CEHC
Cultural Ecology of Health and Change

Working Papers Series

INTRODUCTION TO THE CULTURAL ECOLOGY OF HEALTH AND CHANGE

By

Tony L. Whitehead, Ph.D., MS.Hyg.
Professor of Anthropology and Director, CuSAG

Department of Anthropology
University of Maryland
College Park, Maryland 20742

September 11, 2002.

Table of Contents

1. Introduction

The Cultural Ecology of Health and Change (or CEHC) is a system of anthropology based theoretical paradigms, and research and technical assistance programs that I have been developing for several years[1]. The paradigms and programs of the CEHC evolved from 35 years of involvement as an anthropologist in community based initiatives (CBIs) in the United States and abroad[2]. During this long career of working with other professionals, organizations, groups, and activists involved in research, and the planning, implementation, and evaluation of CBIs, I have found that non-anthropologist colleagues and community groups viewed my contributions as having the greatest value in the following areas:

- providing cultural theoretical foundations that would help in understanding community structures and CBI planning and implementation dynamics;
- bringing anthropological perspectives and research (ethnographic) methods to *community assessment research activities* that would provide data for the planning, implementation, and evaluation of *effective*[3] CBIs; and
- bringing anthropological perspectives and methods to the *planning, implementation, and evaluation* of *effective* CBIs.

As such, over the years, I have continued to develop *theoretical paradigms, programs, methods, materials, and organizational structures* to enhance those contributions, and to be able to better communicate and transfer the benefits gained from my knowledge, skills, and experiences to my students, non-anthropologists, other anthropologists, and members of the communities with whom I worked. The purpose of this working paper is to provide a brief introduction to the theoretical paradigms and programs of the CEHC. Discussion of CEHC Materials and organizational structures will be added later.

The CEHC in its entirety is an applied research and technical assistance system with a primary focus on the planning, implementation, and evaluation of CBIs. The CEHC differs, however, from other models with similar purposes, in that it:

- use conceptual paradigms based on theories of culture that address the complexities of the socio-cultural *contexts*, *processes*, and *meaning* systems that influence individual ideas (knowledge, attitudes, values, beliefs, etc.) and behaviors, including health related behaviors, and should therefore, be considered in the design, implementation, and evaluation of CBIs;
- is made up of *four interrelated systems* (See Appendix 2, Figure 1[4]), each with multiple programs that integrate community assessment research, and strategies of CBI design, implementation, and evaluation; and
- committed to the development of Program Technical Manuals (workbooks), and monographs that are being designed for the transfer of CEHC knowledge and skills to those involved in the design, implementation, and evaluation of CBIs;

---

[1] While the conceptual paradigms of the CEHC evolved solely from Dr. Whitehead's work, various colleagues and students have assisted in the development of CEHC programs.

[2] A community based initiative may be defined as an activity that has the following characteristics: (1) *goals* that include alleviating or improving a select health or social problem within or among a targeted community or population; and (2) *a high level of involvement* by members of the community or population targeted by that activity in its *planning, implementation and evaluation*.

[3] The term effective is used here to refer to the planning, implementation, and evaluation of CBIs that score highly in achieving the eventual outcomes desired by those involved in their implementation and planning.

[4] Other paradigms for designing, implementing, or evaluating CBIs do not integrate these three activities in a single interrelated system. The CEHC does so and is visually illustrated in Appendix 2, Figure 1.

The CEHC in total is a *cultural, ecological* and *social change* paradigm or model that is informed by multiple theoretical approaches cutting across several disciplines: anthropology, health behavior and promotion, communications, social psychology, and so on. However, the CEHC is made up of three distinct, but highly interrelated theoretical paradigms: (1) the *Cultural Systems Paradigm (or CSP)*; (2) the *Cultural Systems Approach to Change (or CSAC); and* (3) the *Community Based Approach to Program Planning, Implementation, and Evaluation (or CSAPPE)*. The four applied research and technical assistance subsystems of the CEHC are:

(1) The Ethnographically Informed Community and Cultural Assessment Research Systems (EICCARS)
(2) The CEHC System in Project Design and Implementation Plan (PDIP).
(3) The CEHC Project Implementation Programs (PIPs); and
(4) Ethnographic Assessment & Evaluation Systems (EAES)

The remainder of this working paper will present a brief introduction to the CEHC Paradigms and its applied research and technical assistance subsystems. More detail discussion of these paradigms and subsystems are found in working papers and PTMs dedicated to specific paradigms and subsystems.

