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Improving communication with migrants for crisis preparedness in Finland: Lessons learned from COVID-19

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Improving communication with migrants for crisis preparedness in Finland: Lessons learned from COVID-19

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A report by

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The University of Helsinki research team was led by Dr. Simo K. Määttä and included the following researchers: Dr. Tuija Kinnunen, Dr. Svetlana Probirskaja, Dr. Päivi Kuusi, and research assistants Linda Rolig and Jenni Lahti.

Contents

1 Multilingual landscape in Finland	4
2 Evolution and characteristics of the COVID-19 pandemic in Finland	ϵ
3 Data-collection procedures and methods	8
3.1 Assessment of the latest practices	8
3.2 Interviews	8
3.3 Dissemination and stakeholder involvement	10
4 Findings	10
4.1 Characteristics of multilingual information about COVID-19 in Finland	10
4.2 Interviewees and their tasks in their organization	11
4.3 Cooperation networks	12
4.4 Target groups	13
4.5 Translated contents	15
4.6 Management and organization of translation flows	16
4.7 Monitoring the quality of translations	17
4.8 Languages of dissemination	19
4.9 Dissemination	20
5 Summary of major findings	26
5.1 Best practices	26
5.2 Challenges	26
6 Recommendations	28
7 References	30

1 Multilingual landscape in Finland

Until 1809, the current territory of Finland alternated between western (Sweden) and eastern (Novgorod and Russia) rule, with Swedish rule being dominant in the western part and Russian rule in the eastern part of the country. Between 1617 and 1721, most of the country was part of Sweden, and between 1809 and 1917, the entire country was part of the Russian Empire, though with a considerable degree of autonomy. Traditionally, most residents spoke Finnish and Karelian dialects, and varieties of Swedish were spoken in parts of the archipelago and along the western and southern coasts—Swedish has been spoken in the current territory of Finland at least since the 13th century. The indigenous Sámi people originally inhabited most of the country. Four Sámi languages were spoken in the current territory of Finland, though one has since passed from use. The Finnish Roma language has been a non-territorial minority language since the 16th century. The current speaker areas of territorially defined languages are shown in Figure 1.



Figure 1. Territorially defined languages in Finland and neighboring countries, showing Finno-Ugric languages (including Finnish, Karelian, Estonian, and Sámi) in yellow and moss green, Germanic languages (including Swedish and Norwegian) in red, Baltic languages (Latvian and Lithuanian) in forest green, Eastern Slavic languages (Russian and Belorussian) in dark green, and state borders using red lines. Finland is mapped centrally. The map is an approximation combining past and present, rather than a realistic depiction of the current situation: the areas marked as Swedish-speaking in Finland, Finnish-speaking in Sweden, Karelian-speaking in Russian, and Sámi speaking in all countries are mostly bilingual, the language in question typically being a minority language. Source: Wikipedia.

Swedish was the language of most of the elites and the official language until 1902. Following the country's independence (1917), both Finnish and Swedish were made national and official languages, and both can be used in state-run services. In officially bilingual municipalities, public services are available in both these languages. In addition, the Constitution mentions the rights of the speakers of Sámi, Finnish Roma, and sign language, as well as persons with specific communicative disabilities. In four municipalities in northern Lapland, Sámi languages can be used in public services. Signers using Finnish sign language and disabled people with communicative deficiencies have extensive language rights across all public services. The rights of speakers of Finnish Roma and Karelian and signers of Finland-Swedish sign language are somewhat upheld.

In the 19th century, most of the population lived in rural areas and spoke the vernacular languages (Finnish, Karelian, Swedish, and Sámi languages). Multilingualism was a characterizing feature of larger cities. For example, in 1870, 12.1% of the population of Helsinki spoke Russian and up to 17% of the population comprised foreign-language speakers. In Vyborg, meanwhile, 32% of the population were foreign-language speakers. By 1900, Finnish speakers (including Karelian speakers) represented 86.8% of the population, Swedish speakers 12.9%, and Sámi speakers 0.1%. The speakers of other languages represented only 0.3% of the population, including approximately 5000 Russian speakers and speakers of Tatar and Yiddish. (The 130,000 Russian soldiers [during the last years of the Russian Empire] were not counted among the permanent residents.)

Statistics regarding the first language of residents have been quite precise since the Language Act of 1922 installed official bilingualism: it is important to know the exact number of speakers of Finnish and Swedish in each municipality to determine whether the municipality is officially monolingual or bilingual. However, while the first language of each resident is recorded through the population registry, individual bilingualism or multilingualism is not acknowledged: only one language per person is entered into the system.

Since the 1920s, the proportion of Swedish speakers has declined and that of Finnish speakers has increased. Then, in the early 1990s, a major demographic shift occurred in Finland: the number of migrants started to grow, which also meant an increase in the number and proportion of speakers of non-national languages, and a gradual decrease in the proportion of Finnish speakers. Table 1 illustrates these changes.

Year	Finnish	Swedish	Sámi languages	Other languages
1950	91.1	8.6	0.1	0.2
2000	92.4	5.6	0.03	1.9
2021	86.5	5.2	0.04	8.3

Table 1. Evolution of the proportions of speakers of the national languages, Sámi languages, and other languages from 1950 to 2021 (%).

At the end of 2021, Finnish speakers represented 86.5%, Swedish speakers 5.2%, Sámi speakers 0.04%, and speakers of other languages 8.3% of the population. The most important foreign languages at the end of 2021 were:

- Russian (n=87,552)
- Estonian (50,232)
- Arabic (36,466)
- English (25,638)
- Somali (23,656)
- Farsi (16,432)
- Kurdish (15,850)
- Chinese (14,780)
- Albanian (13,830)
- Vietnamese (12,310).

Russian speakers represented 1.6% and Estonian speakers 0.9% of all residents. In the greater Helsinki area, about 20% of the population had a foreign language as their first language—for example, most Somali speakers in Finland lived in the Helsinki region. However, it must be noted that since official statistics do not acknowledge individual bilingualism, many persons born in Finland to parents born abroad have the language of the country of their parents' origin as their "official" first language, though they are bilingual and often more fluent in Finnish.

Foreign language speakers' right to interpreting and/or translation services is guaranteed by several laws. For example, these services are guaranteed in the asylum procedure and all procedures initiated by the authorities,

including criminal investigations and procedures of expulsion and deportation. In addition, anyone using healthcare and social services has the right to be informed in a language they understand.

The national broadcasting service YLE provides news and journalistic content (with varying intensity) in Finnish, Finnish sign language, Swedish, English, Russian, Karelian, Finnish Roma language, and Sámi languages (North, Inari, and Skolt Sámi). The *infoFinland.fi*¹ website provides public information about practical issues related to life in Finland in Finnish, Swedish, English, Russian, Estonian, French, Somali, Spanish, Turkish, Chinese, Arabic, and Farsi. In addition, municipalities with large numbers of speakers of non-national languages, as well as some government agencies, provide information in the most important languages spoken by their migrants.

2 Evolution and characteristics of the COVID-19 pandemic in Finland

The first confirmed COVID-19 case in Finland came at the end of January 2020. In this case, the infected person was a tourist visiting Lapland. The first case affecting a local person was confirmed on 26 February 2020, and the infections started to spread rapidly in March 2020.

As serious concerns were raised regarding the sufficiency of care (in terms of the numbers of ventilators, high-quality facemasks, hospital beds, etc.), a state of emergency was declared on 16 March 2020. A special law on crisis preparedness was in force between 17 March 2020 and 15 June 2020, including a partial lockdown of the Helsinki region. There was a ban on large gatherings, and all school teaching was online. The contact between the persons decreased by 70% during the first months of the pandemic. While the pandemic was effectively controlled due to these restrictions, the country's economic structure and functioning were severely affected, and many people lost their jobs, especially in the service sector.

The health situation was mostly stabilized in April 2020, and it became clear that the healthcare system would not be overburdened and there would be enough intensive-care beds. Therefore, a hybrid strategy was implemented in May and June 2020, with a strong focus on testing and tracing the COVID-19 cases.

The number of cases started to rise again in August 2020, and it was no longer possible to track all the chains of infection, especially in the Helsinki region, where serious concerns regarding the overburdening of the healthcare system were raised in November 2020. The peak of the pandemic in this region was reached by Christmas 2020, coinciding with the first vaccinations among healthcare personnel.

The third wave started in February 2021, and partial lockdowns and other restrictions were enforced in the regions with the most cases. The peak was reached at the end of March, and the restrictions were gradually removed from early April 2021 onward. When the fourth wave started in the summer of 2021, concerns were not as serious as earlier: most residents had gained immunity through vaccination or infection. The nationwide recommendation to wear a facemask on public transportation and in other public spaces was lifted in April 2022.

