

CDC Evaluation Coffee Break Practical Strategies for Culturally Competent Evaluation

An Evaluation Guide

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National Center for Chronic Disease Prevention and Health Promotion

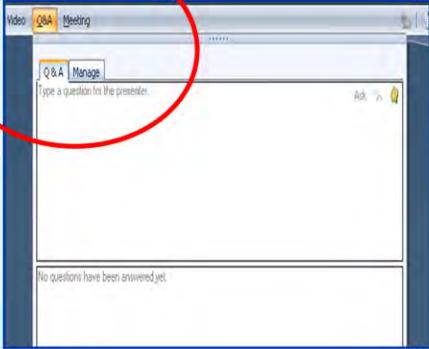


Welcome to today's Coffee Break presented by the Evaluation and Program Effectiveness Team in the Division for Heart Disease and Stroke Prevention at the Centers for Disease Control and Prevention.

I am Derrick Gervin and I'm a health scientist in the Program Development and Services Branch here in the Division for Heart Disease and Stroke Prevention. I am wearing two hats in that I am serving as your moderator and one of your presenters today. It is my pleasure to introduce my co-presenters who are both in the Applied Research and Evaluation Branch – we are joined by Rashon Lane who is a behavioral scientist and Refilwe Moeti who works as a public health educator. So, welcome Rashon and Refilwe... and welcome to all of you who have joined us today.

Before we begin

- ❑ All phones have been placed in SILENT mode
- ❑ To ask a question, simply click on the “Q & A” tab located at the top of your screen
- ❑ Time permitting, your question will be answered at the end of the presentation



The screenshot shows a meeting interface with a top navigation bar containing 'Video', 'Q&A', and 'Meeting' tabs. The 'Q&A' tab is highlighted with a red circle. Below the navigation bar, there is a text input field with the placeholder 'Type a question for the presenter.' and an 'Ask' button with a speech bubble icon. At the bottom of the interface, it says 'No questions have been answered yet.'

Before we begin we have a few housekeeping items.

All phones have been placed in silent mode for this presentation which will last about 12 minutes. After the presentation, we will have a few minutes for questions. At any time during the session, you can send questions to the presenter by clicking on the tab labeled Q&A found at the top of your screen. A dialogue box will open and you can type in your question. Your question is private and can only be seen by the presenters.

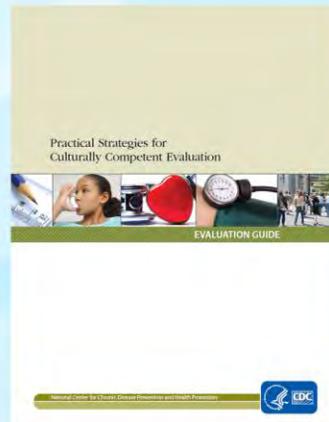
We will answer as many questions as time permits. At the end of the questions, we will have a brief poll that will take about 1 minute. Since this is a training series on evaluation, we do hope you will complete the poll and provide us with your feedback.

Disclaimer: The information presented here is for training purposes and reflects the views of the presenter. It does not necessarily represent the official position of the Centers for Disease Control and Prevention.

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Overview

- ❑ Purpose of the Evaluation Guide
 - ❑ Importance of Cultural Competence in Evaluation
 - ❑ Use of CDC's Framework for Program Evaluation in Public Health
 - ❑ Primary Sections of the Guide
 - ❑ Self-reflection Questions
 - ❑ Guiding Questions
 - ❑ Vignettes
 - ❑ Tools and Resources
 - ❑ Q&A and Poll
- Link to Guide :
http://www.cdc.gov/dhdsp/docs/cultural_competence_guide.pdf



Our coffee break serves as a preview to the recently released evaluation guide titled “Practical Strategies for Culturally Competent Evaluation.” This evaluation guide is one in a series of program evaluation guides developed by DHDSP to assist in the evaluation of heart disease and stroke prevention activities. Over the next couple of minutes Rashon, Refilwe and I will discuss the importance of cultural competence in evaluation, how the CDC framework for program evaluation in public health was used to guide this work and we will discuss how self-reflection questions, guiding questions, and vignettes are used throughout the guide. We will conclude the coffee break by sharing information about some of the tools and resources included in the guide followed by our standard Q & A period and poll questions. Feel free to reference the guide which is accessible through the Division’s Evaluation page so that as we move through each section you can follow along with us. The web link is also included at the bottom of the current slide.