2. A Brief Introduction to the Theoretical Paradigms of the CEHC

2.1. The Cultural Systems Paradigm (the CSP).

The CSP was the first of the CEHC paradigms to evolve, having its roots in my graduate training in public health and anthropology in the late 1960s and early 1970s, and early ethnographic fieldwork experiences of the 1970s[5]. It was highly influenced by my 12 years of work at the School of Public Health at the University of North Carolina. When I arrived there in January of 1976, as a sort of phenomenologically oriented anthropologist in a nine department school with predominantly positivist scientists, I often felt like an alien in a strange land. While the majority of my colleagues could demonstrate their work through measurement and methodological cookbooks, I was often made to feel like a non-scientist (read "non-academic) as I struggled to explain the primary, but non-standardized concepts and methods in my field, such as "culture" and "ethnography. " As such, the CSP has two primary functions, it

(1) operationalizes the concept of culture and how the concept might be used in the planning, implementation, and evaluation of community based initiatives; and
(2) provides a framework for the design and implementation of ethnographic research, including ethnographic research that might be used in the planning, implementation of CBIs.

The CSP offers eight large analytical categories for analyzing the human condition:

(1) The Human Individual as a biological, social, cultural, and cognitive being;
(2) Individual and Normative Behavioral Patterns.
(3) Individual and Shared "Idea" or "Ideational" Structures (knowledge, beliefs, attitudinal systems, values, "significant symbolisms"), which frame interpretations and meanings that underlie behaviors, including illness risk behavior, as well as all the other categorical contents within the CSP that are briefly presented here.
(4) Significant Social Systems including: (a) *domestic units* (households or residential compounds); (b) *extraresidential groupings and dyads* (ethnic groups, social networks and

---

[5] There is another CEHC working paper that focuses primarily on the CSP, and thus, the various theories that underlie the paradigm. Our discussion here, however, is a brief introduction to the paradigm. .

kinship systems, voluntary associations/organizations, symmetrical dyads such as friends, coworkers or real/and fictive kin dyads, asymmetrical dyad such as employer-employee, patron-client, etc.); (c) the policies and practices of *institutions and agencies of the wider community/society;* and *(d) intersocietal systems and influences.*

(5) Material Culture including various human made *objects, technologies,* and *artifacts.*

(6) The Physical Environment, in which the human group resides and that group's cultural system provides a successful exploitation of life sustaining elements, protection against elements which have the potential of threatening life, and finds ways to overcome elements that constrain life sustaining activities. Cultural meaning which influences behavior, including health risk behavior, might be influenced directly or indirectly by environmental elements and/or shared or individual ways of interacting with environmental elements. Environmental factors might affect the incidence of disease in other ways. For example, intestinal parasites that abound in African environment are suggested by Feldman (1990) to be possible cofactors in the transmission of HIV.

(7) Real and Perceived Needs that human groups and individual members nave to meet in order to achieve physical and socio-psychological functioning. Such needs are further categorized in the CSP as: (a) *organic* (i.e. reproduction, consumption of food, water and other energy sources, waste elimination, disease prevention and cure, protection from hazardous climate conditions, and physical space); (b) *instrumental* (economic, educational/socializing, governance or political and legal, and communal); and (c) *expressive* (cognitive [meaning and orderly world view], affective [social status and acceptance, being loved or liked, self and group identity etc]; and communicative (need to explain, communicate, etc).

(8) Significant Historical Processes and Events that may be *biophysical* (e.g. floods, droughts, etc) or sociocultural (coups, wars, new economic or marketing systems, etc.) that either institutionalize or sustain a cultural system, or a part of that system, or result in a "regenerated" or <u>syncretized</u> (new, combined) cultural form.

While the eight major categories will be described and discussed in more detail—with descriptive examples in the CSP Working Paper, the major *point to note here is that the eight categories are theorized to exist* in all human cultural groups. The CSP maintains that it *is the job of the anthropologist or ethnographer* to *discover the contents of the eight major cultural analysis categories as expressed by specific human groups, and how different groups, and individuals* within groups *vary in their expressions* of the contents of these categories. As such, the CSP gives greater analytical power to the concept of culture by directing us to assess how humans are different before moving on to how they are different. The broad categories of human similarities also facilitates the design and implementation of community and organizational ethnographies, and the analysis of the data from such research, by providing somewhat standardized categories, that are flexible as more is learned about the phenomena under study.

2.2. The Cultural Systems Approach to Change (the CSAC)

The CSAC was the second CEHC paradigm to evolve. Its evolution was also heavily influenced by my experiences at UNC. While the theoretical and methodological foundations of the CSP resided with my graduate training and ethnographic experiences prior to coming to UNC, the CSP did not emerge as a well-articulated theoretical and methodological paradigm until I began my food related research in North Carolina. During my early years at UNC, one of the dominant research foci in the School of Public Health was in risk factors for hypertension and other cardiovascular diseases, for which food behavior, or diet was considered a key risk. Because of the strong health promotion and disease prevention (HPDP) orientation of

the school, a primary reason for health research was to inform HPDP programs. After several years of epidemiological and ethnographic research in one rural county (See Whitehead 1984, 1992, 2002),) it became apparent to me, that if one expected to attempt to change food behavior in such communities, then such behavior had to be studied as part of a complex system with cultural, social, economic, historical, and psychological components (See Whitehead 1984). This was a position taken by nutritional anthropologists working in other cultural settings. For example, the cultural ecological view of food research advocated by Jerome, Kandel and Pelto (1980) was quite influential on my own thinking at this time:

