Cultural Competence Primer: Incorporating Cultural Competence into Your Comprehensive Plan
CADCA’s National Coalition Institute, developed in 2002 by an act of Congress, serves as a center for training, technical assistance, evaluation, research and capacity building for community anti-drug coalitions throughout the United States.

In 2005, the Institute started a series of primers to help coalitions navigate the Strategic Prevention Framework (SPF). The Substance Abuse and Mental Health Services Administration (SAMHSA), an agency of the U.S. Department of Health and Human Services, developed the SPF for use by community coalitions in their efforts to reduce substance abuse at the population level. Each primer is designed to both stand alone and work with the others in the series. While we have focused on the inclusion of cultural competence in the elements of the SPF, any community coalition can adapt the materials in this primer to its own needs.

CADCA’s Institute designed this primer to provide anti-drug coalitions with a basic understanding of cultural competence and its importance in achieving substance abuse reduction that is both effective and sustainable. If you know how to include all major sectors of your community in your efforts to develop a plan to create population-level change in community rates of substance abuse, then you will likely increase your chances of success.

You will find additional information on cultural competence, the SPF’s primary components and all of the published primers on the CADCA website, www.cadca.org.

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INTRODUCTION

Drug Free Communities Support Program
In 1997, Congress enacted the Drug Free Communities Support Program (DFC) to provide grants to community-based coalitions to serve as catalysts for multi-sector participation to reduce local substance abuse rates. By 2010, more than 1,700 local coalitions received funding to address two main goals:

• Reduce substance abuse among youth and, over time, among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.
• Establish and strengthen collaboration among communities, private nonprofit agencies, and federal, state, local and tribal governments to support the efforts of community coalitions to prevent and reduce substance abuse among youth.

Strategic Prevention Framework
This is one of a series of primers based on the Strategic Prevention Framework (SPF).\(^1\) CADCA utilizes the SPF to assist

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**Cultural competence**

**What you need to know:**
- Basic understanding of the key principles of cultural competence and how to integrate them into your coalition’s work
- How to integrate cultural competence into the Strategic Prevention Framework

**What your community needs to do:**
- Acknowledge the diversity in your community
- Reach out to diverse organizations in your community and invite them to join the coalition
- Commit to the development of a culturally competent coalition
- Create an entity responsible for ensuring cultural competence

**The products your community needs to create:**
- A culturally competent comprehensive community plan to reduce substance abuse

Sample materials related to cultural competence are available on the CADCA website, www.cadca.org.

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\(^1\) The federal Substance Abuse and Mental Health Services Administration (SAMHSA) developed the SPF to facilitate implementation of prevention programming.
community coalitions in developing the infrastructure needed for community-based, public health approaches that can lead to effective and sustainable reductions in alcohol, tobacco, and other drug (ATOD) use and abuse. The elements shown in Figure 1 include:

- **Assessment.** Collect data to define problems, resources, and readiness within a geographic area to address needs and gaps.
- **Capacity.** Mobilize and/or build capacity within a geographic area to address needs.
- **Planning.** Develop a comprehensive strategic approach that includes

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**A word about words**

What is your goal? Your aim? Your objective? Perhaps more importantly, what is the difference? At times, the terms seem interchangeable. Often, the difference depends on who is funding your efforts.

To minimize confusion, we have added a chart (see page 38) that highlights terms often used to describe the same or similar concepts.

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**Figure 1. The Strategic Prevention Framework**

![Figure 1. The Strategic Prevention Framework](image-url)
policies, programs, and practices creating a logical, data-driven plan to address problems identified in assessment.

• **Implementation.** Implement evidence-based prevention strategies, programs, policies, and practices.

• **Evaluation.** Measure the impact of the SPF and the implementation of strategies, programs, policies, and practices.

**Cultural competence and the SPF**

This primer focuses on the process that the Institute suggests community coalitions use to incorporate cultural competence as they work through the elements of the SPF. SAMHSA lists cultural competence as a cross-cutting aspect of the SPF. Likewise, we believe that cultural competence affects all aspects of coalition building, and include it as one of the 15 core competencies for achieving community change. These research-based core competencies align closely with the SPF. Notice that cultural competence is listed under the capacity element of CADCA’s core competencies.

Although cultural competence affects all elements of the SPF, coalitions should emphasize it when developing capacity. Individuals and organizations can increase their cultural competence because the skills and knowledge required can be learned and implemented in a fairly reasonable time frame.

The SPF process can help people collaborate by enabling them to better understand the coalition’s mission, vision and strategic plan, as well as their individual roles in helping the group achieve its goal of a safe, healthy and drug-free community. Coalitions that merely conduct a string of activities without fitting them into a strategic plan perpetuate the trend of coalition members working in isolation, because individual members do not understand how their contributions relate to the greater goal.

We encourage your coalition to **think** comprehensively, even if it cannot **act** comprehensively at the moment. Maintain a strong focus on your community and its needs, and avoid “borrowing” another group’s cultural competence plan and using it as your own. You can incorporate ideas and concepts from others to
jump-start your own efforts; but you should custom design a plan that matches your community’s unique characteristics.

A word about sustainability as it relates to cultural competence

Sustaining initiatives to bring about population-level changes in substance abuse rates requires a strong coalition that can unite all sectors of a community. Starting to work on sustainability without involving key segments of your community can lead to serious problems. Indeed, many funders will want your coalition to clearly demonstrate that it has the commitment and participation of diverse sectors of your population, especially those acutely affected by substance abuse.

Sustaining an initiative over time also requires a combination of diverse internal and external nonfinancial resources. Necessary internal resources include sound leadership; committed, well-trained partners and members; and strong administrative and financial management systems. Critical external resources include public and key stakeholders and the engagement of community-based organizations, parents and other residents.

Learn more about the SPF

This primer focuses on cultural competence and how to integrate this concept into each element of the SPF. You can learn more about the SPF from the Institute’s primer series and CADCA website, (www.cadca.org). Additional discussion of cultural competence is included in the Institute’s Capacity Primer.
Actions to ensure cultural competence for your coalition

Every coalition’s planning for cultural competence will look different because each community is unique. When you develop your coalition’s plan for incorporating cultural competence into every phase of its work, ask DOES OUR COALITION...

Assessment

☐ Include diverse populations, cultures, ethnicities, gender, sexual orientation, disability and age groups in our data gathering?
☐ Encourage participation of bi-lingual community members to support the development and implementation of our assessment?
☐ Use multiple forms of data collection; both qualitative and quantitative (key informant interviews, focus groups, listening sessions and surveys)?
☐ Recognize that diverse communities view alcohol and drugs differently and that culture influences how they should be addressed (i.e., drinking as an accepted form of socializing)?
☐ Recognize and include formal and informal community leaders in all aspects of building your coalition?
☐ Consider how community “institutions” and history-keepers can contribute to prevention efforts?
☐ Involve community in all aspects of data analysis (impacts buy-in in prevention strategies)?
☐ Incorporate community strengths as well as problems in our assessment?

