabricante	CPS
Misuse	Uso incorrecto	CPS
Motor vehicle crash	Choque automovilístico	General
Motorcycle	Motocicleta	Bike/Ped
Motorized scooter	Monopatín motorizado	Bike/Ped
New Driver/Novice Driver	Nuevo conductor/ Conductor novato	General
Night vision	Visión nocturna	Bike/Ped
Padding	Relleno	Bike/Ped
Passenger	Pasajero	General
Pedestrian cross walk	Cruce peatonal	Bike/Ped
Pedestrian/ Person traveling on foot	Peatón/ Persona caminando	Bike/Ped
Pick up truck	Camioneta	General
Posted speed limit	Límite de velocidad indicado	General
Prevent/Prevention	Prevenir/ Prevención	General
Protective padding	Protector (acolchado/ acojinado)	Bike/Ped
Rear lights	(Focos/ Luces) traseras	General
Rear-facing only seat	Asiento de seguridad para bebé instalado mirando hacia atrás	CPS
Research	Trabajo de investigación OR Análisis investigativo	General
Retainer clip	Broche retenedor del arnés	CPS
Road accident	Accidente de carretera	General
Roadside assistance	(Asistencia/ Auxilio) en las carreteras	General
Rollerblades	Patines con ruedas en línea	Bike/Ped
Rollover crash	Choque en donde el automóvil se vuelca	General
Run over by a car	Atropellado	Bike/Ped
Safety belt/ Seat belt	Cinturón de seguridad/ Cinturón	Belts
Scooter	Monopatín OR Teresina	Bike/Ped
Seat frame	Estructura o marco del asiento	CPS
Senior/Older Person	Persona de mayor edad OR Persona de la tercera edad OR Anciano/a	General
Shell	Armazón	CPS
Shoulder restraint	Cinturón de seguridad de hombro	Belts
Side walk	Acera	Bike/Ped
Skateboard	Patineta	Bike/Ped
Sports utility trucks (SUV)	Camioneta [SUV] OR Camioneta deportiva	General
Tether	Correa que sujeta la parte superior del asiento de seguridad para niño, (parte del sistema de anclaje/ parte del sistema de pestillo de anclaje) [latch system]	CPS
Tips	Consejos	General
Tools	Herramientas	General
Traffic crash	Choque automovilístico	General
Traffic lights	Semáforo	General
Truck	Camión	General
Used seat	Asiento usado	CPS
Vehicle design	Diseño del vehículo	General
Vehicle Inspection	Inspección de Vehículos	General
Vehicle owner's manual	Manual del propietario del vehículo	General
Vehicle restraint systems	Sistema de seguridad en los vehículos	Belts
You drink and drive. You lose.	Si bebes y manejas, pierdes	DUI

Appendix C: Glossary Spanish to English

<i>Spanish</i>	<i>English</i>	<i>Category</i>
¡Abrochate el cinturón de seguridad!	Buckle up!	Belts
Abrochado o Multado	Click it or ticket	Belts
Abrochate el cinturón	Buckle up	Belts
Abrochese el cinturón/ abróchese- Spanish formal “you” tense of the verb	Buckle up	Belts
Accidente de carretera	Road accident	General
Acera	Side walk	Bike/Ped
Almohadillas de ajuste	Adjustment cushions	Bike/Ped
Amigos no dejan que los amigos manejen borrachos	Friends don’t let friends drive drunk	DUI
Aplicación de la ley	Enforcement	General
Armazón	Shell	CPS
Arnés	Harness	CPS
Asiento de seguridad del niño integrado al asiento del vehículo	Integrated seat	CPS
Asiento de atrás OR Asiento trasero	Back seat/ rear seat	CPS
Asiento de segunda mano	Hand-me down seat	CPS
Asiento de seguridad para niño	Child safety seat/ Child restraint	CPS
Asiento de seguridad de niño convertible que se instala mirando hacia atrás o hacia adelante	Convertible child safety seat	CPS
Asiento de seguridad para bebe instalado mirando hacia adelante	Forward-facing child safety seat	CPS
Asiento de seguridad para bebe instalado mirando hacia atrás	Rear-facing only seat	CPS
Asiento de seguridad de uso múltiple	Combination safety seat	CPS
Asiento delantero	Front seat	CPS
Asiento elevado [booster seat]	Booster seat	CPS
Asiento elevado [booster seat] con respaldo alto	High back booster	CPS
Asiento plegable en la camioneta	Jump seat	CPS
Asiento usado	Used seat	CPS
Asistencia/auxilio en las carreteras	Roadside assistance	General
Atropellado	Run over by a car	Bike/Ped
Automóvil/ carro/ vehículo/ auto	Automobile, car, passenger car	General
Bebé	Baby	General
Bicicleta	Bicycle	Bike/Ped
Bolsa de aire	Air bag	Belts
Broche retenedor del arnés	Retainer clip	CPS
Cabecera/ respaldo para la cabeza	Head restraint	CPS
Camión	Truck	General
Camioneta SUV, camioneta deportiva, vehículo deportivo utilitario	Sports utility trucks (SUV)	General
Camioneta	Pick up truck	General
Casco protector	Bike helmet, motorcycle helmet, helmet	Bike/Ped
Causa de muerte	Cause of Death	General
Choque	Crash	General
Choque automovilístico	Traffic crash	General
Choque automovilístico	Motor vehicle crash	General
Choque en donde el automóvil se vuelca	Rollover crash	General
Cinturón de seguridad de 3 puntos	3 point restraints	Belts
Cinturón de seguridad de regazo	Lap belt	Belts
Cinturón de seguridad de hombro	Shoulder restraint	Belts
Cinturón de seguridad/ Cinturón	Safety belt/ Seat belt	Belts
Colisión	Collision	General
Como peatón haga contacto visual con el conductor	As a pedestrian make eye contact with the driver	Bike/Ped
Condiciones ambientales	Environmental conditions	General
Conducir ebrio o drogado, guiar/ conducir/ manejar bajo la influencia del alcohol o las drogas	DUI—Driving under the influence of alcohol or/and other drugs	DUI
Conductor/ chofer	Driver	General
Conductor bajo la influencia del alcohol o las drogas OR Conductor ebrio o drogado	Impaired driver	DUI
Conductor/ Chofer designado sobrio	Designated sober driver	DUI
Confiscar	Confiscate	General
Conoce la (realidad/ verdad) o sufre las consecuencias OR Conoce la realidad o atente a las consecuencias	Know the facts or suffer the consequences	General
Consejos	Tips	General
Concentración de alcohol en la sangre OR Nivel de alcohol en la sangre	Blood alcohol content (BAC)	DUI