Just so you know...

Today's session is an
introduction, and
not a "how-to" session.

This coffee break presentation is a- brief introduction to cultural competence in evaluation and not a "how-to" training. You can obtain additional information about cultural competence in evaluation through the references and resources that will be shared and the end of this presentation.

Cultural Competence is...

- ❑ **A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.**

Office of Minority Health, DHHS

So.... What is cultural competence?

The Department of Health and Human Services' Office of Minority Health defines cultural competence as "A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations."

It is important to note that culture is not limited to race and ethnicity. Culture includes language, gender, age, religion, sexual orientation, and social class – and more generally any group's values, norms and beliefs.



Cultural competence in evaluation is important because it acknowledges and respects different worldviews; it helps to ensure the validity and reliability of findings; it minimizes risks to participants; and it contributes to relevant and meaningful evaluation findings.

Cultural Competence in Evaluation Defined...

- **A systematic, responsive inquiry that is actively cognizant, understanding, and appreciative of the cultural context in which the evaluation takes place... (SenGupta, Hopson, Thompson-Robinson, 2004)**

Here, we provide the following definition for cultural competence in evaluation, “A systematic, responsive inquiry that is actively cognizant, understanding, and appreciative of the cultural context in which the evaluation takes place...”

Now... Rashon will provide additional information on how the guide, Practical Strategies for Culturally Competent Evaluation, can help you in implementing your public health strategies.

CDC's Framework for Program Evaluation in Public Health

How does cultural competence fit into the CDC steps for program evaluation?

Figure 1: CDC's Framework for Program Evaluation in Public Health^{2,4}



Thank you Derrick, in the guide you will find that the CDC framework for Program Evaluation in Public Health is the framework that structures the guide. Using the CDC framework, we highlight how to apply a cultural competency lens in developing evaluation approaches and methods, and we provide relevant examples to each step in the framework, and additional resources.

Throughout the guide we stress the importance of stakeholder engagement and how 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 fully participate in the evaluation. While we use the CDC framework for Program evaluation framework to structure the guide,

Self-Reflection Questions

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 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?



In the first two steps of the CDC Evaluation framework, evaluators are encouraged to learn about the communities in which they will be working with to evaluate a program or strategy. While it is important to understand and respect the diversity in each community, we also have to ask ourselves about our own personal bias that might impact an evaluation.

By doing this we better understand if we 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.

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

Guiding Questions



Use models that resonate with the community. The evaluator might engage program staff in a lively discussion of the program and then create a graphic depiction or logic model. A similar activity might be conducted with program participants where stories and personal experiences may describe a different perspective of the program. Logic models, as graphical depictions of a program's theory of change, are often great tools to illustrate how perspectives can be missed. While boxes and arrows often are used for logic models, some stakeholders may not engage with such symbols. Depending on the norms of the community, a nonlinear logic model may resonate with the community members' views.⁴ Use stories, direct experiences, pictures, drawings, documents, and/or any other materials that make sense to the stakeholders to articulate or illustrate the program's activities and expected outcomes.

Guiding Questions to Help Describe the Program

- Are the stakeholders' perspectives appropriately reflected in the program description such that relevant contextual factors are included?
- What types of conceptual models resonate with and are useful to the stakeholders?
- Does the program description identify intended beneficiaries?
- Does the description sufficiently receive differing views on the program?
- Does the context provided with the program description include community or participant strengths?
- What is known about the strengths, assets, challenges, and barriers of the community, including the talents and expertise that individual community members or organizations bring?
- Are there "gatekeepers of knowledge" within the community that can help to understand the social and political context of the program or community?