Capacity

☐ Ensure that coalition staff reflects composition of community.
☐ Train staff and members on concepts of cultural competence.
☐ Establish principles and strategies that lead to diverse community leadership.
☐ Encourage participation of members that represent the cultural, linguistic, and ethnic composition of the community.
☐ Meet in different community settings and ask local cultural organizations to host at their site.
### Planning
- Ensure broad community participation in planning process
- Review and discuss planning process with community to increase understanding of planning
- Broaden work and action plans to reflect input and outreach by diverse populations, cultures, ethnicities, and age groups to include in data gathering
- Incorporate community in selection of strategies and seek methods to assure buy-in is present

### Implementation
- Ensure activities include members of impacted communities (i.e., people involved should include target audiences and people in treatment, recovery, rehabilitated, ex-offenders).
- Seek unique and creative methods to ensure all communication materials reflect “community”—brochures and posters, reports, etc.
- Continuously review, assess and select strategies for implementation that reflect local environments and problems.
- Ensure all communication materials are reviewed (tested) for appropriateness by target community prior to distribution (content, reading level, visual and distribution method?)
- Conduct appropriate prevention programs for the composition of our community

### Evaluation
- Involve community in collection, interpretation and dissemination of information (including youth)
- Ensure evaluation process and products are relevant to diverse communities
- Consider applying awareness of race and culture specific linguistic and community attributes and relevance to measure all coalition prevention efforts
- Include various qualitative methods in your evaluation (e.g. interviews informal/formal)
- Select an evaluation team with experience and expertise working in diverse communities and be diverse (age, education, gender, ethnicity, etc.)
- Disaggregate data to lowest level
CHAPTER 1. WHAT DEFINES A CULTURALLY COMPETENT COALITION?

Multiculturalism is an acknowledgment that the United States is a diverse nation and does not assume that any cultural tradition is ideal or perfect. It looks to the equitable participation of all individuals in society. It assumes that our nation can be both united and diverse, that we can be proud of our heritage and of our individual group identities while at the same time working together on common goals. It is a reciprocal process based on democratic principles and a shared value system.

— Elizabeth Pathy Salett, President, National Multicultural Society, Washington, D.C., 2004

Effective anti-drug coalitions recognize the need to include a broad cross section of the population in their work and give importance to including organizations that represent various cultural groups. They know, for example, that they must focus on young people as one target of prevention efforts, but they also make a place for youth at the coalition table. They understand that different racial and ethnic groups need viable roles in the coalition to help determine and support anti-drug strategies. In short, effective coalitions make a concerted effort to ensure that cultural competence permeates all aspects of their work.

We define a coalition as a formal arrangement for collaboration among groups in which each retains its identity but all agree to work together toward a common goal: a drug-free community. To serve as catalysts for population-level change, coalitions need deep connections into all major sectors of the community. Coalition building, collaborative problem-solving and community development constitute some of the most effective interventions for change available. Prevention programs or human service organizations are different than effective coalitions, which involve agencies, the public sector and individuals as equal partners.

Coalition leaders readily acknowledge that working with diverse cultural groups is necessary, incredibly rewarding and often difficult. Efforts to bridge cultures and encourage communitywide participation often run counter to prevailing sentiments. At times, residents blame drug problems on particular cultural groups,
youth or people from certain neighborhoods. Some people do not readily trust what they consider the dominant culture or government institutions. Others feel isolated by language, low socioeconomic status or the frustration of trying to be understood.

Remember, substance abuse is a tough issue. It crosses all racial and economic lines and disproportionately affects certain populations. The coalition can help foster community reconciliation. For example, coalitions can bring together a range of organizations and agencies to create a positive environment for reintegrating former prisoners. Research indicates that approach is critical to successful, sustainable outcomes. Re-entry implementation is easier through a coordinated effort.

It is important to acknowledge that some coalition members may see solutions in terms of decreasing racism and poverty, while others will consider solutions in terms of getting people clean and sober. There is a place at the table for all, but the coalition needs to have a clearly articulated logic model so members and supporters will understand what success will look like in measurable terms, both short and long term.

Despite these and many other challenges, coalitions across the country actively serve as catalysts for better understanding and collective work. They gain vital community support through their efforts to include, validate and respect diverse populations in the common goal of healthier, drug-free communities. Effective coalitions recognize and honor the strengths and resources inherent in diverse groups.

Because achieving cultural competence requires time and effort, your coalition must demonstrate how achieving it helps contribute to reducing substance abuse rates. Following are reasons commonly cited for devoting resources to cultural competence:

**Rapidly changing demographics.** The 2000 U.S. Census indicates the country is undergoing rapid demographic change. Significant numbers of immigrants are settling in traditional and new communities. Far fewer culturally homogeneous communities exist now than in past decades.
The widespread reach of substance abuse. The negative consequences of substance abuse affect all segments of society, regardless of income, gender, ethnic origin, sexual orientation, disability, age, etc. It is not enough to reduce rates in one segment of a community; a comprehensive approach is necessary.

The value of group strengths and protective factors. Research demonstrates that each group has strengths and protective factors that can buffer the negative effects of substance abuse. Communities must identify, strengthen and include these factors in their strategies to reduce substance abuse rates.

The value of group representation. The coalition table must reflect the diversity of the community. Residents want to see respected individuals who understand their needs occupying leadership roles. Otherwise, your coalition will not gain widespread community buy-in.

What defines culture?
The most commonly cited aspects of culture are the most visible: language, music and food. Anthropologists and other social scientists study additional qualities that help us develop a deeper understanding of culture—the shared values, traditions, norms, customs, arts, history, folklore and institutions of a people unified by race, ethnicity, language, nationality, religion or other factors. For example, culture affects people’s perceptions about alcohol use, abuse and related problems.

Culture pervades all aspects of identity—whether individual or group. Coalitions must first understand a culture before attempting to alter systems, policies or group norms. And they need to recognize that an individual can identify with multiple groups. Diversity encompasses much more than racial or ethnic
identification. Researchers have identified the following factors, which may be present in any number of combinations:

- National origin
- Gender
- Sexual orientation
- Religion
- Location (rural, urban, suburban)
- Socioeconomic status
- Age

What is cultural competence?
The U.S. Department of Health and Human Services defines cultural competence as a “set of behaviors, attitudes and policies that come together in a system, agency or program or among individuals, enabling them to function effectively in diverse cultural interactions and similarities within, among and between groups.”

Other experts view cultural competence as a point on a continuum representing the policies and practices of an organization, or the values and behaviors of an individual, which enable that organization or individual to interact effectively in a culturally diverse environment (see Figure 2).

When coalitions incorporate cultural competence into their work, they

- Invest time and resources in training staff and volunteers in cultural competence.
- Carefully examine their structure, practices and policies to ensure that these elements truly facilitate effective cultural interactions.
- Display respect for differences among cultural groups.
- Expand cultural knowledge and pay attention to the dynamics of culture.