Appendix C: Glossary Spanish to English (continued)

Spanish	English	Category
Correa que sujeta la parte superior del asiento de seguridad para niño, (parte del sistema de anclaje/ parte del sistema de pestillo de anclaje) [latch system]	Tether	CPS
Cruce peatonal	Pedestrian cross walk	Bike/Ped
Cuneta	Curb	Bike/Ped
Datos sobre lesiones	Injury facts	General
Diseño del vehículo	Vehicle design	General
El centro del asiento trasero	Center of the back seat	CPS
Equipo protector	Protective padding	Bike/Ped
Estación para instalar asientos de seguridad para niños	CPS Fitting Station	CPS
Estructura o marco del asiento	Seat frame	CPS
Etiqueta/ Etiqueta de Advertencia	Label/ Warning label	CPS
Fabricante	Manufacturer	CPS
Faros o luces delanteras	Front headlights	General
Focos o luces traseras	Rear lights	General
Folleto	Brochure	General
Guías, directivas, consejos, pasos a seguir	Guidelines	General
Herramientas	Tools	General
Intersección	Intersection	General
Individuos en estado de ebriedad o individuos ebrios OR Individuos en estado de embriaguez	Intoxicated individuals	DUI
Inspección de Vehículos	Vehicle Inspection	General
Interruptor para activar o desactivar las bolsas de aire	Air bags on and off switches	CPS
Lesión cerebral	Brain injury	Bike/Ped
Lesión de la cabeza	Head injury	Bike/Ped
Lesiones	Injuries	General
Límite de velocidad indicado	Posted speed limit	General
Línea de información	Hot line	General
Manejar en estado de ebriedad, manejar borracho	Drunk driving	DUI
Manejar intoxicado o en estado de ebriedad	DWI—Driving while intoxicated	DUI
Manual del propietario del vehículo	Vehicle owner's manual	General
Materiales impresos comunicados, folletos	Hand-outs	General
Monopatín, Teresina	Scooter	Bike/Ped
Monopatín motorizado	Motorized scooter	Bike/Ped
Motocicleta	Motorcycle	Bike/Ped
Nuevo conductor/conductor novato	New Driver/Novice Driver	General
Panel de instrumentos/ tablero de instrumentos	Dashboard	General
Parachoques	Bumper	General
Pasajero	Passenger	General
Patines con ruedas en línea	Rollerblades	Bike/Ped
Patineta	Skateboard	Bike/Ped
Peatón- persona caminando	Pedestrian—person traveling on foot	Bike/Ped
Persona de mayor edad OR Persona de la tercera edad OR Anciano/a	Senior/Older Person	General
Por su seguridad, haga que lo vean OR Por su seguridad, déjese ver	Be safe be seen	Bike/Ped
Prevenir/prevención	Prevent/Prevention	General
Protector (acolchado/ acojinado)	Protective padding	Bike/Ped
Relleno	Padding	Bike/Ped
Revisiones de los asientos de seguridad para niños	Child seat checkup	CPS
Ruta o trayectoria del cinturón de seguridad	Belt path	CPS
Salgase del camino	Get out of the way	Bike/Ped
Seguridad automovilística	Automobile safety	General
Seguridad del niño como pasajero OR Seguridad del pasajero niño	Child passenger safety	CPS
Semáforo	Traffic lights	General
Ser expulsado del vehículo	Being thrown out of the vehicle	Belts
Si bebes y manejas, pierdes	You drink and drive. You lose.	DUI
Sistema con anclaje inferior y correas de seguridad para niños	Latch system (Lower Anchorage and Tethers for Children)	CPS
Sistema de seguridad en los vehículos	Vehicle restraint systems	Belts
Técnico de seguridad especializado en el pasajero niño	Child passenger safety (cps) technician	CPS
Trabajo de investigación OR Análisis investigativo	Research	General
Uso incorrecto	Misuse	CPS
Ventanas automáticas	Automatic windows	CPS
Visión nocturna	Night vision	Bike/Ped