"Food, by virtue of its pivotal place in human experience is at once, a bundle of energy and nutrients within the biological sphere, a commodity within the economic sphere, and a symbol within the social and religious spheres. Food ideas and attitudes, socioeconomic structure, patterns of resource allocation, dietary intake, and nutritional status [have] to be studied holistically as part of a single system. Techniques of food production affect the natural environment, which in turn influence dietary requirements. Patterns of land tenure, food distribution within the society, family traditional cuisines, personal tastes, and financial pressures will influence what people will eat and how well nourished they will be. Differential nutritional status, by making some people more fit than others has wide sweeping social, political, and economic implications." (Kandel, Jerome, and Pelto 1980:)

It was the North Carolina food research that led to one of the core theoretical assumptions of the CSP, and that is.

If a particular behavior or ideation is practiced or held by a significant number *within a human community, and* over multiple generations, *than it is quite likely that this behavior or ideation* is part of a cultural system.

This particular assumption of the CSP led to a theoretical assumption about planning change through CBIs:

if a particular ideation or behavior is part of a cultural system, *than if that behavior is to be changed, programs oriented towards such change must take* a cultural systems approach to change.

This particular assumption led to the emergence of the CSAC, which is a comprehensive model for conceptualizing the planning, implementation, and evaluation of *effective* community based, or *culturally systemic*[6] planned change.

In this working paper, the primary categories of the CSAC are briefly presented. Similar to the CSP, more detailed discussions of these categories are provided in a CSAC Working Paper, and in various CEHC programs in which the CSAC is used. Following the orientation of change initiative in communities or other social system, the CSAC has three major conceptual categories (See Appendix 1, Figure 3, which are:

(1) the Desired Outcomes (ultimate goals and/or objectives);
(2) Process Input Programs that must be carried out throughout various phases of a change initiative, if desired outcomes are to be effectively achieved; and
(3) Instrumental Input Programs that must be put in place in the early phases of a change initiative if the project's desired outcomes, process input programs, and other instrumental input programs are to be effectively implemented and achieved.

The adoption of "Desired Outcomes" as a major CSAC category evolved from my work with community based organizations, assisting them with project planning. In helping them understand what *ultimate*

---

[6] The phrase, cultural systemic, is used to suggest that the CSP is used to carry out analysis of cultural systems beyond simply local communities, total societies, ethnic or national groups, or communities. (See Section 3.1.2. for discussion of other cultural systems).

goals or objectives were, I would ask them *what did they desire* to eventually come from their various project activities. Thus, desired outcomes, is a generic term used for ultimate goals or objectives of a project.

From the literature and my many years working with CBIs, the ultimate goals/objectives of most community initiatives fall in the following six areas (See right column of Figure).

(1) Changes in Knowledge (about the targeted problem, how to avoid or prevent the problem, or how to overcome it).

(2) Change in Attitudes (that put persons at risk for the particular problem, or prevent them from overcoming the problem).

(3) Changes in Behaviors (e.g. decrease in behaviors that puts one at risk for diabetes, or increase in behaviors to overcome such problems, or their impact).

(4) Change in a targeted Health Problem (e.g., increase in the morbidity or mortality from the target health or social problem)

(5) Empowerment (capacity building) or enhancement in the capacity of individuals, families, and/or communities to effectively respond to a health problem, e.g., AIDS, and its deleterious impact.

(6) Sustainability or Institutionalization of the changes (knowledge, attitudinal, behavioral, health status, and/or empowerment) initiated by a community based intervention.

(7) Diffusion of the changes initiated by a community based intervention project beyond those originally exposed to the CBI's intervention

The achievement of the various outcomes is dependent on the achievement of the project's intervention strategies, or input programs. As briefly mentioned above, I have divided input programs into two categories: Instrumental Input Programs (those that have to be put in place in the early phases of a program for its success) and Process Input Programs (those that are ongoing through several phases of a program, if not throughout its duration). Among CSAC's Instrumental Input Program categories are the following:

(1) Resource Development refers to the <u>fiscal</u>, <u>spatial</u>, <u>personnel</u>, <u>technological</u>, and other resources needed to carry out the proposed project. It addresses, in particular the issue of project financing and training that a number of scholars think are critical to a project not only being able to achieve its desired outcomes, but also to sustainability (e.g., see Shediac-Rizkallah and Bone (1998).

(2) Community Involvement/Participation refers to the involvement of members of the community or population targeted by the population, the strategies to secure community involvement, as well as strategies to develop partnerships and coalitions in the design and implementation of the project.

