Practical Strategies for Culturally Competent Evaluation





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Acknowledgments

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The authors (Derrick Gervin, Robin Kuwahara, Rashon Lane, Sarah Gill, Refilwe Moeti, and Maureen Wilce) wish to thank reviewers Nancy Amerson (Illinois Department of Public Health), Melanie Durley (Georgia Department of Public Health), Michael Sells (Division for Heart Disease and Stroke Prevention, Program Development and Services Branch), and Pam Collins (Division of Environmental Hazards and Health Effects, Air Pollution and Respiratory Health Branch).

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PURPOSE OF THIS EVALUATION GUIDE

CDC provides its funded programs with a wide range of evaluation resources and guides. State health departments, tribal organizations, communities, and partners working in a variety of public health areas may also find these tools helpful. The resources provide guidance on evaluation approaches and methods, relevant examples, and additional resources. The guides are intended to aid in skill building on a wide range of evaluation topics.

Practical Strategies for Culturally Competent Evaluation is designed to complement the other evaluation resources offered by the Division for Heart Disease and Stroke Prevention (DHDSP) and the National Asthma Control Program (NACP) in the Division of Environmental Hazards and Health Effects.

INTRODUCTION

If you talk to a man in a language he understands, that goes to his head. If you talk to him in his language, that goes to his heart.

-Nelson Mandela, former president of South Africa

Purpose

CULTURAL COMPETENCE IS...

"...a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals and enables effective work in cross-cultural situations."¹ CDC's NACP and DHDSP developed this guide as an introduction and resource for state partners to use to promote cultural competence in the evaluation of public health programs and initiatives. Designed for program staff and evaluators, this guide highlights the prominent role of culture in our work. It provides important strategies for approaching an evaluation with a critical cultural lens to ensure that evaluation efforts have cultural relevance and generate meaningful findings that stakeholders individuals who are invested in the program or potentially affected by the evaluation ultimately will value and use.

Throughout this guide, aspects of cultural competence in evaluation are discussed within the context of CDC's *Framework for Program Evaluation in Public Health*² to highlight opportunities for integrating cultural competence during each of the six steps of the evaluation process. A list of related resources and tools and an abbreviated version of this guide, titled *Program Evaluation Tip Sheet: Integrating Cultural Competence into Evaluation*, are available as an appendix.

Background

According to the Office of Minority Health³ at the U.S. Department of Health and Human Services, culture and language may influence

- ▶ Health, healing, and wellness belief systems.
- How patients, consumers, and health care providers perceive illness, disease, and their causes.
- The behaviors of patients and consumers who are seeking health care and their attitudes toward health care providers.
- ► The delivery of services by providers, who view the world through their own particular values, which can compromise access for patients from other cultures.

Incorporating cultural competence in public health systems enables professionals to adapt their approaches to benefit individuals and groups from varying cultural backgrounds. Furthermore, improving cultural competence among public health practitioners could help reduce health disparities and improve the quality of care and health for everyone.

Over the years, public health professionals have expanded their approaches to preventing disease, as evidenced by the growing number of practice and translation models designed to meet the needs of multiple cultural groups. Incorporating a thoughtful and consistent emphasis on cultural competence when performing all essential public health functions, including evaluation, creates a necessary foundation for efforts to reduce health disparities. The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (the National CLAS Standards) serve as the cornerstone for advancing health equity through culturally and linguistically appropriate services.⁴

The Importance of Cultural Competence in Evaluation

CDC acknowledges that cultural competence in evaluation is necessary and important for evaluators of all backgrounds.⁵ When we conduct an evaluation, everything we do reflects our own cultural values and perspectives—from the evaluation purpose, the questions we develop, and the methodologies we select to our interpretation of the findings and the recommendations we make based on those findings. Because culture is influenced by many characteristics (i.e., race, ethnicity, language, gender, age, religion, sexual orientation, education, and experience), it is important that we stop and reflect on our own culture before embarking on an evaluation. To conduct culturally competent evaluations, we must learn and appreciate each program's cultural context and acknowledge that we may view and interpret the world differently from many evaluation stakeholders.