Understanding culture is a process

1. Cultural Knowledge—Knowledge of some cultural characteristics, history, values, beliefs and behaviors of a different group
2. Cultural Awareness—Openness to the idea of changing cultural attitudes
3. Cultural Sensitivity—Knowledge of cultural differences without assigning values to the differences
4. Cultural Competence—Ability to bring together different behaviors, attitudes and policies and work effectively in cross-cultural settings to produce better results
• Solicit advice from diverse communities regarding activities.
• Hire employees who respect unique aspects of varied cultures.

Coalitions that embody these qualities create an atmosphere that encourages cultural competence in individuals and member organizations. Some of the guiding principles of cultural competence that your coalition may incorporate include the following:

**Culture: first, last and always.** Culture has an impact on how a person thinks, believes and acts. Acknowledge culture as a predominant and effective force in shaping behaviors, values and institutions.

**One goal—many roads.** Each group has something to share. Acknowledge that several paths can lead to the same goal.

**Diversity within diversity.** Recognize the internal diversity and complexity of cultural groups. Remember that one individual cannot speak for all.

**People are unique.** Acknowledge people’s group and personal identities and treat people as individuals.

**Viewpoint shift.** The dominant culture serves the community with varying degrees of success. Acknowledge that what works well for the dominant group may not serve members of other cultural groups. Try viewing issues from alternative viewpoints.
CHAPTER 2. CULTURAL COMPETENCE AND COALITION BUILDING

Community work is bigger than any one organization or group. At its best, it transcends organizational boundaries and encompasses all members and groups, including diverse populations, within a community. For such collective work, members of all community sectors must realize that what happens in one part of town affects everyone. This perspective focuses, justifiably, on the interconnectedness of problems and issues. Successful coalitions practice self-determination and democratic principles. They recognize that it is never acceptable for one group or individual to impose its solutions to problems on another.

As cultural issues affect all aspects of coalition development and operations, your group should address cultural competence on multiple levels: in your community interactions, within your partnerships, within the host organization (if applicable) and so on. Effective collaborations highlight cultural issues and integrate them as core aspects of building communitywide support. To work through the elements of the SPF before inviting members of diverse communities to the coalition table is a mistake and likely will offend the people you need to include.

To transform a focus on cultural competence into effective action, coalitions need to take steps to ensure broad support of the concept. Following are examples of some things your coalition should consider:

**Write it down.** Make including diverse populations part of your mission and vision statements. Incorporate these concepts into your logic model, strategic plan and action plan.

**Commit from the top.** Coalition governance should officially commit to enhancing its cultural competence as it works to reduce substance abuse.

**Do not assign and forget.** Do not delegate work on cultural issues to one individual or department. Focus and responsibility must remain with the coalition.
Significant benefits accrue to a coalition that focuses on cultural competence. You will see an *increase* in:

- Respect and mutual understanding.
- Unity and civility in problem-solving.
- Participation and involvement of diverse cultural groups.
- Trust and cooperation.
- Inclusion and equity.

Your coalition will see a *decrease* in:

- Unwanted surprises that might slow coalition progress.
- Mistakes, competition or conflict.

Following are some of the most commonly cited indicators of cultural competence to help your coalition assess whether you are heading in the right direction:

**Outreach efforts.** You encourage outreach to diverse groups, have made it part of your strategic plan and have assigned responsibilities to coalition members.
Inclusive language. You use inclusive language when referring to groups in your community (“we” and “our community” rather than “those people” or “those kids”). Coalition members and staff demonstrate an understanding of cross-cultural concepts.

Committed leadership. Your coalition leaders support cultural competence and demonstrate commitment to the concept.

Coalition composition. Your coalition—members and leaders—reflects the diversity in your community.

Training and development. Your coalition provides or facilitates cultural competence training for community and coalition members, staff and volunteers.

Shared responsibility and accountability. Coalition and community members, staff and volunteers work together and share responsibility for developing effective strategies.

Overarching principles of cultural competence

Individuals who work in various areas of substance abuse prevention served on the SAMHSA Center for Substance Abuse Prevention’s Racial and Ethnic Specific Knowledge Exchange and Dissemination Project committee, which drafted the following overarching principles that define cultural competence:

• **Ensure** community involvement at all levels.
• **Use** population-based definitions of community (let the community define itself).
• **Stress** the importance of relevant culturally appropriate approaches.
• **Support** the development of culturally specific services.
• **Adhere** to Title VI of the 1964 Civil Rights Act (42 U.S.C. 2000d et seq.), which prohibits discrimination on the basis of race, color and national origin in programs and activities receiving federal financial assistance.
• **Use** culturally relevant outcomes and indicators.
• **Employ** culturally competent evaluators.
• **Engage** in asset mapping—identify resources and start from this point.
• **Promote** organizational cultural competence—staff should reflect the community it serves.
• **Allow** the use of indigenous knowledge in the body of “evidence-based” research.
• **Include** target population(s) (e.g., youth, consumers, participants, elders).
CHAPTER 3. INCORPORATING CULTURAL COMPETENCE INTO YOUR COMPREHENSIVE APPROACH

As noted earlier, cultural competence should never be an after-thought or something to worry about after your coalition has been formed and has developed activities. Addressing issues of diversity and cultural competence from the coalition’s inception increases the likelihood of establishing a firm foundation to build on in later years.

We will use the SPF as the basis for a discussion of how to incorporate cultural competence into your efforts to develop population-level approaches to substance abuse. In this chapter, we will take a closer look at how the first element—assessment—relates to your coalition. Note that we present substantial information on the assessment and capacity-building elements of the SPF. Simply stated, you should incorporate key concepts of cultural competence from the very beginning. If in your initial coalition meeting, you look around the room and see that significant groups are not present, take immediate steps to change that situation. Your credibility—indeed, the success of your entire effort—may hang in the balance.

As you work through the elements, you will notice that each encompasses a kind of mini-SPF—that is, each element includes a certain amount of assessment, capacity building, planning, implementation and evaluation. Your coalition might start to feel as if it is doing the same thing over and over. That is a natural part of the process, because as you get into the work, you will start to see areas that you need to revisit, generate more data for or fine-tune.

Assessment

A community assessment is a comprehensive description of your target community. It involves systematically gathering and analyzing community data to identify and address local ATOD problems. Generally, coalitions conduct community assessments early in their formation. However, because a community’s strengths, needs, resources and makeup continually change and
evolve, ongoing assessment is critical. Effective community assessment includes five elements:

- **Creating** a community description
- **Assessing** community needs
- **Discerning** community resources
- **Documenting** community history
- **Developing** a problem statement (or statements)

Cultural issues affect all of these components, highlighting the need for cultural competence when you begin to assess the problems in your community.