Especially during the first months of the pandemic, the media widely reported the high incidence of COVID-19 and the high hospitalization rate among persons whose first language was not a national language. In a study conducted in spring and summer 2020 in the Helsinki University Hospital District (Holmberg et al. 2022), 124,240 persons were tested for COVID-19. The first language of 95.2% of those tested was registered, and 7% of them had a foreign first language, whereas 93% had a domestic first language. Among those whose test result was positive, 21.7% were foreign-language speakers, and 25.9% of patients admitted to the ICU were foreign-language speakers. However, the mortality rate was not higher among foreign-language speakers because the proportion of elderly people was low in this group.

In fall 2021, up to 50% of those hospitalized due to COVID-19 were reported to be foreign-language speakers, and the need for efficient multilingual communication was clearly acknowledged (Marttinen 2021).

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¹ https://www.infofinland.fi/en/health/coronavirus-covid-19.

A few studies have assessed how speakers of non-national languages perceived the accessibility of information about COVID-19 in Finland. Finell et al. (2021) conducted 209 telephone interviews among speakers of Somali, Russian, and Arabic in March and April 2020, during the first months of the pandemic. Most of the respondents were aged 50 or over, and the interviews were conducted by bilingual persons who were native speakers of Arabic, Russian, or Somali. Among the seven key themes identified in this study, "being vulnerable in Finland" was of particular interest in terms of the production and reception of multilingual COVID-19-related information. A lack of resources, ability, and/or support to cope with the health crisis was high among Arabic (37%) and Somali speakers (30%), whereas only 7% of Russian speakers declared that they lacked resources, ability, and/or support. There were significant differences between these linguistic groups regarding their ability to understand Finnish: 93% of the Russian, 64% of the Arabic, and 61% of the Somali speakers said they could understand Finnish moderately or well. Only 3% of the Russian speakers declared that they did not understand Finnish at all, whereas 14% of the Arabic and 8% of Somali speakers said that they could not understand Finnish. Knowledge of Finnish was particularly important at the onset of the pandemic when there was no information available other than in the national languages. Finell et al. (2021) postulated that migrants might not have access to official communication channels, meaning they might rely more than average on social media and informal oral communication. The study also emphasized that traditional face-to-face interaction is often the most efficient way of getting a message across; for some target groups, traditional communication is the only method that works well, as compared to digital services.

A press release in April 2020 led to significant media coverage of the findings of the (at the time unpublished) study described above. In the press release, the research team stated that based on the interview findings, it seemed not all foreign language groups had received enough information in their own language (Wesslin 2020). One particular insight offered by the team was that information was difficult to locate because search engines could not find information on the Finnish authorities' websites if a person searched for it in their own language. In addition, the information was generally difficult to locate on the websites, with several clicks needed.

A large-scale study focusing on access to information, use of preventive measures, and working conditions was conducted by the Finnish Institute for Health and Welfare (Skogberg et al. 2021). This large-scale study included 3668 persons who were born abroad or whose parents were born abroad, aged 20–66 years. It constituted a follow-up to a previous survey on wellbeing among persons born abroad. The participation rate was 59.7%, but only 26.1% among persons born in sub-Saharan Africa. Electronic and paper-based questionnaires, as well as telephone interviews, were used to collect the data, and the questionnaire was available in Finnish and Swedish, along with 16 non-national languages. A reference group was formed by the FinHealth 2017 follow-up study with 3490 participants of Finnish descent.

The survey indicated that in both the foreign-born (98%) and migrant (94%) groups, a vast majority of the respondents said they had received enough information about COVID-19 and preventive measures. Knowledge of national languages was found to be a differentiating factor in this study: among those who had an excellent command of a national language (Finnish or Swedish), 97% declared that the information they had received was sufficient, whereas the percentages dropped to 92% for intermediate-level speakers and 91% for beginner-level speakers. The Finnish media represented a source of information about COVID-19 for 91% of the migrants in the study, and 85% of the respondents also reported that they used the media of their country of origin or international media when seeking information about COVID-19. Social media, friends, or acquaintances were mentioned by 82% of the respondents. NGOs and other associations and community groups were mentioned by 44% of the respondents. These sources of information were most common among persons who had migrated from Africa and least common among migrants from Russia, Estonia, and other ex-Soviet Union states. The study concluded that most migrants reported having received enough information about COVID-19 and preventive measures, but acknowledged that the survey may not have reached those in the most vulnerable and marginalized groups, whose risk of not obtaining adequate information was the highest.

A critical point to note is that while previous studies had shown that migrants also follow media from other countries (see, e.g., Davydova et al. 2016), the research by Skogberg et al. (2021) showed that during the COVID-19 pandemic, migrants followed Finnish media more than media from other countries.

3 Data-collection procedures and methods

3.1 Assessment of the latest practices

Before the onset of this project, the researchers Dr. Tuija Kinnunen, Dr. Päivi Kuusi, and Dr. Simo Määttä assessed the scope of multilingual information about COVID-19 and the communication and translation strategies guiding the multilingual information production. As municipalities have wide responsibilities for the organization of social and healthcare services in Finland, this assessment focused on the three large municipalities of the Helsinki region (population 1,190,074), namely the cities of Helsinki (pop. 656,611), Espoo (pop. 294,836), and Vantaa (pop. 238,627). In February 2021, the researchers collected a dataset of 360 screenshots of these cities' websites offering information in several languages.

A preliminary analysis of these data showed that information was translated into many different languages (up to 30), and several channels (written texts, written texts with images, videos, bots) were used. The pages also contained several links to other websites providing multilingual information, such as infoFinland and the Finnish Institute for Health and Welfare. However, there were significant differences between the three cities in terms of the choice of languages, contents translated into different languages, structuring of the information, and information channels. In addition, while multilingual information was abundantly produced, it was not easy to locate this information. For example, since the main websites were only available in Finnish, Swedish, and English, it was necessary to know one of these languages to navigate the site in search of information in other languages.

This assessment produced evidence of an implicit and fragmented translation policy, a diversity of approaches to disseminating COVID-19-related information, and a need for multilingual crisis communication strategies. While information was profusely produced, the challenge of finding relevant multilingual information appeared to reflect how multilingual information had been produced and disseminated without a clear, overarching strategy and without sufficiently considering the usability and reception of the information. In addition, preliminary textual analyses showed that in many cases, the translations were extremely faithful to the Finnish source text, which occasionally added to the complexity of the target text, for example, by reproducing the constituent order of the Finnish text or by literally translating the names of the city departments and terms related to COVID-19 or social security.

In addition to the assessment of the translated information available online, two M.A. theses completed in spring 2021 provided useful background information about the translation policies of the City of Espoo.

3.2 Interviews

As municipalities had such a central role in producing and disseminating COVID-19-related information, the research team decided to focus on this sector when conducting the interviews that were part of the "Improving Communication with Migrants" project, and chose to interview the specialists working for the most multicultural cities, corresponding to the largest cities in the Helsinki region. The NGO sector was regarded as equally important: the Finnish Red Cross was chosen because of its prominent role in producing and disseminating multilingual information, and the associations of Russian and Somali speakers because they represent some of the largest migrant groups. Due to the focus on the municipal sector, the team decided to include only one participant organization each from the media and university sectors. Regarding businesses, the construction sector was chosen because it employs many foreign and foreign-born workers: representatives of one multinational company and the Confederation of Finnish Construction Industries (RT) were interviewed. The data were collected between October 2021 and May 2022 through semi-structured interviews (n=14). In addition, information collected in five interviews in spring 2021, before this project, was condensed and used in this project (the relevant interviewees permitted us to use these data in the project). Accordingly, a total number of 19 interviews were conducted, as shown in Table 2 on page 9.

Sector	Organization	Persons interviewed	Date of interview
Municipality (1)	City of Helsinki	Senior planning officer	7 April 2022
Municipality (2)	City of Helsinki	English language communication specialist	26 April 2022
Municipality (2)	City of Helsinki	Special coordinator at the Economic Affairs	8 April 2022
1 3 1	•	Office	_
Municipality (4)	City of Vantaa	Communication specialist at the Health and	7 March 2022
3.6	C'. CY	Social Services Department	2.14 2022
Municipality (5)	City of Vantaa	Project manager	3 May 2022
Municipality	City of Espoo	Five persons responsible for crisis	Spring 2021
(6–11)		communication and multilingual information ²	
Government (1)	Finnish Institute for	Project planner at the Immigration and	2 February 2022
	Health and Welfare	Cultural Diversity Unit; communication	
	(THL)	specialist	
Government (2)	Finnish Institute for	Communication manager	21 February 2022
	Health and Welfare		
	(THL)		
Business (1)	Confederation of Finnish	Communication officer	1 April 2022
	Construction Industries		
	(RT)		
Business (2)	NCC Finland	Communication manager	11 April 2022
	(construction company)		1
NGO (1)	Finnish Association of	Chairperson	11 February 2022
	Russian Speakers		,
NGO (2)	Finland–Somalia	Project coordinator	9 May 2022
, ,	Association		
NGO (3)	Finnish Red Cross	Communication specialist	5 May 2022
Media (1)	News in Russian at	News in Russian team	15 October 2021
	national broadcasting		
	service YLE		
University (1)	University of Helsinki	Communication manager	18 January 2022

Table 2. Sectors, organizations, and job descriptions of the interviewees and dates of the interviews.

