BUILDING COALITIONS AMONG COMMUNITIES OF COLOR

A MULTICULTURAL APPROACH

Prepared for
State Partnership Initiative
Office of Minority Health
Office of Public Health and Science
Department of Health and Human Services
Rockville, Maryland 20852
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Prepared by
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Washington, DC 20001

In collaboration with
Out of Many One/Campaign for the Elimination of Racial and Ethnic Disparities

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The views expressed in this document are not necessarily those of the Office of Minority Health, Office of Public Health and Science, or the U.S. Department of Health and Human Services
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About the Cover

The creators of this document recognize that all the communities referenced as “of color” do not necessarily identify themselves in this manner. The term “minorities” is inaccurate in those settings. Further, people of color have sought consciously to move from a deficit to an asset model in describing themselves, preferring to highlight their strengths.

Communities of Color – “Communities of color” is used in this document to describe those racial and ethnic minorities that are identified by the United States Government as statistically distinct groups. These groups have also been given priority attention by the Office of Minority Health because of their well-documented health needs and disparate health status when compared to the total population. The term, “communities of color,” refers therefore to Native Hawaiians and other Pacific Islanders; Latino/Hispanic Americans; Asian Americans; American Indians and Alaska Natives; and African Americans, inclusive of immigrants from Africa and the Caribbean.

“Communities of color” are the focus of this guide in order to convey a message. Those who experience health disparities have an extraordinary opportunity and obligation to assume leadership in seeking health parity and equal access. The guidance offered in this document is intended to encourage people of color to organize and build the capacity to take the lead in closing the gap and changing the graphs. Working hand-in-hand and standing side-by-side, they have the potential to make a measurable difference.

“People of color” and “communities of color” are also used consistently throughout this guide as a conscious effort to move away from the term “minorities.” Seen collectively, racial and ethnic groups increasingly represent the majority in communities throughout the nation, so the word “minorities” is inaccurate in those settings. Further, people of color have sought consciously to move from a deficit to an asset model in describing themselves, preferring to highlight their strengths.

The creators of this document recognize that all the communities referenced as “of color” do not necessarily identify themselves in this manner. The term is used as a unifying concept to bring together groups who share similar experiences and challenges in the context of the United States. Those who use this guide may wish to substitute descriptions of themselves that they feel are more accurate and appropriate.

Among – Use of “among” in the title has two purposes. First, different communities of color are invited to find ways to work together in coalitions. Second, there is a growing recognition of the need for coalition-building within communities of color. For example, there are 558 independent Indian nations. Latino/Hispanic Americans hail from 23 different countries. African American, Asian, and Pacific Islander communities clearly are diverse. Intra- and inter-group coalition-building may proceed sequentially or at the same time. This guide is intended to be useful in either case.

A Multicultural Approach – This part of the title speaks to the intention of the guide’s creators to energize stakeholders from every arena to help build coalitions among communities of color (CACCs.) The authors recognize that these coalitions may be launched by persons or entities that are not from communities of color. It is also important that CACC leaders seek and welcome support from a wide range of resource persons and decision-makers from the broader community. Thus, these individuals may become actively involved in coalitions among communities of color as members, staff or contributors. However, an important premise reflected throughout the guide is that leadership of coalitions among communities of color should rest in the hands of those who have direct experience with the challenges to be addressed. This point of view is well expressed by the phrase, “Not about us without us.”

The inspiration for the logo on the cover comes in part from a Pacific Island handicraft called the Kapingamarangi Heart, created by the Kapingamarangi People. Islanders believe that within every human heart there are bright colored threads that are interwoven into a solid material. Each unique and irreplaceable strand of thread represents the spirit and contribution of one’s ancestors. Each thread honors our elders and ancestors for their knowledge and experiences, remembering that we are but the most recent of generations and have multitudes of elders sitting upon our shoulders. It is this woven compilation of threads that forms the basis of who we are. We are the sum total of their former lives, and it is from them that we garner strength in time of need.*

In the same spirit, the heart of America is enhanced by the bright multi-colored threads that represent our various communities of color. The turquoise blue represents our environment, which we influence and which affects us as well. Orange represents energy and passion for life. Red represents prosperity and good fortune which is our collective promise and potential. The rich brown of Mother Earth reminds us of our roots — our connectedness with our history and heritage. Green conveys the enduring vitality of persons of color, who have survived and thrived despite external challenges. From these strands can emerge a new creation — a coalition of strength and beauty, as symbolized by the design inside the heart.

The heart also reflects the emphasis that must be given to relationships, trust, mutual respect, and caring in coalition-building in communities of color, as contrasted with a single-minded focus on the head, or cognitive functions.

The Title

Coalitions – As described in this guide, the word “coalitions” connotes entities comprising organizations and individuals that have come together for a common purpose and that function independently on behalf of the coalition’s members. Although it is understood that some of these groups are short-lived, the coalitions envisioned in this document are those that are prepared to make a longer-term commitment to work together to address issues requiring sustained effort.

The Logo

Every culture manifests creative energy in the form of designs that may adorn pottery, woodwork, musical instruments, precious metals and jewels. Distinctive designs in textiles represent yet another form of this universal life expression. The border of this guide presents patterns that can be found among the five major racial and ethnic groups that are featured in this guide.

*This explanation was provided by Nia Aitaoto, Cancer Council of Pacific Islands.
MESSAGE

July 2004

Establishing coalitions is clearly an idea whose time has come. Frequently, however, coalitions have been relationships of convenience, launched to take advantage of a short-lived funding opportunity. When resources are no longer available, temporary partners have gone their separate ways.

This document has been published as a guide to develop a different kind of coalition. I refer to a collaboration that draws on the strengths and assets of communities of color to help eliminate health disparities and achieve expanded access for racial and ethnic minorities. Constructed with care and commitment, these partnerships have the potential to serve as strong, effective change agents over time, illustrating the Korean proverb: “One chopstick breaks easily. Many chopsticks cannot be broken.”

It is clear that solutions to unequal treatment in health care delivery and the unequal burdens of death and disease cannot come from the Federal government alone. That is why the Office of Minority Health believes that it is so important to encourage coalition-building at national, state, and local levels. We recognize that building and sustaining partnerships among communities of color is hard work. We are committed to support and advocate for racial and ethnic minority groups who work together, fully cognizant that effective community partners are essential if we are to attain the goals of health parity and equal access by 2010.

I invite you to study this document, put its guidance into practice, pass on the coalition-building strategies to others and tell us about your results. Knowing that you have been aided in closing the health gaps experienced by communities of color is the best possible indicator of this project’s success.

Nathan Stinson, Jr., PhD, MD, MPH
Deputy Assistant Secretary for Minority Health
Rationale for This Guide

What Makes Coalition-Building among Communities of Color Different from Coalition-Building in General

Who Should Use This Guide

How to Use This Guide
Building Coalitions Among Communities of Color
A Multicultural Approach

Introduction

‘Of all forms of inequality, injustice in health care is the most shocking and inhuman.’
Rev. Dr. Martin Luther King, Jr.

Winds of change are gaining momentum. In 2000, the Department of Health and Human Services, joined by other government, business and community leaders, set a date — 2010 — for the nation’s racial and ethnic groups to reach parity in health. In 2002, the Institute of Medicine issued the landmark Unequal Treatment, another urgent call to action. That report, subtitled Confronting Racial and Ethnic Disparities in Health Care, confirmed beyond any doubt, that race and ethnicity matter in health status and treatment. The Healthcare Disparities Report of the Agency for Healthcare Research and Quality, released in 2003, offers further evidence that health is color-coded in America, to the detriment of racial and ethnic minorities.

For Americans of African descent, American Indians and Alaska Natives, Asian Americans, Hispanic/Latino Americans, and Native Hawaiians and other Pacific Islanders, this newest evidence substantiates what they have known for centuries. People of color understand that living with the status quo means dying from preventable causes too soon. For many, inaction can no longer be an option.

Rationale for This Guide

People of color are attaining majority status in states and communities across the nation and, according to the United States Census, now comprise a third of the U.S. population. New faces and cultures are appearing in communities where they have never been before. Recognition is growing that providing quality care means responding to racial and ethnic diversity with sensitivity and competence. Moreover, as cost-effectiveness becomes the watchword, funders are signaling their preference for working coalitions, partnerships, and networks to maximize efforts to tackle common goals.

Underserved racial and ethnic minority groups have responded to these changing realities. They are organizing in neighborhoods, city-wide, across counties, state-wide, and nationally. Tackling health disparities and expanding access to health care have become common targets for advocacy. People of color are voicing increased demands for services that meet their cultural and language needs. In addition, leaders from communities of color have increasingly embraced coalition-building as a tool to address health disparities and changing social, economic, and political community dynamics. Some have focused on harmonizing different voices within their communities. Others have joined broad-based coalitions that are led by non-minority agencies. Still other people of color have assumed leadership of community networks, in which multiple racial and ethnic groups play a role.

At the same time, people of color are turning to each other as they focus on shared challenges and the need to mobilize for change. The result is coalitions among communities of color (CACCs). These coalitions are multicultural, multi-racial, and multi-ethnic. These networks may also be described as racial and ethnic minority coalitions. In these coalitions, persons from diverse groups who are experiencing disparities provide leadership. They also predominate among coalition participants. Although representatives from non-racial and ethnic minority groups and individuals may be involved, it is clear that they are invited to participate in the CACC in a supportive, rather than a leadership, role.

In other words, members of racial and ethnic minority groups share a bond that is linked to their proud histories and common experiences in the United States. This sharing has given rise to assets for relationship- and coalition-building that are not always valued, or even recognized, in other kinds of networks.

Thus, the assumption of leadership by people of color in CACCs has implications not only for diversity, but also for attentiveness to such dimensions as: particular sensitivity, passion, and enthusiasm for the issues being addressed; focused attention on personal relations; valuable life experiences that can inform solutions; sensitivity to shared and different communication styles; and similar encounters with societal institutions.
What Makes Coalition-Building among Communities of Color Different from Coalition-Building in General

Builders of these coalitions among communities of color have to know the basics. Coalitions of all kinds operate best if certain rules are observed. They must set a vision, evaluate their progress and outcomes, solidify an organization, and stabilize their finances. Certain communications and group management principles apply, no matter who is involved.

CACC organizers have to cover these bases, and more. The heart symbol on the cover conveys a message. Drawing on their shared experiences, organizers of these coalitions must give priority to building trust and mutual respect, relationship-nurturing and cementing personal ties — frequently, even before they focus on a vision, mission, goals and organizational structures.