**Data collection tips**

To ensure a culturally appropriate and responsive data collection process, follow these guidelines:

**Data collectors should be diverse.** They should reflect the makeup of your community.

**Edit data collection questions.** Be sure your questions are not potentially too personal or offensive.

**Make sure you are understood.** Employ competent translators, interviewers or group facilitators who mirror the community.

**Use focus groups.** A skilled moderator can help you unearth information you will not get from a broad survey.

**Listen to local experts.** Invite community experts to share their thoughts with coalition members.

**Be sensitive to group norms.** Learn what is and what is not acceptable to your target group. Which actions or words cause alarm; which open doors?

**Be alert to group concerns.** Some groups may feel quite vulnerable or defensive about discussing substance abuse with people they consider outsiders.

**Conduct key informant interviews.** In one-on-one interviews, a skilled interviewer can gather insights to flesh out your quantitative data.

**Host a town hall meeting.** Work with partners from different cultural groups to host town hall meetings in a variety of community settings. Employ a skilled moderator (and translators if needed) to focus participants on generating information to decrease substance abuse.
Creating a community description

To develop a complete community description, your coalition must gather the basic demographic data that define your community. Factors to consider include such variables as size, population, ethnic or racial groups, economic status, primary language and so on. You can get this information from the most recent U.S. Census.

Coalition leaders often find that data from national or state sources, usually presented in the aggregate, provide an overly broad picture of their community and its substance abuse problems. Similarly, state- or federal-level data are often too general to adequately define a community’s specific concerns or needs.

Whenever possible, aim for data sorted by gender, age, race and/or ethnicity, so you can determine which groups are more affected by ATOD problems. However, if you can only amass aggregate data, your coalition may need to disaggregate them—that is, divide them into constituent parts—to help you better understand the dimensions of the problem.

Your group might turn to a city or county planning department, economic development office, tribal council or chamber of commerce for more precise data. In describing your community, your group also must consider cultural heterogeneity, assimilation and acculturation, and hidden communities.

Cultural heterogeneity

While many large population groups such as Asian Americans, Native Americans or Hispanics possess many similarities, they also differ by national origin, language, tribe, geography and culture. For example, the traditional approach to studying the extremely diverse Asian American population as a homogeneous group hides important intergroup differences. Likewise, the Hispanic population of the United States includes a number of nationality groups that vary from each other and have different rates of alcohol and drug abuse. Consequently, simply saying “drug use among Asian American or Hispanic youth” probably will not be sufficient for your purposes. Acknowledging these disparities by disaggregating data can help your coalition avoid a culturally insensitive approach.
Acculturation and assimilation

Immigrant groups bring traditional cultural values, such as strong family ties, which have served for generations as protective factors. Acculturation and assimilation tend to decrease the strength of these cultural values and with them their protective value. This phenomenon is seen among youth, who tend to adapt more readily to a new culture. For example, research shows that among Hispanic/Latino immigrants, more men than women consume alcohol. However, within two generations a cultural shift occurs, and the consumption rates between the genders tend to equalize.

Hidden communities

For a variety of reasons, some groups prefer to maintain a low profile, and finding good data about them may be difficult. For example, individuals who have learned to fear negative consequences as a result of their sexual orientation often shun contact with government agencies and have been historically undercounted. Coalitions may find it challenging to identify these hidden communities, but should make every effort to reach out to them.

One source of data that you might investigate is diversitydata.org, a project of the Harvard School of Public Health. The website incorporates data on a diverse range of social measures that may be helpful to your coalition.

Assessing community needs

Your coalition naturally will want to deploy its limited resources to the areas of greatest concern and will want as much community input as possible when developing a list of community needs. Coalition members can agree that not all needs may be met at the same time; however, they must at least make it onto your list. Compiling a comprehensive list helps build trust and ensures that when resources become available, you can quickly match them to identified needs. As you or some other entity conduct a needs assessment, do not be surprised if you find that diverse communities have different priorities.
Assessing community resources

Your community assessment should include a list of key institutions that serve diverse populations and describe their role in reducing substance abuse rates. Incorporate organizations with direct, historic links to their populations. Black churches, for instance, have long served as both places of worship and social and health services providers to African Americans. Community centers, such as those run by Filipino Americans in some parts of the United States, help keep cultural traditions alive. These community-based entities and other grassroots organizations provide access to local expertise and knowledge that are invaluable in community mobilization efforts.

Documenting community history

Every community has a history of the events and forces that have affected and helped to shape it. It is not uncommon for people in diverse ethnic or cultural groups to interpret the same event differently. Being unaware of or insensitive to the community’s history can lead to a variety of problems. For example, consider:

- Failing to account for key events that help explain current conditions can result in misinterpreting what those events really mean to community members.
- Misunderstanding the context of a situation can cause loss of credibility for the coalition.
- Failing to build on the community’s past successes can result in duplication of efforts.
- Inappropriately claiming credit for progress attributable to other factors or historic trends can result in mistrust from the community.

**History includes existing research**

When reviewing community history, include existing research literature. You can gain valuable insight when analyzing substance abuse data among various groups. For example, Dr. Marilyn Aguirre-Molina of Columbia University in New York has studied patterns of alcohol consumption among Hispanics/Latinos. She describes how, for this population, drinking is often associated with family-centered celebrations, and thus is a normative behavior.
Developing a problem statement

Recruit individuals familiar with substance abuse issues within the target community to help evaluate the data your coalition gathers. Avoid using a deficit model when analyzing issues. This model tends to focus on “fixing” what appears to be the source of the problem, to the detriment of the community. If a coalition identifies youth methamphetamine use as the problem, resultant strategies tend to focus on “fixing” young people and may ignore underlying issues. Some communities of color express alarm when they see a strong focus on their risk factors without equal emphasis on their protective factors or assets. Coalition leaders should not be surprised when groups who feel they have been unfairly characterized in the past balk at the use of deficit models.

Therefore, your coalition needs to develop a functional problem statement early in the assessment phase. (See the Institute’s Assessment Primer.) This exercise will set the stage for both your community assessment and the strategies you develop. Recognize that existing community tensions can add challenges to this process. Following are some guidelines to help your coalition navigate this exercise and develop a culturally appropriate problem statement.

• **Begin** the process with a purpose statement to focus the discussion.
• **Be alert to** community tensions and draw key community members into the process.
• **Name** only one problem at a time, and define it by its behaviors and conditions.
• **Avoid** making blaming statements.
• **Avoid** naming specific solutions.
• **Define** the problem in measurable terms.
• **Revise** the problem statement as needed to reflect community concerns.
• **Solicit** group consensus regarding the final version of the statement.
CHAPTER 4. CAPACITY BUILDING

Capacity building is the process of developing the human resources your coalition needs to achieve its aim. True capacity development involves finding people in your community who are ready, willing and able to contribute.