The interviews were conducted by Dr. Tuija Kinnunen and Dr. Svetlana Probirskaja, as well as research assistants Linda Rolig and Jenni Lahti. The Zoom video conferencing tool was used, and the duration of the interviews varied between 30 minutes and 1 hour 30 minutes. Interviews with the Russian speakers' association and YLE News in Russian were conducted in Russian; the other interviews were conducted in Finnish. The interviews were structured as follows:

- **Introduction**: presentation of the project, ethical issues, consent form
- Background information: sector, number of employees, languages used within the team and with clients, ways of acknowledging speakers of non-national languages, impact of COVID-19 on communication strategies and practices
- Multilingual information: languages used in COVID-19 communication, timing of dissemination in different languages, contents, ways of considering different target groups
- Sources of information
- Forms of information: formats, channels
- Coordination of communication: coordinators, contents of coordination, decision-making, choice
 of texts to be translated, principles guiding the decisions
- Translation: translators (professionals vs, non-professionals), translators' backgrounds, instructions given to translators, contents translated, editing of translations, evolution of translation practices and principles during the pandemic

² These interviews were part of two M.A. theses completed before the onset of the current project.

- Dissemination: channels, rationale behind the choice of channels, choice of languages per channel, changes affecting the choice of channels during the pandemic, efficiency of different channels
- Reception: monitoring of reception, impact on communication strategy, information about the
 efficiency and impact of dissemination/translation practices, availability of statistics or feedback
- Cooperation: organizations involved, forms of cooperation, usage of information produced by other organizations, assistance to other organizations
- Challenges and areas of development: previous communication strategies, most important challenges, resolution of challenges, best practices, lessons learned, future perspectives.

All interviews were transcribed, and the transcriptions of the interviews conducted in Russian were summarized in Finnish. In addition, a summary of the answers given in each interview was created, following the detailed interview protocol. As a result, each interviewee's answers to each question could easily be retrieved and the different answers could be compared.

3.3 Dissemination and stakeholder involvement

Two workshops were organized to inform local stakeholders about the results of the research. In the first workshop, held on-site at the University of Helsinki on 23 May 2022, the focus was on the production and reception of multilingual information for the Arabic-speaking population. A second workshop was organized online on 7 October 2022, which involved most of the people who had been interviewed within the project or other representatives from the same institutions.

The results of the assessment of the latest practices in Finland and the interview results were also presented at the following scientific conferences:

- The 18th conference of the Society for the Study of Ethnic Relations and International Migration (ETMU) (*After Crises, Diversity and Dialogue*), University of Oulu, 12/2021
- European Language Council conference (*Language and Rights*), University of Antwerp, 12/2021
- 10th European Society for Translation Studies congress (*Advancing Translation Studies*), University of Oslo and Oslo Metropolitan University, 6/2022
- Translation, Ideology, Ethics Response and Responsibility conference, University of Vilnius, 9/2022
- 12th International and Interdisciplinary Conference on Applied Linguistics and Professional Practice (ALAPP), University of Jyväskylä, 9/2022
- Finnish Association for Applied Linguistics annual symposium (*Language and Participation*), University of Helsinki, 10/2022.

An international workshop for academic audiences was organized online on 20 October 2022 in cooperation with the European Network for Public Service Interpreting and Translation (ENPSIT). This workshop was attended by 34 participants.

4 Findings

4.1 Characteristics of multilingual information about COVID-19 in Finland

Crisis communication plans drawn up before the pandemic had generally not mentioned the foreign-language target group, let alone the actions needed to reach them. There were some mentions of recognizing multilingualism, for example, in the City of Espoo's (2016) practical guidelines for crisis communication, but there were no specific guidelines on translation processes. Accordingly, awareness of foreign-language target groups was mentioned as one of the lessons learned from the pandemic, for example, by the construction company communication manager whom we interviewed.

The interviewees were asked what information sources were available when they produced multilingual information about COVID-19. Several governmental organizations were responsible for producing such information within their domain on their own or in cooperation with other governmental actors. The

information leaflets and other materials produced by these organizations were used by the organizations whose representatives were interviewed in this project. Among the governmental organizations in question, only representatives of the Finnish Institute for Health and Welfare were interviewed in this project. The most important governmental institutions that produced information about COVID-19 were:

- The Prime Minister's Office
- The Ministry of Social Affairs and Health
- The Ministry of Employment and the Economy, especially the Centre of Expertise in Immigrant Integration and its website https://kotoutuminen.fi/en/coronavirus
- The Finnish Institute for Health and Welfare
- Electronic platform *infoFinland.fi*, which collected and saved COVID-19-related information in 10 non-national languages (English, Russian, Estonian, French, Somali, Spanish, Turkish, Chinese, Farsi, and Arabic). The website is administered by the City of Helsinki and jointly financed by all municipalities that are members of the network.

In addition, multilingual information produced by the national broadcasting service YLE, the largest daily newspaper *Helsingin Sanomat*, and other media were used when producing multilingual information.

4.2 Interviewees and their tasks in their organization

Several specializations were represented by the communication experts we interviewed. Some worked as communication managers, while others were in charge of more operational tasks, such as writing and editing texts or planning multilingual communication processes, translation processes, or the selection of information channels to be used. The responsibilities of the communication managers included following the information produced by the government and the Prime Minister's Office, as well as other authorities, such as the Institute for Health and Welfare and the Border Guard. In addition, communication managers were responsible for conveying how the state-level guidelines affected their organization, which was handled somewhat collaboratively in COVID-19 coordination groups and between communication managers within the same organization, as exemplified in Figure 2 on page 12. The tasks of the communication managers also included making joint decisions with the communication team about the implementation of communication on different topics and the updating of information, for example, on the website. During the pandemic, the nature of communication changed from initial crisis communication to a calmer, more normal form of communication. A characteristic feature was that communication had to be constantly updated to meet new information needs.

Often, communication-related or supporting tasks mainly consisted of coordinating ongoing tasks and ensuring their implementation within the unit. This included facilitating dialogue between migrants and organizations. The following statement from a university representative exemplifies the multiple tasks at hand: "There was so much to communicate that we were working two shifts."

The job descriptions of the persons responsible for COVID-19 communication were broad, and the pandemic affected the jobs of many people handling traditional communication tasks. For example, in cities, communication professionals performed various new tasks resulting from the pandemic, such as identifying multilingual city employees to assist with communication activities. One person who normally works in the field of employment and integration services for migrants described it this way: "Of course, when COVID-19 arrived, everyone started to do a bit of everything in the City Hall." In this environment, integration experts briefed the communication department about the main language groups so that the communication department could consider residents who spoke non-national languages. Communication professionals also had to develop counselling services for migrants and efficient ways of reaching out to these citizens and engaging with them.

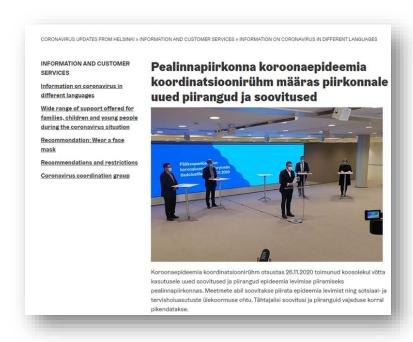


Figure 2. This screenshot from the City of Helsinki website exemplifies how information about new restrictions and recommendations (on 27 November 2020) was directed toward the largest language groups. In this case, the information is in Estonian. The story includes a photo of the press conference held by the Helsinki Region COVID-19 Coordination Group.

For the Institute for Health and Welfare, extensive direct communication with the public was unconventional, and the communication department did not have enough staff to take care of multilingual communication. The interviewees working for the Institute for Health and Welfare represented the communication department and a project it has launched to develop its future crisis preparedness. Usually, the Institute for Health and Welfare communicates about projects, specific situations, or policies and good practices that have been developed to support social and health authorities. Communication about the pandemic was, therefore, unusual and involved disseminating behavioral guidelines directly to the citizens. In addition, the Institute for Health and Welfare provided advice, for example, to municipalities so that they could make appropriate decisions.

Media professionals interviewed as part of this project worked for the Russian-language news service of the national broadcasting service YLE. YLE's Russian-language editorial team translates and reports news for a Russian-speaking target audience. The main source of information is the Finnish news, which is adapted to the needs of the target audience by extracting information of particular relevance to Russian speakers. During the pandemic, the information provided by the Prime Minister's Office was also translated in full.