Appendix C: Glossary by Category

Spanish	English	Category
Abróchate el cinturón	Buckle up	Belts
¡Abróchate el cinturón de seguridad!	Buckle up!	Belts
Cinturón de seguridad/ Cinturón	Safety belt/ Seat belt	Belts
Abróchese el cinturón/ abróchese- Spanish formal “you” tense of the verb	Buckle up	Belts
Bolsa de aire	Air bag	Belts
Cinturón de seguridad de 3 puntos	3 point restraints	Belts
Cinturón de seguridad de regazo	Lap belt	Belts
Ser expulsado del vehículo	Being thrown out of the vehicle	Belts
Cinturón de seguridad de hombro	Shoulder restraint	Belts
Abrochado o Multado	Click it or ticket	Belts
Sistema de seguridad en los vehículos	Vehicle restraint systems	Belts
Atropellado	Run over by a car	Bike/Ped
Bicicleta	Bicycle	Bike/Ped
Casco protector	Bike helmet, motorcycle helmet, helmet	Bike/Ped
Como peatón haga contacto visual con el conductor	As a pedestrian make eye contact with the driver	Bike/Ped
Por su seguridad, haga que lo vean OR Por su seguridad, déjese ver	Be safe be seen	Bike/Ped
Acera	Side walk	Bike/Ped
Cruce peatonal	Pedestrian cross walk	Bike/Ped
Protector (acolchado/ acojinado)	Protective padding	Bike/Ped
Monopatín, Teresina	Scooter	Bike/Ped
Monopatín motorizado	Motorized scooter	Bike/Ped
Motocicleta	Motorcycle	Bike/Ped
Patines con ruedas en línea	Rollerblades	Bike/Ped
Patineta	Skateboard	Bike/Ped
Peatón- persona caminando	Pedestrian—person traveling on foot	Bike/Ped
Relleno	Padding	Bike/Ped
Visión nocturna	Night vision	Bike/Ped
Cuneta	Curb	Bike/Ped
Almohadillas de ajuste	Adjustment cushions	Bike/Ped
Salgase del camino	Get out of the way	Bike/Ped
Lesión de la cabeza	Head injury	Bike/Ped
Asiento delantero	Front seat	CPS
Asiento de atrás OR Asiento trasero	Back seat/rear seat	CPS
Asiento elevado [booster seat]	Booster seat	CPS
El centro del asiento trasero	Center of the back seat	CPS
Ruta o trayectoria del cinturón de seguridad	Belt path	CPS
Armazón	Shell	CPS
Asiento de seguridad para bebe instalado mirando hacia atrás	Rear-facing only seat	CPS
Asiento usado	Used seat	CPS
Broche retenedor del arnés	Retainer clip	CPS
Estructura o marco del asiento	Seat frame	CPS
Asiento de seguridad para niño	Child safety seat/ Child restraint	CPS
Asiento de seguridad para bebe instalado mirando hacia adelante	Forward-facing child safety seat	CPS
Asiento de seguridad de uso múltiple	Combination safety seat	CPS
Asiento de seguridad de niño convertible que se instala mirando hacia atrás o hacia adelante	Convertible child safety seat	CPS
Seguridad del niño como pasajero OR Seguridad del pasajero niño	Child passenger safety	CPS
Arnés	Harness	CPS
Asiento de seguridad del niño integrado al asiento del vehículo	Integrated seat	CPS
Asiento de segunda mano	Hand-me down seat	CPS
Asiento elevado [booster seat] con respaldo alto	High back booster	CPS
Asiento plegable en la camioneta	Jump seat	CPS
Correa que sujeta la parte superior del asiento de seguridad para niño, (parte del sistema de anclaje/ parte del sistema de pestillo de anclaje) [latch system]	Tether	CPS
Etiqueta/ Etiqueta de Advertencia	Label/ Warning label	CPS
Fabricante	Manufacturer	CPS
Interruptor para activar o desactivar las bolsas de aire	Air bags on and off switches	CPS
Sistema con anclaje inferior y correas de seguridad para niños	Latch system (Lower Anchorage and Tethers for Children)	CPS
Uso incorrecto	Misuse	CPS

Appendix C: Glossary by Category (continued)