Building your coalition

To ensure success, you will want to create a well-balanced mix of member stakeholders and community representatives. Remember, to the extent possible, your coalition should mirror your community. The following guidelines will help you in this task:

- **Create** a formal plan for seeking coalition candidates, review who is at the table and identify gaps to fill.
- **Define** the skills, knowledge and resources coalition members need to implement your community plan effectively.
- **Plan** to recruit candidates for your coalition from both formal and informal sources.
- **Look** for leaders with strong ties to the community.
- **Create** a “job description” for coalition members outlining their responsibilities and level of commitment. Remember that you want coalition members who will actively work to bring about change, not just come to meetings, eat and listen to staff reports.
- **Avoid** recruiting “one of each type” of individual from your community. This approach can smack of tokenism.
- **Recruit** members face-to-face. This method gives you the opportunity to assess interest, skills and competence levels, and describe the level of involvement you seek.
- **Share** a compelling description of what your coalition wants to accomplish and why participation can contribute to your success.

**Skill building is key**

When focusing on skills your coalition may need to build, consider this quote from the University of Kansas Community Tool Box:

“Organizations have a ‘culture’ of policies, procedures, programs, and processes, and incorporate certain values, beliefs, assumptions and customs. An organizational culture may not lend itself to cultural competence, so that’s where skill building comes in.”
Recognize that not everyone in the community can or should be a full-fledged coalition participant. You can manage this resource gap by establishing relations with organizations and institutions that represent diverse populations. Schedule a visit to explain the purpose of your coalition and to determine other ways that these organizations might be of assistance.

**Managing your coalition**

Coalitions, by their nature, are always evolving; some members will come and go. However, basic management and ongoing recruitment techniques will help keep core members focused and on track.

**Match members to outreach efforts.** Coalition leaders should consider member skills and attributes such as established relations with the community, language skills, business contacts and faith. For example, you might ask a person who is “faith friendly” to reach out to local congregations.

**Acknowledge barriers to full community participation.** Community members might not be able or might not want to participate in your coalition. Consider why certain groups or individuals cannot participate and, if appropriate, determine whether your coalition and the reluctant party can mutually work around the barrier. For example, if you wish to have genuine youth involvement, holding meetings during school hours will be a barrier. However, recognize that some community members cannot be brought into the process. Whatever the reason—trust issues, turf issues—your coalition should respect them. Continue to provide information to these groups and individuals, because they may change their minds at a later date.

**Develop leaders.** Many groups lose their community leaders when they immigrate to this country. Other groups may be isolated from traditional leaders. Therefore, your coalition should develop a plan for leadership development and commit resources for leadership training and conference attendance. When seeking the established leaders in your community, consider the term “leader” from the community’s point of view. A community leader might be a member of the town council, but could just as easily be “the lady
in the corner house” whom everyone knows and trusts. Indeed, the term “leader” includes all of the following and more:

- Heads of institutions or organizations
- Elected or appointed officials
- Those who oversee sweat lodge rituals
- Those who oversee ceremonial rituals
- Heads of tribal councils
- Elders
- Residents with extensive social family networks
- Youth

Teen leaders: Unique challenges

Teens often express reluctance to join a coalition of adults because they feel they will not be respected or listened to. One way to address the issue is to provide leadership training to youth.

The CADCA Institute’s National Youth Leadership Initiative is one program that can be helpful in developing young leaders. Another successful strategy is to create a youth council. CADCA coalition member the Vallejo Fighting Back Partnership in Vallejo, Calif., established such a program with youth leaders meeting separately and making recommendations to the coalition’s board.

To learn more, visit the CADCA website.

Increasing the cultural capacity of your coalition

To achieve a culturally competent coalition, you need to take a look at your existing practices and policies. Use these guidelines to help guide your efforts:

Assess your level of cultural competence. Determine the knowledge, skills and resources you have now and identify any gaps. How well do your staffing, training and materials reflect the community you serve? Do you regularly evaluate your programs in terms of cultural competence?

Fill resource gaps. Fill any gaps you identified in your assessment. Do you need staff, volunteer or coalition member training? Do you need to work with partner organizations?
Develop support for change throughout the coalition. Consider naming a committee to develop a plan for enhancing cultural competence.

**Involve community groups.** Involving individuals from community groups will provide needed insights.

**Identify barriers for achieving cultural competence.** Identify what is not working and what barriers impede your efforts. Resist laying blame or rehashing past “mistakes.”

**Develop goals and define steps required to achieve them.** Your coalition leaders should formally endorse the community’s goals and implementation steps. Ensure that they know about and understand the goals and strategies of the coalition and that you have methods for informing the community in place.

**Commit to ongoing evaluation and be willing to change.** Evaluation enables your coalition to determine how well the plan is working, take corrective action and, if appropriate, change course.

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**Why is this not working?**

You will encounter many challenges on your path to cultural competence. Working your way through them is part of the process. Following are typical challenges:

- The learning curve
- Lack of resources, leadership commitment or training
- Staff resistance
- Communication problems—verbal and nonverbal
- Different languages or dialects
- Class-related values
- Culture-related values
- Stereotyping
- Racism
- Ethnocentricity
CHAPTER 5. STRENGTHENING YOUR EFFORTS

The previous chapter provided you with information relevant to initial measures your coalition can take as it embarks on a journey that will lead to a healthier community. Clearly, cultural competence and diversity issues can and should be embedded in your work in the assessment and capacity-building phases of your development. This chapter will focus on how you can continue to evolve toward a culturally competent coalition as you work through the next three elements of the SPF: planning, implementation and evaluation. It finishes with a brief discussion of some corrective actions you can take if you experience problems.

Planning

“Coalitions don’t plan to fail, they fail to plan.”

Community leaders need to pay considerable attention to the planning process as they initiate efforts to build an effective coalition. They should design a process that embodies the concept that strong participation of all segments of the community will be a key determinant of the success of their efforts to reduce substance abuse. Research shows that truly effective coalitions engage residents and partners and thus develop more resources and achieve greater results. Active involvement in a planning process can empower communities as coalitions reach out to all residents and welcome them as participants in efforts to solve their problems.

While no one model planning process exists, coalitions should keep several key principles in mind. First, the process should be open to all who wish to participate. The planning process can be of singular importance in building a broad base of community support, and the people who participate in it support the coalition over the long haul. This does not mean that large numbers of people need to be involved in all aspects of the development of a community plan, but there should be points at which they can provide input and help build consensus.

Your planning process constitutes a significant opportunity to reach out to potential members, so to be truly inclusive and diverse, the process should involve a large number of community
sectors. For example, participation in the planning process can provide your coalition with great ideas, help get youth buy-in and give the coalition credibility in the community. For a variety of reasons, you may not get representatives from diverse cultural groups in your planning process. You may need to reach out to those groups and invite them to the table.