Regarding migrant associations, interviews with representatives of these organizations focused on their pandemic-related work. More details are given in Section 4.9.

4.3 Cooperation networks

As the general COVID-19 situation evolved from the initial crisis phase toward vaccination campaigns, communication experts in many organizations invited migrant associations (i.e., the "third sector") to join the dialogue. The work of these communication specialists came to be characterized by the organization of cooperation, with the meetings organized by these municipalities also including health experts who answered questions. Migrant associations needed a lot of information and their members had many questions. These meetings were seen as a way of increasing trust in the information given by cities to migrant populations. It was considered important to have existing connections with the communities and their associations— build

good and trusting relations "in peacetime"—since in times of crisis, when rapid action is needed, there is no time for relationship building.

Public authorities considered cooperation with migrant associations to be particularly important because these associations had ready-made communication channels to inform their community. In the interviews, the expression "multilingual and multichannel" was frequently used to describe the approach to COVID-19 communication. While several languages were needed, several channels were equally needed as language groups had their own communication channels. It was also noted that migrant associations' help was needed to target communication.

In addition to their separate networks, the cities in the Helsinki region also had a cooperation network with which to share information on COVID-19 communication among themselves. A representative of the infoFinland website was involved in that information sharing.

On the initiative of the Institute for Health and Welfare, a Multilingual and Multichannel Corona Communication Task Force was established in spring 2020. This expert network included experts in different domains from the Ministry of Social Affairs and Health and the Ministry of Employment and the Economy. The group explored the best ways to reach all language groups. The group's work was rewarded with the Open Government Democracy Award in 2021 (Ministry of Employment and the Economy 2021).

The interviewee representing the Finnish Red Cross coordinated a multilingual and multi-channel COVID-19 communication campaign together with another employee. The campaign was carried out in cooperation with about 20 migrant organizations. The Finnish Red Cross is a statutory emergency organization supporting the authorities, which has crisis-related training tasks. Largely for this reason, the Institute for Health and Welfare hoped that the Finnish Red Cross would coordinate contacts between different organizations and with migrant associations to ensure that the information on COVID-19 reached all language groups. Yet, many small migrant associations did not have the resources needed for COVID-19 communication. Overcoming that problem, the Finnish Red Cross could support multilingual and multi-channel communication for these associations through a project funded by the Funding Centre for Social Welfare and Health Organizations. For example, the project promoted networking between associations to avoid duplication of work. However, the project only really started over a year after the onset of the pandemic. The aims are to ensure that this network continues to function after the end of the project and that even the smallest of associations will find it easy to contact the authorities in the future.

As for the Finland–Somalia Association and the Finnish Association of Russian Speakers, they collaborated with the Institute for Health and Welfare, the Finnish Red Cross, and the municipalities, among others.

The communication expert representing a large construction company who we interviewed also described the importance of discussing practices with other large companies and exchanging experiences. The assistance provided by the Confederation of Finnish Construction Industries was very important. This confederation, which represents all construction companies, produced multilingual material for joint use, as shown in Figure 3 on page 14.

4.4 Target groups

In the organizations we interviewed, the foreign-language population was viewed from a variety of perspectives. Among other things, this was due to the role of the organization.

The Institute for Health and Welfare is a knowledge-sharing organization that does not usually communicate with the general public. In the case of COVID-19 communication, the target group in need of multilingual communication was wider than ever before. At the same time, this target group could be characterized as distant and general.

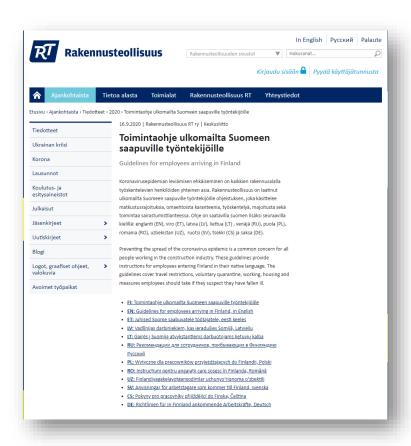


Figure 3. The Confederation of Finnish Construction Industries produced guidelines for employees arriving in Finland in 10 foreign languages (English, Estonian, Latvian, Lithuanian, Russian, Polish, Romanian, Uzbek, Czech, and German). The screenshot displays the Confederation's website on 16 September 2020.

In contrast, municipalities have the role of making, implementing, and informing decisions. The recipients of the communication were inhabitants of the municipality: workers, schoolchildren, or users of health, social, or cultural services. The exact target groups were determined by the subject matter of the communication and the municipal sector concerned. For example, the municipalities implemented official decisions on quarantine and isolation, and these had to be communicated in different languages. The municipalities' tasks included directly informing students and their parents about exposure at school, for which the target groups consisted of individuals and their families.

The pandemic meant that migrants of working age had to rely on the municipality more than ever before to access services or information. As the crisis unfolded, there was a greater understanding of the importance of advice given in the person's first language. According to one interviewee, direct advice was more effective than using translators and interpreters. Timely advice on the services needed by a client who did not speak a national language was efficient and helped the client understand exactly what was happening and where they could get help. The importance of self-advice was also highlighted as it is important when health is concerned that everyone understands what is at stake.

From the perspective of an institution of higher learning (in this case, a university), for which we interviewed a representative, the recipients of communication were employees, students, visitors arriving at the institution's premises, and incoming or outgoing researchers.

From the construction company's perspective, the target groups were mainly employees or subcontractors and their employees, and the languages were chosen according to the languages spoken by the employees.

The Russian-speaking recipients targeted by YLE's Russian-language service represented the largest group of foreign-language speakers in the country. According to YLE News in Russian, the entire Russian-speaking population in Finland was largely informed about COVID-19 through their service as no other sources were providing comprehensive information in Russian. YLE's Russian-language TV news is watched by around 225,000 viewers every day. About 88,000 first-language Russian speakers reside in Finland (see the statistics above) so it can be concluded that the news also is watched by the population with a first language that is not Russian. In addition, the Russian-language editorial team at YLE noted that the Russian media sometimes refers to the stories the team is reporting, so the impact of this media is multi-dimensional.

From the perspective of the associations representing migrants, the recipients were their own members or people who belonged to the group represented by the association. In the same way as YLE's Russian-language editorial staff, the Association of Russian Speakers in Finland considered its media the main source of information for Russian speakers. The Finnish Red Cross helped many migrant associations produce material for their members, just as it helped many public authorities produce appropriate communication material for target groups speaking different languages.

4.5 Translated contents

The linguistic quality and content of the source texts to be translated into non-national languages were often questioned. The communication manager of the construction company stated that the goal was for all communication to be quick, concise, and easy to understand: "the material was well-prepared" and "straight to the point," which also meant that it was easier to translate the material. Similar ideas were held in the cities' communication departments. One employee described how before a translation, they "cleaned up and selected the key points and simplified" the texts.

However, the approaches taken varied. One team might carefully select contents to be translated and prepare them for the process by considering the directness of the language, while another would have all its Finnish texts translated verbatim, even though, according to one interviewee, the translation outputs may have been useless to audiences and the text might have contained information that rapidly became outdated.

The benefits of using easy language were also mentioned by several interviewees. Easy language was thought to facilitate translation by keeping the content as simple as possible, for example, by using short sentences and a list format. Many proposed that, in general, language should always be clear. According to the interviewee representing the Finnish Red Cross, it is not wise to translate official texts without modifying them because in Finnish they are "so complicated and difficult that they are not readable at all." For example, if the topic is the ingredients of a vaccine, a faithful translation of the answer verified by the doctor of the Institute for Health and Welfare would yield a translation that nobody understands.

The material that was translated varied from one organization to another. Nationally distributed material was produced by organizations such as the Institute for Health and Welfare and the Border Guard. These materials included coughing, handwashing, and vaccination instructions produced by the Institute for Health and Welfare and travel instructions produced by the Border Guard. (No representative of the Border Guard was interviewed in this study.)

On a regional level, the Regional State Administrative Agencies produced instructions in Finnish and Swedish. Hospital districts also published guidelines in different languages, but they mainly used texts already produced by other organizations. (Representatives of Regional State Administrative Agencies and hospital districts were not interviewed for this study, but their roles came up in the interviews.)

Municipalities translated practical guidelines concerning their own facilities and services, such as healthcare (e.g., information on a positive COVID-19 test result), education, sports, and other recreational facilities, and use of public transportation within the municipality (see Figure 4 on page 16). Meanwhile, companies

published their own instructions related to sick leave, hygiene, travel, and vaccination. These were drawn up using guidelines from public authorities, such as those of the Finnish Institute for Occupational Health (TTL). A city communication officer reported that during the pandemic, there was a consensus that it was important to produce multilingual material.