With its emphasis on stakeholder engagement, this version of CDC's *Framework for Program Evaluation* (see Figure 1) emphasizes an even greater commitment to cultural competence than do less participatory evaluation approaches. Evaluations guided by the CDC framework actively involve engaging a range of stakeholders throughout the entire process, and cultural competence is essential for ensuring truly meaningful engagement. As evaluators, we have an ethical obligation to create an inclusive climate in which everyone invested in the evaluation—from agency head to program client can fully participate. At the same time, significantly engaging stakeholders, particularly in the planning stage, will enhance the evaluation's cultural competence.

The "Program Evaluation Standards," which are benchmarks used to address the quality of an evaluation effort and endorsed by most professional evaluation organizations, provide guidance throughout the evaluation process and reinforce the importance of cultural context in each step of the evaluation. Appendix A presents the 30 evaluation standards and provides strategies to increase cultural competence in their application.

CULTURE IS

"The integrated pattern of thoughts, communications, actions, customs, beliefs, values, and institutions associated, wholly or partially, with racial, ethnic, or linguistic groups, as well as with religious, spiritual, biological, geographical, or sociological characteristics."4

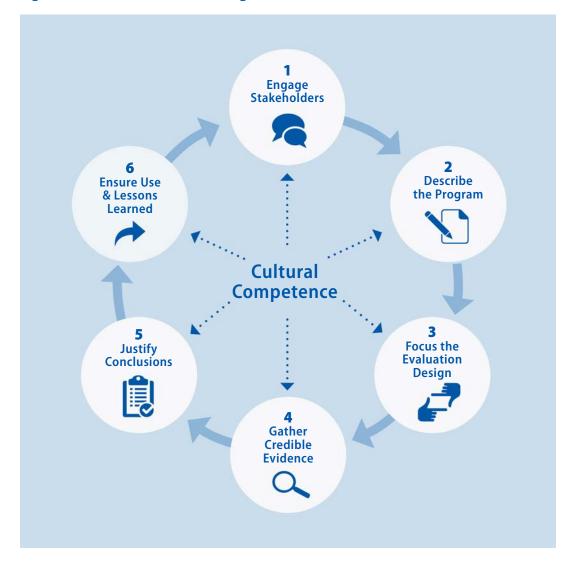


Figure 1: CDC's Framework for Program Evaluation in Public Health^{2,6}

As illustrated in the six steps of the evaluation framework, which are described in detail in this report, the use of a culturally competent evaluation approach will likely lead to better evaluations and greater use of the evaluation findings.

CULTURAL COMPETENCE IN PUBLIC HEALTH EVALUATION

Whatever affects one directly, affects all indirectly.... I can never be what I ought to be until you are what you ought to be.

—Martin Luther King, Jr.

In working through the six steps of CDC's *Framework for Program Evaluation in Public Health,* this guide gives examples of the roles that culture plays in each step and offers strategies for promoting cultural competence in the particular tasks associated with each step. These strategies, first conceptualized by an expert panel⁷ and guided by the American Evaluation Association's Public Statement on Cultural Competence in Evaluation,⁸ require the evaluator to implement the framework's steps through a cultural competence lens. Intrinsic to the framework and the NACP- and DHDSP-supporting materials is the active involvement of a diverse group of stakeholders throughout the course of the evaluation. Thus, while stakeholder engagement appears as Step 1 in the framework, it should remain a prominent aspect of the entire process.

Step 1: Engage Stakeholders

Engaging the participation of stakeholders invested in a program serves as the foundation for an evaluation that potentially will produce credible and useful information. However, challenges typically arise when encouraging stakeholders to participate fully. The following strategies may help us as evaluators to communicate more effectively, build a climate of respect among participants, and promote more inclusive evaluation practices.

Assess cultural self-awareness. The first step toward conducting culturally competent evaluations is to know ourselves and recognize those whom we might view as different from us. We can begin this process by taking the time to reflect on our own background and life experiences, all of which shape our thoughts and behaviors and consequently influence how we conduct an evaluation. Thinking about our personal history challenges us to uncover our biases or prejudices as well as our assumptions about others. How often do we find ourselves assuming that other people think the same way we do? See the world in the same way? Share the same values? These thoughts are not unusual, but we must continually remind ourselves that what we might consider "normal" may be anything *but* normal for someone else.