Your plan should include a logical sequence of strategies and steps that lead to the reduction of substance abuse in your community. A well-constructed plan includes development of an evaluation process at the start of your project (rather than at the end). In addition, a good plan:

- **Allows** you to wisely allocate current dollars and resources and secure future funding.
- **Defines** “success” in measurable terms.
- **Helps** you select interventions targeted to root causes of substance abuse in your community.
- **Assigns** accountability and timetables.
- **Emphasizes** cultural competence at every stage—involving community members at the coalition table for assessment, capacity building, planning, implementation and evaluation.

Creating a workable plan of action is challenging for any entity. For an organization that also strives to be culturally competent, it may be necessary to modify the planning process to reflect the target community. Coalitions should be open to planning and thinking that more closely aligns itself with traditions of various community groups. For example, American Indians often prefer planning processes that are circular and reflect their respect for the sacred circle. Faith-based organizations may believe action-oriented plans are secondary to the understanding of doctrine or sacred texts. Listening to and incorporating different viewpoints results in a plan that is culturally competent and therefore more likely to succeed.

Regardless of the approach or approaches you take, most coalition members will come to the table with different levels of understanding of substance abuse and the basic planning process. For example, many may not be familiar with the inner workings of effective logic models. You might need to conduct several
sessions to get everyone to a baseline of understanding. Coalition members may need time to work out any disconnects between a formal logic model process and their own approaches. Ideally, you will not start work on a logic model until all coalition members understand and are comfortable with the process. When most members start from more or less the same place, you will have a setting that generates fruitful discourse and consensus building.

Cultural competence in a coalition does not just happen. You need to take concrete, coherent steps to ensure that you are on the right path. If you apply for federal grants such as the DFC, you will be required to demonstrate the inclusion of diverse groups in your coalition. Cultural competence and diversity issues should be interwoven in an explicit manner throughout. For example, if the aim of your logic model is to reduce substance abuse among youth, you should outline the steps your coalition will take to have youth from diverse backgrounds as full participants in your coalition. Make youth the subject rather than the object of your activities.

It is surprising that many coalitions develop detailed plans for everything except how to become more culturally competent. As noted above, a cultural competence plan is one method of assessing whether you are on the right track. Such a plan should have measurable goals and objectives with concrete timelines. For example, you might develop an outreach goal that your coalition will contact 30 different community organizations within six months with the goal of recruiting 12 to become members of the coalition. A cultural competence plan also should indicate who is responsible for the proposed action and outline some of the potential resources needed. The entire coalition should periodically review the cultural competence plan.

Note that a cultural competence planning process may reveal several areas of discord among coalition members. Such differ-
ences are better dealt with early in the formation of the coalition; if not, they may resurface later to derail the coalition’s work.

Implementation
Community coalitions should select and implement strategies that will produce communitywide changes in substance abuse rates. Remember that while substance abuse affects entire communities, its causes, impacts and manifestations may differ significantly in diverse neighborhoods. For example, you may find that some areas of your community have a number of high-risk environments. You must tailor your approaches to address the unique problems of each locale and involve residents in crafting and carrying out solutions.

To select or develop an effective intervention, it is worthwhile to understand the basic components and elements generally present in successful community interventions. (These interventions are fully outlined in the Institute’s Implementation Primer.) Research indicates seven essential approaches for achieving community change. We have included example interventions with each of the seven strategies.

1. Providing information—Ensure that printed materials (brochures, flyers, etc.) consider the community’s linguistic differences, average reading level, and how different groups are portrayed in the materials, and determine how to distribute the materials to reach the largest number of community members. Translate materials into languages used widely in your community. Disseminate publications and advertising through non-mainstream media and through a variety of channels (i.e., church bulletins, cultural organization newsletters, etc.).

2. Enhancing skills—Develop an educational plan for employees, coalition members and volunteers to improve competencies required for effective cross-cultural work. Select and pay for coalition members to attend training.
3. **Providing support**—Review your coalition’s policies and practices and confirm that your mission, vision and goals align with and are served by a diverse membership and inclusive practices. Provide child care during coalition meetings and hold meetings in the evenings when the majority of members are not at school or work.

4. **Enhancing access/reducing barriers**—Engage local hospitals and treatment centers and collaborate to provide low-cost or free substance abuse treatment for low-income, uninsured individuals.

5. **Changing consequences (incentives/disincentives)**—Establish a Teen Court for youth involved in minor drug offenses.

6. **Physical design**—Work to place alcohol and tobacco products in areas of retail outlets not accessible to youth.

7. **Modifying/changing policies**—Advocate for a policy to eliminate advertising of alcohol products near places of worship.

Choosing several of these strategies—with particular emphasis on approaches 4 through 7, referred to as environmental and systems changes—ranks high among the most important decisions your coalition will make. The methods selected must correspond to the problems identified in your logic model. After selecting one or more activities related to a particular strategy, your coalition should consider the following issues:

**The challenge of changing a community**

Many diverse groups live in high-risk environments. Research shows that a higher concentration of liquor outlets, alcohol and tobacco advertising, and public drinking exists in low-income and minority areas. Often, the residents have little say over land-use policies such as zoning ordinances. Research also shows that the alcohol and tobacco industries:

- Market heavily to minority communities.
- Saturate minority neighborhoods with advertising.
- Misuse minority culture to market the products.
- Oppose attempts to reduce or modify their advertising efforts.

If your coalition wants to mobilize segments of your community that are disproportionately affected, it must take these factors into account.
• Do you have broad-based support for the intervention?
• Has the intervention been successfully attempted with other diverse populations?
• Will the coalition be able to promote ownership of the intervention?
• Is it doable?

Most challenging to attain are changes in policies, environments, barriers or consequences. Because these types of changes have a wide impact, your coalition will need to mobilize broad sections of the community.

**Prevention program or coalition?**

One significant issue affecting community change involves coalitions that manage prevention programs. In recent years, various federal agencies have encouraged coalitions to use model programs, which have been studied and found effective. We encourage coalitions to develop comprehensive strategies to reduce substance abuse rates, and acknowledge that prevention programs may form part of a comprehensive community plan.

Some coalition members may operate programs and ask for coalition support of their efforts. However, it is important to keep in mind that a prevention program by itself, no matter how effective, is less likely to achieve the population-level change that a true coalition accomplishes.

Your coalition members may want to consider selecting an existing model program and fine-tuning it to meet your community’s needs. To help you determine if the program is appropriate for your community, consider the following questions:

• **Who** conducted the research and program development? How knowledgeable were they in working with diverse populations?

• **What** populations were involved in the research study? How effective will the program be if the study did not include the populations with which you work?

• **Has** the original research and program been repeated with diverse populations?

• **Who** evaluated the program? Was it the program developer? Was there an independent review? Were representatives of diverse groups included on the evaluation team?
• Are the materials available in other languages? Do you have the resources to get necessary translations?
• Are translations available? Who did the translations? Were the translations tested in a target population and found effective?
• Was cultural competence integrated into the design of the program? If so, how?
• Will the program developer or local experts work with your coalition on the adaptation?
• Have you created a way to involve the community in the adaptation?