Migrant associations translated practical guidelines, edited translations produced by other organizations, and produced videos.



Figure 4. Information in Dari for persons in quarantine. The screenshot displays the City of Helsinki's multilingual COVID-19 website on 3 February 2021 (the source text was created on 20 November 2020).

4.6 Management and organization of translation flows

The interviews included many questions about the organization of translation work:

- Did the organization have in-house translators or were the translations outsourced?
- What were the skills of the translators and the people working with them?
- Was information directly created in languages other than Finnish or Swedish?
- What kind of multilingual communication knowhow was there in the organization?

Translations were supplied to the organizations in a variety of ways. Some translation assignments were outsourced, while others were completed in-house.

The construction company operating in several countries could purchase translations in a flexible and versatile way. The in-house communication team used Russian and Estonian in addition to Finnish. Finnish, Russian, Estonian, Polish, and English were used among the subcontractors' employees. During COVID-19, the company used one translation agency, and some translations were purchased from an experienced translator who had previously worked for the company but had gone into private practice, along with one of the employees (who translated into Estonian). Larger translations were completed by the translation agency, while the private translator was called on for shorter texts and in-house assistance was sought for translations that were needed fast. The construction company received considerable help from the Confederation of Finnish Construction Industries, which provided communication support for the sector. The Confederation, which coordinated the industry's COVID-19 communication, purchased translations from a translation agency it had used for a long time. A previous agreement on specific linguistic issues related to the construction industry had been reached with the agency, which made communication simpler.

Since all cities involved in this study were bilingual, translations into Swedish and English were completed by in-house translators, and translations into other languages by contracted partner translation agencies that had won bids through public procurement procedures. The procurement decisions had already been made before the pandemic. However, the procurement of translations varied between different departments of a city. Due to the nature of the communication needs in times of pandemic, the social and health services purchased more translations than the other departments.

In addition, translations were sometimes carried out by the cities' bilingual staff. A team composed of city employees and representatives of partner organizations was sometimes called in to help with translation tasks, and sometimes they even translated. The team's help was particularly useful when translations were revised. City employees translating in addition to their own work included school assistants, cultural interpreters, and heritage-language teachers from the education department. They showed considerable flexibility by accepting tasks that were not part of their normal job. In some cases, these extra tasks of translating and revising translations were also remunerated. It was a novel scenario where urgent translation needs changed the job descriptions of many employees who had no translator training. The staff's flexible attitudes were praised. People whose first language was not Finnish or Swedish doing an internship in different department of the city could also be used to revise or update translations. Yet, the city administrations realized that revising translations is time-consuming and that the revisers must have subject knowledge about the topic of the text.

The Institute for Health and Welfare had no in-house translators and procured all translations from a single contractor.

4.7 Monitoring the quality of translations

To assess the monitoring of quality, we sought answers to the following questions:

- What kinds of guidelines existed for translators?
- Did translators have glossaries or guidelines on specific topics?
- Did translators have problems specifically related to COVID-19 vocabulary?
- How did translation processes evolve during the pandemic?

There were quality problems related to the organization of translation work in many, but not all, organizations. Communication specialists often had difficulties in managing translation processes. They did not necessarily have sufficient knowledge of the planning and implementation of multilingual communication or its overall management. However, many could assess why the quality of translations was not satisfactory from a communicative point of view.

Often, translation work was outsourced to translation agencies. The procurement of translations from external professionals was often problematic, and especially in the cities, translation work was carried out by several

different actors, which represented a further issue. The translation quality was often poor or uneven. The quality of the translations varied both when they were procured from agencies and from other translators. According to one interviewee, the "quality of translations varied between zero and 100," and texts had to be re-translated from scratch if it was not possible to correct the errors in an existing translation. One person commented that "the two translation agencies that had won the bid would deliver whatever." As the quality of translations depended on so many factors, the interviews did not yield enough data to determine what exactly caused their poor quality. Yet, the following factors were mentioned:

- Haste
- Changing and rapidly outdated information
- Complex language of the source texts
- Variable availability of translators in different languages
- No revision of translations (or revision was not part of the contract)
- Difficulty in providing feedback
- Time-consuming correction processes
- Translators' uneven professional skills.

The interviewees also found it surprising that there were often fewer problems with translations to less-widely-used languages, as compared with translations to more widely used languages, such as Swedish, Estonian, English, and Russian. According to the interviewees, this stemmed from translation agencies subcontracting work without requiring any particular skills from the translators. The following translation problems were mentioned:

- Translation processes were slow
- Translations contained factual errors
- Translators had read the text with insufficient attention to detail
- Translators were not familiar with healthcare vocabulary or the language of health communication
- Translators had probably used machine translation tools, but they had not post-edited the text
- Language of the source text was too complex
- Translations were verbatim
- Language use did not correspond to the natural language use within the target culture.

The organization of the translation work also impacted the quality of the translations. A key factor was that the quality was better if the translation agency had previously translated COVID-19-related texts. In addition, when translations were conducted by in-house or other known translators, the quality was better than average; accordingly, no one mentioned the work of in-house professional translators as being of poor quality. The benefits of using in-house translators were mentioned by the representatives of the private sector, the media, NGOs, and the communication manager of the university. The representative of one organization also mentioned that they had a special arrangement guaranteeing direct access to a contracted translator whom they specifically wanted to use. Otherwise, purchasing translations from external actors was described as a slow process. The haste with which translations were required meant there was not always time to use professional translators.

Another problem related to translation processes concerned the types of services specified in a contract: if a contract did not specify that translations should be revised by the agency, the lack of a revision service often came as a surprise. The representative of the Finnish Red Cross mentioned that it is not enough to double-check translations (translation + revision), proposing they should be "triple-checked" before publication. With many intermediate steps required to produce a quality translation, the initial translation process—from the order placed by the client to reception by the end user—stood to be greatly improved. Accordingly, during the pandemic, the organizations made great strides toward improving the quality of the translation processes.

In-house revision of translations from outside an organization was an important part of the process. In the municipalities, quality was monitored in-house if the organization had employees with expertise in the language in question. For example, in the social and healthcare sector, the most important texts were revised

by native-speaking counselors at the city's migrant information desks before publication. In addition, the native-speaking counselors sometimes simplified the language used in the translations because the source texts were characterized by the complex language of the social and healthcare sector. Simplifying complex language of the source text, therefore, constituted good practice. In other cases, the translations procured from contractor agencies were sometimes "difficult to understand" or "too complicated" and used "the language of highly educated people." In other words, external translators "had not understood what is important for residents to understand." "Fortunately, there are these in-house city employees who know the language and know our target groups," commented one interviewee, who recalled consulting such staff for advice on whether the expressions used in the translations were too difficult or matched the kind of language that should be used.

Generally, there was a fair degree of satisfaction with the outsourced translation services. However, from the above, we can infer that the quality of the translations provided by contracted agencies was not always fit for purpose, which led the city's own linguistic experts to be called in. A further problem mentioned was that the outsourced translations did not always use "city-specific" language, i.e., the expressions and styles typically used in that city. In all situations described here, feedback was given to the contractors and resulting improvements were often made.

Translations were stored in various databases where they were easily available, but not to facilitate or improve the translation work. This was apparently seen as the responsibility of the service provider rather than a way to develop the organization's communication, for example, by storing glossaries or increasing the consistency of language use through translation memories based on previous, high-quality translations. At the stakeholder seminar organized as part of this project, a proposal was put forward to make translations and glossaries available for all. The proposal was met with enthusiasm, and someone suggested that an ideal support for this measure would be the electronic Partnership Platform³ linking the third sector (i.e., NGOs) and the public sector actors responsible for migrant integration. Many organizations already use the Partnership Platform to enhance their COVID-19-related communication.

A translator we interviewed was particularly happy with the COVID-19 glossary of the Prime Minister's Office.⁴ This interviewee highlighted how multilingualism should be accounted for when planning communication. In other words, from the very beginning, it is important to bear in mind that texts will be translated.

4.8 Languages of dissemination

In the organizations we studied, a varied number of languages were used for multilingual communication. The choice of languages depended on different factors. Often, communication was targeted only at the largest populations of speakers of non-national languages. However, the foreign-language materials available were not directly proportional to the sizes of the populations with non-national first languages. One reason may be that everyone who declared their first language as other than Finnish, Swedish, or one of the Sámi languages was not necessarily considered to need information in their own language because they already had sufficient knowledge of the official language. We did not collect enough data from the interviews to determine what exactly motivated the language choices in different settings and situations.

