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## **Dialects, Identity, and Language Equity: Resources for Extension Work with Spanish Speaking Communities**

### **Abstract**

Spanish is the second most spoken language in the United States, yet it varies widely by region, migration history, and cultural identity. These differences influence how individuals interpret guidance, assess risk, and trust institutions. We present practical resources for Extension professionals across agriculture, health, and youth programs. The tool synthesizes literature on cultural humility, distinctions between translating and interpreting, criteria for selecting qualified language professionals, and recommended actions for program planning, delivery, and evaluation. We provide examples, implementation tips, equity considerations, and metrics to support program improvement. This resource is adaptable and aligned with national standards.

### **Keywords:**

Language; Culture Competency; Human Rights; Health Disparate Minority and Vulnerable Populations

## **Introduction**

Hispanic or Latino individuals, defined as persons of Cuban, Mexican, Puerto Rican, South, Central American, or other Spanish culture or origin, regardless of race (U.S. Census Bureau, n.d.), make up 20% of the U.S. population, or about 68 million people, making it the largest racial minority in the country (United States Census Bureau, 2025). Because individuals of Hispanic origin come from diverse national and cultural backgrounds, Spanish is consequently the second most spoken language in the United States. Despite this demographic reality, Extension resources that effectively serve Spanish-speaking audiences remain limited.

Like all languages, Spanish encompasses multiple varieties. Pronunciation, vocabulary, grammar, and idiomatic expressions vary across Caribbean, Andean, Mexican, Central American, Rioplatense, and Peninsular Spanish, among others. These linguistic differences influence how individuals interpret information, evaluate risk, and develop trust in institutions and service providers. For Extension professionals, awareness of dialect variations, combined with cultural humility, is essential for promoting clear communication, fostering trust, and supporting equitable program outcomes.

To clarify the need for an adaptable Extension resource that accounts for language variation, the following literature review synthesizes existing research and practice guidance across four areas: (1) linguistic diversity and Spanish varieties; (2) language access and equity in health and agricultural setting; (3) the role of cultural humility and intersectionality; and (4) distinctions between interpreting and translating within community based practice.

### **Linguistic Diversity and Spanish Dialect Variation**

Spanish use in the United States reflects extensive social and geographical diversity, shaped by region-specific vocabulary, pronunciation, and grammatical features (Fernández de Molina Ortés & Hernández Campoy, 2018). More than 60 million U.S. residents speak Spanish at home, representing communities from Central America,

South America, the Caribbean, and Spain (U.S. Census Bureau, 2025; Manrique & Mouw, 2023). These Spanish-speaking populations represent a broad range of dialects, including Mexican, Puerto Rican, Cuban, Central American, and long-established U.S. regional varieties, each shaped by historical migration, community identity, and ongoing language contact (Manrique & Mouw, 2023). These dialects differ systematically in phonetics, lexicon, grammar, and idiomatic expression, reflecting sociolinguistic dynamics documented across Spanish-speaking communities in the U.S.

Research shows that discrepancies across Spanish varieties can produce misunderstandings in educational, public health, and service settings (Benítez-Burraco, 2024; Davidson et al., 2024; Fafulas et al., 2024; Kaiser Family Foundation, 2024; Nguyen et al., 2024; Zaylskie et al., 2025). Importantly, for Extension educators, dialect variation may affect comprehension of safety instructions, agricultural terminology, food-handling guidance, nutrition education, and youth program requirements (Tkacova, 2025). Intentionally adapting vocabulary and examples to reflect participants' dialects promotes clearer communication and reduces cognitive load (Benítez-Burraco, 2024; Nguyen et al., 2024). These practices are particularly important for individuals with limited formal schooling and for speakers of Indigenous languages (Angelo et al., 2022; Esperanza, 2025; Kaiser Family Foundation, 2024). While dialect matching enhances comprehension, respectful, clear, and responsive communication remains essential (Davidson et al., 2024; Zaylskie et al., 2025).

### **Language Access, Equity, and Trust in Community Settings**

Language access is increasingly recognized as a determinant of equitable participation in community-based services. The U.S. Department of Health & Human Services identified language as a central component of the Hispanic/Latino health profile, with limited English proficiency linked to challenges in accessing health services (Office of Minority Health, 2025). Research on farm workers and rural communities similarly highlights the risks of miscommunication during trainings and language differences pose

barriers to receiving health and safety information (Cheney et al., 2022; Miller et al., 2018).