AMERICAN EVALUATION ASSOCIATION

"Cultural competence is a stance taken toward culture, not a discrete status or simple mastery of particular knowledge and skills. A culturally competent evaluator is prepared to engage with diverse segments of communities to include cultural and contextual dimensions important to the evaluation. Culturally competent evaluators respect the cultures represented in the evaluation."8



During this ongoing reflection process, we should acknowledge that all of us belong to many cultural groups, and these groupings are not static. We can identify a number of personal characteristics that might influence our perceptions (see the text box "Self-Reflection Questions for Evaluators"). The role of evaluator comes with its own language and values. In addition, discipline-specific training (e.g., in anthropology or epidemiology) brings its own particular culture. Furthermore, if we come from a "dominant" culture vis-à-vis that of any of the evaluation stakeholders, we must realize that we may be perceived as occupying a privileged social position and may, in fact, have rights and liberties that others do not possess.

Finally, we should consider our ability to interact genuinely and respectfully with evaluation stakeholders from the community without making judgments. We must ask ourselves

- Are we addressing or raising issues with community members in a culturally appropriate manner? If we are unsure, asking them will show respect and our desire to learn more and understand better.
- Are we open to learning from others regardless of status or role?
- Do we value community members' expertise regarding their community and how best to interact with these members?

The community members with whom we work are experts in their own right and must be acknowledged as such. Recognizing and respecting their wisdom can be crucial to a successful evaluation.

Self-Reflection Questions for Evaluators

As the saying goes, where we stand depends on where we sit—or are situated. To understand the impact of culture in our own lives and others', we can look directly at how we are situated and the ways in which it might influence our perspectives and behaviors.

To help us explore our own identity, we can ask ourselves the following self-reflection questions:

- Where am I from (nationality, region, and heritage)?
- · What are my beliefs, values, and religious and political orientations?
- What is my biological sex and gender identity?
- What is my age group?
- What is my social class?
- What are my vocations and avocations?
- What life events have greatly affected me?
- Which of the above factors are significant to me?
- What do I see as resources I can use in this evaluation?
- What do I see as potential opportunities, challenges, or conflicts for this evaluation?
- What stereotypes do I hold?

People Have Multiple Social and Cultural Identities

To evaluate a pilot asthma education program for young inner-city girls with asthma, Program X hired an external evaluator who had extensive experience working with schoolchildren in City H, 100 miles north of the program. With a graduate degree in evaluation, "Janice" (not her real name) and the funders assumed her extensive experience and familiarity with children would facilitate interactions during the group interviews with the girls. After reading extensively about the asthma program and familiarizing herself with the epidemiologic data (e.g., school absenteeism, hospitalization rates), Janice found herself surprised at the challenge she faced getting the girls to open up during discussions. She later learned that they had perceived her as an outsider who, although she "knew children," had a "different way of speaking and acting." Janice was an upper-middle-class professional. In this context, the evaluator's social class played a more dominant, critical role than gender.

Engage stakeholders that reflect the diversity of the community. Identifying diversity among a public health program's intended beneficiaries and other stakeholders is an essential starting point in the evaluation process. Cultural differences of program participants go beyond traditional demographic characteristics, such as race or ethnicity. Differences may exist in beliefs, ideologies, knowledge, institutions, religion, and other factors that influence what people do, how they think, and how they understand and interact with others.

Talking to community leaders can help us become familiar with the community and assess the community's readiness and willingness to address the issues that the evaluation may raise. The community leaders can share history or attitudes, such as distrust of the program or health department, that may affect the level of stakeholder buy-in. For example, community representatives may think that past efforts to which they contributed ignored their input in favor of supporting the views of agency leaders. In this situation, we must build relationships and establish ways to assure participants that their perspectives will be respected and that their participation goes beyond mere tokenism. As evaluators, we need to familiarize ourselves with the cultural context and setting of each program we evaluate. We should ask ourselves

- ▶ What is the community's history?
- ▶ What traditions and norms exist in the community?
- ▶ What are the community demographics and trends?
- ▶ What are the community's specific interests, needs, and assets?