Spanish	English	Category
Ventanas automáticas	Automatic windows	CPS
Cabecera/ respaldo para la cabeza	Head restraint	CPS
Técnico de seguridad especializado en el pasajero niño	Child passenger safety (CPS) technician	CPS
Revisión de los asientos de seguridad para niños	Child seat checkup	CPS
Estación para instalar asientos de seguridad para niños	CPS Fitting Station	CPS
Amigos no dejan que los amigos manejen borrachos	Friends don't let friends drive drunk	DUI
Conducir ebrio o drogado, guiar/ conducir/ manejar bajo la influencia del alcohol o las drogas	DUI—Driving under the influence of alcohol or/and other drugs	DUI
Conductor/ Chofer designado sobrio	Designated sober driver	DUI
Manejar en estado de ebriedad, manejar borracho	Drunk driving	DUI
Manejar intoxicado o en estado de ebriedad	DWI- Driving while intoxicated	DUI
Concentración de alcohol en la sangre OR Nivel de alcohol en la sangre	Blood alcohol content (BAC)	DUI
Si bebes y manejas, pierdes	You drink and drive. You lose.	DUI
Conductor bajo la influencia del alcohol o las drogas OR Conductor ebrio o drogado	Impaired driver	DUI
Individuos en estado de ebriedad o individuos ebrios OR Individuos en estado de embriaguez	Intoxicated individuals	DUI
Aplicación de la ley	Enforcement	General
Condiciones ambientales	Environmental conditions	General
Conductor/ chofer	Driver	General
Panel de instrumentos/ tablero de instrumentos	Dashboard	General
Folleto	Brochure	General
Herramientas	Tools	General
Lesión cerebral	Brain injury	General
Parachoques	Bumper	General
Accidente de carretera	Road accident	General
Camión	Truck	General
Camioneta	Pick up truck	General
Choque automovilístico	Traffic crash	General
Consejos	Tips	General
Datos sobre lesiones	Injury facts	General
Diseño del vehículo	Vehicle design	General
Focos o luces traseras	Rear lights	General
Trabajo de investigación OR Análisis investigativo	Research	General
Límite de velocidad indicado	Posted speed limit	General
Línea de información	Hot line	General
Semáforo	Traffic lights	General
Choque	Crash	General
Colisión	Collision	General
Confiscar	Confiscate	General
Camioneta SUV, camioneta deportiva, vehículo deportivo utilitario	Sports utility trucks (SUV)	General
Choque automovilístico	Motor vehicle crash	General
Intersección	Intersection	General
Conoce la (realidad/ verdad) o sufre las consecuencias OR Conoce la realidad o atente a las consecuencias	Know the facts or suffer the consequences	General
Faros o luces delanteras	Front headlights	General
Guías, directivas, consejos, pasos a seguir	Guidelines	General
Materiales impresos comunicados, folletos	Hand-outs	General
Causa de muerte	Cause of Death	General
Prevenir/prevención	Prevent/Prevention	General
Pasajero	Passenger	General
Nuevo conductor/conductor novato	New Driver/Novice Driver	General
Persona de mayor edad OR Persona de la tercera edad OR Anciano/a	Senior/Older Person	General
Automóvil/ carro/ vehículo/ auto	Automobile, car, passenger car	General
Seguridad automovilística	Automobile safety	General
Manual del propietario del vehículo	Vehicle owner's manual	General
Lesiones	Injuries	General
Bebé	Baby	General
Choque en donde el automóvil se vuelca	Rollover crash	General
Inspección de Vehículos	Vehicle Inspection	General
Asistencia/auxilio en las carreteras	Roadside assistance	General

Appendix D: WEST Story and Development of a Fotonovela

To test the completeness and feasibility of the draft of these *Guidelines*, EDC staff followed the *Guidelines* as we developed a pilot material for one community. The following are notes describing our experience working with Western Massachusetts Educación de seguridad en el tránsito (WEST), a community group in Holyoke, Massachusetts, to develop a Spanish-language material for the Latino community of western Massachusetts. This story offers an example of how a national organization (EDC), in consultation with two other national organizations (AAAFTS and NHTSA), developed a single material with and for a specific community. The *fotonovela* is provided in Appendix E.

Getting Started

We considered creating materials in three Massachusetts communities, all of which have large Latino populations. We selected Holyoke for several reasons: EDC was already familiar with this community, having worked there on a previous project called “Kids in the Back”; the community wanted to address traffic safety issues affecting Latinos in their locality; and the project’s senior research assistant worked in the area and had contacts with professionals and residents who were interested in this project.

The EST senior research assistant spoke with colleagues and others in the community who had expertise in traffic safety, public health, and Latino health issues, and invited them to participate in a community advisory group.

Six people came to the first meeting, learned about the project, and enjoyed lunch. The group named itself WEST (Western Massachusetts Educación de seguridad en el tránsito). Participants represented the Office of Child Care Services—West Springfield; the Martin Luther King, Jr. Community Center; Western Massachusetts SAFE KIDS Coalition; the Holyoke Health Center; the Carson Center for Traumatic Brain Injury Services; and the University of Massachusetts—Amherst. These individuals continued to meet over the course of nearly a year to provide EDC with ideas and feedback.

Determining the topic

The first task for the WEST group was to select the topic to be addressed. EST staff began by reviewing existing materials and consulting the EST National Work Group, a group of national experts in traffic safety, Latino issues, and health communication. We decided that there was a need for Spanish-language materials addressing impaired driving, safety belts, and pedestrian safety. Because we wanted the WEST group to make the final choice of topic, at the first meeting with the group we presented general data on the three potential topics, as well as national data from NHTSA on

traffic-related injuries and risk factors among Latinos. The group chose pedestrian safety. Members felt that, due to the State's *Click It or Ticket* enforcement campaign, the community was already aware of the importance of using safety belts, and that more information existed on impaired driving than on pedestrian safety.