Studies also document improved trust when providers acknowledge dialect preferences, avoid stigmatizing regionalisms, and offer language services aligned with professional standards (Cuevas, 2022; Velasco Mondragón et al., 2016). Collectively, this evidence underscores the importance of language-responsive practices in fostering safety, comprehension, and equitable engagement. These findings also reflect broader calls for linguistic justice, which emphasize the right to use and be respected for one's full linguistic repertoire, including non-standard dialects and heritage varieties, and frame language as a site of identity, dignity, and equity (Baker-Bell, 2020).

### **Cultural Humility and Intersectionality as Foundations for Equity**

Cultural humility, defined as “a process of openness, self-awareness, being egoless, and incorporating self-reflection and critique after willingly interacting with diverse individuals” (Foronda et al., 2016, p. 213), has become central to work in community health, educational, and Extension systems. Intersectionality, described as the interactivity of social identity structures such as race, class, and gender in shaping experiences of privilege and oppression (Crenshaw, 1989; Gopaldas, 2013), offers an additional lens for understanding how language barriers intersect with systemic inequities (Rodrigues et al., 2024).

For Spanish-speaking communities, language identity is deeply connected to cultural belonging, migration history, language contact, and social determinants of health. Respect for dialect variation and access to accurate language services can mitigate linguistic discrimination, including linguistic racism or dialect prejudice, which has been associated with reduced help-seeking, lower program retention, and increased safety risks (e.g., Aminah and Paswan, 2023; De Costa, 2020; Meyer, 2023; Yoder, 2023). By soliciting preferred terms, cocreating mini glossaries with local partners, and acknowledging dialect diversity, Extension professionals can foster belonging, comprehension, and safety, aligning their work with National Culturally and Linguistically

Appropriate Service (CLAS) Standards, developed by the U.S. Department of Health and Human Services, and Extension's mission.

### **Translating and Interpreting as Distinct Professional Practices:**

Although the terms “translating” and “interpreting” are often used interchangeably, they represent distinct professional disciplines. Translating concerns written materials such as curricula, handouts, and signage, while interpreting involves real-time spoken or signed communication (Eby, 2016). Misusing or conflating these services can lead to significant communication errors.

Professional translators and interpreters receive training in dialect variation, technical terminology, ethics, accuracy standards, and confidentiality. National certification programs for interpreters are competency based and require validated assessments to ensure safe and ethical practice (Eby, 2016). Credentials such as Certified Medical Interpreter®, National Board Certified Medical Interpreters, Certification Commission for Healthcare Interpreters, American Translators Association certification, and various court-interpreter qualifications indicate tested and verified skills. Bilingual ability alone does not guarantee accuracy, and reliance on untrained individuals, particularly in high-risk contexts, can introduce safety concerns and inequities for limited-English-proficient individuals (Fafulas et al., 2024). For Extension professionals, understanding distinctions between translating and interpreting is essential for program planning, selecting qualified language professionals, and ensuring accuracy in public-facing communications.

### **Objectives**

There remains a need for a practical and adaptable resource that supports Extension professionals in addressing language variation, cultural humility, and professional language access. This article responds to that need by:

1. Presenting a dialect aware, culturally responsive resource for working with Spanish speaking communities in Extension settings.
2. Clarifying how to identify and select qualified professionals for translating and interpreting services.
3. Offering examples and evaluation indicators to support the development of more inclusive and effective programs.

## **Methods**

This article employed a targeted literature review to gather and integrate evidence on Spanish language variation, cultural humility, and professional language access in Extension contexts. Our aim was to identify existing national guidance, scientific literature, and professional standards to inform the development of a resource for use across agricultural, health, and youth programming.

### **Search Process and Source Selection**

To develop the resource, we conducted a review of literature on Spanish dialect variation, intersectionality, linguistic equity, and multilingual service delivery, along with publicly available federal guidance, most notably the U.S. Department of Health and Human Services' National CLAS Standards, and professional certification standards relevant to language access and linguistically appropriate services. We prioritized sources that met the following criteria: (1) Relevance to Extension or community-based programming; (2) Direct applicability to language access or communication practices, and (3) Evidence-informed recommendations suitable for adaptation across program areas. Searches were conducted using a combination of publicly available scholarly search tools and the university's library discovery system, supplemented by federal and professional organization publications. Sources were included if they offered conceptual, applied, or procedural guidance on culturally and linguistically responsive communication.