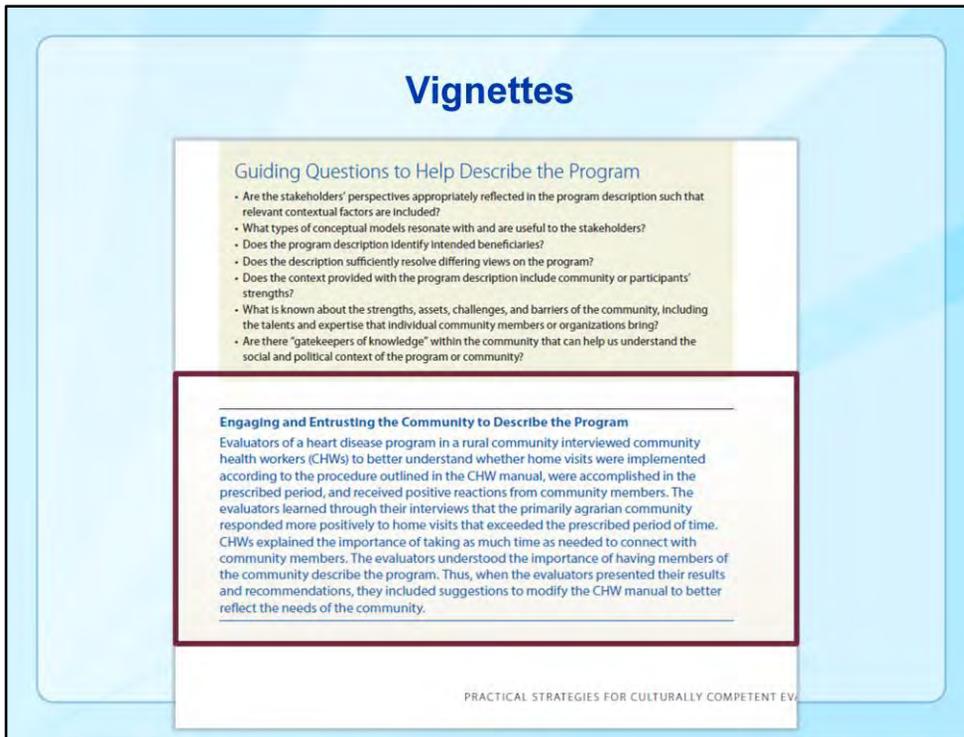
Engaging and Empowering the Community to Describe the Program

Evaluators of a heart disease program in a rural community interviewed community health workers (CHWs) to better understand whether home visits were implemented according to the procedures outlined in the CHW manual, were accomplished in the prescribed period, and received positive reactions from community members. The evaluators learned through their interviews that the primarily agrarian community responded more positively to home visits that exceeded the prescribed period of time. CHWs explained the importance of taking as much time as needed to connect with community members. The evaluators understood the importance of having members of the community describe the program. Thus, when the evaluators presented their results and recommendations, they included suggestions to modify the CHW manual to better reflect the needs of the community.

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Each section of the guide also provides a set of guiding questions that you may use in the development and implementation of your evaluation. Consider asking yourself these questions as you walk through each stage of your evaluation to ensure that you're implementing culturally competent strategies throughout your work.

Based on the answers to these questions, alternate options for developing your evaluation or collecting data may need to be considered. One approach that you may consider is including a co-evaluator from the community in which you're working in. A co-evaluator can be useful in developing strategies for how to improve upon each of these areas.



Throughout the guide you will find vignettes that provide examples on how other programs approached cultural competence in their evaluation practice. In each vignette you will find a synopsis of several evaluation issues that evaluators face and learn from their successes and challenges. We hope that these vignettes will resonate with your work and that these approaches for addressing cultural competency can be incorporated into your work.