During this planning stage, we should know what factors are relevant to the evaluation and do additional homework to gain greater insight into how those factors might influence the evaluation. Simply being familiar with or having a good working relationship with a particular cultural group does not make an evaluator culturally competent in all settings. In fact, a person could be a member of that group but not necessarily share the same "culture." Cultural competence is essential to fostering meaningful stakeholder engagement.



Working with a co-evaluator from the community can help build trust and improve communication with stakeholders. For instance, we may have certain expectations about meetings, communications, and the temporal flow of processes, yet stakeholders from other cultures may have different norms and may be less likely to participate fully in uncomfortable settings. A co-evaluator can help incorporate community norms into the procedures so that all stakeholders experience moments of the familiar and unfamiliar during the evaluation. A co-evaluator also can help articulate our expectations for and of all the stakeholders. In addition, the co-evaluator can influence the design and implementation of the evaluation and share critical information with stakeholders and the community at large. When no obvious or appropriate person can serve as co-evaluator, we may need to train a willing person to take on that role.

Lay clear ground rules for participation to establish equality. Power imbalances often are entrenched in our behaviors. Occasionally, we need to use our facilitation skills by regularly "checking in" with all participants to elicit their perspectives on the evaluation process. During meetings, take notice of who is talking, who is silent, who is interrupted or interrupting, who is present but was not invited into the discussion, and who restates what others are saying. If several people say the same things, take notice of whose ideas are ignored and whose ideas are taken up by the group. Take note if one person or group consistently makes decisions on how meetings are conducted, such as when to start and end the meeting and other time considerations, moving an idea to a decision, or revisiting a decision. It may be helpful to consider alternative strategies to ensure full engagement, such as holding separate meetings with different groups within the community or using methods that allow anonymous input.

Teach basic evaluation skills along the way. Some stakeholders may have little or no experience with evaluation; others may bring different needs or expectations that are not appropriate to the evaluation given the context. For some people, the word "evaluation" may have a negative connotation (refer to CDC's *Learning and Growing Through Evaluation: State Asthma Program Evaluation Guide—Module 2: Implementing Evaluations*). Assessing the attitudes and skills of the stakeholder group and tailoring training in evaluation early in the process will help stakeholders engage better. To facilitate communication, actively limit the use of evaluation and program jargon.⁹ Also, clearly define the stakeholders' roles so that participants know what is expected of them and of other people involved in the evaluation process must be equally understandable to all participants. We may need to translate documents, such as the evaluation plan, and offer translation services during meetings. The co-evaluator may be tapped for ideas on appropriateness and fit.

Create a diverse advisory team to help with planning, implementing, and

interpreting findings from the evaluation. Engaging all stakeholders at all points in an evaluation is typically overwhelming to both the evaluator and the stakeholders. A smaller advisory group often can be created from among the stakeholders to help with many aspects of the evaluation, including advising us on when the larger group's input is needed. When creating an advisory group, be sure to consider and value cultural diversity within the team. Have the co-evaluator help select members. This advisory team also may be a good way for different cultural groups within the community to have a voice on decisions.

Build trust. Stakeholders must trust that the evaluation information will not be used against them if they are to be expected to move beyond initial introductions and engagement. Trust develops from positive relationships, and building relationships takes time. Throughout the evaluation, it is important to talk with community leaders and members openly about the evaluation, why it is being done, and how the community can expect to benefit from it. Listen to their interests and concerns, and invite their feedback and input. To build trust, you must acknowledge that some degree of conflict is to be expected and establish resolution processes. Ensure that stakeholders understand that staying involved throughout the evaluation is important, and explicitly address the implications for the budget and timeline with the evaluation sponsors and funders.

Guiding Questions to Help Engage Stakeholders

- Does the stakeholder group fully represent the diversity of the program's participants and others affected by the program?
- Are meaningful roles planned for stakeholders throughout the evaluation?
- Have I paid attention to the distribution of power among stakeholders? To other distinctions related to status and social class?
- Has the stakeholder group developed a process to work together with established ground rules?
- Have I included multiple voices in planning, implementing, interpreting, and decision making?
- Have I assembled an evaluation advisory team whose collective experience is appropriate to the context?
- Have I identified and inventoried the skills and traits of the members of the evaluation advisory team so that I can tailor my approach based on these resources or augment them if necessary?

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