## **Data Extraction and Synthesis**

During the review, we extracted key concepts, recommendations, and terminology related to culturally responsive communication and language access. We used an iterative, qualitative synthesis process to: (1) Identify recurring themes across diverse bodies of literature; (2) Compare federal standards with Extension-relevant needs; (3) Consolidate overlapping recommendations into broader conceptual categories; and (4) Distill practice-oriented guidance relevant to program planning, delivery, and evaluation.

Our synthesis emphasized clarity, transferability, and alignment with Extension's mission and operational contexts. The procedures were carried out by representatives from two of the state's three Extension departments (Agriculture and Natural Resources, Family and Community Health Sciences, and 4-H), which increased the reliability and range of perspectives reflected in the processes. Extracted material was reviewed for consistency and organized into preliminary categories for further refinement.

## **Resource Structuring**

Following the synthesis, we organized the extracted insights into a coherent structure suitable for Extension professionals. This process involved consolidating related concepts, refining definitions for operational clarity, and outlining actionable steps for staff working with Spanish-speaking communities. The final structure was designed to support adaptability across program areas and to prepare the groundwork for presenting outcomes in the Results section.

## **Results**

The results of this review produced a practical, evidence-informed resource designed to support clear and equitable communication across agricultural, health, and youth Extension programming. The synthesized findings are organized into six categories: (1) core practice principles, (2) the rationale for addressing Spanish dialect variation in daily

Extension work, (3) distinctions between translation and interpreting, (4) guidance for selecting qualified language professionals, (5) an actionable checklist to support implementation, and (6) suggested evaluation indicators. Together, these categories introduce key areas of applied guidance for Extension professionals seeking to strengthen language equity, participant comprehension, and program safety.

To ensure clarity and consistency, the concepts were refined into a consolidated reference tool that defines terms, outlines key principles, and links each concept to actionable strategies. Table 1 provides a summary of these core concepts, their working definitions, and their practical implications for Extension staff implementing agricultural, health, and youth development programs. Building on these foundational definitions, Table 2 presents the synthesized practice principles, examples of dialect impacts, and guidance on the appropriate use of language services that emerged from the review.

Table 1. Key Terms, Definitions, and Application Considerations for Culturally and Linguistically Responsive Extension Programming

Terms	Definition	Application Considerations for Extension Programs
Cultural Humility	A lifelong process of self-reflection and institutional accountability used to mitigate power imbalances and align services with community-defined needs (Foronda et al., 2016).	Incorporate routine feedback loops; invite community terminology; co-create materials; acknowledge provider role and limits; adjust content in response to participant input.
Dialect	Regional and social varieties of a language that differ in pronunciation, vocabulary, grammar, and idiomatic expressions. Includes Caribbean, Andean, Mexican, Central American, Rioplatense, and Peninsular Spanish (Manrique & Mouw, 2023).	Check for vocabulary differences related to agricultural tasks, measurement units, health terms, and youth program procedures; normalize variation; clarify key safety terms; verify comprehension through teach-back.
Hispanic / Latino / Latinx / Latine	Pan-ethnic terms for people with origins in Spanish-speaking	Ask participants how they self-identify; avoid imposing

Terms	Definition	Application Considerations for Extension Programs
	Latin America or Spain. Individuals may also identify by nationality, Indigenous identity, race, or cultural heritage (U.S. Census Bureau, n.d.).	terminology; tailor examples/evidence to the cultural groups represented; avoid framing regions or dialects as “more correct.”
Interpreting	Real-time rendering of spoken or signed language from one language into another while preserving meaning, tone, register, and cultural context (Eby, 2016).	Use for workshops, farm visits, health education sessions, safety demonstrations, parent meetings, and consent conversations; contract qualified interpreters; avoid relying on untrained bilinguals for high-risk content.
Intersectionality	How overlapping social identities (race/ethnicity, gender, immigration status, language, class, sexuality, disability, rurality) shape lived experiences and advantages or disadvantages (Crenshaw, 1989).	Consider how language needs intersect with literacy, migration, work schedules, access to technology, or disability; adapt outreach, materials, and delivery methods accordingly.
Linguistic Justice	The right to communicate and receive services in one's preferred language and dialect, recognizing all variations as culturally legitimate (Baker-Bell, 2020).	Budget for qualified language services; avoid stigmatizing regionalisms; ensure plain-language Spanish versions of materials; acknowledge language diversity as a strength; protect against inequitable access.
Translating	Rendering written text from a source language into a target language while preserving meaning, tone, and context; requires subject matter expertise and cultural competence (Eby, 2016).	Use for curricula, handouts, signage, forms, and digital materials; utilize ATA-certified translators or professionals with field-specific experience; avoid word-for-word substitutions or machine-generated text without review.