Deciding Whether to Use Existing Materials

At a WEST group meeting, we reviewed target audiences, messages, and topics in the pedestrian safety materials we had collected as part of our survey of Spanish-language materials, which was conducted earlier in the project. Our examination confirmed that very few materials addressed adult Latino drivers and pedestrians. Nor did the materials deal with the issues on which we planned to focus: environmental factors in pedestrian safety, the shared responsibility of drivers and pedestrians, and the consequences of unsafe behavior.

1. Identify Key Partners

Traffic safety experts: Throughout the project, we drew on the expertise of our own staff, as well as staff from AAAFTS, the national and regional NHTSA offices, the injury prevention office at the Massachusetts Department of Public Health, and the Massachusetts Governor's Highway Safety Bureau. In addition, the Western Massachusetts SAFE KIDS coalition and the Carson Center for Traumatic Brain Injury provided valuable information about local pedestrian safety issues.

Health communication experts: We worked with The Media Network, Inc., a social marketing firm specializing in developing culturally appropriate messages for diverse communities. The Media Network was under contract with NHTSA, and therefore was available to work on our project.

Latino culture experts: We were able to draw on the expertise of the national experts on our EST National Workgroup, as well as the local expertise provided by the members of the WEST group.

2. Understand Your Traffic Safety Topic

Review Data on the Scope of the Problem

To help WEST members understand the scope of the problem in their community, at the second meeting we provided them with local data on pedestrian injuries among Latinos: hospitalization data from the Massachusetts Department of Public Health and emergency department data from Safe Kids. We also provided traffic fatality data from NHTSA and summaries of research from other states on pedestrian injuries among Latinos.

Review the Research on Preventing Traffic Injuries

With the WEST group, we reviewed current pedestrian injury prevention information from NHTSA and the Massachusetts Governor's Highway Safety Bureau. In addition, we reviewed information from other sources of pedestrian safety information, such as WalkBoston.

Refine Your Topic

At this point in the project, we needed to specify the aspect of pedestrian safety on which we would focus. Based on the information and research they had reviewed, WEST members agreed that both drivers and pedestrians were responsible for incidents resulting in pedestrian injuries, and that the material should therefore target both pedestrians and drivers.

The group then decided that the material should target adults between the ages of 16 and 65. WEST selected this age group, rather than children and the elderly, for several reasons:

- In this community, adults under 65 had higher rates of emergency-department visits for pedestrian injuries than did the elderly.
- If parents and other adults knew how to be safer pedestrians, they could teach their children.
- This audience includes new drivers, a high-risk group.

WEST decided that the material would target all Latinos. Although in the Holyoke area Latino residents are predominantly from Puerto Rico, many are also from other countries of origin. Initially we selected Holyoke for our target area and then expanded to the Chicopee–Springfield region because the agencies represented in our WEST group overlap and serve all of these areas.

3. Understand Your Audience

Next, we needed to increase our understanding of the community's knowledge, attitudes, and behavior relevant to pedestrian safety, and to learn what methods community members thought would help prevent pedestrian injuries. Because EST staff did not have expertise in conducting focus groups, we hired an organization to train our bilingual staff in how to conduct focus groups, assist in developing questions, and help plan and co-facilitate the sessions.

We conducted three focus groups, with a total of 32 people. The participants of these groups were predominantly of Puerto Rican descent age 16 through 65, the age group we had identified as our target audience.

To prepare for the focus groups, we followed these steps:

1. Determined our questions according to the information we wanted to obtain
2. Contacted the WEST group to help recruit participants
3. Provided stipends of \$25 for each participant, with an additional \$10 for people who needed child care assistance
4. Reserved three sites that were centrally located, accessible by public transportation, and well known to residents

Each group was conducted somewhat differently, depending on the preferences of the participants: One group was conducted in Spanish, the second was conducted bilingually in Spanish and English, and a third group was conducted in English, which was then translated into Spanish. The translated focus group took much longer, and the flow of the discussion was less smooth. Staff recorded the responses of all three groups. Key quotes were left in their original language and then “interpreted” into English.

Understand Your Audience's Demographics

We did a demographic assessment of the Holyoke area using national and county data and discovered the following:

- The county is 16 percent Latino; Holyoke is 41 percent Latino and Latinos comprise 13 percent of the U.S. population (U.S. Census Bureau 2002, The Hispanic population in the United States: March 2002).
- Of Latinos in the county, 89 percent identify themselves as Puerto Rican. The remaining 11 percent identify themselves as Cuban, Mexican, or other Latino (U.S. Census Bureau 2003, American Community Survey-Multi-Year Profile).
- In Holyoke, 36 percent of persons over age five speak Spanish at home (U.S. Census Bureau 2000, Ability to Speak English: 2000).

Understand How Your Audience Views Traffic Safety Issues

The focus-group findings were key to understanding our target community. We found that a large number of participants had personal experience with pedestrian injury. Many participants expressed the misconception that the pedestrian always has the right of way.

Focus-group participants felt that the following issues needed to be addressed:

- There were many impediments to safe walking—broken sidewalks, a lack of clear signs, and difficulty understanding traffic signals—to name a few.
- Environmental issues, such as trash and snow removal and adequate lighting, need to be resolved to make walking safer.

- The police should enforce speed limits and other traffic laws that protect pedestrians.
- Community members need to be educated about signs and safe walking.