In most cases, you will need to adapt the model program to meet the needs of your diverse community—not necessarily an easy process.

Evaluation
To evaluate your program, your coalition will collect, analyze and interpret information on its implementation, impact and effectiveness. Evaluation should tell the story of your coalition’s work—what it did to try to change the community for the better, and how effective it was at achieving change.

An evaluation plan is like a trip itinerary. It should:

• **State** clearly where you are going.
• **Describe** how you will get there.
• **Describe** success in measurable terms (your destination).
• **Allow** your group to check short-term outcomes in measurable terms and make adjustments if necessary.

At one time, an evaluator—typically a researcher from a university—would observe coalition efforts from a detached perspective and produce a report. Today’s evaluator, however, also acts as a facilitator who helps organizations identify and improve the skills they need for success. Consequently, most evaluations now engage coalition members in the process of formulating, conducting, interpreting and using the findings of the evaluation. This approach improves communication, involves community representatives and stakeholders at each stage of evaluation and results in a more well-informed analysis of the project.
Data collection in evaluation and selection of an evaluator

Your evaluation strategy is incomplete without baseline information and a complete data collection plan. You need good data sources to interpret events in your community, and sometimes primary data sources produce information that is too broad. To put some meat on the bones of a broader survey, your coalition may need to create questionnaires, conduct key informant interviews or set up focus groups at the local level. Keep cultural competence at the forefront of this process. Ask your key constituents, which data-gathering methods will resonate in a positive way with your community? Which data-gathering methods will the community view with suspicion or alarm?

You also will want cultural competence to guide your selection of an evaluator or evaluation team. Get your community involved in the search and selection process; solicit their insights and local knowledge. When reviewing the qualifications for evaluation candidates, consider these questions:

- **How** much experience does the candidate have in working with culturally diverse groups?
- **What** experience does the candidate have in working with community coalitions?
- **How** will the candidate involve members of the community at all stages of the evaluation?
- **How** will the candidate incorporate cultural competence into the evaluation?
- **How** will the candidate manage communication issues (e.g., language)?

Getting your message out

The worst thing that can happen to your evaluation is for it to be printed, bound and placed on a shelf. Your coalition needs a strategy for getting your message out. Consider these questions:

**Who cares about your work?** Coalitions routinely share their results with key stakeholders: school districts, police departments and public health departments. The culturally competent coalition gets the message out to the entire network—formal and informal—that makes up the community. Have your coalition draft a list that includes civic and social organizations, ethnic or racial
groups, youth programs, senior citizens—in short, the residents of the community.

What do they care about? Many organizations complete a comprehensive report and consider the job done. However, a bound, formal report will not work for everyone. Your coalition may need to break its big report into smaller sections that highlight information important to various constituents in your community. For example, statistical summaries will resonate with police or health departments, but not, perhaps, with a youth group. Another community partner may be more interested in your process than your outcomes. To determine how best to present your information, consider your community’s needs. Your organization’s goals should match these needs. If you are trying to reach a particular group, providing summary information directed to its concerns is a powerful outreach tool. Consider the following additional ideas for getting your message out:

- **Invite** reporters from foreign-language newspapers to a press conference or information session.
- **Ask** teachers of graphics courses at the high school or local college to help you create colorful, eye-catching graphics to simplify information.
- **Contact** local media and ask if they need interview subjects for local public information shows. Send coalition members to talk about your initiatives.
- **Create** a “vision for our community” game by conducting a brainstorming session with coalition members.
- **Plan** a regularly scheduled “good news” report about successes in your community.
- **Create** a blog, e-mail blast system or Web page designed especially for community members (separate from your official Web page) that serves as an electronic town hall.
- **Participate** in community festivals and hand out suitable information.
- **Organize** a community pride day to recognize and honor those working for change.
- **Create** a cartoon book in which the “superheroes” are community leaders.
• **Continue** to brainstorm, and give unconventional ideas a fair hearing (no matter how outlandish they may sound at first).

**Troubleshooting**

Coalitions often contact CADCA’s Institute with requests for training and technical assistance to help them work with diverse populations in their communities. They frequently indicate that they have difficulty reaching out to diverse groups, particularly immigrants, or have not received support from target populations. Many seek a quick fix to a complex problem. Coalition leaders who have not paid close attention to cultural competence issues often find themselves in a quandary as to what steps they can take. Here are some general suggestions that your coalition may consider if you feel that you need to make improvements in this area:

**Place the issue on the agenda of an upcoming coalition meeting.** Coalitions often experience difficulty when dealing with racial, ethnic, gender, sexual orientation or other differences that impact their work. Such coalitions need to air out their issues rather than continuing to hope that they will disappear. Have the group engage in an honest, constructive discussion about the current situation. Take steps to ensure that this discussion does not degenerate into a grousing or finger-pointing session. Focus on ways to improve your coalition, not to blame previous leadership or members of underrepresented communities.

**Get coalition members to take ownership of the issue.** In many instances, cultural competence, diversity and outreach issues are made the purview of paid staff, often an “outreach” worker. However, for your coalition to make progress on this issue, the coalition members need to take ownership of the issue and identify solutions. For example, if representation of diverse populations is a problem, then coalition members, not just staff, should be involved in identifying, reaching out to and recruiting prospective members.
Establish a subcommittee or task force to deal with cultural competence. Often, a coalition board will form a committee to probe the issue, meet with community members and make recommendations back to the entire board. Such groups can initiate action and plan concrete next steps. Research shows that such committees must have appropriate authority to be truly effective.

Develop a plan. Coalitions should consider the development of an action plan that will identify measurable outcomes and a blueprint for steps to achieve them. This plan should include goals, strategies and activities; persons responsible; and resources needed. For example, if lack of diversity in the coalition is an issue, the plan could contain the following: “Coalition will contact 24 organizations and agencies representing diverse groups in our community within the next six months with the goal of recruiting four new board members and signing six memoranda of understanding between the groups/agencies and the coalition.” Decide who will be responsible for implementing the plan. Periodically evaluate all aspects of your plan and make adjustments as necessary.

Finally, consider hiring a skilled facilitator if a situation blows up and threatens to undo the good work that your coalition has completed.
CONCLUSION

This primer presents information to help your coalition incorporate cultural competence into each step of the Strategic Prevention Framework. We hope that the ideas and concepts presented here will help you meet the challenges involved in becoming a culturally competent organization. Keep in mind as you move forward that you have entered a marathon. You are attempting to change yourself, your coalition and your community—no small task, but certainly one well worth doing.