CACCs have a vested interest therefore in making operational this guide’s main themes – create, connect, commit, and celebrate — by emphasizing the heart at every stage. As presented in the discussion of Strategy 4, “Build Trust and Mutual Respect,” specific activities can greatly facilitate collaboration among racial and ethnic groups which are rarely, if ever, described in more generic guides.

Who Should Use This Guide

This guide is intended as a resource primarily for people of color, who are building coalitions in which representatives from communities of color predominate. People of color hold unique positions as prospective agents for positive change in our society. This resource document offers guidance for maximizing their abilities as change agents by enhancing skills in the following areas:

- Coalition-building
- Strategic planning
- Inter-group relations
- Organizational development
- Group maintenance
- Evaluation

The primary audience for this guide comprises persons from three groups:

1. Underserved racial and ethnic groups (specifically, African Americans, American Indians and Alaska Natives, Asian Americans, Hispanic/Latino Americans, and Native Hawaiians and other Pacific Islanders) who may have already exercised leadership in bringing people of color together, but who want to function more effectively
2. Individuals who should find this document a resource for building new coalitions among communities of color
3. Individuals and agencies who seek to serve as catalysts for coalition-building among people of color

Although their leadership roles may be temporary, the third group listed can play constructive and important roles in launching CACCs. State minority health entities are in the forefront of this group, along with foundations, public health agencies, unions, corporations, and advocacy groups, as well as organizations and individuals interested in multicultural work.

This guide is directed toward those who seek to address health disparities, health access, and other health issues. The information, however, is clearly transferable to other fields. It is also intended for persons who will present the information it contains to others. Adult learners typically rely on prior knowledge and experience when processing new information. Accordingly, users of this document should consider the guidance presented as “food for thought” — ideas they can use as they build and strengthen CACCs.

How to Use This Guide

This guide presents ten strategies and their corresponding steps. Strategies are key building blocks for the construction of a CACC. The absence of any of these key elements could result in an organization’s failure to reach its full potential. Steps represent activities that, based on experience, can be effective ways to attain each strategy. The reader will find illustrations of how strategies and steps are understood and applied throughout the document, in the form of exhibits, sidebars (vignettes, anecdotes and parables), quotations, and lessons learned/insights.

At the same time, the authors of this guide recognize that CACCs are as unique as the people who participate in them. Although it is expected that the proposed strategies have nearly universal applicability, experience teaches us “one size does not fit all.” Further, the steps outlined to implement them may differ from one community to another. In addition, based on where they are in their own coalition-building process, CACCs may determine where to enter the coalition-building process. (See Figure 1, which depicts the interactive, circular process intended.) In short, since coalition-building among communities of color is dynamic, these strategies and steps may work
best when viewed as guidance rather than a recipe. Users of this guide are invited therefore to assume ownership of it, by incorporating case studies, quotations, examples, and learning tools that reflect their own experiences.

The ten strategies, mentioned above, are organized under four tabs, Tabs 2-5, as follows:

- **Tab 2 – Create** — describes the activities recommended to plan and initially organize a CACC.
- **Tab 3 – Connect** — presents actions that will help the group to become well grounded as an organization.
- **Tab 4 – Commit** — provides information that will help the group function effectively over time.
- **Tab 5 – Celebrate** — describes the importance of celebration to the CACC’s success.

The charts on the following pages present a summary of the ten strategies and related steps or activities.

CACCs are different from other coalitions for many reasons; therefore, experiences with other non-CACC networks do not necessarily transfer. That is why we believe that this resource document is making a unique contribution to the field — a tool for the empowerment of communities of color. We will have achieved this goal if use of this guide contributes to strengthening or creating effective CACCs that are as diverse as the people they represent, and that collectively enable people of color to attain health equality by 2010. That will be a time of national celebration, for surely, everyone will benefit when that day dawns and all can behold the beauty of a dream fulfilled.

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**Figure 1**

Four Cs of Coalition-Building among Communities of Color

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“Be the change you want to see in the world”

Mahatma Gandhi
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<th>Strategy 1: Launch the Coalition</th>
<th>TAB 2 — CREATE</th>
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<td>Step 1-2 Put relationships first</td>
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<td>Step 1-3 Identify an initial vision and common concerns as possible organizing issues</td>
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<td>Step 2-4 Honor different communication styles</td>
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<td>Step 2-6 Take inventory and, if necessary, seek funds for the coalition's work — as a team</td>
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<th>TAB 3 — CONNECT</th>
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<td>Step 3-4 Plan and hold organizing meeting of the coalition</td>
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<td>Step 4-12 Take time to discuss issues of race and ethnicity</td>
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<td>Step 5-3 Take a community inventory</td>
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<tr>
<td>Step 5-5 Identify areas of consensus and supply supporting documentation</td>
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<tr>
<td>Step 5-6 Take time to craft a CACC vision, mission, and values that everyone endorses</td>
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**Figure 2 (cont’d)**

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<th>Step 5-7</th>
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<td>Step 7-1</td>
<td>Decide on the CACC’s life span and revalidate that decision periodically</td>
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<tr>
<td>Step 7-2</td>
<td>Examine options available for organizing the CACC</td>
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<tr>
<td>Step 7-3</td>
<td>Determine most suitable organization for the CACC</td>
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<td>Step 7-4</td>
<td>Hire an appropriate level of staff to work on the CACC’s behalf</td>
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<td>Step 7-5</td>
<td>Provide training, as needed, to strengthen CACC’s capacity and skills</td>
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<td>Step 7-6</td>
<td>Share leadership</td>
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<td>Step 7-7</td>
<td>Welcome and involve new recruits as CACC members of equal standing</td>
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<td>Step 7-8</td>
<td>Anticipate problems that could pull the coalition apart, and develop plans to handle them</td>
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<td>Plan to pass it on</td>
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<td><strong>Strategy 8: Plan for and Establish Financial Stability</strong></td>
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<td>Step 8-1</td>
<td>Take inventory of resources CACC members can offer</td>
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<td>Step 8-2</td>
<td>Decide who should receive funds for the CACC</td>
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<td>Step 8-3</td>
<td>Identify acceptable and non-acceptable donors</td>
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<td>Step 8-4</td>
<td>Develop short- and longer-term budgets</td>
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<td>Step 8-5</td>
<td>Develop business, marketing, and fundraising plans</td>
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<td>Step 8-6</td>
<td>Seek funding from non-traditional sources</td>
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<td>Step 8-7</td>
<td>Provide CACC members with financial reports on a regular basis</td>
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<td><strong>Strategy 9: Communicate Effectively</strong></td>
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<tr>
<td>Step 9-1</td>
<td>Develop an internal and external communications plan</td>
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<td>Step 9-2</td>
<td>Designate a communications monitor or task force</td>
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<td>Step 9-3</td>
<td>Identify and utilize members’ specialized communications skills</td>
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<td>Step 9-4</td>
<td>Develop the CACC’s logo and other “trademarks”</td>
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<td>Step 9-5</td>
<td>Speak with one voice</td>
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<td>Step 9-6</td>
<td>Address members’ special communication needs</td>
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<td><strong>TAB 5 — CELEBRATE</strong></td>
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<td><strong>Strategy 10: Build on Success</strong></td>
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<td>Step 10-1</td>
<td>Identify opportunities for victory along the way</td>
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<td>Step 10-2</td>
<td>Transform challenges into opportunities</td>
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<td>Step 10-3</td>
<td>Record the CACC’s history and important events</td>
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<tr>
<td>Step 10-4</td>
<td>Invite the community to share in the celebrations</td>
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<tr>
<td>Step 10-5</td>
<td>Celebrate individuals, too!</td>
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Figure 3
Phasing of Strategies for Developing Collaborations among Communities of Color

Strategy 10
Build on Success

Strategy 9
Communicate

Strategy 7
Solidify Organization

Strategy 6
Evaluate

Strategy 8
Stabilize Finances

Strategy 5
Set Vision etc.

Strategy 4
Build Trust

Strategy 3
Expand Circle

Strategy 2
Build Framework

Strategy 1
Launch Coalition
Strategy 1: Launch the Coalition

Strategy 2: Build an Initial Framework for Working Together
Create

“Tell me, I forget. Show me, I remember. Involve me, I understand.”
Chinese Proverb

The information at this tab comprises the planning and initial organizing phases of building a coalition. In a sense, this is the most important phase: “If you fail to plan, you plan to fail.” This phase involves two strategies:

1. Launching the coalition
2. Building an initial framework for working together

Strategy 1: Launch the Coalition

Coalitions among CACCs do not suddenly come into being. They emerge because someone steps up to the plate to get things started. Reasons for initiating the CACC may vary, for example:

- A burning health issue has gained public attention and affects several racial and ethnic groups in the community more than non-minorities.
- A community organization that represents one racial or ethnic group may seek to include new arrivals from other groups in order to address shared concerns.
- A private funding source may be willing to provide resources to support collaborative problem-solving as a means of dealing with a community health problem.
- Inter-group conflicts may be surfacing in the communities of color, which need to be addressed.

Or, someone like Fannie Lou Hamer, heroine of the 1960s’ civil rights movement, may have simply reached the point of being “sick and tired of being sick and tired” and decides to do something about it. The key point is this: CACCs work best when they are created for a purpose. Following are three steps to help your CACC get off to a good start.

Step 1-1: Recruit a core coalition planning committee (core team)

The initiator or catalyst for the CACC may be an individual, several individuals, an organization, or several organizations. Representatives of State minority health entities, in unusual circumstances, may be able to play this role. From the start, however, (s)he or they should plan for an early retirement as the only key player(s).

As quickly as possible, the initiator should seek out a team of colleagues to organize the CACC and begin to share decision-making on an equal basis. To the greatest extent possible, key decisions should be postponed until the entire team is in place.

The initial core team members should meet three criteria:

1. Recruited team members must commit to spend the necessary time. (Building a CACC takes lots of time.)
2. Members of the core team should reflect the significant racial and ethnic populations in the community or target area.
3. Members of the initial decision-making team must be true stakeholders — that is, those who are so well connected with their communities that they can provide trustworthy information about demographics, health statistics, issues, organizational dynamics, and other stakeholders who might be included.