Participants believed that traffic safety messages should do the following:

- Speak to all members of a family and acknowledge the role of families in Latino culture.
- Show the negative impact of being an unsafe driver or pedestrian. For example, point out that the person they injure when being reckless could be their own family member or other loved one.
- Emphasize that everyone—pedestrians, drivers, and law enforcement officers—has a responsibility to keep people safe when they are walking.

After we conducted and summarized the focus groups, we shared the results with WEST members. They gave us their reactions, adding context to some of the comments we had heard. For example, one WEST member talked about the challenge of getting a damaged sidewalk repaired and her eventual success in doing so; other members spoke about their understanding of the community's relationship with the police. This feedback deepened our understanding of the community.

4. Develop Your Message and Content

Make Sure That the Traffic Safety Content Is Accurate

To refine the safety messages in the material, we consulted NHTSA. A staff member from NHTSA's regional office was on-site for our photo shoot to ensure that all the behavior portrayed was consistent with pedestrian safety recommendations.

Present Content in a Way That Is Culturally Appropriate

Based on our focus-group findings, research, and input from WEST and the EST National Work Group, we made the following decisions about our material:

- The material would target both drivers and pedestrians, and would highlight the emotional consequences (fear, regret, and shock) of unsafe behavior. The pedestrians would be a grandmother and grandson, both to show the importance of extended-family caregivers in protecting young pedestrians and to heighten the emotional impact.
- The material would include information about traffic signs and symbols, because focus-group participants indicated unfamiliarity with both.
- Because focus-group participants noted that trash, broken sidewalks, and inadequate lighting were all impediments to safe walking in this community, the material would include contact information for the Department of Public Works, which is responsible for fixing such problems.

5. Use Accurate, Simple, and Appropriate Language

Find a Good Writer

Finding a writer was a difficult task. We advertised the position and made personal contacts with the state and local health departments, multicultural Web job search engines such as latpro.com, advertisement and public relations agencies, and organizations represented by WEST. Several trained translators and writers expressed interest in this project; however, they did not feel comfortable with all of aspects of the job: writing, message development, and cultural marketing. We eventually chose a media consulting company, The Media Network, Inc., which specialized in working with various cultures and had expertise in traditional marketing, social marketing, and working in the Latino community. One of our sponsors helped defray the costs of working with this group.

Word Usage

In collaboration with our media consultant, we made several decisions about writing the material:

- It would be created in Spanish.
- Bilingual text would be used for key facts about laws and signage, because a majority of focus-group participants selected both English and Spanish as the primary language spoken at home.
- The language would be direct and simple.
- Because our sponsors hoped to use an adapted version of the material in other regions of the county, it would be written in Pan-Hispanic Spanish rather than using the colloquialisms of our particular community.

6. Use Culturally Appropriate Format and Graphics

Focus-group participants told us that, in general, they liked materials that were short and to the point and which grabbed the reader's attention with colorful images. They also preferred photographs to cartoons or drawings. Participants did not like materials with small fonts, long words, or a lot of text.

Based on our research, the focus-group results, WEST's input, and the advice of our media consultant, we selected the following elements for our material:

- A large font size
- Short, simple text
- A *fotonovela* rather than cartoons or text-only
- Bright colors
- Scenes from the Holyoke community

7. Solicit Feedback from Your Audience and Partners

We held a focus group to show members of our target audience a draft of the *fotonovela*. At this point, it contained drawings and text. One major question we wanted to answer was what character should serve as the “voice of reason,” the person who tells others the correct safety actions to take. We considered a crossing guard, a local business owner, and a nurse for the role. We also included a police officer as an option, even though WEST members believed, and other experts have concluded, that Latinos do not always have positive views of law enforcement officials. However, focus group participants stated clearly that they preferred to see a police officer in this role. Even though they rarely saw police enforcing pedestrian safety rules, they believed that police should promote pedestrian safety, and that people should expect them to do so. They believed that a Latino officer would be most appropriate and should be depicted in a helping role.

A Latino officer from the Holyoke police force volunteered to be photographed for the *fotonovela*. This outcome exemplifies the importance of asking your audience to provide feedback on the material and not relying solely on “common knowledge” or “expert opinion.”

Two months later, when the material was finalized, we held another focus group to make sure that the photos and finalized text were effective for the audience. Participants were able to state the key messages in the brochure, understood all the words, and indicated that the format was very engaging. They suggested two additions to the contact information on the back page.

8. Effectively Disseminate Your Material

More than 17,000 copies of the *fotonovela* were distributed to various community organizations in Holyoke, Springfield, West Springfield, Westfield, and Northampton, Massachusetts. They were shipped to organizations such as community health clinics, employment centers, Hispanic/Latino community groups, the local chapter of Safe Kids, and the local AAA clubs, for dissemination among their clientele.

9. Evaluate and Review Your Material

AAAFTS performed a simple process evaluation of the *fotonovela*, to monitor the distribution of the material and assess the appropriateness of the material for the specific community as seen by the distributors in the community itself. Surveys were emailed to all organizations to which the *fotonovela* was shipped. Follow-up telephone calls were placed to non-respondents, and distributors without valid e-mail addresses

were also contacted via telephone. Distributors were asked several questions pertaining to their ordering, receipt, and distribution of the *fotonovela*, and also about their impressions of its quality and appropriateness for their community. Specifically, they were asked to:

- Rate how useful and how appealing they found the *fotonovela* (very / somewhat / not at all),
- Indicate what words or phrases, if any, would be confusing to their community, and
- Provide specific suggestions for improving the *fotonovela*.