## **Core Practice Principles**

The synthesis generated five overarching practice principles that support the implementation of dialect-aware, culturally responsive Extension programming. These principles reflect findings through the reviewed literature and the applied experience of Extension professionals in agricultural, health, and community settings. Collectively, they emphasize approaches that build trust, improve comprehension, and promote linguistic justice. Extension professionals can use Table 2 as a reference to integrate these principles across program planning, delivery, and evaluation.

## **Why Dialects Matter in Day-to-Day Practice**

The synthesis identified multiple ways in which dialect-specific vocabulary, grammatical structures, and social norms shape comprehension, rapport, and safety in Extension settings. Dialect variation influences how participants interpret, respond to, and engage with program content. As summarized in Table 2, meaning shifts, politeness conventions, verb and pronoun choices, trust cues, and regional norms each play a role in how Spanish-speaking participants experience information and interact with educators. Recognizing and adapting to these patterns is essential to ensuring that program messaging is both culturally and linguistically appropriate.

## **Translating vs. Interpreting in Extension Settings**

A key finding from the synthesis was that Extension professionals frequently conflate translating and interpreting, leading to mismatches between staff communication needs and the type of language support selected. Clarifying these distinctions is essential for accuracy, participant safety, and program accessibility.

Table 2 summarizes the distinctions between translating and interpreting and outlines appropriate use scenarios for each. Interpreting is required for real-time spoken or signed communication during workshops, demonstrations, meetings, or parent interactions. Translating is required for written materials such as curricula, handouts,

signage, consent forms, and digital resources. Across both areas, the synthesis underscores the importance of working with qualified professionals who possess field-specific knowledge relevant to agriculture, health, or youth development.

Table 2. Practice Principles, Dialect Impacts, and Appropriate Use of Language Services in Extension Programming

Category	Concept / Example	Description / Application in Extension
Practice Principles	Clear and broadly comprehensible Spanish	Prioritize forms understood across Spanish varieties while respecting regional expressions.
	Teach-back strategies	Use teach-back prompts to verify understanding, reduce stigma, and enhance clarity.
	Engage qualified language professionals	Contract trained interpreters and translators with relevant field expertise.
	Co-create mini-glossaries	Develop shared vocabulary with local partners and participants.
	Integrate evaluation	Use evaluation at each stage of programming to assess clarity, comprehension, and accessibility.
Why Dialects Matter	Meaning shifts	Words like guagua mean “bus” in the Caribbean but “baby” in Chile; ensure clarification and verify comprehension.
	Politeness norms	Expressions acceptable in one region may be perceived as rude or overly informal elsewhere.
	Verb variation	Participants may use conducir vs. manejar depending on country of origin.
	Pronoun norms	Variation in ustedes, vosotros, vos, tú, and usted influences tone, formality, and perceived respect.
	Trust signals	Recognizing or adapting to dialects strengthens rapport and supports practice adoption.

Category	Concept / Example	Description / Application in Extension
	Risk reduction	Dialect-appropriate messaging reduces misunderstanding, especially in safety and health communication.
Translating vs. Interpreting	Interpreting (real-time spoken/signed)	Required for workshops, demonstrations, farm visits, parent meetings, health sessions, and consent conversations.
	Translating (written)	Required for curricula, handouts, signage, consent forms, flyers, and digital materials.
	Professional expertise	Accuracy depends on training, certification, and knowledge of agricultural, health, or youth development terminology.

**Professional Standards and Selecting Qualified Language Professionals**

The review highlighted that high-quality language access depends on the use of trained, credentialed professionals and the integration of established national standards into Extension practice. Several nationally recognized certification pathways and guidance documents were identified that Extension staff can rely on when procuring language services, ensuring accuracy, safety, and alignment with CLAS expectations.

To support decision-making, Table 3 outlines recommended qualifications for interpreters and translators across common Extension contexts, along with considerations relevant to community-based programming. In addition to individual credentials, the review also identified key federal and practitioner-oriented resources that offer guidance on culturally and linguistically appropriate communication. These resources, including the National CLAS Standards, NIH Clear Communication materials, Think Cultural Health training modules, court interpreter certification systems, and state language-access initiatives, can be incorporated into staff training, program planning, and evaluation activities to strengthen communication equity and ensure consistent standards across program areas.