(3) The Development of "Culturally" and "Community/Population Appropriate Materials". The CSAC holds that in order for a CBI to achieve its desired outcomes, it will need to develop materials for *all* of its input programs (.i.e. materials for resource development, community participation/coalition development, intervention development and implementation, staff monitoring, research and evaluation activities, and materials for the development of materials). The CSAC also holds that efforts must be made to make sure that project materials for all project materials are *culturally* and *community appropriate*[7].

---

[7] The CSAC uses the concept of cultural appropriateness to include other related concepts such as cultural competency, relevancy, and sensitivity. The CSAC considers **community** (local) **appropriateness** to be as important as **cultural appropriateness**. For example, one might consider a project carried out among Latinos in Los Angeles to be culturally appropriate for American Latinos in general. However, such a project might not be community appropriate for Latinos in Washington, D.C., and may not be

(4) The Development of "Culturally" and "Community/Population Appropriate" Intervention Programs. Consideration for the cultural appropriateness of interventions is now a standard in most CBIs carried out in the United States, and is necessary given the extensive cultural, social, economic, and regional diversity in the U.S.

Included among the CSAC Process Input Programs are:

(1) The Monitoring and Continual Assessment of Staff Needs. The numerous input programs of the CSAC needs an array of different types of staff skills and abilities, carried out over different periods of project implementation. The CSAC also suggests that the success of a CBI is dependent of an *ongoing process of mutual learning* and compromise between the culture of the community or population being targeted by the project, and the culture of the project. As such, the CSAC advocates continuous assessment of staff needs during different phases of the life of a CBI.

(2) Research and Evaluation. In the CSAC, research and evaluation (R&E) is viewed as an ongoing process that informs the development and implementation of all Input Programs. Community and cultural assessment carried out during the early phases of a project overlaps with formative evaluation, and formative evaluation evolves into process evaluation, process evaluation into outcome evaluation, and outcome evaluation evolves into impact evaluation[8]. The research methods include a range of qualitative and quantitative methods described in detail in Program Technical Manuals (PTM) for two CEHC Systems, "Ethnographically Informed Community and Culture Assessment Research Systems" (EICCARS) and "Ethnographic Assessment and Evaluation Systems" (EAES) (presented later in Section 3 of this working paper).

(3) Implementing Culturally and Community/Population Appropriate Intervention Materials and Methods. Of all of a CBI's input programs, the most relevant to achieving its desired outcomes is the implementation of the culturally and community/population appropriate intervention materials and methods after they are developed.

(4) "Energizing" Community Cultural Systems is a CSAC Process Input Program that is related to the Instrumental Input Program of Community Participation/Involvement, and the Desired Outcomes of Empowerment (or capacity building), Sustainability, and Diffusion. The CSAC concept of energizing community cultural systems means that community involvement does not stop simply with identifying community residents to participate in a CBI, or calling on their expertise in the design and implementation of culturally and community/population appropriate materials and methods of intervention. Community/population involvement includes the development and implementation of strategies for *energizing* or *enhancing* community *enthusiasm* for a CBI, as the project goes on. Enhanced community enthusiasm as the project proceeds, will result in enhanced community participation as well, and will enhance the prospects for empowerment, sustainability, and diffusion. We return to the CSP for defining a community's cultural systems as not simply a reference of the different ethnic groups that may exist within a community; but to the sig*nificant social systems of a community or population, and its ideational, behavioral and material* systems. In the case of a CBI, the focus are on those social, ideational, behavioral, and material systems that are relevant to the health or social issue(s) that is/are being targeted by a specific CBI.

---

culturally appropriate because Latinos are not a monotlitic cultural group nationally, and they are not a monolithic cultural group in large metropolitan areas, as Latinos come from different nations in Latin America.

[8]

2.3. The Cultural Systems Approach to Program, Planning and Implementation (the CSAPPE)

The third and final theoretical paradigm of the CEHC is the "Cultural Systems Approach to Program, Planning and Implementation" (the CSAPPE). I received my PhD from a traditional department of anthropology, and studied with some of the leading cultural anthropology theorists at the time (George Peter Murdock, John Gillin, Alexander Spoehr, Hugo Nutini, and others), and the CSP and the CSAC demonstrated the usefulness of this training in the non-anthropological setting that I found myself working at the University of North Carolina. However, theorizing about community based initiatives were not enough in this setting, particularly in the department in which I worked, the Department of Health Behavior and Health Education (HBHE). During most of the time that I was at HBHE, the department was chaired by Guy Steuart, along with other faculty like John Hatch, Leonard Dawson, and Allen Steckler, the orientation was overwhelming community action. Working with these guys, I could not stop with the CSP and the CSAC as theoretical models, but needed to demonstrate how the benefits of these paradigms into instruments of change, which was only possible through the transfer of their capacities, to those in the communities being targeted for change. As such, whereas the CSAC is primarily a paradigm for conceptualizing effective community based change, the CSAPPE is primarily *a paradigm for operationalizing the categories of the CSAC* in order to effectively achieve *design*, *implement*, and *evaluate* effective CBIs. In other words, the CSAPPE provides the processes used in carrying out all CEHC programs. That opreationalization of the CSAC and CSP categories are the programs of the CEHC, and will be briefly outlined in the discussion of those programs, provided in Section 3 below. These programs are discussed in greater detail in the working papers on each.