Please note that “significance” may not be determined solely by numbers, but may also be indicated by disproportionate health problems, social and political clout (or the lack thereof), and access to resources. The core team also needs to be aware of the fact that the complexion of one’s community can change, sometimes rather rapidly; therefore, the CACC must remain flexible in order to respond to changing demographics.

The key principle to observe is: “Not about us with-
out us.” In other words, people affected by an issue must be at the table. The important question to ask is: Who’s missing? Once that question has been answered, team members already at the table should move as quickly as possible to fill any missing chairs. When the organizing team is complete, each participating community on the team should have equal representation. (See Building Coalition Infrastructure for a real-life application of this principle.)

The third criterion that initial CACC members must meet is the most important. They must be true stakeholders, who are so well connected with their communities that they can provide trustworthy information about demographics, health statistics, issues, organizational dynamics, and other stakeholders who might be engaged. Stakeholders are individuals who have reasons to be deeply concerned with an issue. The reasons may be organizational (their organization’s mission is to address these issues), or they may be personal (based on a person’s own experiences or the experiences of the racial and ethnic group to which they belong.) (See Who Is a Stakeholder?)

**Step 1-2: Put relationships first**

In traditional societies, many believe that it is who you know, not what you know, that counts. In communities of color in the United States, this saying frequently rings true. Trusting, respectful, even loving relationships represent the glue that sustains successful CACCs, far more than a shared vision or an urgent goal. The core team must be aware of opportunities to build those relationships — first among themselves, with actions that include:

- Introductions that encourage sharing of personal stories, such as describing the “passion” or special gift one brings to the group (See also Strategy 3, Step 4 for other examples.)
- Gift-giving (e.g., sharing a favorite poem or an item of cultural significance – discussed in greater detail under Tab 3, Strategy 4, Step 5)
- “Pot-luck” dinners
- Attendance at each other’s meetings and conferences
- Cultural celebrations (discussed further under Tab 3, Strategy 4, Step 4)
- Special celebrations (such as acknowledgment of birthdays, achievements, and awards — with computer-generated certificates and other means)

In other words, the team should seek every opportunity to help build new and cement existing relationships as the coalition expands (see Strategy 4).

**Step 1-3: Identify an initial vision and common concerns as possible organizing issues**

Coalitions have to have a reason for coming together. Organizers should have a vision in mind when they first bring others to the table. That vision may be broad, such as eliminating health disparities, ending “unequal treatment” in health care delivery, or achieving 100 percent access in their community. This long-term aim may be sharpened, or even changed completely, once the coalition broadens and becomes solidified. But there must be some reason for stakeholders in communities of color to heed the organizers’ call.

The vision is different from an organizing issue. In some communities, organizing “targets of opportunity” may be topical issues, such as hospital closings, cuts in health funding, the availability of tobacco funds, or the release of reports documenting an urgent health problem. The initial issue or issues may not be the concern(s) the CACC ultimately agrees to include in a long-range strategic plan. But it is important to find a problem that can serve to as a “rallying cry” to call attention to the need for collective action.

In Los Angeles County, for example, coalition organizers pulled together a Children’s ScoreCard as a tool to organize advocates to oppose state budget cuts. Their data described pockets of poverty and associated health problems across racial and ethnic groups in even the richest communities in the county. Their presentation brought many different groups to the table to work together. Advocates have also used existing resources, such as the Racial and Ethnic Disparities in North Carolina Report Card or the Alabama Chart Book of Regional Disparities in Mortality, to identify urgent issues for possible community action.

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**Who Is a Stakeholder?** A book edited by Wilma Mankiller, former Principal Chief of the Cherokee Nation, includes a story about the Cherokee people whose ancestral lands were on the verge of being flooded by the Tennessee Valley Administration. The people were deeply grieved and many refused to leave. As the waters rose, one man pounded a stake in his front yard and chained himself to it. His stake in his land, his people, and his heritage were things for which he was willing to die.

**Lesson Learned:** People of color, for whom disparities are a life and death matter, are the essential stakeholders in coalitions created to address health inequities and bring about change.
Once the CACC initiators have identified the vision and the “organizing” issue or issues (the fewer the better), they can include them in their “call to action” via the media and/or in an invitation to stakeholders to meet to address these concerns.

**Strategy 2:**
**Build an Initial Framework for Working Together**

CACCs may not survive if they do not plan to organize in a manner that sustains them. There must be at least a basic infrastructure to manage the coalition’s business. Some organizations operate with a small managing committee of three (3) to five (5) persons, who serve as a quasi-executive board. Other organizations select conveners or temporary officers, such as a chairperson, treasurer, and secretary. Strategy 2 involves six steps.

**Step 2-1: Create an appropriate decision-making and governing process**

CACCs bring together people with diverse backgrounds, different life and work experiences and, sometimes, varying socio-economic status. Some members of the group may have been exposed to more formalized meetings and procedures. Others may be participating in a group process or formal meeting for the first time. This diversity should be considered when deciding on a process by which decisions will be made. Determining how decisions are to be made requires careful discussion. Whatever the group’s choice, the choice should be made before too many decisions need to be made.

It is also important to keep stakeholders informed about how decisions have been made and who made those decisions. Such openness will prevent misunderstandings later on. (See Culture and Process.)

**Step 2-2: Determine extent of decision-making by consensus**

For some, consensus means everyone agrees. More frequently, consensus is the expression of the common will of the group. It is the common understanding that enables a group to move forward together, even if they do not agree on all of the details. Reaching decisions by consensus may be warranted on several, if not many, occasions; for example, when deciding on a vision or reaching agreement about long-term goals. Day-to-day decisions may require other means of decision-making, such as authorizing a group (e.g., executive committee) to act on behalf of the group as a whole. Among some racial and ethnic groups, there may be a cultural preference in favor of decisions by consensus, while other groups may be prepared to accept “majority rule” in the interest of time and expediency. At times, it may be necessary to “agree to disagree” and move on — an outcome that will be more accepted if consensus has been reached about the group’s vision and goals. Exhibit 1 lists steps involved in reaching consensus.

**Step 2-3: Share power from the very beginning**

Deciding who has the greatest power is an important issue for all coalitions, but particularly for communities of color. Having been powerless in so many other circles and circumstances, handling power fairly is often an issue that will “make or break” a CACC even before it gets off the ground. Sometimes one organization, usually the initiator, practices inclusion and power-sharing in name only. This may be done in the name of efficiency (“We had a quorum”) or expedience (“We couldn’t reach you in time and we had to move on.”) Put another way, this approach to power-sharing resembles, “One for all, and all for one, said the elephant as she danced among the chickens.”

From the start, CACCs need to decide to share power. Following are several techniques that support this decision:

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**Culture and Process:** The process for making decisions and conducting the work of the CACC must reflect cultural norms. Depending on the culture, elders may have the final word, and hence, their representatives may not be able to fully commit prior to consultation with them. In other cultures, women may defer to males, who are accustomed to making decisions. Some individuals will be influenced by their cultural traditions so that they speak rarely or not at all.

**Lesson Learned:** Set aside time so that the group can discuss how they would like to be governed. Confirm that those who have emerged as leaders are accepted in that role. Ask group members what their experience has been with group process, meetings, or coalitions; and make note of their prior experiences. Then ask the group which process would be most agreeable to them.
Exhibit 1
Steps in Reaching Group Consensus

*Set the context* and clarify the topic about which consensus is being sought – establish what is the group trying to achieve and why

*Brainstorming* – elicit the group’s best thinking through a brainstorming (Through this process everyone’s ideas are valued and included in the critical thinking of the group.)

- First, members list all the ideas individually
- Next, in pairs or small groups, set priorities and select several cards reflecting those priorities to share with the group

*Cluster the ideas presented,* discover points of agreement and reveal where more inputs or data are needed

*Name the ideas* through a facilitated dialogue to clarify the consensus of the group

*Confirm the consensus* made by the group and encourage individuals to own the collective decision

- Conference calls, list serves, and other electronic means can be an effective way to maximize participation, especially when coalitions cover large areas (e.g., country, state, regional, national), and all participants have access to the necessary technology.

CACC leaders may also need to make sure that a representative from the same organization is available to participate in conference calls and to keep missing stakeholders informed. If a CACC member has been absent for one or two meetings or conference calls of the core group, the chairperson or convener of the coalition should call the absent member to inquire about the reason(s) for the missed meetings.

Designate interim co-chairs, or designate different chairs for specific activities.

The CACC leaders should also make sure that most decision-makers are at the table most of the time.

Check schedules early enough in advance to provide for maximum feasible participation.

If the explanation for non-attendance is schedule conflicts, the next meeting should be organized around that representative’s availability. If there are other reasons, the chair should meet with the missing representative to seek further clarification and resolution. Other useful techniques for sharing the power include:

- Being prepared to postpone decisions if key players are not able to participate, or to find other ways to consult about decisions that the group has reached on a “tentative” basis.
- Circulating a summary of decisions made on each occasion so that everyone can be kept in the loop.
- Allowing enough time for all groups to consult with key leaders in their organizations. (For example, American Indian, Alaska Native, Native Hawaiian, and other Pacific Islanders may need extra time to consult with elders on matters requiring feedback or decisions so that organizational representatives can speak with their leaders’ backing.)

**Step 2-4: Honor different communication styles**

“Type A” personalities and persons accustomed to the “majority rules” or the “if you move, you lose” approach to decision-making may be uncomfortable with this deliberate approach. But the hallmark of many non-Western societies is patience and taking enough time to talk things through. The building of trust begins with understanding, which is achieved through respectful, patient listening and accommodation. Giving process the time and respect it deserves will go a long way toward ensuring positive outcomes. (See Kofi Annan and the Talking Stick.)

Given time and resource constraints, it may not be possible to take days to work through issues and decisions. Therefore, the core team can plan to revisit topics when consensus cannot be reached. Taking the time to make decisions in a deliberate way is an important way to honor members of the team, solidify the core group and lay a firm foundation for the next stages of development.

**Step 2-5: Respect that not all partners will feel the same way about every issue**

As the coalition begins to define its priorities, it will soon be apparent that not all issues affect the groups equally. For example, Asian, Haitian, and Latino/Hispanic groups may place a higher priority on immigration and language access issues. American Indians, Asians, and Pacific Islanders may find a common bond in advocating data collection among populations frequently ignored. In such instances, the groups with passion and commitment for targeted issues should take the lead on behalf of the CACC, with other groups providing support. However, it is important to invest time in attempting to reach a consensus so that there is no question that the total CACC membership endorses the actions to be taken. In those instances when consensus cannot be reached, it is recommended that the coalition follow the six stages of conflict resolution, as depicted in Exhibit 7.