Table 3 on page 20 lists the languages in which information on COVID-19 was provided by different organizations. The table is based on material found on the organizations' websites or reported in interviews, and the list of languages represents the total number of languages in use during the pandemic. A language has been included if it was used to give information about the pandemic or if the website or interview indicated that information was available in that language, for example, in the form of telephone hotlines or face-to-face advice. As different languages were used situationally, a language's inclusion in the list does not

³ https://kumppanuusalusta.kotoutuminen.fi/en/frontpage.

⁴ https://vnk.fi/kaannos-ja-kielipalvelut/sanastot.

mean that this language was used in all forms of multilingual communication. In addition, the websites and interviewees may not have mentioned all languages that were used.

The official languages (Finnish and Swedish) are included in the listings. For the Institute for Health and Welfare, we have included the Sámi languages, Finnish and Finland-Swedish sign languages, and easy Finnish and Swedish because the Institute produced more materials than any other in these languages. Links to the Institute for Health and Welfare's easy language website were provided on the cities' websites. The cities themselves also provided information in the Finnish and Finland-Swedish sign languages; however, we did not collect enough information about these practices to include them in the list. In addition, the project focused on the languages used by the migrant population.

Organization (sector)	Languages
City of Helsinki (municipality)	23: Finnish, Swedish, Russian, Somali, Estonian, Arabic, English, Kurdish (Kurmanji), Kurdish (Sorani), Farsi, Spanish, Turkish, French, German, Albanian, Urdu, Ukrainian, Romanian, Polish, Bulgarian, Azerbaijani, Dari, Uzbek
City of Vantaa (municipality)	9: Finnish, Russian, Estonian, Swedish, Arabic, Albanian, Somali, English, Dari
City of Espoo (municipality)	19: Finnish, Swedish, Russian, Estonian, Arabic, English, Chinese, Somali, Farsi, Albanian, Vietnam, Dari, Hindi, Sorani, Thai, Turkish, Urdu; counselling also in Tagalog and Visayan
Finnish Institute for Health and Welfare THL (government)	Up to 25 languages and 2 easy languages: - 7 languages traditionally used in Finland: Finnish, Swedish, Inari Sámi, Northern Sámi, Skolt Sámi, Finnish and Finland-Swedish sign language - 2 easy languages: easy Finnish, easy Swedish - Comprehensive information throughout the pandemic in 6 migrant languages: Arabic, English, Estonian, Russian, Somali, Kurdish (Sorani dialect) - Throughout the pandemic, some information in the following 3 migrant languages: Chinese, Farsi, Thai - Ukrainian was added to these languages in spring 2022 at the onset of the war - At the beginning of the pandemic, also in the following 8 migrant languages: Albanian, Dari, French, Persian, Romanian, Spanish, Turkish, Vietnamese.
Confederation of Finnish Construction Industries (business)	12: Czech, English, Estonian, Finnish, German, Latvian, Lithuanian, Polish, Romanian, Russian, Swedish, Uzbek
NCC Finland (business)	6: Russian, Estonian, Polish, English, Finnish, Swedish
Finnish Association of Russian Speakers (NGO)	1: Russian
Finland–Somalia Association (NGO)	1: Somali
Finnish Red Cross (NGO)	19: Arabic, Bulgarian, Chinese, Dari, English, Estonian, Farsi, Finnish, Pashto, Ukrainian, Romanian, Russian, Somali, Sorani, Swahili, Swedish, Thai, Tigrinya, Turkish
News in Russian at national broadcasting service YLE (media)	1: Russian
University of Helsinki (university)	3: Finnish, Swedish, English

Table 3: Languages in which information was provided by different organizations.

4.9 Dissemination

The following key points characterized the dissemination of multilingual COVID-19 information:

- It is important to reach out to the communities of speakers of non-national languages
- The best ways to reach out to communities and engage with them must be identified (e.g., whether to disseminate information in a shopping mall, in a mosque, or via TV)
- Existing information channels quickly find their audience (e.g., Russian-language YLE)

- Multichannel information can lead to fragmentation when the communication through multiple channels is managed by the authorities (vs. grassroots-level communities and their associations)
- Cooperation between authorities, other organizations, and associations is crucial.

A variety of channels was used to disseminate information on COVID-19. On the one hand, while social media and digital services allowed for wide dissemination of information in diverse ways, they also led to excessive fragmentation of information sources. Face-to-face counseling and community events, on the other hand, were regarded as valuable opportunities for information sharing, but it was not always possible to organize these, especially at the beginning of the pandemic.

Table 4 summarizes the communication channels used by different organizations.

Sector	Organization	Channels used for dissemination of multilingual information
Municipality	City of Helsinki	Web pages, videos, info desks at malls, info flyers, chatbot,
		telephone hotlines, counseling desks, associations of foreign
		language speakers and their communities
Municipality	City of Vantaa	Web pages, videos, info desks at malls, info flyers, chatbot,
		telephone hotlines, counseling desks, associations of foreign
		language speakers and their communities, community radio
		stations
Municipality	City of Espoo	Web pages, personal letters to residents, videos, info desks, info
		flyers, chatbot, associations of foreign language speakers and
		their communities
Government	Finnish Institute for	Web pages, social media, YouTube channel, newsletters, press
	Health and Welfare	conferences, lectures, live streams, emails, task force
Business	Confederation of Finnish	Web pages, expert speeches to workers, sharing of good practices
	Construction Industries	with member companies, posters, articles on web page
Business	NCC Finland	Posters, info screens, signs, pictograms, intranet, email address
	(construction company)	for COVID-19 questions, info releases, weekly newsletters
NGO	Finnish Association of	Website, mailing lists, Facebook, Instagram, YouTube channel,
	Russian Speakers	information events (live and streamed)
NGO	Finland–Somalia	SOM TV Finland's Talk Show and "soap operas" distributed via
	Association	Facebook, website, info desks, mosques
NGO	Finnish Red Cross	Co-produced together with associations of foreign-language
		speakers: information flyers, YouTube videos in many languages,
		posters, information cards, subtitled videos, videoed interviews in
		target languages, question-and-answer leaflets
Media	News in Russian at	Daily five-minute news in Russian on national TV channel,
	national broadcasting	website, Facebook
	service YLE	
University	University of Helsinki	Web pages, intranet, Zoom conferences, Twitter, Instagram,
		email accounts for COVID-19-related questions

Table 4: Communication channels mentioned in the interviews. Note that other channels may have existed, as well.

The Institute for Health and Welfare was the main source of official COVID-19 information, which it disseminated through its website, social media, YouTube channels, and newsletters, with its communication in foreign languages most extensive in the main migrant languages (see section 4.8 above). In addition, the Institute for Health and Welfare organized information sessions (often streamed), lectures, and meetings, and sent emails directly to stakeholders. The various communication channels, for example, on social media, often included links to other channels. The Institute for Health and Welfare also tried to target communications to different audiences. The Institute's website was not necessarily accessible to the general target groups, but the information could be used by representatives of associations and other actors to disseminate the information. The Institute for Health and Welfare recognized that it was not enough to

translate information into different languages—it was equally important to disseminate the information, i.e., to take it to communities and ensure that it was understandable. To achieve this, the Institute collaborated with migrant community associations. Figure 5 on shows a flyer produced by the Institute, in which text is combined with images.



Figure 5. Instructions to protect oneself from COVID-19 infection in Russian, exemplifying the combined use of images and text. The flyer was created on 16 February 2022 and modified on 16 August 2022. Source: The Finnish Institute for Health and Welfare (THL).

Construction companies' employees commonly originate from different countries, and face-to-face sharing of COVID-19 information was a natural dissemination method on construction sites. In addition, posters, information screens, and pictograms were implemented on the sites. Information was provided in the languages used by the construction workers (e.g., English, Russian, Estonian, and Polish). Outside the sites, intranet and email were used to distribute newsletters and weekly bulletins, among other communications. The Institute for Health and Welfare, the national broadcasting service YLE, and the daily newspaper Helsingin Sanomat were also important sources of information. The construction companies shared good practices and invited experts to give information sessions for their employees. As many employees were affected by entry restrictions, the Border Guard was an important source of information. Cultural differences in the use of masks were noted, even between Finland and Sweden, where official policies differed greatly.

It is interesting to compare the results of the interviews with a study by THL (Skogberg et al. 2021) on access to information, compliance with official recommendations, and working conditions among migrants during the pandemic. According to the THL study, men who migrated from Estonia, Russia, and other former Soviet Union countries were less likely than other groups to comply with the recommendations not to shake hands (op. cit., p. 25) and to wear a mask (op. cit., p. 23). This was probably due to cultural factors—in the construction industry, males belonging to these groups perceived the use of masks as a restriction of their human rights and freedoms. Plus, in Russia, for example, shaking hands is an important part of male-to-male interaction.

Some municipalities tested a machine translation chatbot proficient in as many as 100 languages, as well as a local radio station providing information in some languages used by migrants. The municipalities also provided telephone advice in different languages and sent information leaflets to residents in their language. The leaflets were available on the websites as well, as shown in Figure 6.