3. The CEHC Applied Research and Technical Assistance Subsystems and Programs

3.1. Programs of the Ethnographically Informed Community & Cultural Assessment Research System (the EICCARS).

There are two programs in the Ethnographically Informed Community And Cultural Assessment Research System (the EICCARS): (1) The EICCARS Approach to Community Assessment Research; and (2) The CEHC Approach to Cultural Systems Analysis.

3.1.1. The EICCARS Approach to Community Assessment Research

The EICCARS is a multi-method research system informed by the CSP. The EICCARS is used to collect *holistic* or systemic data about local communities and other cultural systems that are then used to design and implement change initiatives. There are ten research methods programs in the EICCARS, any mix of which are used in the assessment of local communities. Each of these programs are based on one of the ten research methods that are used in the EICCARS. The programs are:

(1) Establishing Community Profiles with the Analysis of Statistical and other Secondary Data.
(2) The Physical Mapping of Human Communities: Using Maps and Geographical Information Systems (GIS) Technology in Community Assessment Research.
(3) Using the Classical Ethnographic Methods of Observation & Participant Observation in Community Assessment Research.

(4) Using Ethnographic and Semi-Structured Interviews in Community Assessment Research.
(5) Using Focus Group Interviewing in Community Assessment Research.
(6) Using Structured Interviews and Survey Methods in Community Assessment Research.
(7) Social Mapping: Assessing Domestic Unit, Family, Kinship, and Social Network Composition in Community Assessment Research
(8) Using Ethnohistorical Methods in Community Assessment Research.
(9) Using Audio-Visual Techniques in Community Assessment Research.
(10) Management, Analysis, and Presentation of EICCARS Data.
(11) Training in EICCARS Methods for Community Based Research Assistants, Community Residents, and the Personnel of Public Agencies and Community Organizations.

These programs and the methods used in each are discussed in greater detail in the Program Technical Manuals that are being developed for each.

3.1.2. The CEHC Approach to *Cultural Systems Analysis.*

As mentioned earlier, the CSP is used to inform the analyses of cultural systems beyond simply local communities, total societies, ethnic or national groups, or communities.   For example, the conceptualization of the CSP has allowed me and my colleagues to be able to treat any of the social systems within the CSP (see Figure 2A) as cultural systems, including: (1) *residential groups* such as households and families; (2) *extra-residential human systems that* may exist at the local level, the region, or the wider society, such as ethnic groups, social networks, kinship groups, peer groups, work groups, religious and other organizations, volunteer associations, service institutions, and government agencies and bureaucracies; and (3) inter-societal associations and systems.

The CSP is used to study these various social systems as cultural systems if they have the following characteristics: (1) have preferred social relationships or structures; (2) have preferred (or normative) idea systems and behavior patterns, and preferred modes of expressing these ideas; (3) have valued and other objects that have been produced by the group; (4) exist within certain physical and social environments; (5) have a shared sense of needs that the group attempts to meet; and (6) have shared historical events and processes that group members either explicitly know, or are tacitly influenced by.

The analysis of a number of these other cultural systems may also be included in any assessment of a local community, either as part of such communities, or as part of wider ecology that affects local communities (societal agencies and policies or cross societal environments and relationships). And finally, similar to the way the CSP is used to study various social systems as cultural systems, the CSAC allows us to conceptualize the planning, implementation, and evaluation of projects carried out by or in these systems, as it also informs similar change activities in communities.

3.2. The CEHC Program in Community Based Intervention Project Design and Implementation Plan (PDIP): The Project Culture Development Workshop

The CEHC System for CBI Project Design only has one program, a 2½-day, nine-session workshop that I call the "Project Culture Development" (PCD) Workshop. The reason that the workshop is so titled is because from my three decades of work with CBIs, I continue to find that most CBI personnel are not clear about what the goals and objectives of their project are, or what the strategies needed to achieve those goals and objectives should be. Even when CBI's leadership is able to provide some clarity about these issues, the clarity is usually not voiced or followed by all project personnel who may play critical roles in carrying out various strategies important to the achievement of project goals and objectives. I

have found this "sharing of a project culture" to be even more elusive in projects with multiple stakeholders or collaborations with multiple partner organizations. Part of this elusiveness seems to be related to the fact that the strategies needed to develop a project culture is not considered important enough to build into the proposal seeking funding, and as such is not included as an important activity to undertake after the project is funded. Yet my experience has also taught me that the exclusion of an activity early in the history of the implementation of a CBI, in order to get those important to the project "on the same page," is a major reason that such projects do not achieve the success that was originally proposed or envisioned.