You know, perhaps better than anyone, how difficult it is to create positive change within a community that may itself be changing in unpredictable ways. A sudden influx of new immigrants, an increase in gangs or gang-related violence, a new economic development plan, the closing or opening of a local business and even events at the national level continually buffet your community. That is why it is so important to create a healthy community that can weather these constant challenges. What all this means, of course, is that your work is never truly done. However, your coalition does not have to struggle alone. You have resources available not only at the local level but at the Institute as well. We offer training, technical assistance, publication resources and more. If you need help, contact us, as we are always ready to assist.
**A WORD ABOUT WORDS**

As noted at the beginning of this primer, there are a number of terms that sometimes are used interchangeably. Often, the difference depends on who is funding your efforts or the field from which you come. The following chart highlights terms that often are used to describe the same or similar concept.

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### A Word about Words

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<th>Evaluate</th>
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*Build Capacity*

*Sustain the Work*

*Increase Cultural Competence*
GLOSSARY

**Acculturation.** The process of adopting the cultural traits or social patterns of another group. In immigrant groups, traditional cultural values and the protective value they provide may be weakened as a result.

**Activity.** Thing that you do—planned event(s) or project(s) used to implement a program.

**Aim.** A clearly directed intent or purpose, an anticipated outcome that is intended or that guides your planned actions, the goal intended to be attained.

**Approach.** The method used in dealing with or accomplishing: a logical process to solving an identified problem.

**Assimilation.** An intense process of integration in which members of an ethno-cultural group, typically immigrants, or other minority groups, are absorbed into an established, generally larger community. This presumes a loss of many characteristics which make the newcomers unique.

**Community assessment.** A comprehensive description of your target community (however your coalition defines community). The assessment process is a systematic gathering and analysis of data about your community.

**Community-level change.** This is change that occurs within the target population in your target area.

**Cultural awareness.** Being open to the idea of changing cultural attitudes.

**Cultural competence.** A set of behaviors, attitudes and policies that come together in a system, agency, or program or among individuals, enabling them to function effectively in diverse cultural interactions and similarities within, among, and between groups. A culturally competent organization has the capacity to bring into its system many different behaviors, attitudes, and policies and work effectively in cross-cultural settings to produce better outcomes.

**Cultural diversity.** Differences in race, ethnicity, language, nationality, religion, etc. among various groups within a community. A community is said to be culturally diverse if its residents include members of different groups.

**Cultural heterogeneity.** The differences within a cultural group. Large population groups, such as Asian Americans, Native Americans or Hispanics possess many similarities, but also differ by tribe, national origin, language, geography and culture.

**Cultural knowledge.** An understanding about some cultural characteristics, history, values, beliefs, and behaviors of another ethnic or cultural group.

**Cultural sensitivity.** Knowing that differences exist between cultures, but not assigning values to the differences (better or worse, right or wrong). Clashes on this point can easily occur, especially if a custom or belief in question goes against the idea of multiculturalism. Internal conflict (intrapersonal, interpersonal, and organizational) is likely to occur at times over this issue.

**Culture.** The shared values, traditions, norms, customs, arts, history, folklore and institutions of a group of people that are unified by race, ethnicity, language, nationality, or religion or other major factors (i.e., gender, sexual orientation, faith, etc.)

**Demographic data.** Data that describes a place and the people living in a community. Commonly collected demographic data include size, population, age ethnic/cultural characteristics, socio-economic status, and languages spoken.
Disaggregated data. Statistics or other information that is separated into its parts, such as separating data by race, ethnicity, language, sexual orientation, geography or culture.

Diversity. Diversity is “otherness” or those human qualities that are different from our own and outside the groups to which we belong, yet are present in other individuals and groups.

Environment. In the public health model, the environment is the context in which the host and the agent exist. The environment creates conditions that increase or decrease the chance that the host will become susceptible and the agent more effective. In the case of substance abuse, the environment is the societal climate that encourages, supports, reinforces, or sustains problematic use of drugs.

Ethnocentricity. The belief in the inherent superiority of one’s own ethnic group or culture, or a tendency to view alien groups or cultures from the perspective of one’s own.

Framework. A framework is a structure that is used to shape something. A framework for a strategy or approach supports and connects the parts.

Goal. A goal states intent and purpose, and supports the vision and mission statements. For example: “To create a healthy community where drugs and alcohol are not abused by adults or used by youth.”

Initiative. A fresh approach to something; a new way of dealing with a problem, a new attempt to achieve a goal or solve a problem, or a new method for doing this.

Logic model. Presents a diagram of how the effort or initiative is supposed to work by explaining why the strategy is a good solution to the problem at hand and making an explicit, often visual, statement of activities and results. It keeps participants moving in the same direction through common language and points of reference. Finally, as an element of the work itself, it can rally support by declaring what will be accomplished, and how.

Multiculturalism. The preservation of different cultures or cultural identities within a unified society, as a state or nation.

Objective. Objectives are the specific, measurable results a coalition plans to accomplish and serve as the basis by which to evaluate the work of the coalition. Each objective should have a timeframe by which it will be accomplished. “To reduce the number of youth in our community who smoke at age 15 from 18.5 percent to 10 percent by 2007.”

Outcome. Outcomes are used to determine what has been accomplished, including changes in approaches, policies, and practices to reduce risk factors and promote protective factors as a result of the work of the coalition. An outcome measures change in what you expect or hope will happen as a result of your efforts.

Policy. A governing principle pertaining to goals, objectives, and/or activities. It is a decision on an issue not resolved on the basis of facts and logic only. For example, the policy of expediting drug cases in the courts might be adopted as a basis for reducing the average number of days from arraignment to disposition.

Practice. A customary way of operation or behavior.

Program. Any activity, project, function, or policy with an identifiable purpose or set of objectives.

Protective factors. The factors that increase an individual’s ability to resist the use and abuse of drugs, e.g., strong family bonds, external support system, and problem-solving skills.
**Readiness.** The degree of support for, or resistance to, identifying substance use and abuse as a significant social problem in a community. Stages of community readiness for prevention provide an appropriate framework for understanding prevention readiness at the community and state levels.

**Resources.** A resource is any or all of those things that can be used to improve the quality of community life: the things that can help close the gap between what is and what ought to be.

**Results.** The consequences and outcomes of a process or an assessment. They may be tangible such as products or scores, or intangible such as new understandings or changes in behavior.

**Risk factors.** Those factors that increase an individual’s vulnerability to drug use and abuse, e.g., academic failure, negative social influences and favorable parental or peer attitudes toward involvement with drugs or alcohol.

**Strategy.** Identifies the overarching plan of how the coalition will achieve intended results.

**Sustainability.** The likelihood of a strategy to continue over a period of time, especially after specific funding ends.

**Targets.** Defines who or what and where you expect to change as a result of your efforts.
Community Anti-Drug Coalitions of America (CADCA) is a nonprofit organization that is dedicated to strengthening the capacity of community coalitions to create and maintain safe, healthy and drug-free communities. The National Community Anti-Drug Coalition Institute works to increase the knowledge, capacity and accountability of community anti-drug coalitions throughout the United States. CADCA’s publications do not necessarily reflect the opinions of its clients and sponsors.

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