**Step 2-6: Take inventory and if necessary, secure “start-up” resources for the coalition’s work — as a team**

Most of us are familiar with the saying, “He who pays the piper calls the tune.” Frequently, a large share of decision-making power goes to the individual or organization that finances the coalition’s work, either through cash or in-kind contributions. Although the initiator may be the source of the group’s funding at first, the CACC should move as quickly as possible to find and secure funding that is dedicated to the coalition’s work.
Initially, these resources may be made available in the form of in-kind contributions specifically for CACC purposes (e.g., mailings, secretarial support, meeting space, paying for conference calls.) So an important first step is to take inventory of the resources CACC members have to offer — services, loaned space, equipment, training, etc. (See also Strategy 8, step 8-1.)

Funds may also be funneled through an organizational member of the team, particularly one with tax-exempt status, but it should be clear to all concerned that the funds belong to the coalition; and the group should make decisions about those funds, to the greatest extent possible. “God bless the child who’s got his own.”

From the outset, the CACC needs to be aware of the need to value the resources member groups can bring to the table. For example, a particular organization may not be able to contribute a large dues check, but they could host a coalition fundraiser using their facilities. Taking early inventory of what each group could offer to the CACC is a recommended option. This approach allows everyone to invest in the coalition’s viability and financial stability. (See A Win/Win Solution in Iowa.)

An effective way to share power and encourage “buy-in” from stakeholders from several communities of color is to agree from the very beginning to “share the wealth.” Following are several options to consider:

- Organization X could administer funds it secures on behalf of the group, or it could share (or even transfer) that responsibility to Organization Y.
- A series of subcontracts could be developed to be certain that everyone gets an opportunity to work for the CACC.
- Funds could be placed in the hands of organizations that need to be at the table, but have no resources, as a way to build capacity and infrastructure for these entities.

The CACC works best when every team member assumes responsibility for identifying and raising funds, as needed. It is also important that team members advise their colleagues openly and in advance, when an approach to a particular funding source by the CACC could conflict with an individual group’s funding strategies. In such a case, this funder should be avoided. Some coalitions may formally adopt a “non-compete” policy as a way of formalizing this understanding.

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**A Win/Win Solution in Iowa:** A minority health coalition in Woodbury County, Iowa, has decided not to seek grants for now, but to collaborate with existing agencies and programs for its first few years. This coalition recently enlisted the support of the local university to provide meeting facilities and lunch for a health conference, in partnership with the city council, board of supervisors, and state and community agencies. Participants thus were able to attend the meeting at no cost.

**Lesson Learned:** The conference was a success and helped build rapport between the coalition and these other entities. Interest has also been stirred among other universities to participate in similar collaborations. The coalition was seen as the catalyst for building relationships with a broad array of public and private agencies.
Strategy 3: Expand the Circle

Strategy 4: Build Trust and Mutual Respect

Strategy 5: Organize around a Vision, Mission, and Goals that Promote Change and Continuity

Strategy 6: Evaluate
The information at this tab comprises the development phase of building a coalition. This phase involves three strategies:

1. Expanding the coalition’s circle
2. Building trust and mutual respect
3. Organizing around a vision, mission, and goals
4. Setting the stage for ongoing evaluation

**Strategy 3:** Expand the Circle

Coalitions among CACCs that seem to work best are those that observe the principle of equal representation rather than proportionate representation. In other words, once it is determined which racial and ethnic groups should be at the table, every effort should be made to make sure that each group has the same number of representatives. For example, if all five of the principal racial and ethnic groups experiencing disparities are in a given community, then it stands to reason that the organizing or core CACC team would have at least five members, one from each group.

The importance of recruiting the right stakeholders initially becomes clear when it is time to expand the CACC. Strongly recommended is the “each one, reach one” approach, which places the responsibility for recruitment of additional members from each community of color in the hands of that group’s representative at the table.

This means that recruitment must be a planned, systematic process. It should be governed by an agreement established by the core CACC to reach out to a wider audience simultaneously so that each group’s numbers will remain comparable. Similarly, if for any reason individuals leave the coalition, they should be replaced using the same procedure. This commitment to equal representation is particularly important to maintain as the core team plans to expand the decision-making circle for the coalition (for example, from an executive/management committee to a steering committee, or more formally, from incorporators to a board of directors).

Expanding the CACC is one of the core team’s most important tasks, because it is the expanded coalition that will be able to take collective action. Here are some steps that have worked:

**Step 3-1: Agree on criteria for coalition candidates**

Before recommending candidates for an expanded coalition from their respective groups, the core team takes time to develop criteria for coalition membership that apply to each group’s candidates. The core team can also make initial decisions about whether to involve organizational representatives only, or a mixture of organizational representatives and key individuals, all of whom meet the criteria.

Screening criteria might include the following:

- **Community of color** — one of five racial and ethnic groups as defined by the Office of Management and Budget (African American, which includes persons of African descent born outside of the U.S.; American Indian/Alaska Native; Asian American; Latino/Hispanic American; Native Hawaiian/Other Pacific Islander)
- **Community of common interest** — refers to groups that are experiencing similar problems or are committed to advocate regarding common issues, but are not one of the OMB-defined racial and ethnic groups. These groups may include immigrants from Bosnia and the former Soviet Union, for example, which share cultural and linguistic concerns. They may also include, depending on the community, other non-minority groups, such as advocacy groups for the disabled, low-income persons, professional associations, labor unions, etc. that have focused on disparity and access issues.
- **Passion for justice, fairness and equity**
- **Multicultural coalition experience or openness to multicultural networking**
- **Demonstrated experience/interest in health** (or potential interest in health)
- **Stability** (in existence for a while)
- **Organizational constituency or membership**
- **Influential, respected in community and/or decision-makers’ circles**
- **Resources (people, funds, contacts)**
- **Expertise important to the coalition’s work, such as knowledge of statistics, evaluation, media relations, consumer outreach, fundraising, health promotion, and disease management, etc.**

It is important to decide early in the process whether the CACC will include non-minority organizations. The premise of this guide is that there is a need for communities of color to develop coalitions among themselves to craft solutions for problems they understand best. As illustrated by this Ghanaian proverb:
“When the turtle comes out of the river to tell you the crocodile is dead, you don’t argue with it.” (The turtle knows whereof it speaks.) However, if an organization of color selects a non-minority representative to participate in the coalition, or act on its behalf, that choice should be honored and respected.

Step 3-2: Compile a list of potential coalition members
Experience suggests that a phased approach works well. For example, each core member could develop a list of 10-20 organizations from his or her own racial or ethnic group. Those organizations meeting most selection criteria could be approached to send a representative to a steering committee (or planning committee if the initial organizing event for the coalition is a workshop, hearing or conference.) The remaining organizations recommended to participate in the coalition could be invited to subsequent events, such as workshops, hearings, conferences, or could be used as alternates to be invited if initial selectees are not interested or available.

Although the core team relies on each individual to recommend persons from his/her own group to be included, the team as a whole reviews and agrees with the list of names before an invitation is extended on behalf of the core team. Sometimes other members of the team can provide insights about a candidate organization’s interests and history that should be taken into account.

Step 3-3: Check interest and availability of coalition candidates
Once the priority list of potential candidates is set, each core team member reaches out to the organizations on his/her group’s list. Recruiters need to pose several questions to determine the suitability of the organization being approached to play a leadership role in forming the coalition, such as:

- Willingness to designate a representative with the requisite authority to make decisions
- Organizational representative’s availability and commitment to CACC concept
- Willingness to promote CACC, once formed
- Ability to follow through on tasks and assignments

Care should be taken to make sure that the same number of invitations is extended to each participating group, and that the number of acceptances from each group is pre-determined and agreed. If each group is to have three representatives on the planning/steering committee, there can only be that number for each group.

Step 3-4: Plan and hold organizing meeting of the coalition
Planning should take place enough in advance so that all (or nearly all) invitees can attend the first meeting. That will require a real commitment on the part of the core team to choose a date carefully, in consultation with others, making sure that there are no conflicting holidays (e.g., Chinese New Year) or dates of religious significance (Muslim Ramadan.)

Organizers should pay careful attention to this first meeting, which will set the stage for future success (or lack of success) of the coalition. Serving a meal or some kind of repast, in a neutral or comfortable location — perhaps in someone’s home — is almost a necessity. Refreshments can be provided by the host or host agency, through contributions from a business entity, by participants (each attendee brings something), and so forth. Also important is allowing enough time for introductions (focused on who one is and what one believes in, not just what one does) and relaxed conversation. (See Icebreakers as Cultural Celebrations.)

Experience suggests that an organizing committee will work best if it focuses on a common task. Rather than discuss “shall we form a coalition?,” the more appropriate focus of the initial meeting might be: “Let’s plan an event where our respective communities can come together to talk about health concerns we all share, and what we can do about it.” Another approach could be: “Since we all feel strongly about this issue, let’s see what we can do together to address it.”

Focusing on a common task as the first order of business is generally more effective than talking about organizational purpose and structure. There will be time for that, but only after more trust- and relationship-building among planning/steering committee members have taken place. Besides, accomplishing

**Icebreakers as Cultural Celebrations:** Members of Out of Many, One (OMO), a national CACC, introduced two “icebreakers” at a recent meeting that gave the opportunity to meeting participants to celebrate their own and others’ cultures in unique ways. In one instance, each person present was asked to describe his or her favorite food and to tell why. In the second icebreaker, OMO members described the significance of their names. Both exercises revealed rich insights into individuals’ family histories, cultures and personalities that helped members of the group get to know each other much better.
one task as a group is an excellent way to establish the value of working together as a coalition in other arenas.

There are some situations in fact where groups have postponed a decision to form a coalition for some time, while moving to tackle one task after another as an informal, loose-knit group. In other situations, the decision to build a coalition may be raised at the first meeting if the core CACC team has reached a consensus that a coalition is warranted and can be sustained.

Remember, CACCs that work best are those who see themselves as a TEAM:

- T – Together
- E – Everyone
- A – Achieves
- M – More

Persons of color who build CACCs understand clearly that there must be a reason to bring people together. Without a clear purpose, a coalition is likely to fail in short order, if it can be launched at all. At the same time, community-of-color representatives caution against being so focused on the group's goal that the process of trust-building is neglected. In fact, building trust and mutual respect are seen as the “glue” that holds the group together as it works toward a common goal. As one person put it: “If you trust a person, you are more likely to trust the organization that person represents.”