The goals of the PDIP is similar to those found in "empowerment evaluation"(See Fetterman et al 1996; Fetterman 2001). However, whereas the empowerment evaluation advocates focus primarily on evaluation, with some discussion of its relationship to program planning, the CEHC is a model that integrates program planning with implementation and evaluation, and as such the PDIP works with organizations in planning their programs so that implementation and evaluation follow program design and implementation plan. Whereas empowerment evaluation workshops last from a couple of hours to a half day, the PDIP is a 2½-day workshop provided to the leadership of CBIs in order that they might review and incorporate the concepts and methods of the CSAC and CSAPPE into their project designs. The project leadership who might attend PDIP workshops include the following: (1) the project director, co-directors, and specific project program coordinators; (2) the representatives of all organizations that are to be involved in project implementation; (3) the coordinators of all project implementation activities, including all research and evaluation research activities; and (4) any other persons who have major supervisory or technical responsibilities for achieving project tasks. However, project leaders may want to have other staff members there, as well as others to make sure that they are socialized into the project design from the start. Moreover, if the project is small or has a small leadership, CuSAG recommends that non-leadership staff may be present in order to create at least 6 small groups of no less than 2 members each. The PDIP workshop is divided into 9 sessions of short lectures, small group activities, and small groups reports back to the full workshop participant group. Appendix 3 provides a general outline of the activities that are usually included in the PDIP workshop:

3.3. The CEHC System in Project Implementation Programs (PIPs)

The CEHC System in the implementation of community initiatives closely follows the implementation plan that emerges from the PDIP workshop. The plan is usually informed by the categories of the CSAC, and results in the creation of a schedule of project activities that are closely followed in project implementation. There are three categories of programs in the CEHC System in Project Implementation Programs (PIPs):

(1) CSAC *INPUT Programs* in CBI Implementation based on the CEHC Paradigm, the Cultural Systems Approach to Change (the CSAC);
(2) The CEHC Program in *PHASIC Project Implementation*; and
(3) The *FULL CEHC Program* in CBI Implementation.

3.3.1. CSAC INPUT Programs in CBI Implementation

As stated earlier, input programs in the CSAC are those proposed in order to effectively achieve a CBI's desired outcomes. It was also stated that there are eight CSAC input programs, four Instrumental Input Programs and four Process Input Programs. In the CEHC, there have been strategies developed in all eight programs. These programs and related activities are simply outlined below. The following are only

outlines of the eight programs. More information on each can be found in the more detailed CEHC PTMs that are being developed for each of the programs.

The four CEHC Instrumental Input Programs are:

(1) The CEHC Program in Project Resources Development provides strategies to assist CBIs in putting their fiscal, spatial, personnel, equipment, technological, and other resources in place in order to achieve its Input Programs and Desired Outcomes (goals and outcome objectives).

(2) The CEHC Program in Community Participation and Collaboration provides strategies in facilitating the involvement of members or residents of the community/population targeted by the CBI, community coalition building and partnership development, and moving the CBI towards full community ownership.

(3) The CEHC Program in the Development of Culturally and Target Community/Population Appropriate/Relevant Materials provides strategies in the development of culturally and community appropriate and relevant project materials needed in the implementation of all eight of the CEHC INPUT Programs.

(4) The CEHC Program in the Development of Culturally Appropriate/Relevant Intervention Strategies provides strategies in the development of interventions that are culturally and target community/population appropriate and relevant.

The four CEHC Process INPUT Programs are:

(1) The CEHC Program in Monitoring CBI Staff Needs provides strategies in assessing and addressing CBIs staff needs throughout the life of the CBI.

(2) The CEHC Programs in Research and Evaluation provides strategies in: (a) community assessment research using the programs and methods of the EICCARS (See Section 3.1.); and (b) the evaluation of CBIs using the EAES programs in formative, process, outcome, and impact evaluation (See Section 3.4).

(3) CEHC Program in the Implementation of Culturally and Target Community/Population Appropriate/Relevant Intervention Strategies provides strategies in implementing the culturally and target community/population interventions that have been developed by a CBI.

(4) The CEHC Program in "Energizing" Community Cultural Systems provides strategies in increasing the enthusiasm of the target community/population's participation in the CBI.

3.3.2. The CEHC Program in PHASIC Project Implementation

There are three major strategies in the CEHC Program in PHASIC Project Implementation:

(1) carrying out a PCD Workshop to establish a phasic project design;

(2) conducting one-day Phasic Implementation Workshops (PIWs) at the end of each project phase; and

(3) providing simple (one page) "Project Barriers and Enablers Recording Forms" (PBERFs) to be used by project staff members and returned to the CAA or CuSAG for analysis;

(4) analyzing the PBERFs and using the analysis for facilitating discussions at subsequent PIWs.