Responses were obtained from 55 percent of distributors who received shipments of the material. All respondents indicated that they believed the material would be either very or somewhat useful and appealing to members of their community. No respondents indicated that any of the Spanish language used was inappropriate or confusing. One respondent indicated that the brochure should be translated into English. One respondent indicated appreciation that the material was “not talking down to anyone;” however, another apparently inferred that the material primarily targeted children, which was not our intent as developers, and that adult readers might not “see themselves as part of the [pedestrian safety] problem.”

An impact evaluation was not performed in Holyoke. Given the extensive community involvement in the development of the *fotonovela*, as well as the overwhelmingly positive responses from the community-level distributors, it was determined that the *fotonovela* met the stated objective of the project, namely, to use the *Guidelines* to develop one sample educational material. The resources that would have been required to conduct a thorough evaluation of the impact of the material on the knowledge, beliefs, and behaviors of end-users was determined to be beyond the scope of this project.

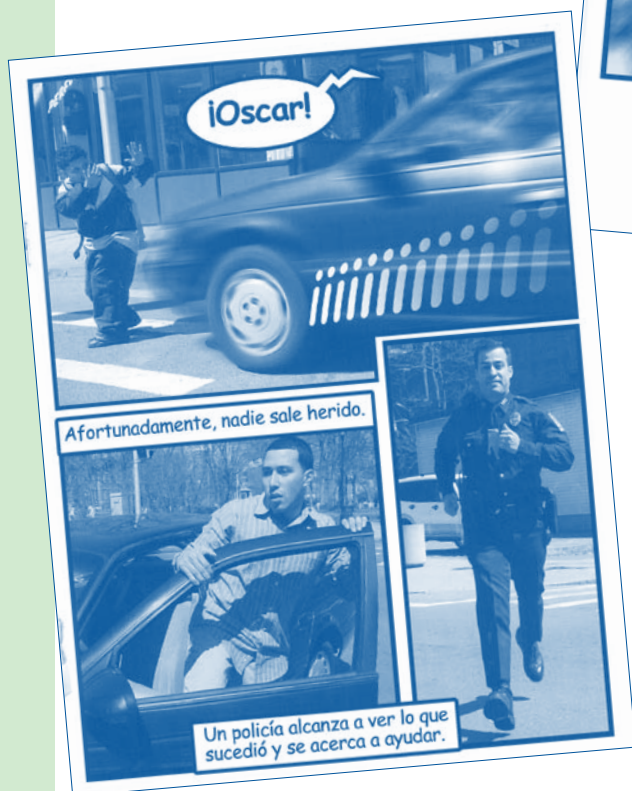
The *fotonovela* is presented next, in appendix E.

Appendix E: Fotonovela

Conductores y Peatones: Manténganse Alerta. Sean responsables.

La Seguridad es responsabilidad de TODOS.







Sepa lo que significan las señales de tránsito:

SEMÁFORO
Reglas Deténgase, Alto total.
Cuando la luz roja su velocidad y prepárese a detener su vehículo.
Cuando la luz verde siga.

ALTO o PARE
Todos los vehículos tienen que detenerse completamente.

CEDA EL PASO
Disminuya la velocidad y prepárese para detener su vehículo, si es necesario. Siga adelante con precaución.

SEÑAL DEL CRUCE DE PEATONES
Todos los vehículos, ciclistas y personas en patinetas deben detenerse y dejar cruzar a los peatones.

SEÑALES PARA PEATONES
No cruce. Manténgase en la acera.
Si está cruzando y la mano roja empieza a parpadear, termine de cruzar. Si está en la acera, deténgase y espere la señal.
Mire hacia la izquierda, hacia la derecha y hacia la izquierda nuevamente. Cruce si no vienen carros. Fíjese mientras cruza.

Know the meaning of the traffic signals:

TRAFFIC LIGHT
Red Stop completely.
Yellow Slow down and prepare to stop.
Green Go.

STOP
All vehicles come to complete stop.

YIELD
Slow down. Be ready to stop your vehicle if necessary. Proceed with caution.

CROSSWALK SIGN
All vehicles, bicyclists and skaters must stop to allow people to cross the street.

PEDESTRIAN SIGNALS
Don't cross. Stay on the sidewalk.
If the red hand starts blinking, finish crossing if in the road. Don't start if on the sidewalk.
Look left, look right and left again. Start crossing if clear. Keep looking as you cross.

LA SEGURIDAD ES UNA RESPONSABILIDAD COMPARTIDA. CUIDE A LOS DEMÁS, CUIDÁNDOSE A SI MISMO.