Trust, simply defined, means “I can count on you.” It is the “human connection” and requires honest communication and interaction from the heart, not just the head. Mutual respect is based on the acknowledgment, appreciation, and experience of another’s path, contributions and abilities. Developing trust and respect takes time, and should be ongoing; starting from the very first moment the CACC is envisioned. It starts with honoring the individual as a person first, and then, the community he or she represents.

Building trust and mutual respect cannot be left to chance, but should be approached in an organized, proactive manner. Here are some recommended steps:

Step 4-1: Create opportunities for self-examination within communities of color before bringing different racial and ethnic communities together

It may sound like a contradiction, but this is an important step that contributes to honest and open exchange. Each community of color comes to a coalition with a certain amount of ignorance, skepticism, or distrust of other communities. There are many reasons, such as prior community conflicts, competition for jobs and other resources, deliberate “divide and conquer” efforts, or — commonly, the absence of relationships and lack of information about each other.

Providing the opportunity to examine issues from their own separate perspectives, including the venting of feelings about other groups in a “safe environment,”
has worked well in several settings. It helps to diffuse negative attitudes, and also gives others within the group the opportunity to challenge erroneous information. This is also a way to promote honest interaction and exchange, once different racial and ethnic groups come together. There are several ways to create these opportunities, such as:

- Hold focus groups within communities likely to participate in a cross-community coalition. For example, in Tarrant County, Texas, focus groups in African American, Asian American, and Latino/Hispanic communities were held where participants were asked to select priority health issues and identify barriers and resources affecting their ability to work with other groups before the groups came together.
- At an organizing meeting of a CACC, plan for an initial session at which each of the separate racial/ethnic groups can identify issues, barriers, unique group resources, and possible commonalities. These individual reports will be later shared with the entire group.
- In several states, tobacco settlement funds have been used to create race/ethnic-specific groups or coalitions that then come to the table as equal partners. This approach ensures that participating groups have certain goals and experiences in common.

**Step 4-2: Establish boundaries of acceptable behavior**

Ground rules are a coalition’s traffic lights, in that they help maintain the group’s easy flow and avoid collisions and conflicts. Rules or norms work best when group members themselves establish and agree to abide by them, rather than having them imposed by CACC organizers. Exhibit 2 lists frequently encountered coalition ground rules.

A critical issue to face early is the potential interference of personal and organizational “agendas.” CACC organizers should make clear that self-interest is OK. Coalition members are not expected necessarily to subordinate their own organization’s priorities and needs in favor of the CACC. At the same time, self-disclosure must be a principle that is accepted by all. A CACC member therefore should let the entire group know in advance when an action being considered by the total group will conflict with that member’s interests. It may be wise, in fact, to have open discussions early in the CACC’s life so that members’ self-interests can be addressed.

**Step 4-3: Share personal experiences with representatives from other racial and ethnic groups**

Typically, when individuals from different racial and ethnic groups come together for the first time, they exchange information about what they do, rather than talk about who they are. Successful facilitators of CACCs know that trust-building depends on knowing what lies in the heart of another individual. This requires providing space for a certain amount of self-disclosure when representatives of different groups first come together.

Useful approaches may include asking each person to describe:

- Their first moment of awareness of their racial or ethnic identity
- The person (including family or excluding family) who has had the greatest impact on their lives
- Any personal experience with health or the health care system that has affected him or her most deeply
- Aspects of their culture they consider unique or particularly meaningful to them

A group facilitator or leader can be helpful in summarizing and helping the group to emphasize common issues or attributes shared by participants. Identifying commonalities is effective as a means of building mutual respect and trust, and provides a basis for shared resolve and action.

**Step 4-4: Create space for spiritual/cultural sharing**

People of color bring to groups a history, traditions, cultural experiences, spiritual beliefs, and values that can broaden others’ horizons and deepen their lives. Too often, coalitions are so focused on getting things done that there are no opportunities for cultural sharing. Those that take the time, however, discover that doing so is richly rewarding.

Sharing of cultures can take several forms. OMO has promoted widely, for example, the incorporation of spiritual/cultural celebrations at meetings and conferences. The meeting agendas are designed to include five segments, one each for Native Hawaiians and other Pacific Islanders, Latino/Hispanic Americans, Asian Americans, American Indians and Alaska Natives, and African Americans. Representatives of each group are given total responsibility for their segment, which they may use to:

- Bring greetings from the elders by means of chants, dance, or song;
- Read and/or distribute prayers, poetry, or stories;
- Play or sing songs in one’s native language or provide a translation of a well-known song in one’s native language for all to sing;
- Display art work or play recorded music; or
- Request a moment of silence.

Other approaches to sharing cultures may include
1. **Self-management:** Manage your level of interaction and participation within the group. You are responsible for managing the time given to you as effectively as possible and for staying within the allotted time frames. This will allow others to have the opportunity to interact and communicate equally.

2. **Confidentiality:** It is important to create an atmosphere of safety and trust within which to work. Commit to maintain all confidences within the confines of the room. It is acceptable to share one’s own experiences and issues raised, but not to share others’ experiences and issues that are shared in confidence.

3. **Avoid Dumping or Blaming (no “put-downs”):** Blaming other participants for the ills of society or for negative experiences caused by others is counterproductive and diminishes trust.

4. **Be Open:** Be open to hearing the information others provide. Listen carefully to what they are saying. You don’t have to accept everything you hear...just take it in and think about it.

5. **Self-Responsibility:** Take responsibility only for yourself. Squarely and honestly confront your own attitudes and behavior. You are not responsible for how others learn or change their attitudes or behavior.

6. **Participate at Your Own Comfort Level:** Feel free to interact only as much as you choose. Share only what you want to share of your thoughts, feelings, and experiences. You have a right to “pass.”

7. **Be Honest:** You will gain more from CACC meetings if you honestly look at your own strengths, biases, and prejudices. This may be strictly internal.

8. **Take Risks:** Share bold ideas, step outside of the norm, and be willing to express openly, diplomatically, those opinions or issues that may be difficult to convey.

9. **Have Fun:** Working on multicultural issues need not be an arduous process. Freeing ourselves of the emotional baggage that we all carry around — prejudice, anger, frustration, guilt, feelings of helplessness — can be truly emancipating.
holding meetings in restaurants owned and operated by different ethnic partners or their contacts; sponsoring receptions or functions where different varieties of ethnic dishes are presented; or holding a reception or “evening of elegance,” which is attended by CACC members and their guests wearing ethnic garments. The gift-giving described below is another way of sharing one’s culture with another.

Step 4-5: Exchange gifts

One of the most effective ways to gain insight into another individual’s “essence” is to exchange gifts when individuals and groups from different racial and ethnic groups first come together. Here again, this practice appears to run counter to the experiences of many individuals, for whom gift-giving is reserved for persons they have known for some time. But experience teaches that a gift exchange conducted with clear instructions, among persons new to one another, can open the door to self-disclosure and sharing of experiences in a comfortable, non-threatening way. It can also build bridges of mutual understanding and respect very quickly.

Gift-giving does not have to involve the expenditure of funds. One strategy that works well when people come together for the first time is to ask each person to describe verbally the gift he or she brings to the group or to his or her community. These might include such offerings as: “passion,” “organizational ability,” “perseverance,” “a sense of humor,” or “cultural experiences unknown to others.”

A low-cost gift giving option that works well in the early stages of coalition-building is making available to the group laminated copies of affirmations, parables, sayings, and stories. Organizers then ask participants, after the group has had some discussion, to select one document and give it to someone else. Givers and receivers are encouraged to talk about why that particular gift was selected and presented, as a way of getting to know each other better.

Coalitions may want to offer suggestions that include sharing a personal possession that has special meaning, a prepared dish, something handmade, a poem, reading, scripture, song, or service (e.g., transportation to meetings). Instructions to participants could include:

- Bring a gift that has special meaning to you and tells something about you and your culture.
- Be ready to share with the group the significance of your gift to you.
- Gifts can include poetry, spiritual blessings, songs performed by the giver, prepared food items, a promised service, and other creative expressions.
- Keep the gift modest (if purchased, no more than $5 for most groups).
- Leave the gift unwrapped. (See Gift-Giving: A Learning Process.)

Step 4-6: Identify, compare, and celebrate assets

While acknowledging and celebrating racial and ethnic group differences, it is very important to provide an opportunity to identify common assets. This can be done through a process similar to Step 4-4, where each group is asked to describe the assets or gifts they offer to the group as a whole. Then, during a report-out session, everyone present will have an opportunity to determine those contributions that are both unique and cross-cutting.

Step 4-7: Share stories on advocacy and policy development successes and challenges

This exercise allows each individual group to share what has worked for them in the past and to describe experiences – good and bad – that helped or hindered their efforts to address health disparities and inequities in their communities. This serves another purpose in that it helps the group build an advocacy and policy “profile” for their community, including the identification of community power brokers, allies, and antagonists. Sharing “war stories” is a “bonding” experience and also puts on the table strategies that should be considered and those that might be avoided in light of results received.

Step 4-8: Put listening on the agenda

As stated, trust-building and the fostering of mutual respect can be fostered by planned activities. Most people could use lots of practice in effective, “active” listening. A tried and true technique is a pairing exercise:

**Gift-Giving: A Learning Process:** At an Office of Minority Health workshop, participants sat at round tables, and were given the chance to introduce themselves and describe their gifts in an opening session. Then all gifts were put on a side table and displayed throughout the workshop. (In larger groups, the gifts can be left on the round tables.) At a pre-determined time, gifts were taken by individuals other than the giver, and participants were encouraged to let the giver know they had taken that individual’s gift and why.

**Lesson Learned:** Ideally, dialogue about the gift given and taken should take place as soon as possible to encourage early one-on-one discussion at a “heart” level, generate positive interaction, and build mutual rapport.
cise, where one individual introduces his/her partner to the group, based on what the partner has shared in a one-on-one discussion. Group members must also be sensitive to the fact that excessive talking by individuals limits their ability to listen to the verbal and non-verbal communications of others. It may be necessary for the group to develop a “ground rule” around this point as a way of underscoring the importance of allowing members of the group “equal time.” It may also be important to ask a facilitator to help manage the group’s discussion, particularly in its early stages. (See Exhibit 3, Managing Communications.)