These strategies are discussed in greater detail in the more detailed CEHC PTMs that are under development

3.3.3.   The FULL CEHC Program in Project Implementation.

The FULL CEHC Implementation Program includes utilizing all of the other implementation programs in combination, including:

(1) some of the EICCARS methods used in carrying out community assessment research;
(2) the PCD Workshop to help get all project stakeholders and staff on the same page in terms of how the project will be implemented;
(3) the INPUT Implementation Programs in terms of actually implementing the project for maximum success; and
(4) The Phasic Implementation Program to help project stay on course in their efforts to achieve their outcome objectives and long-term goals.

More information on the FULL CEHC Implementation will be provided in the more detailed PTM that is under development.

3.4. The CEHC Ethnographic Assessment Evaluation System (EAES): Evaluating for CBI Success Rather than "Failure"

3.4.1.   Addressing Potential Conceptual and Ethical Issues in Offering Technical Assistance Following Evaluation Recommendations.

As seen in the following discussions of formative and process evaluation, the CEHC offers CBIs technical assistance in helping them meet the recommendations that emerge from the evaluations. Such offers of technical assistance are related to a philosophy in the CEHC of evaluating for project success rather than failure. However, there are some conceptual and ethical issues related to combining evaluation and technical assistance. Traditionally, technical assistance was considered conceptually different exercises (unless it was technical assistance to a CBI in terms of how to evaluate their own programs). Moreover, for evaluators to offer technical assistance in meeting their own recommendations is subject to serious abuse (e.g., are certain evaluation results offered simply to allow the evaluator to make further profit from the evaluation). Within the CEHC there are procedures that have been developed for overcoming such problems, in particular putting the issue out front prior to starting the evaluation and let the client reject such offers.

3.4.2.   EAES Formative Evaluation Programs

There are two EAES Formative Evaluation Programs, one that overlaps with the EICCARS and one that overlaps with the PDIP. The EICCARS Based Formative Evaluation Design has the following strategies:

(1) Using the EICCARS Program Technical Manuals (PTM) to assess whether a CBI has carried out community assessment research to gain knowledge about a community and to inform its project design and implementation plan, and if so what were the methods and findings used in such research; and
(2) providing recommendations based on the EICCARS based findings; and
(3) offering technical assistance in meeting EICCARS based recommendations.

The PDIP Based Formative Evaluation Program has similar strategies:

(1) using the PDIP Program Technical Manual (See Section 4) to assess whether a CBI has a project design/implementation plan;
(2) if it is found that there is such a plan, determining what the desired outcomes (goals and long term objectives) are, and what were the strategies and tasks, task assignments,

timelines included in the plan, and if there were any barriers and enablers associated with the plan;

(3) providing recommendations based on the PDIP assessment; and

(4) offering technical assistance in meeting PDIP assessment recommendations.

3.4.3. EAES Program in Process Evaluation and Project Monitoring

The EAES Program in Process Evaluation starts with many of the strategies

included in the EAES Program in Formative Evaluation discussed above, so as to establish a baseline for carrying out a phasic evaluation process. That is, the EAES Program in Process Evaluation includes the following strategies:

(1) using the EICCARS PTM to assess whether a CBI has carried out community assessment research to gain knowledge about a community and to inform its project design and implementation plan, and if so what were the methods and findings used in such research;

(2) using the PDIP Manual (See Section 4) to assess whether a CBI has a project design/implementation plan;

(3) if it is found that there is such a project design/implementation plan, determining what the desired outcomes (goals and long term objectives) are, and what were the strategies and tasks, task assignments, timelines included in the plan, and if there were any barriers and enablers associated with the plan;

(4) if there is no project design/implementation plan, or the existing plan is not organized into project phases, recommending the immediate implementation of a modified PCD workshop to develop a plan organized into phases; .

(4) once the project design/implementation plan is completed so that the project can now be utilized, carrying out the EAES phasic evaluation activities, using the same techniques as used in the CEHC Phasic Implementation Program: (1) Phasic Workshops; and (2) Project Barriers and Enablers Recording Forms (PBERFs);

(5) complementing the data from the Phasic Workshops and the PBERFs structured questionnaire to assess the achievement of phasic objectives;

(6) complementing the previous three sources of data with other ethnographic techniques such as ethnographic observations and natural conversation, key informant, indepth, or focus group interviews where appropriate;

(7) reporting at the end of each phase the level of achievement of phase objectives, making recommendations as to:

(a) how barriers might be overcome, or enablers enhanced;

(b) whether modifications need to be made in the project design/implementation plan based on phasic assessment findings; and

(c) whether the lessons that seem to be emerging from the assessments of project implementation might indicate, that the original outcome objectives may not have been appropriate for the community/population targeted by the CBI.

3.4.4. The EAES Program in Outcome Evaluation

There are two EAES programs in outcome evaluation:

(1) EAES Program Using More Tradition Approaches to CBI Outcome Evaluation;

(2) EAES Program in CBI Outcome Evaluation with Technical Assistance and Project Monitoring

3.4.4a. EAES's Program Using More Traditional Approaches to CBI Outcome Evaluation

There are two programs in the EAE's more traditional approaches to CBI outcome evaluation outcome:

(1) pre-and post-test measures; and/or
(2) quasi-experimental methods using experimental and control target communities/populations.