Next, Refilwe will continue to walk you through others areas of the guide that might be useful in looking at cultural competency.

Tip Sheet



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Program Evaluation Tip Sheet: Integrating Cultural Competence Into Evaluation

This Tip Sheet contains important excerpts from the *Practical Strategies for Culturally Competent Evaluation*, an evaluation guide designed for programs and partners funded by the Centers for Disease Control and Prevention's (CDC) Division for Heart Disease and Stroke Prevention and Division of Environmental Hazards and Health Effects' National Asthma Control Program. The guide highlights the prominent role of culture in the work of evaluation and provides important strategies and guiding questions for enhancing cultural competence in evaluation.

What is Cultural Competence?

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 Cultural competence is an essential and ethical obligation for all evaluators.

Applying a critical cultural lens for evaluation will ensure that efforts have cultural relevance and will generate meaningful findings that stakeholders ultimately will value and use. This Program Evaluation Tip Sheet contains tips and guiding questions aligned with the six steps of CDC's Framework for Program Evaluation in Public Health.²

Self-Reflection Questions for Evaluators

To help explore your own identity, ask yourself:

- 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?
- Which of the above factors are significant to me?
- What do I see as potential opportunities, challenges, or conflicts for this evaluation?
- What stereotypes do I hold?



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http://www.cdc.gov/dhdsp/docs/cultural_competence_tip_sheet.pdf

At the end of the Guide, there is a 2-page Tip Sheet that can be used as a stand-alone resource to share with your partners. This Tip Sheet contains important excerpts from the Guide. For example, it has the definition of cultural competence, the self-reflection questions for evaluators that are fully described in the Guide's section on "Engage Stakeholders," and four overarching guiding principles of cultural competence in evaluation, which are: 1) Evaluations cannot be culture free; 2) Cultural competence requires reflection on one's own cultural position; 3) Competence in one context is no assurance of competence in another; and 4) Cultural competence fosters trustworthiness. Lastly, the Tip Sheet presents tips and accompanying guiding questions for each of the six steps of CDC's Evaluation Framework.



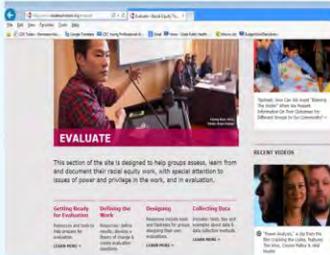
Helpful References

- ❑ **AEA's Statement on Cultural Competence in Evaluation**
<http://www.eval.org/ccstatement.asp>
- ❑ **SenGupta, Hopson, Thompson-Robinson. (2004). Cultural competence in evaluation: An overview. *New Directions for Evaluation*, 102, 5-19.**
- ❑ **LaFrance and Nichols. (2010). Reframing evaluation: Defining an indigenous evaluation framework. *Canadian Journal for Evaluation*.**

There are several references that were used to develop the Guide, and they can serve as additional resources. For example, there is a reference, including a website link, to American Evaluation Association's Public Statement on Cultural Competence in Evaluation. Other examples of references include an article that provides an overview of cultural competence in evaluation and an indigenous evaluation framework.

Resources and Tools

<http://www.racialequitytools.org/evaluate>



http://www.acf.hhs.gov/sites/default/files/cb/tribal_roadmap.pdf



<http://www.commonwealthfund.org/Publications/Fund-Reports/2006/Oct/The-Evidence-Base-for-Cultural-and-Linguistic-Competency-in-Health-Care.aspx>



Appendix C in the Guide has various resources and tools on this topic, such as the “Roadmap for Collaborative and Effective Evaluation in Tribal Communities” and the web site for “The Evidence Base for Cultural and Linguistic Competency in Health Care.”