Listening can take many forms. (See Listening with the Heart for a poignant example.)

Step 4-9: Provide support for group identification and cohesion

Communities of color manifest creativity in a variety of ways. The CACC might consider creating a symbol or logo that taps into that creativity and depicts the diversity and purposes of the coalition. Members of the group should have the opportunity to suggest ideas or designs for the group’s consideration. Once the decision has been made, the CACC can create buttons or pins for members to wear, and can use the logo or symbol on coalition materials. There is a caution, however. When a logo is agreed upon, it is important to establish rules on how, when, and by whom the symbol can be used. The logo symbolizes consensus and this point should not be taken lightly. (See also Strategy 9.)

Step 4-10: Acknowledge and respond appropriately to cultural and language differences

Honoring language and cultural traditions is the key to success in any community. (See ‘Imi Hale – Native Hawaiian Community Cancer Network.)

There are other issues related to language that should be addressed as well. CACCs involving individuals and groups for whom English is not the primary language have a responsibility to provide language services for those members so they can participate fully. This support may include, at minimum, making materials available in the requisite languages. In addition, it is hoped that the CACC will also find a way to provide interpreters as needed.

It is important to understand that for some groups, speaking in their own language when members see each other is a way to reaffirm cultural bonds. It is not intended as an offense or disrespect to the rest of the group. In addition, speaking a language other

‘Imi Hale – Native Hawaiian Community Cancer Network: I‘Imi Hale is the name we selected for our research project. Literally, I‘Imi means to see or to search, and Hale means house. Yet, like most languages, this phrase also has a poetic lanai (meaning): I‘Imi Hale – To seek and establish an inheritance for one’s children, and to form a friendship so close, that one feels welcome in the house of the other. This Hawaiian name was selected because it embodies values that were integral to building this research infrastructure. The poetic definition speaks to the “who” this work should benefit – future generations, the “what” – an inheritance of health and wellness, the “where” – like home, where one feels safe, and the “how” – with friendship and hospitality. Our kupuna (elder) Dr. Kekuni Blaisdell so eloquently expressed that, “By using our language for a name, we are invoking and honoring our ancestors, our culture, language and restoration as a nation.”

JoAnn Tsark, Papa Ola Lokahi
Exhibit 3
Managing Communications

Here are steps to ensure that all participants have the opportunity to communicate equitably in CACC meetings.

1 Set the stage for conversation by addressing the need to hear all points of view. Establish the reality that “we all see facts in a variety of ways.”

2 Listen actively to participants – restate participants’ comments to confirm that you have understood their point and affirm their contribution.

3 Demonstrate “hearing the speaker” by writing (using flip chart or identify note-taker) and reading the notes out loud to the group periodically.

4 If a participant is repetitious or long-winded, respectfully cut off the monologue with a statement such as: “I think we’ve got your main point. I would love to hear more at the break. Now somebody else.”

5 If the behavior persists – take the participant aside and check for concerns that he/she is not being heard, and address them. Convey the consequences of dominating the conversation – that others cannot participate equally and will feel marginalized or left out.

6 If discussion goes off point, respectfully but forcefully bring the conversation back to the topic at hand.

7 If a participant interrupts another, intervene respectfully and ask that the first person complete the point he/she is making, then ask: “Now what is your perspective on this?” Open it up to others, as well as the person who interrupted initially.

8 When asking questions, frequently repeat the need for one point or example and succinct answers. As soon as a person makes his/her first point, immediately turn your attention to another participant. This cuts off multiple answers or long answers.

than one’s own tongue is a constant effort. Other group members can acknowledge this, although there may be times when bilingual participants might be asked to translate if speaking their own language in a group space.

As noted earlier, the CACC’s cultural sensitivity can also be reflected in its scheduling of events so they will not compete with religious holidays (e.g., Ramadan) and celebrations (e.g., Chinese New Year.)

**Step 4-11: Solicit input and participation in various ways**

Communications in this “Internet era” are increasingly narrowed to electronic messages. Although clearly efficient when reaching large numbers of people, listserves, web sites, and e-mails have limitations. A CACC that is interested in reaching all of its members effectively needs to use a variety of communication techniques, starting with the old-fashioned “one-on-one” approach, in person or by telephone.

It is also important to observe the principle that people respond best to those they know and trust. Outreach to the Asian community about CACC initiatives, for example, should be the responsibility of the Asian members of the coalition. Ethnic media, such as cable stations and ethnic language newspapers, are also effective means to reach broader numbers, again to be approached by the appropriate CACC members.

Another suggestion is to prepare background materials for all newcomers to the CACC (and turnover is to be expected) so that they can be aware of the group’s origins and history, vision, mission, and goals. There also may be times when the group can benefit from the help of a skilled facilitator who can aid the group in addressing a specific task (e.g., developing a strategic action plan or evaluation plan) or in overcoming communication barriers within the CACC.

**Step 4-12: Take time to discuss issues of race and ethnicity**

As the CACC develops, it will hopefully become a “safe haven” for honest communication on many issues, including race, ethnicity, and experiences of discrimination and oppression. There may be times when providing “space” for these discussions will be necessary in order for individuals to feel accepted and valued. Such conversations may help diffuse tensions. Ideally, a trained and trusted facilitator can be available to assist, when such emotion-laden issues are discussed. (See Exhibit 4, Characteristics of a Trusted Facilitator.)

**Step 4-13: Plan events/activities where people can experience success in working together**

People who work together have a great opportunity to learn about another’s strengths and weaknesses. CCAC coalition-builders should plan such experiences as soon as possible after bringing the groups together for the first time.

Some possibilities are to:

- Create a diverse and representative committee to plan a reception or celebratory event that will feature each of the participating cultures.
- Appoint a diverse task force to put together a press conference or briefing for elected or appointed officials that presents a bill of particulars supported by all participating racial and ethnic groups.
- Gather data on a particular health issue (e.g., diabetes) for all participating CACC groups that can help substantiate the need for collective action.
- Develop a proposal for funding, with diverse CC representatives taking responsibility for writing sections and reviewing drafts as members of a proposal development committee.
- Assign responsibility for recruiting a specific number of racial/ethnic group constituents to attend events sponsored by the CACC.

**Step 4-14: Remember the personal touch**

In addition to the more structured ways the CACC can help coalition members get to know, trust, and respect one another; there is one other approach that cannot fail. CACC organizers and leaders can set the example themselves by developing and nurturing personal relationships with persons from other racial and ethnic groups. Such nurturing can take many forms:

- Greeting each other warmly, as family, in recognition that such demonstrations are common among several racial and ethnic minority groups
- Remembering birthdays or other important personal or family events
- Sharing prayers, affirmations, and inspirational readings
- Checking in and offering support personally, in times of challenge, through e-mails and other means
- Letting others know of personal or family health crises
- Inviting one another (or arranging for invitations) to special events – receptions, dinners, ceremonies, and attend events together
- Extending invitations to share meals in restaurants or personal homes
- Sharing books, newspaper articles, artifacts, or gifts that have special meaning
- Making referrals to spiritual, medical, or other advisers to deal with personal issues.
Exhibit 4
Characteristics of a Trusted Facilitator

- Makes participants feel comfortable and supported in addressing issues of concern;

- Understands that there are varying self-interests and is able to encourage the expression of those interests while balancing the views of others;

- Recognizes that some group members may not participate unless specifically requested. Others may prefer to voice their opinions prior to, or after the meeting;

- Recognizes that some positions taken may stir controversy and heated debate. The facilitator’s role is to ensure that the participants need not be fearful or feel intimidated by raising such issues;

- Unifies the group at every opportunity, emphasizing mutual respect and trust;

- Calls upon participants, gauging their level of confidence in speaking publicly and encouraging them to participate at their comfort level;

- Keeps the momentum going and encourages the group to define goals, tasks and timeframes for accomplishment; and

- Recognizes that every individual has a valuable contribution to make.
• Attending each other’s conferences and/or extending invitations to other people of color to be present at meetings or conferences sponsored by one’s own group
• Recommending one another for awards and honors
• Acknowledging and considering the existence of the cultural and linguistic diversity of racial and ethnic communities, such as the existence of over 500 American Indian tribes; differences among Puerto Rican, Mexican, and Cuban Americans within the Latino/Hispanic community; diversity among persons of African descent; and the wide range of groups subsumed under the Asian American category
• Establishing a roster of CACC members and other key participants with contact information that is shared with all members (Having such information makes it possible for individuals to extend and solidify personal and group relationships.)

It is equally important for CACCs to acknowledge members’ awards and achievements through web sites, e-mails, cards of congratulations, and celebration lunches. These acts of remembrance strengthen individual relationships and promote group bonding.

Strategy 5:
Organize around a Vision, Mission, and Goals that Promote Change and Continuity

“A very great vision is needed and the man who has it must follow it as the eagle seeks the deepest blue of the sky.”

Chief Crazy Horse

Most people of color who are health advocates take very seriously the goal of eliminating health disparities by 2010. For them, wiping out the gap between their health and that of the general population is a matter of great urgency.

Given the extent of community needs, achieving results is an imperative, particularly in a period of scarce resources and competing demands.

CACC organizers therefore must be ready to proceed on parallel tracks. Building trust and fostering mutual respect are essential, as noted in Strategies 2 and 5, but so is having an impact and making a difference as the result of having come together. Coalitions that function only as “feel good” gatherings are a luxury that underserved racial and ethnic groups cannot afford.

It is of the utmost importance, then, to organize around a vision, mission, and goals that will move communities in the direction of parity and equal access to health care. It may also be equally important to establish or strengthen a presence in the community and to be equipped to react to serious challenges to communities when they arise. Effective CACCs must be able to accomplish what they set out to do. Further, establishing a common agenda and making it happen — one step at a time — are proven ways to support individual and group empowerment, cohesiveness, and a sustained movement for change.

Following are seven proven approaches:

Step 5-1: Bring the right support to the table
In CACCs, people of color play key leadership and technical support roles, as described in Strategies 1 and 2. However, effective CACC organizers may also decide to supplement the resources brought to the table by people of color with support from other individuals and institutions. Effective aid can come from evaluators, epidemiologists, public health officials, and representatives of government agencies, foundations, and corporations who may not be members of underserved racial and ethnic groups, but are willing to follow the lead of those who are. The CACC should reach consensus about the types of skills needed and who should be invited to augment the group’s capacity before invitations are extended.