A major activity in both of these programs is the development of standardized measures and data collection instruments. For example, in both programs, an "Exposed Pre-Test Interview Guides" (EPreIGs) and an Exposed Post-Test Interview Guide (EPosIG) that are administered to those who were exposed to the CBI, respectively in the pre- and post-test phases of the project. The Quasi-Experimental Program also uses the same instruments. But this program also adds control or non-exposed population samples, necessitating the development of a Non-Exposed Post-Test Interview Guide (NPosIG). The type of intervention used in a CBI (e.g. an intervention utilizing the mass media versus an intervention utilizing interpersonal facilitation) determines how these EAES outcome evaluation programs are carried out, and which structured instruments are used. More details on the techniques used in these outcome evaluation programs are explained in greater detail in the Full CEHC Manual and the EAES Manual.

3.4.4b. EAES Program in CBI Outcome Evaluation with Technical Assistance and Project Monitoring

EAES's Program in CBI Outcome Evaluation with Technical Assistance and Project Monitoring includes many of the same methods used in the EAES Traditional Outcome Evaluation Program. The second CEHC outcome evaluation program also includes, however, some of the technical assistance and monitoring activities used in the formative evaluation and process evaluation programs outlined in Sections 3.4.2 and 3.4.3. above, used as a preface to carrying out these traditional CEHC evaluation approaches. All of the techniques used in this second evaluation program are explained in greater detail in the full CEHC Manual, and the EAES Manual (See Section 4).

3.4.5. The Conceptual Difference Between Outcome and Impact Evaluation as Used in the EAES

In the EAES, the concept of outcome evaluation discussed in the preceding section (3.4.4.), and our use of "impact evaluation," that will be outlined in the next section (3.4.6), are in the reverse order of how they are used in contemporary treatments of these concepts. That is, in most other uses of these concepts, impact evaluation is defined in terms of whether or not a CBI has achieved its desired outcome (long term objectives and goals); whereas outcome evaluation assesses the eventual outcome of the project or the community. In the EAE on the other hand, we refer to outcome evaluation as the assessment of whether a project has achieved its desired outcomes, and impact evaluation is an assessment of the impact of the CBI on the community to which the CBI has been administered. Reasons as to why the EAES differs in its use of these concepts are provided in the more detailed Full CEHC Manual and the EAES Manual.

3.4.6. EAES Programs in Impact Evaluation

In the EAES, it is proposed that its impact evaluation strategies be carried out at least one year following the outcome evaluation so as to assess the *sustainability*, *routinization* and *diffusion* of a CBI's desired outcomes as indicators of true change. To measure such indicators, there are structured instruments that are developed and applied to those who were exposed to the CBI, called the "Exposed Impact Interview Guide" (the EIIG) and the Non-Exposed Impact Interview Guide (the NIIG). But more qualitative

ethnographic methods are also used, such as ethnographic observations, natural conversation, key informant, and indepth or focus group interviews. These methods are also used to assess the impact of a CBI on its target community or population beyond the project's desired outcomes. More information on the impact program of the CEHC is provided in the Full CEHC Manual and the EAES Manual.

References Cited and Related Literature

Feldman, DA (1990). Chapter 4, "Assessing Viral, Parasitic, and Socio-cultural Cofactors Affecting HIV-1 Transmission in Rawanda," IN: Culture and AIDS, DA Feldman (ed.), New York: Praeger, pps. 45-54.

Green LW, Richard L, and Potvin L. (1996). "Ecological Foundations of Health Promotion." <u>American Journal of Health Promotion</u>, 10(4): p. 270-281

See Whitehead 1984, 1992, 2002/

APPENDIX 1: Acronym Glossary

CAR   Community Assessment Research

CBI   Community Based Initiative

CEHC   Cultural Ecology of Health and Change

CSP   Cultural Systems Paradigm, a CEHC theoretical paradigm

CSAC   The Cultural Systems Approach to Change, a CEHC theoretical paradigm

CSSAPPE   The Cultural Systems Approach to Program Planning, Implementation and Evaluation, a CEHC theoretical paradigm

CuSAG   Cultural Systems Analysis Group, a anthropologically based unit at the University of Maryland College Park

EAES   Ethnographic Assessment & Evaluation Systems, the CEHC system of evaluation programs

EICCARS   Ethnographically Informed Community & Cultural Assessments Research Systems, the CEHC system of community & cultural systems research

PBERF   Project Barriers and Enablers Recording Form

PCD   Project Culture Development

PDIP   The CEHC System in Project Design and Implementation Plan

PIPs   The CEHC System of Project Implementation Programs

PTMs   CEHC Program Technical Manuals