Table 3. Recommended Credentials and Selection Considerations for Qualified Language Professionals

Program Context	Recommended Credentials	Selection Considerations
Health / Nutrition	CMI <sup>®1</sup> / NBCMI; CCHI <sup>2</sup> (CoreCHI <sup>™</sup> , CHI <sup>™</sup> )	Prioritize medical terminology expertise, ethics, confidentiality, and role boundaries.
Legal / Consent	State or Federal Court Interpreter Certification	Required for high-stakes accuracy; ensures procedural fidelity and compliance.
Written Materials	ATA <sup>3</sup> -certified translators	Ensure subject-matter expertise (agriculture, health, youth development) and cultural competence.
Community Programs	Training in community/public service interpretation	Supplement with dialect awareness and local terminology; suitable only for non-technical or low-risk communication.

Certified Medical Interpreters / National Board of Certification for Medical Interpreters

<sup>1</sup> Certification Commission for Healthcare Interpreters (Core Certification Healthcare Interpreter, Certified Healthcare Interpreter)

<sup>1</sup> American Translators Association

### Use of Native Speakers or Paraprofessionals

Although native speakers and bilingual paraprofessionals can provide helpful support, research consistently shows that relying on untrained individuals for interpreting introduces substantial communication risks (Allen et al., 2025; Horváth and Molnár, 2022; Slade, et al., 2024). Studies across health and community settings document that “ad hoc” interpretation is associated with inaccuracies, omissions, altered meanings, and distorted emotional tone, issues that can jeopardize participant safety and understanding. Family members (e.g., children and spouses) or untrained staff may filter or omit parts of messages and are often unable to remain neutral during sensitive conversations (Rimmer, 2020).

Untrained bilingual staff typically lack familiarity with technical agricultural, health, or regulatory terminology, leading to paraphrasing, guessing, or the omission of concepts

(Essary, 2023). For these reasons, such individuals should only be used in low-risk, non-technical contexts and on a temporary basis. When they are involved, written or verbal content should be reviewed by a qualified interpreter or translator to ensure accuracy and maintain alignment with CLAS standards.

### Implementation Checklist and Evaluation Indicators

To support practical application of the resource, the synthesis produced a three-phase implementation checklist and a set of complementary evaluation indicators. Together, they translate the resource’s core principles into concrete steps that Extension professionals can use when planning, delivering, and assessing programs. Table 4 consolidates both components into a comprehensive tool for strengthening dialect-aware, culturally responsive, and safety-oriented communication.

Table 4. Implementation Checklist and Evaluation Indicators

Phase	Actions	Evaluation Indicators
Plan and Prepare	Identify language varieties (ask about heritage or dialects they are familiar with); co-create mini-glossaries; use broadly comprehensible Spanish; incorporate visuals and teach-back prompts; prepare materials aligned with CLAS standards <sup>1</sup> .	<ul style="list-style-type: none"> <li>• Participant reach by dialect group</li> <li>• Availability of translated materials</li> <li>• Interpreter utilization rates</li> <li>• Staff training in dialect awareness</li> </ul>
Engage and Deliver	Begin with a dialect-aware welcome; confirm key terms; provide audio/voice-note summaries; avoid stigmatizing regionalisms; reinforce language diversity as normal and valued.	<ul style="list-style-type: none"> <li>• Teach-back or comprehension accuracy</li> <li>• Reductions in communication-related safety or dosing errors</li> <li>• Participant perceptions of respect, clarity, and understanding</li> </ul>

<sup>1</sup> <https://thinkculturalhealth.hhs.gov/clas/standards>

Phase	Actions	Evaluation Indicators
Evaluate and Improve	Track questions and misunderstandings; request feedback; update glossaries and materials; acknowledge community contributors; monitor changes over time.	<ul style="list-style-type: none"> <li>• Reductions in language-related complaints or incidents</li> <li>• Increased use of recommended terminology</li> <li>• Investments in language services (time, budget, partnerships)</li> </ul>

Extension teams may adapt these indicators to local needs and use them to track changes in accessibility, participant satisfaction, and program adoption over time. Where feasible, teams should document pre and post implementation changes to assess the impact of the resource on communication equity and program effectiveness.

**Discussion**

The findings of this review highlight the importance of attending to language variation as a core competency for Extension professionals. As Spanish becomes increasingly prevalent across agricultural, health, and youth-serving environments, Extension programs must adopt communication strategies that acknowledge linguistic diversity and promote equitable participation. The resulting resource demonstrates that dialect awareness, cultural humility, and the use of qualified language professionals are foundational practices that strengthen safety, clarity, and trust across communities.