Para contactar la Oficina del Alcalde de su ciudad, llame al: Holyoke (413) 322-5510, Springfield (413) 787-6100

Para reportar problemas con señales de tránsito (semáforo, señales, cruce peatonal, etc.) llame al: Departamento de Obras Públicas: Holyoke (413) 322-6645, Springfield (413) 787-6224

Para información general sobre leyes y señales de tránsito en Massachusetts llame al: Oficina del Gobernador para la Seguridad en las Carreteras (Governor's Highway Safety Bureau) (617) 725-3301

En caso de emergencia llame al: 911

This material was developed by Education Development Center, Inc. with funding from AAA Foundation for Traffic Safety, National Highway Traffic Safety Administration and FIA Foundation for the Automobile and Society. Guidance and assistance were provided by Western Massachusetts Education de seguridad en el tránsito, a community advisory committee on pedestrian safety.

Appendix F: Adapting the Fotonovela for a Broader Audience

This appendix describes the process used to adapt the original *fotonovela*, reproduced in Appendix E, to serve a broader, more heterogeneous, nationwide audience. As described in Appendix D, the original *fotonovela* developed under the EST project was developed with and for a predominately Puerto Rican audience in western Massachusetts. This appendix describes how the AAA Foundation for Traffic Safety and the National Highway Traffic Safety Administration collaborated to modify the original *fotonovela* to serve Spanish-speakers across the United States.

To gain insight into the perceptions of this broader, more heterogeneous, nationwide audience, the AAA Foundation hired Dr. Carlos Arce of NuStats to conduct an external expert panel review of the original *fotonovela*. NuStats is a social policy research firm based in Austin, Texas. Dr. Arce, the founder of NuStats, possesses vast knowledge of and experience with the Hispanic market, and in fact, executed the first national survey of U.S. Hispanics in 1979. Dr. Arce and NuStats also possess extensive experience in traffic safety research, outreach, and communication.

NuStats worked closely with the AAA Foundation to assemble a panel of expert reviewers of the original *fotonovela* and to develop a questionnaire to distribute to this expert panel. NuStats and the AAA Foundation identified 125 potential panelists with expertise in working with, communicating with, or conducting outreach or marketing with the Latino/Hispanic community. The potential panelists were drawn primarily from respondents who had participated on NuStats Hispanic outreach expert panels in the past, and were supplemented by Spanish-speaking professionals suggested by the AAA Foundation.

The purpose of the questionnaire was to examine the *fotonovela* with respect to the following seven criteria:

- Cultural appropriateness [for Latinos in the reviewer's area],
- Readability,
- How understandable,
- Credibility of message,
- Appropriateness of *fotonovela* format,
- Attractiveness of overall design,
- Overall relevance to the audience, and
- Appropriateness for all U.S. Latino groups.

Of the 125 review requests sent, 25 completed questionnaires were ultimately returned. The reviewers represented a diverse cross-section of people responsible for conducting outreach with and/or delivering services to the Latino community. The majority of reviewers possessed at least 10 years of experience working with the Latino community, and 20 of the 25 considered themselves to be Hispanic or Latino. Six of the reviewers were from Puerto Rico, five were from the United States, five were from Mexico, five were from South America, three were from Central America, and one was from Cuba. The majority of reviewers worked with families, youths, and/or immigrants in their communities, and all but two of the reviewers indicated that they worked in an urban setting.

Overall, the opinions of the majority of the reviewers were positive. They indicated that the *fotonovela* format was appropriate for the intended audience, that the language level was appropriate and generally understandable, and that the *fotonovela* delivered a credible message.

The reviewers provided a number of specific criticisms of the *fotonovela*, and in many cases, they also provided specific suggestions for improvements. Specifically, several reviewers disliked the design of the front cover of the *fotonovela*, indicating that it was generally unattractive and that the font was difficult to read. Reviewers also commented on several aspects of the content of the *fotonovela*, including the selection of photographs, the correctness and appropriateness of the language used, and the clarity of the overall message. Several reviewers commented that the conduct of the young boy, Oscar, toward his grandmother, Doña Rufina, was disrespectful, and also that the use of the phrase “*¡Madre mía!*” would be offensive to some members of the intended audience. Several reviewers also suggested reducing the amount of text used to convey the police officer’s message on the final page, and remarked that the police officer’s body language might be viewed as condescending.

In response to insight gained from this review, the AAA Foundation and the National Highway Traffic Safety Administration modified the *fotonovela* to improve its clarity, appeal, and overall effectiveness for an audience comprising Latinos in urban areas across the United States. Examples of modifications made to the *fotonovela* include:

- Redesign of the front cover to use brighter colors and more readable font;
- Substitution of new text for specific phrases that reviewers found unclear, potentially offensive, or otherwise inappropriate;
- Simplification of messages and reduction in quantity of text; and
- Selection of alternate photographs to portray the police officer in a more positive light.

Some reviewers commented on other aspects of the *fotonovela*, including the appearance of the background (e.g., types of trees, amount of pedestrian traffic, etc.), indicating that these were not representative of their communities. Given that the resulting *fotonovela* is intended for nationwide distribution, it was acknowledged that some members of the audience would be able to identify more than others with specific images used in the *fotonovela*. Thus, in several instances, comments and suggestions not specifically related to the issues of linguistic and/or cultural appropriateness were not implemented.

The modified *fotonovela* is included in the final project report, available at www.aaafoundation.org. The review by NuStats is available, upon request, from the AAA Foundation for Traffic Safety.

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