Do you suspect you might have a coronavirus infection?

- Soupçonnez-vous une contamination par le coronavirus? (in French)
- Soupçonnez-vous une contamination par le coronavirus? (visual instructions in French)
- ¿Cree que se ha contagiado del coronavirus? (in Spanish)
- Was tun bei Verdacht auf eine Coronavirus-Infektion? (in German)
- Miyaad ka shakisantahay in aad qaadday cudurka fayruska Korona? (in Somali)
- Miyaad ka shakisantahay in aad qaadday cudurka fayruska Korona? -hagitaanka sawirka leh (visual instructions in Somali)
- Kas kahtlustate koroonaviirusesse nakatumist? (in Estonian)
- Kas kahtlustate koroonaviirusesse nakatumist? illustreeritud juhend (visual instructions in Estonian)
- Подозреваете, что заразились коронавирусом? (in Russian)
- Подозреваете, что заразились коронавирусом?
 графическая инструкция (visual instructions in Russian)
- Koronavirüs enfeksiyonundan mı şüpheleniyorsunuz? (in Turkish)
- Koronavirüs enfeksiyonundan mı şüpheleniyorsunuz? (visual instructions in Turkish)
- Suspectați că aveți o infecție cu noul coronavirus? (in Romanian)
- <u>Имате ли съмнения за коронавирусна инфекция?</u> (in Bulgarian)
- (in Sorani) ئهگهر گومانت كردكه تووشي قابر وسي كزې وته بوويته، يهم جوره ي خوارموه بكه •
- په خور دی خوار دو دیکه و (visual instructions in Sorani)
- (in Arabic) افعل كما يلمي، إذا كنت تشك بأنك ق د أصبت بالحدوى بفيروس كورونا
- (visual instructions in Arabic) افعل كما بلي، إذا كنت تشك بأنك ق د أصبت بالحوى بفبروس كورونا
- (in Dari) الكر شك داريد ك ويروس كرونا به شما سرابت كرده است ابنطور عمل كنيد .
- (visual instructions in Dari) اگر شک دارید ک ویروس کرودا به شما سرایت کرده است ابدلمور عمل کنید
- (in Urdu) اگر آب کو اس بات کا شبہ ہو کہ آب کورونا وائرس سے متاثر ہوگئے ہیں تو کیا کریں •
- اگر آب کو اس بات کا شید ہو کہ آب کوروٹا وائرین سے مثاثر ہوگئے ہیں تو کیا کریں
 Urdu)
- See visual instructions (in Finnish, Swedish, English, Estonian, French, Russian, Somali, Turkish, Ukrainian, Sorani, Arabic, Dari, Urdu)

Figure 6. Screenshot of the City of Helsinki multilingual COVID-19 website on 3 February 2021. The main page in English contains links to information in different languages, the content of which is also described in English in brackets. Information is provided in 13 foreign languages (French, Spanish, German, Somali, Estonian, Russian, Turkish, Romanian, Bulgarian, Sorani, Arabic, Dari, and Urdu). In addition to text, information combining text and visual information is available in all these languages.

However, the low number of clicks indicated that written texts, videos, and other materials published on the municipalities' websites were difficult to find and scarcely used. It was, therefore, important to utilize a variety of channels. The following extract from the interview material illustrates the situation:

For example, in some population groups, information travels best by word of mouth. We do realize that the city's website is not necessarily accessible to people who do not speak Finnish, Swedish, or English, so even if the content is on the website, it is important to distribute the information through other channels as well.

Awareness of the problem of accessibility of communication led municipalities to set up information points in shopping malls, where leaflets, flyers, and other information were distributed in the main migrant languages. Outreach work was seen as an important way to create active links with associations and religious communities, which were key players in disseminating information and getting the message through: "It's the networks and personal contacts that play a really big role here." The municipalities also found that communication should consider the target group, seeing as it is not possible to effectively communicate with different language and cultural groups using the same information, as the following quote reflects:

It would be important to get a better understanding of which form of information and what kind of communication works for a given language and cultural group and what are the cultural specifics. There are so many different factors at work: lack of knowledge, cultural habits, lack of understanding, indifference.

The University of Helsinki has two official languages, Finnish and Swedish, and English is also used to ensure its openness to the international community. All three languages were used to communicate during the pandemic. A web page for COVID-19 communication was created on the university's website. In addition, the university communicated through its social media channels (Twitter and Instagram) and organized separate briefings and Q&A sessions for its staff and students via the Zoom video-conferencing tool in three languages. A special email address was set up for all COVID-19-related questions. As the university rapidly moved to distance working and learning, people-to-people contact was avoided. The university is an expert organization, and its members are used to receiving information and asking questions. Many university staff members have contacts abroad so travel information became topical.

The Finnish Red Cross helped associations to organize their COVID-19 communication and acted as an intermediary between the authorities and the associations. The Red Cross also assisted various target groups to create videos. For example, an expert panel discussion video was created in cooperation with SOM-TV Finland and the Finland–Somalia Association, which was distributed via a satellite channel with more than 300,000 viewers, in addition to hundreds of thousands of viewers on Facebook. Expert speakers using the language of the community inspired confidence.

The Red Cross staff noted significant differences between different groups of migrants: some needed a more individual approach, others a more community-based approach; some followed the media, whereas others needed face-to-face communication. For some, simply being called a migrant (in Finnish, *maahanmuuttaja*) could be offensive.

In addition, migrants of different ages within the same group followed different media, so messages needed to be targeted at different subgroups. The Red Cross acknowledged the importance of adapting the information to make it understandable; simply translating official information is not enough. As for the Institute for Health and Welfare and the municipalities, the importance of outreach work and network meetings became evident.

Regarding the accessibility of information, the following was noted:

The problem is quite often that the multilingual and different-language stuff is hidden somewhere inside the Finnish webpages, so you have to click many links in Finnish before you get to the multilingual section.

All these municipalities, medical districts, and such, they are pretty hidden, and the Institute for Health and Welfare was in my opinion even more hidden.

The Finland-Somalia Association organized telephone counseling and led outreach work at information points in the Itäkeskus ("Eastern Center") and Malmi neighborhoods⁵ in Helsinki, where it also distributed flyers and masks. Information and masks were, furthermore, distributed to various mosques, and cooperation was secured with the Ministry of Social Affairs and Health, the Institute for Health and Welfare, and the Finnish Red Cross, among others. As mentioned above, four videos were produced with the Finnish Red Cross, one of which was a comprehensive TV broadcast via a satellite channel (SOM-TV Finland) "because we knew that many people watch programs in their own language in the evening, rather than YLE or MTV⁶ news." During COVID-19, the Somali community experienced feelings of inequality and discrimination because information in Somali often arrived too late and was outdated. In addition, the quality of translations was poor, and the Finnish media highlighted the particular spread of the virus among the Somali population. The association noted that the Somali population was then avoiding Finnish channels because of the negative news coverage regarding their community. Racism and social inequality, therefore, impacted trust in society. The association also perceived that the authorities used too many communication channels in Finland (Institute for Health and Welfare, cities, Helsinki Hospital District, Regional State Administrative Agencies, Red Cross, etc.), resulting in fragmentation of information. This led to the proposal that, in the future, one clear communication channel is needed from which associations can retrieve information and share it through multiple channels within the community. In other words, multichannel access should be implemented closer to the community level.

The Association of Russian Speakers in Finland distributed information translated to Russian on its website and via email lists, Facebook, and YouTube. The association's employees independently translated information from the following sources: the Prime Minister's Office, Institute for Health and Welfare, Regional State Administrative Agencies, and city websites. The association also organized information sessions for its members, both on-site and streamed. The association reached around 20,000 followers through its Facebook group, YouTube, and Instagram channels. The target group consisted of Russian-speaking migrants, social workers, and member associations. The pandemic led to an evolution in the association's communication activities, larger numbers of subscribers, and a growing awareness of the impact and importance of the association's communication. Trolls spreading alternative information by commenting on the association's social media press releases created a problem.

YLE's Russian-language news service has three communication channels: TV (the main news of the day, lasting about five minutes), a website (10 to 15 news items per day), and Facebook (with links to the news on the website). Facebook gives visibility to the Russian news and attracts readers to the site. The editorial team also has an Instagram account, mostly dedicated to entertainment. During the pandemic, the number of users significantly increased both on the Russian-language YLE website and on Facebook. In 2020, before the pandemic, there were approximately 115,000 page views per week, while at the beginning of the pandemic, in March and April 2020, the number of page views was 460,000–540,000 per week.

⁵ Transportation hubs and important meeting points.

⁶ Finnish commercial TV network.