The review found that language access and dialect responsiveness directly influence participant comprehension and program effectiveness. Mismatches between language varieties can result in confusion about procedures, inaccurate interpretations of key messages, and uneven access to services (Fafulas et al., 2024; Office of Minority Health, 2025). Similarly, literature on intersectionality and cultural humility shows that linguistic identity intersects with race, gender, immigration status, and socioeconomic factors to shape experiences of inclusion, risk, and support (Cuevas, 2022; Rodrigues et al., 2024). The present resource builds on this scholarship by translating these concepts into actionable guidance for Extension contexts.

A key contribution of this resource is its ability to support gradual adoption across diverse program settings. Extension professionals can begin with foundational, low-cost practices, such as offering a dialect welcome, using broadly comprehensible Spanish as a baseline, and applying teach-back strategies, to build shared understanding and reduce stigma around language variation. Over time, programs may integrate more advanced components, including the use of credentialed interpreters and translators, the development of glossary repositories, and alignment with CLAS standards. These steps reflect broader recommendations in the culturally and linguistically appropriate services literature, which emphasize incremental capacity building as an effective approach to system level equity improvements.

### **Implementation Considerations and Ethical Implications**

Implementation of the practices outlined in this resource will vary based on organizational structures, available resources, and training opportunities. Because language varieties within communities are dynamic, shaped by seasonal employment patterns, migration, and demographic shifts, Extension professionals will need to routinely update glossaries, materials, and staff training. Reliance on untrained bilingual individuals, including family members and children, poses ethical concerns, as they may unintentionally introduce bias or omit critical information with implications for health and safety (Fafulas et al., 2024). Ongoing attention to these factors can help Extension strengthen linguistic equity across programs. Future research should examine how dialect-responsive practices influence comprehension, trust, and program participation over time, and evaluate the effectiveness of each implementation phase to identify areas for improvement.

### **Conclusion**

This review demonstrates that communication practices that are attentive to language variation are essential to advancing equity in Extension programming. As Spanish-speaking participation grows across agricultural, health, and youth-serving contexts, Extension professionals must adopt approaches that recognize linguistic

diversity, strengthen comprehension, and build community trust. The resource developed through this review integrates cultural humility, professional language-access services, and iterative evaluation into a model that aligns with national CLAS standards and supports safer, clearer, and more inclusive program delivery.

Findings indicate that dialect-aware strategies can be both low-cost and high-impact, reducing misunderstandings and mitigating inequities associated with language variation. The resource is grounded in existing research, federal language-access standards, and applied experience across multiple Extension program areas, offering a practical set of tools that can be adapted and scaled over time. Future research and local evaluation will be important to assess the resource's impact on comprehension, trust, participation, and safety across diverse communities.

Ultimately, adopting practices that affirm and respond to language variation enables Extension to better meet the needs of the communities it serves, advance linguistic justice, and deliver programming that is culturally responsive, equitable, and effective for all participants.

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### **Literature Cited**

Aaminah, Z.M. and Paswan, A. (2023). Linguistic racism in inter-culture service encounter. *The Journal of Consumer Marketing* 40(5):585-596. Accessed on March 13, 2026. <https://doi.org/10.1108/JCM-03-2021-4545>

Allen, J., Martinez Aguiriano, J., Pietrosevoli, S., Salazar, L. and Garcia, A. (2025). 199 Breaking language barriers in animal welfare: Developing Spanish for specific purposes courses and internship programs for veterinary and animal science students in Spanish-speaking farm environments. *Journal of Animal Science* 103(3):60-61. Accessed on March 13, 2026. <https://doi.org/10.1093/jas/skaf300.076>

Angelo, D., Disbray, S., Singer, R., O'Shannessy, C., Simpson, J., Smith, H., Meek, B. and Wigglesworth, G. (2022). Learning (in) Indigenous languages: Common ground, diverse pathways. *OECD Education Working Papers* 16:278. Accessed on March 15, 2026. [https://www.oecd.org/content/dam/oecd/en/publications/reports/2022/09/learning-in-indigenous-languages\\_ad468b23/e80ad1d4-en.pdf](https://www.oecd.org/content/dam/oecd/en/publications/reports/2022/09/learning-in-indigenous-languages_ad468b23/e80ad1d4-en.pdf)

Baker-Bell, A. (2020). *Linguistic Justice: Black Language, Literacy, Identity, and Pedagogy* (1st ed.). *Routledge*. Accessed on March 15, 2026. <https://doi.org/10.4324/9781315147383>