Step 5-2: Complete and document an environmental scan
Demographic, health status, and other descriptive data can be found in most communities, often housed in the local or state Department of Health, area think tanks, colleges, and universities. The CACC can use these data to inform its members and the broader community by means of fact sheets, public service announcements, and policy briefing papers for elected and appointed officials.

One of the most effective approaches to an environmental scan is to identify and catalogue a community’s assets. The Asset-Based Community Development Institute (ABCD) at Northwestern University has become a major resource for community and coalition leaders seeking to map and mobilize the assets and capacities of residents, neighborhoods, businesses, and community institutions, providing strategies and materials produced by John P. Kretzmann and John L. McKnight, who spearheaded the development of ABCD concepts and materials.

Compiling available data is essential, because frequently these data are not widely known or disseminated. Sometimes underserved racial and ethnic groups themselves have generated this information,
Geo-Mapping Technology in the Community’s Service: The National Indian Project Center (NIPC) pilots projects for the benefit of American Indian families and other racial and ethnic groups. Headed by Dave Baldridge, NIPC has developed a geographic information system mapping project that brings together racial/ethnic, demographic, environmental, transportation, manufacturing, and other data to show relationships among multiple factors that impact on health. This “cutting edge” technology soon will be made available by NIPC and OMO as a resource for environmental scanning.

Lesson Learned: People of color may be the best resource for addressing their own data needs, which must be met if CACCs are to have maximum impact.

particularly those groups who have been omitted from community surveys. Special efforts must be made by the CACC to collect and circulate whatever data are available for each racial and ethnic group participating in the coalition so that all participants can be effective advocates for each other. Given the fact, moreover, that data may not exist for particular communities because Federal and other agencies have not collected data for them, the CACC may also choose to report on gaps in data sources and establish advocacy strategies to address them. This is a task that clearly should involve representatives from each of the participating racial and ethnic groups. (See Geo-Mapping Technology in the Community’s Service for an example of how these groups might also address the data issue.)

Step 5-3: Take a community inventory

At the same time the environmental scan is taking place, CACC members should also undertake (ideally, as multi-racial/ethnic teams) an inventory to identify key decision-makers in the community. Most “movers and shakers” representing organizations in communities of color should already be at the table, identified through the steps outlined in Strategies 1 and 3 above, but there may be individuals who are highly respected who should be noted during this process.

This step also entails listing and describing the community’s top decision-makers in the health arena, such as:

- Elected and appointed officials with significant executive and legislative roles (e.g., heads of state, county or city departments of health, members of appropriate legislative, appropriations committees)
- Leaders in related government entities, e.g., departments of housing, mental health, environmental/public health, education, and social services
- Local foundations and corporations providing health-related contributions
- Civic and business entities (e.g., Chambers of Commerce) that could be supportive of health issues
- “Non-minority” advocacy and professional organizations involved in health issues
- Head Start and K-12 school leaders, and health providers working in school health clinics
- Area colleges and universities, “think-tanks,” and other entities, which may not have been identified in Step 2
- Effective media voices that have focused on health and related issues
- Community-based organizations, churches, and elders that may not have been identified in Strategy 2, but are influential among their members and in the broader community

Step 5-4: Conduct focus groups to identify specific racial/ethnic group and possible cross-community issues

To this point, the CACC has collected community data that can be used as background and briefing information. Many coalitions make a critical mistake at this point, by allowing only these data to influence their choice of priority issues. A CACC that is attuned to its community, however, will set these data aside for future use and will reach out to their constituents for guidance in determining what the real health issues of concern might be.

Focus groups are tested, low-cost ways of touching base so that various community voices can be heard. One approach is to ask organizations recruited by representatives from each of the communities represented in the CACC to sponsor a focus group. Sponsorship entails making space available, helping to draft questions of interest to the sponsor and the CACC, and recruiting focus group participants. In communities where English is spoken as a second language, the focus groups should be conducted in the sponsor’s preferred language, with the understanding that a transcription in English will be provided to the CACC.

Ideally, all focus groups will address a set of core questions of interest to the CACC, in addition to any questions the sponsor might want to include. Some examples:

1. What is the biggest health problem that you and people you know have to face?
2. What is the most important policy issue facing your community at this time (city, county, or state-wide)?

3. What do you think needs to change to improve the health of people in this community?

4. What could you and/or your organization (church, etc.) do to help you and other members (parishioners) live more healthy lives?

5. If you were mayor (county executive, governor) for a day, what is the first specific thing you would do to help improve people’s health?

Facilitators of the focus groups should plan to help the group come to consensus on each of these topics or, at least, to identify responses that have considerable support from focus group members. Reaching consensus is an important part of the process since individual group results will be compared with findings from other groups in search of areas of consensus.

**Step 5-5: Identify areas of consensus and supply supporting documentation**

After completing Step 4, CACC members will review the focus group findings and, together, look for areas of agreement. For example, in the state of Ohio, the common thread that emerged from a similar process involving Asian-, Latino/Hispanic-, and African American organizations in several cities was indoor environmental pollution. Accordingly, the goal of the State Coalition of Communities of Color became “strengthening and/or introducing clean indoor air policies throughout the state.” In Houston, Texas, the common theme expressed in more than 20 focus groups in Korean, Latino/Hispanic, and African American communities was concern about diet, exercise, and obesity. Once these cross-cutting concerns emerged, the CACC reviewed the environmental and community inventory data that had been collected earlier to provide further justification and statistical back-up and to identify potential allies and/or funding sources.

**Step 5-6: Take time to craft a CACC vision, mission, and values that everyone endorses**

Clarinig the CACC’s vision and mission is important in order to provide overall direction for the coalition. Being of one accord also helps maintain trust and mutual respect among group members. There are at least two ways to proceed. One scenario calls for groups that come together for the first time to move to craft a vision and mission before doing anything else. At its founding November 2000 conference, Out of Many, One formulated its vision and mission statement before developing a Multicultural Action Plan at the same session. (See Exhibit 5.)

Another way that seems to work well for some CACCs is to reach consensus on community-wide issues, then to take the time to put a vision and mission statement together. The benefits of this approach are first, that members of the group already have some experience working together; and second, they can craft a vision and mission that reflects the reality of their situation. Taking time to state the values the CACC agrees to observe as a group is also well worth the effort. Exhibit 6 lists the values the Maryland-based Health Action Forum agreed would govern its organization. Individuals were given the opportunity to suggest values for the group’s consideration. Then, each member selected three values, and priorities were established accordingly.

**Step 5-7: Establish an action agenda with achievable goals and objectives**

Once the CACC knows its communities’ concerns and has a clear sense of direction, it is time to formulate an action agenda that spells out specific goals, objectives, and expected outcomes. Here, as with other steps, there must be full participation of all racial and ethnic groups at the table so that the action plan addresses broad and individual group needs.

The action agenda is the engine that drives the coalition’s work. A typical agenda lays out one to three major goals, which are achievable in three to five years. Objectives should outline the key benchmarks (to be accomplished, for example, in 3, 6, or 12 months) that will clearly contribute to goal accomplishment. Objectives may be assigned to committees or task forces of diverse composition, or, if focused on a specific racial/ethnic group, may be given to an organization or organizations from that community.
OUT OF MANY, ONE

A VISION FROM PEOPLE AND COMMUNITIES OF COLOR FOR MULTICULTURAL HEALTH

We believe that the attainment of the highest level of care and quality of life is a basic human and civil right.

We embrace a vision of healthy communities that respects diverse cultural and spiritual values and empowers all people – individuals and families – in a loving, holistic, healing and compassionate manner.

We are committed to develop diverse leadership to build health environments and a prosperous, just and humane society.

We want to develop a universal system of care that is:

• Culturally and linguistically appropriate;

• Affordable, accountable and accessible, regardless of ability to pay or immigration status;

• Comprehensive and timely;

• Prevention-oriented;

• Community-based, people-centered, and community-owned;

• Acknowledges health as a holistic process;

• Incorporates ethnic healing practices; and

• Supports partnership, mobilization and coalition-building.

The most useful action agendas indicate:

• Persons with lead responsibility for specific objectives (or strategies/tasks related to those objectives)
• Other persons assigned to work on the objective
• Timelines for completing the work
• Outcomes expected

The CACC’s action agenda is an essential blueprint that guides the group’s work. As important, it becomes the framework for ongoing self-monitoring and the coalition’s principal tool to determine its accomplishments and progress in achieving its goals.

CACCs are encouraged to consider, as they formulate their agendas for action, implications for policies at municipal, county, State, and Federal levels, and to understand where the relevant decision-making authority and responsibility may lie. This analysis could enhance the coalition’s ability to maximize its impact and effect change on a broader scale.

A coalition’s goals and objectives, or for that matter, its vision and mission as well, are not etched in stone. They should be revisited from time to time to see if they still represent what the CACC wants to accomplish. This review may be prompted by evaluation results; goals and objectives were either accomplished or proved to difficult to achieve. The group may even decide to change direction, for example, broadening its aims to include housing and environmental issues with a focus on health.
Exhibit 6
Values of Health Action Forum of Prince George's County, Maryland

Prologue

We dare to hold fast to the dream that in the near future Prince George's County will be the model for providing effective health care services in the state of Maryland and, eventually, the nation. We accept this challenge.

Our Values

1. Access to high quality health care is a basic human and civil right.

2. Health care and health advocacy are everybody's business and everybody's responsibility.

3. Optimal health and wellness are attainable.

4. Health care providers are responsible for providing quality cost-effective care, for being accountable and culturally sensitive, and for encouraging active participation in health care decisions.

5. All individuals have a right to a high quality health care system that is accessible, affordable and culturally appropriate.

6. Individuals, groups, families and communities are responsible for active participation in the process of attaining wellness and in making health care decisions.

7. Universal health coverage is an essential component of a quality health care system.

8. All individuals have the right to equal treatment without regard for color, age, income, gender, religion, sexual orientation, disability, employment status, health insurance status, race or ethnicity.

9. Wellness is individually defined and includes physical, social, spiritual, psychological, economic, cultural and environmental components.

10. Wellness includes health promotion, disease prevention and disease management.
Strategy 6: Evaluate

Many organizations view evaluation like castor oil – good for you but not very pleasant to take. Some organizations associate evaluation with a requirement of funders – something to do in order to receive or continue to receive financial resources. Others fear that evaluation results could be used as a rationale for defunding or terminating grants and contracts.