5 Summary of major findings

5.1 Best practices

1) Most participants were aware of the main principles of multilingual communication and had experience in implementing these principles in practice:

- Information was produced in several non-national languages
 - Some organizations had clear multilingual communication principles
- The attitude toward multilingual information production was positive
- The main principles of multilingual communication (e.g., language choices) were formulated before COVID-19
 - Channels that were well-established before the pandemic rapidly attracted viewers and listeners for their COVID-19-related information
- Often, one person was in charge of multilingual communication
- Multilingual communication practices were continuously developed
- Many had experience in procuring and producing translations.

2) Several forms of cooperation existed within and between the organizations:

- Cooperation between and within organizations
 - Cooperation platforms included COVID-19 task forces, coordination groups and networks, and situation centers
 - Forms of cooperation included roundtables, negotiations, information exchanges, and webinars
 - o There was a specific Partnership Platform for sharing multilingual COVID-19 information
- Engaging with migrant communities and their associations
 - Forms of engagement and outreach included pop-up info desks at malls and libraries and meetings with community members at religious events
 - o The importance of trusted and flexible contact was acknowledged
 - The role of multicultural communication experts (within the organizations and in communities) was acknowledged.

3) "One size does not fit all" was widely acknowledged:

- There was widespread awareness of how digital communication is more than just updating the website
- Cultural diversity was acknowledged in visual tools, e.g., pictograms
- Communication was adapted and tailored for different channels
- The channels included YouTube videos and live broadcasts, Zoom cafés, Facebook TV, telephone hotlines, chatbots, and doctors that speak the language.

5.2 Challenges

1) Translation policies

- The existing communication plans did not explicitly recognize
 - o the needs of the multilingual public
 - o translation as a tool of communication with its own management needs
- In municipalities, much work was done in silos
 - o Different departments (e.g., health services, education) did not sufficiently cooperate
 - o Often, there was no coordination of translation and editing work
 - Structural challenges often caused additional problems: different organizations and departments within the same organization did not have the same level of authority
 - O As a result of all this, there was a lot of overlapping translation work and other language work in relation to COVID-19 information.

2) Production and dissemination of information

- There was a lack of financial and human resources
 - o No resources were specifically allocated for multilingual communication
- The high turnover of staff prevented an efficient accumulation of knowhow
- Information changed constantly, and the imperative to act fast created an additional burden
- There was considerable heterogeneity between and within target groups
 - Attitudes were not always positive: there was a lack of trust in the authorities, and some communities' experiences of discrimination made it difficult to build trust and change attitudes
 - o There were divergent ideas about the right information in the target populations
 - A considerable challenge lay in identifying the right ways to address the target population without othering them
 - The Finnish term *maahanmuuttaja* ("immigrant") depicts the out-group and is regarded as negative and even derogatory by many migrants; many would not like to be included in that group, as compared to the term *suomalainen* ("Finn," "Finnish")
 - An additional challenge was how to reach the target population (which channels and media to use).

3) Reception of information

- Speakers of non-national languages found that the information was fragmented and there were too many channels
 - o "Just one channel would have sufficed"
- Information in different languages was not available at the same time (and was updated at a different pace)
 - o This caused feelings of inequality: "When we received the information, it was too late"
 - When comparing the different sources, the information was contradictory (for example, because some sources had not yet updated their information in a given language)
- It was difficult to find the information.

4) Translation processes

- The translation processes were different even within the same organization
- Those responsible for translation did not always have experience with translation processes, coordinating them, or purchasing translations
 - o A high rate of staff turnover created an additional burden in this respect
- Many failed to recognize the need for translation (process) knowhow
- Rapidly changing information increased the pressure on and adversely affected the quality of translation processes, as well.

5) Outsourcing the translations

- Several different translators translated texts for the same organization, and there was no direct contact between the translator and the organization that commissioned the translation
 - The situation was quite different in organizations that had in-house translators or used the same translator(s)
- There was no systematic storage of texts produced in different languages
- Translation memories were not used
- As a result:
 - o It was difficult to carry forward the optimal language use in translations (e.g., terms)
 - o It was difficult to control the quality (e.g., dialectal features, giving feedback)
 - o There was no process development (whole translation process outsourced).

6 Recommendations

The research team issued nine recommendations, and they were positively assessed by the stakeholders at the online workshop on 7 October 2022. Subsequently, overlapping content was removed and more content added, resulting in the following seven recommendations:

1 Greater translation and language awareness are needed in organizations producing multilingual information for the migrant population

- The accessibility of the translated text depends on the complexity of the source text, the quality of the translation, the quality of the translation process, and the choice of dissemination methods.
- In many cases, the linguistic culture of the migrant group differs from the linguistic culture of
 Finnish society. "Linguistic culture" here refers to the relation between written and oral
 communication, the ways in which different kinds of texts of a given genre are composed, and
 trusted sources of information.
- The target group of the translated text typically has very different linguistic resources, as compared to the target group of the Finnish or Swedish source text. For example, the target group of translated texts may not have a sufficient knowledge of the functioning of the Finnish welfare system or administrative structures and they may not be used to processing the kinds of texts that are produced by the Finnish authorities.
- Many migrants are second-language speakers of the languages that they use in Finland (for example, in interpreter-mediated encounters with representatives of the authorities). Often, they declare that their first language is the official language of their country of origin, and/or the language in which they were schooled, although they are not first-language speakers of that language. The proportions of second-language speakers are high, for example, among people using French, English, Portuguese, Russian, Thai, Arabic, or Farsi.
- At the same time, within- and between-group variations in linguistic resources are considerable.
- Most languages used by migrants lack standard equivalents for bureaucratic words and expressions related to the functioning of Finnish society, including names of administrative structures, municipal departments, the organization of the healthcare system, and social benefits.
- Many translators translating from Finnish or Swedish into a language used by a migrant group have not received professional training on how to analyze the source text, provide an accurate translation by searching for appropriate equivalents in dictionaries and parallel texts, and consider the context in which the source text is used, the purpose of the text, and the context in which the target text will be used.
- Non-professional translators tend to follow the source text's expressions, structures, and word order very closely, which adds complexity to the text. They do not necessarily know where to search for the right equivalents or how to imagine the situation where and the persons by whom the translated text will be used. In addition, they may use a register that is higher or lower than the one used in the source text, or they may mix low and high registers in their text. They may even use a dialectal variety of the target language. As a result, a complex target text easily becomes even more complex when it is translated.

2 Multilingual communication should be an intrinsic part of general communication strategies and guidelines

Often, multilingual communication is not part of the entire process of text production, and as a
result, problems related to multilingualism emerge when a crisis occurs. It is easier to produce
multilingual information of high quality and efficiently and adequately disseminate it when
multilingualism is acknowledged in strategies and guidelines.

- A multilingual communication plan should include descriptions of the following or sources of information for the following:
 - Production of information content in plain language
 - Cooperation with end users' associations
 - Cooperation with other organizations producing (similar) multilingual information, to prevent overlapping translation work and confusion created by too many information channels and non-consistent language use, including terms, expressions, and language variety
 - Translation processes, including the coordination of translation processes managed by different departments of the same organization.

3 In crisis communications, source texts should be produced in plain language and/or easy language

 Using plain and/or easy language reduces the risk of translation errors and the production of complex target texts, especially in less-widely-used languages in which there is not yet professional translator training.

4 A designated person or persons responsible for different aspects of multilingual communication should be nominated, including

- A designated person(s) in charge of coordinating and developing the translation processes (including purchasing and outsourcing translations, translation guidelines, quality assurance, and feedback procedures)
- Contact persons in other organizations (including end users' associations).

5 Greater expertise is needed to successfully procure and purchase translations from translation agencies, along with awareness that the procurer also has certain responsibilities

Currently, many organizations outsource their translation activities, with in-house translators only for the most commonly used languages such as English and Swedish. This means that most potential issues with texts to be translated are outsourced, as well. Furthermore, the translator may not have a clear idea about the specific needs of the target readers or audience. In such regards, the producer of the source text and procurer of the translation are equally responsible.

6 There should be a centralized system for collating and storing translated contents with a view to identifying and carrying forward the optimal terminology, expressions, and style.

If previously translated contents are not easily retrievable, the optimal terminology, expressions, and style cannot be carried forward, and each new translation will continue to reflect the lexical, textual, and stylistic choices made by individual translators. As a result, complex and unclear terminology will continue to be used in communications with migrant populations, hindering efficient communication.

7 New forms of cooperation between organizations in the field of translation should be explored, including

- The possibility of purchasing translated texts jointly with other organizations, especially in lesswidely-used languages
- Joint workshops to draft common guidelines for translators
- Joint workshops to create standard equivalents, including plain-language and easy-language equivalents for complex administrative concepts in languages most commonly used by migrants
- Joint workshops where translation experts train translators of less-widely-used languages.

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