Benítez-Burraco, A. (2025). The cognitive science of language diversity: achievements and challenges. *Cognitive Processing* 26:719–736. Accessed on March 13, 2026. <https://doi.org/10.1007/s10339-025-01262-z>

Cheney, A.M., Barrera, T., Rodriguez, K. and Jaramillo López, A.M. (2022). The Intersection of Workplace and Environmental Exposure on Health in Latinx Farm Working Communities in Rural Inland Southern California. *International Journal of Environmental Research and Public Health* 19(19):12940. Accessed on March 13, 2026. <https://www.mdpi.com/1660-4601/19/19/12940>

Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A Black feminist critique of antidiscrimination doctrine, feminist theory, and antiracist politics. *University of Chicago Legal Forum: 1989*(8):139–167. Accessed on March 13, 2026. <https://chicagounbound.uchicago.edu/uclf/vol1989/iss1/8>

Cuevas, A. (2022). How should health equity researchers consider intersections of race and ethnicity in Afro-Latino communities? *AMA Journal of Ethics* 24(4):283. Accessed on March 13, 2026. <https://doi.org/10.1001/amajethics.2022.283>

Davidson, S., Smoker Broaddus, M. and Santana, L. (2024). Literacy and multilingual Indigenous language learners: Elevating the voices of education leaders and culturally sustaining practices. *Region 16 Comprehensive Center*. Accessed on March 13, 2026. <https://files.eric.ed.gov/fulltext/ED661948.pdf>

De Costa, P. (2020). Linguistic racism: its negative effects and why we need to contest it. *International Journal of Bilingual Education and Bilingualism* 23(7):833-837. Accessed on March 13, 2026. <https://doi.org/10.1080/13670050.2020.1783638>

de Molina Ortés, E. F. and Hernández-Campoy, J.M. (2018). Geographic varieties of Spanish, 496-528. In K. L. Geeslin (Ed.), *The Cambridge Handbook of Spanish*

*Linguistics*. Cambridge, Cambridge University Press. Accessed on March 13, 2026. <https://doi.org/10.1017/9781316779194.024>

Eby, H. (2016). Medical interpreting certification in the United States: A comparison. *American Translators Association Interpreters Division* Accessed on March 13, 2026. <https://www.ata-divisions.org/ID/medical-interpreting-certification-in-the-united-states-a-comparison/>

Esperanza, E.C. (2025). Teaching strategies and instructional materials in teaching indigenous learners: basis for module development. *American Journal of Humanities and Social Sciences Research* 90(5):167-178. Accessed on March 15, 2026. <https://www.ajhssr.com/wp-content/uploads/2025/05/S25905167178.pdf>

Essary, L. (2023). How to Recognize and Implement Quality Interpreting (Hint: It Doesn't Involve Your Bilingual Staff). *American Translators Association Compass*. Accessed on March 13, 2026. <https://www.atanet.org/client-assistance/blog-how-to-recognize-and-implement-quality-interpreting-hint-it-doesnt-involve-your-bilingual-staff/>

Fafulas, S., Howe, C., Orozco, R., Cipria, A., O'Rourke, E., Moreno, N. and Van Hoose, M. (2024). The SEC Spanish Consortium: Foundations for linguistic gratuity and language documentation among Latinx populations. *Languages* 9(11):354. Accessed on March 13, 2026. <https://www.mdpi.com/2226-471X/9/11/354>

Foronda, C., Baptiste, D.L., Reinholdt, M.M. and Ousman, K. (2016). Cultural humility: A concept analysis. *Journal of Transcultural Nursing* 27(3):210-217. Accessed on March 13, 2026. <https://doi.org/10.1177/1043659615592677>

Gopaldas, A. (2013). Intersectionality 101. *Journal of Public Policy and Marketing* 32:90-94. Accessed on March 13, 2026. <https://www.jstor.org/stable/43305317>

Horváth, Á. and Molnár, P. (2022). A review of patient safety communication in multicultural and multilingual healthcare settings with special attention to the US and Canada. *Developments in Health Sciences* 4(3):49-57. Accessed on March 13, 2026. <https://doi.org/10.1556/2066.2021.00041>

Kaiser Family Foundation. (2024). Language barriers in health care: Findings from the Kaiser Family Foundation Survey on Racism, Discrimination, and Health. *Racial Equity and Health Policy*. Accessed on March 14, 2026. <https://www.kff.org/racial-equity-and-health-policy/language-barriers-in-health-care-findings-from-the-kff-survey-on-racism-discrimination-and-health/>