Next Steps

To share lessons learned regarding cultural competence in evaluation, please email us at:

Dgervin@cdc.gov

Rlane@cdc.gov

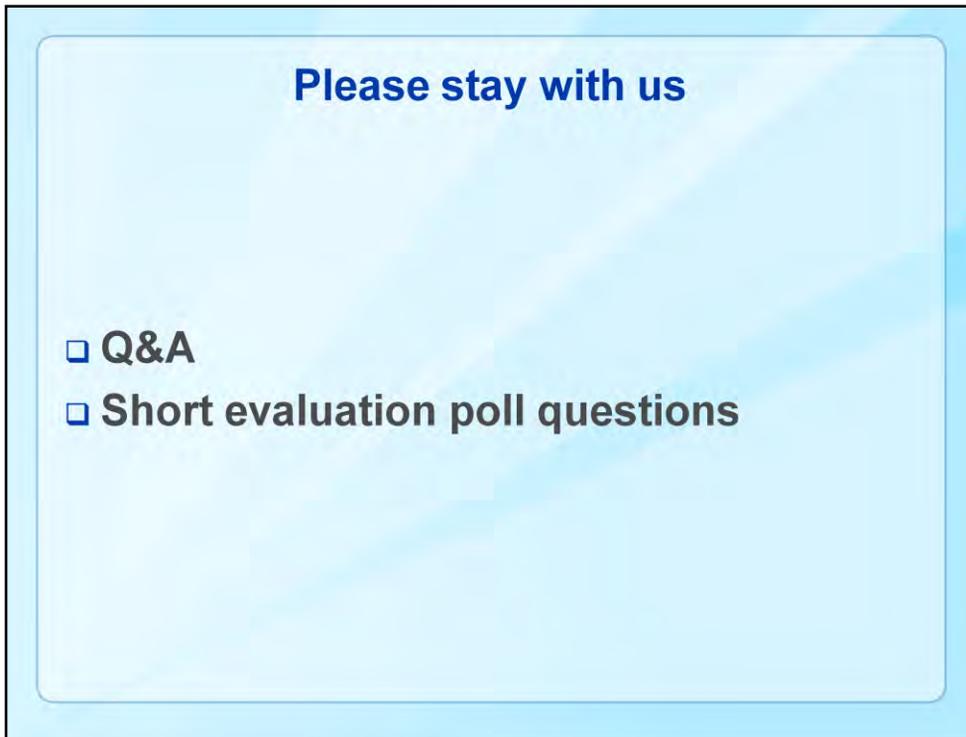
Rmoeti@cdc.gov



Access the Guide Here:

http://www.cdc.gov/dhdsp/docs/cultural_competence_guide.pdf

Thank you Refilwe and thank you Rashon! As a next step in this work we'd really like to hear how our funded programs are working to establish cultural competence in evaluation. Once identified, these programs could serve as a resource to others that are interested in this work. Please feel free to share information with us regarding strategies, practice frameworks or models that you have used to establish cultural competence in evaluation. You can email us directly at e-mail addresses listed on this slide.



So... Please stay with us for questions and a few poll questions.

**If you have suggestions for future
topics or questions in general,
please email us at:**

AREBHeartInfo@cdc.gov

As we are always looking for feedback and input if you have suggestions for future topics or questions in general, please contact the e-mail address above.

Next Coffee Break

When: February 10, 2015 at 2:30pm EST

**Topic: A Demonstration of the Million
Hearts Clinical Quality Measures Dashboard**

Presenter: Linda Roesch

**For more information please contact Centers for Disease Control and
Prevention**

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: cdcinfo@cdc.gov Web: www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official
position of the Centers for Disease Control and Prevention.

National Center for Chronic Disease Prevention and Health Promotion
Division for Heart Disease and Stroke Prevention



The next coffee break will be held on February 10, 2015. Information will be e-mailed to you on how to access the next coffee break.

Thank you again for joining us and have a terrific day everyone. This concludes today's call.