Manrique, E. and Mouw, T. (2023). Shift or replenishment? Stable Spanish bilingualism across contexts of ethnic change. *U.S. Census Bureau: Center for Economic Studies Discussion Paper* CES 23-28. Accessed on March 13, 2026. <https://www2.census.gov/ces/wp/2023/CES-WP-23-28.pdf>

Meyer, J. (2023). Rural migrant farmworker demographics: Implications for vocational rehabilitation. *Rehabilitation Counselors and Educators Journal* 12(1). Accessed on March 13, 2026. <https://doi.org/10.52017/001c.68182>

Miller-Clouser, J., Bush, A., Gan, W. and Swanberg, J. (2018). Associations of work stress, supervisor unfairness, and supervisor inability to speak Spanish with occupational injury among Latino farmworkers. *Journal of Immigrant Minority Health* 20(4):894-901. Accessed on March 13, 2026. <https://stacks.cdc.gov/view/cdc/215852>

Nguyen, N.V., Guillen Lozoya, A.H., Caruso, M.A., Capetillo Porraz, M.G.D., Pacheco-Spann, L.M., Allyse, M.A. and Barwise, A.K. (2024). Through the eyes of Spanish-speaking patients, caregivers, and community leaders: a qualitative study on the in-patient hospital experience. *International Journal for Equity in Health* 23(164). Accessed on March 14, 2026. <https://doi.org/10.1186/s12939-024-02246-9>

Office of Minority Health. (2025). *Hispanic/Latino health profile*. U.S. Department of Health & Human Services. Accessed on March 13, 2026. <https://minorityhealth.hhs.gov/hispaniclatino-health>

Rimmer, A. (2020). Can patients use family members as non-professional interpreters in consultations?. *British Medical Journal* 368:m447. Accessed on March 13, 2026. <https://doi.org/10.1136/bmj.m447>

Rodrigues, M., Risner, E. and Rhodes-Bratton, B. (2024). Intersectionality matters for Hispanic health: A replication study using the All of Us Research Program. *International Journal for Equity in Health* 23:195. Accessed on March 13, 2026. <https://doi.org/10.1186/s12939-024-02280-7>

Slade, I.R., Avery, A.D., Gonzalez, C., Chung, C., Qiu, Q., Simpson, Y.M., Ector, C. and Vavilala, M.S. (2024). Effective use of interpreter services for diverse patients in a safety-net hospital: Provider perceptions of barriers and solutions. *The Joint Commission Journal on Quality and Patient Safety* 50(10):700-710. Accessed on March 13, 2026. <https://doi.org/10.1016/j.jcjq.2024.07.002>

Tkacova, L.H. (2025). Language and dialect considerations in designing culturally appropriate extension communication materials. *International Journal of Agriculture Extension and Social Development* 8(2):202-205. Accessed on March 14, 2026. <https://www.extensionjournal.com/uploads/archives/9-2-198-900.pdf>

United States Census Bureau. n.d. Hispanic or Latino origin. *American Community Survey*. Accessed on March 14, 2026. <https://www.census.gov/acs/www/about/why-we-ask-each-question/ethnicity/>

United States Census Bureau. (2025). National Hispanic Heritage Month: 2025. *Facts for Features*. Accessed on March 13, 2026. <https://www.census.gov/newsroom/facts-for-features/2025/hispanic-heritage-month.html>

Velasco Mondragón, E., Jimenez, A., Palladino-Davis, A.G., Davis, D. and Escamilla-Cejudo, J.A. (2016). Hispanic health in the USA: a scoping review of the literature. *BioMed Central: Public Health Review* 37:31. Accessed on March 13, 2026. <https://doi.org/10.1186/s40985-016-0043-2>

Yoder, A.M. (2023). Addressing risks and language barriers for immigrant feedyard workers. *Ag Proud*. Accessed on March 13, 2026. <https://www.agproud.com/articles/57653-addressing-risks-and-language-barriers-for-immigrant-feedyard-workers/>

Zaylskie, L.E., Zickafoose, J.S., Leech, A.A., Jennings, B., Curcio, N.M. and Griffith, K.N. (2025). Health care access, utilization, and quality for children in English versus Spanish-speaking households. *Health Affairs Scholar* 3(3). Accessed on March 14, 2026. <https://doi.org/10.1093/haschl/qxaf039>