At the same time, many community organizations have come to realize that evaluation can be a tool for improvement, empowerment, and forward movement. There are numerous books and other materials that provide guidance. They all underscore the importance of collecting information in a systematic way to help determine if the goals and objectives set by the CACC are being reached as planned. Very important is planning to evaluate as soon as the CACC has established its goals and objectives, rather than waiting until one month before funding ends.

Here are some ideas for groups to consider as they put together an evaluation plan.

Step 6-1: Hold a group discussion about how evaluation could and should be used

Given the fact that individuals and groups have had such different experiences, it will be important for CACC members to discuss their encounters with evaluation. It may be useful at this same session to present information on innovative uses of evaluation by member organizations or by other CACCs. For example, projects funded under the Racial and Ethnic Approaches to Community Health (REACH) program of the Centers for Disease Control and Prevention have had a chance to explore many different approaches to evaluation. The point of this discussion is to give CACC members a chance to reveal their level of comfort and experience with evaluation before proceeding as a group.

Step 6-2: Establish an evaluation committee and clarify its role

Effective coalitions understand the importance of planning for evaluation. Some members may have a particular interest or experience in program assessment. These individuals can be tapped to participate as an evaluation committee. They might also reach outside the CACC to find persons with evaluation expertise to join the committee.

The role of the evaluation committee is to make sure that the goals, objectives, activities, and results of the CACC can be evaluated. This group is important in order to determine if the CACC makes a positive difference over time. The committee’s tasks might include:

- Outline the goals and objectives of the evaluation process.
- Arrange for a briefing or orientation on evaluation for the group to make sure everyone is on the same page.
- Review CACC goals and objectives and suggest ways to make them more achievable and measurable.
- Pull together available data related to the CACC’s goals and objectives.
- Help the CACC decide on reasonable benchmarks or criteria to determine whether progress is being made in achieving objectives and goals.
- Determine a schedule for reviewing progress and reporting to the group on the results.

Step 6-3: Recruit an evaluator to work with the CACC evaluation committee

Evaluation appears to work best as an ongoing partnership arrangement between an independent evaluator and the organization that is being evaluated. This is the hallmark of “participant” or “empowerment evaluation,” as opposed to “report card” style evaluation where an outsider evaluates a group’s progress independently, essentially “after the fact.” Empowerment evaluation offers the best of both worlds. It can produce an objective assessment – the kind expected and respected by funders and outside parties. At the same time, the evaluation process becomes a learning experience through which the CACC can make decisions to change course in midstream based on its own assessment.

One way to proceed is for the CACC to decide whether it will seek in-kind evaluation services, or the coalition will pay for evaluation services. Either way, CACC members should suggest candidates for the evaluator position. If no acceptable candidate is found, as determined by the CACC executive committee or some other designated group, then the CACC may want to look to area colleges and universities as a potential source of expertise. It is highly recommended that all CACC members have a role in selecting or approving the evaluator before he or she is engaged.

The CACC’s evaluation committee can play a key role in interacting with the outside evaluator. Their responsibilities may include:
• Interviewing evaluator candidates and making recommendations to the group
• Helping the evaluator to develop and/or review a logic model (Reference – CDC) and evaluation plan, to include such items as the problem targeted; measurable process and outcome-related goals and objectives; evaluation criteria; data needed and where available; etc.
• Helping the evaluator arrange interviews and collect data needed to assess the CACC and its work
• Monitoring the evaluator’s work and adherence to schedule
• Reviewing draft reports prepared by the evaluator and helping present evaluation findings to the group

Step 6-4: Review CACC action plan and determine evaluation benchmarks and criteria

Leaders in communities of color are aware that health gaps that have existed for decades, if not hundreds of years, will not be closed overnight. At the same time, they are committed to make a difference and show results. There is an increasing impatience, therefore, with “the numbers game” where brochures distributed or attendance at health fairs, for example, is seen as measures of progress while disparities continue unchanged.

Although the evaluation committee and evaluator would certainly play an important role, the entire CACC should be engaged in reviewing its action plan and determining whether its goals and objectives are meaningful, achievable, and measurable. Once this determination is made, the CACC can create an evaluation plan that will be a tool for improvement.

“Meaningful” goals and objectives are worth doing, worth working to achieve. “Achievable” goals and objectives can actually be accomplished by the CACC. For example:

• Stopping unnecessary amputations among people of color is an important goal.
• Although ending poverty in communities of color lies beyond the reach of CACCs, coalitions can realize success in advocating that their constituents’ feet are examined at the same rate as those of white community residents.

Finally, goals and objectives must be “measurable.” It must be possible, either by using existing data or collecting data, to determine if objectives and goals are being achieved. As an example, 30 faith institutions can agree to survey their members with diabetes to see how often their physicians offer foot exams as a way of determining a baseline for determining a project’s impact.

Once measurable goals and objectives are set, the path is clear to establish evaluation benchmarks. For example, if the CACC’s goal is to increase the mammography rate in Vietnamese, Latino, and African American communities in Fort Worth, Texas, by 20 percent in 24 months, the evaluation team needs to check progress every six months. Increases in rates will probably not occur in the first six months, but if 100 women in 10 faith institutions from each group have been contacted, the CACC is clearly on the right track. Similarly, if the CACC has become established as a functioning multiracial/ethnic team, that too is a benchmark that indicates prospects for accomplishing the CACC’s goals.

Benchmarks or evaluation criteria, as they are sometimes called, can therefore be a mix of process (quantitative) measures, which deal with program inputs (meetings, contacts, materials disseminated) and outcome (qualitative) measures, which deal with program impact or results. Both are important in order to give the CACC the maximum opportunity for meaningful success. For example, outcome measures may show changes in health status as the result of the coalition’s work. Evaluation criteria may also record important improvements in the way the coalition functions – strong, consistent attendance, shared leadership, widespread recognition in the community, financial stability. (See also Strategy 10 for other interim indicators of success that document organizational effectiveness, which in turn enhances the CACC’s prospects for producing improved health outcomes over time.)

One of the most effective ways to present a coalition’s opportunities for evaluation is using a logic model. This is a diagram that describes the environment in which project work will be accomplished; inputs available for accomplishing CACC goals and objectives; the activities that will be pursued; the outputs or products that are expected; anticipated outcomes or results from the coalition’s work; and the CACC’s hoped-for ultimate impact. Groups can use logic models to raise evaluation questions related to the steps that should be taken in order to move from one project phase to another. For example, coalition evaluators can determine if the right inputs, such as sufficient funding and staff time, were made available in order to produce the desired outcomes and impact. Figure 4 is illustrative; it is the logic model of the asset-based coalition-building program of Office of Minority Health, New York State Department of Health.

6-5: Report to the CACC and the broader community

The first audience for evaluation reports must be the CACC itself. CACC members should be encouraged to look for lessons in evaluation results in terms of what is working, what is not working, and what needs to be changed, if anything, to achieve the coalition’s goals.
and objectives. That is why interim reports are so important — so that the CACC does not wait a long time to discover that a particular strategy is not working in terms of results achieved.

There are other important audiences. Community groups are accustomed to furnishing evaluation reports to funding sources who request them. Less common is sharing these reports with constituents and community groups. From this perspective, evaluation findings become tools for learning about what it takes to achieve goals and, perhaps, the need for alternative strategies. Sharing experiences with a broader circle also provides an opportunity to look at the coalition’s experiences differently. For example, what the CACC might consider a shortcoming might be viewed very differently by community leaders who see value in lessons learned about what did not work, as well as what did.

Educating the broader public about what has worked and what has not worked, done properly, can also be a means of attracting new allies and support. For example, if the primary reason for not decreasing the rate of obesity among children of color, despite the CACC’s best efforts, is the presence of commercial vending machines in schools, publishing the CACC’s evaluation results could lead to greater public awareness and advocacy to change school system policies.
Strategy 7: Solidify the CACC’s Organizational Structure

Strategy 8: Plan for and Establish Financial Stability

Strategy 9: Communicate Effectively
The information under this tab comprises the implementation phase of building and sustaining a coalition. In essence, this is the phase in which everyone rolls up their sleeves and actually begins to work toward the CACC’s vision and mission. This phase comprises three strategies — solidifying the group’s organizational structure, planning for financial stability, and communicating effectively. These strategies are key to the CACC’s survival.

**Strategy 7:**
**Solidify the CACC’s Organizational Structure**

CACCs often start on an informal basis and are energized by the passion its members hold for a special common interest. However, welcoming, energizing, and focusing the collective efforts of different cultures over time requires more than passion. What is needed is a base that is consistent and structured to be supportive. Taking the time to define, establish, and adhere to a set of governing rules makes keeping order and focus much easier. In fact, those who will become the coalition’s organizational and financial supporters will look for this stability.

The CACC may decide to operate informally at first. Establishing ground rules may be the first step toward a more structured environment. As described in Step 5-2, they are essential if participants from different racial and ethnic groups are to feel respected. But it is equally important for group productivity at some point to set up a formalized structure for presenting, discussing, and deciding issues, actions, and positions. Structure is also necessary so that members feel that:

- They can trust that their opinions, concerns, and ideas will be heard and respected.
- Leaders of the group understand that to be effective, leadership should be shared.
- Their special talents will be recognized, and they will be called upon to lead or advise others in areas where their expertise adds value to the work.
- They are contributing and, regardless of the size or nature of the contribution, they are appreciated.

**Step 7-1: Decide on the CACC’s life span and revalidate that decision periodically**

The life span of the coalition as a whole differs from the life span of a task. Coalitions brought together for a focused short-term task (e.g., a Multi-Racial/Ethnic Health Fair) may not want to invest lots of time in setting up a formal structure. Therefore, the group should make a conscious decision and agree on the life term of the coalition.

This should not be a one-time decision. It is important for the CACC to revisit its decision about the longevity of the coalition, and revalidate the CACC’s existence on a periodic basis. Coalition members may also decide to revisit the issue after a period of time has elapsed to see if there is still a need for the CACC. If the initial need or needs no longer exist, for example, because the issue has been resolved or the group is no longer able to work together effectively, disbanding the coalition is a wise thing to do.

**Step 7-2: Examine options available for organizing the CACC**

The group’s decision about its structure has major implications. Choosing to become a tax-exempt entity in order to receive philanthropic funds directly may seem to be an expedient choice, but it is not the only one. Several coalitions have chosen not to incorporate as a 501(c)(3) entity, because the CACC does not have the capacity to function as one, or because the tax-exempt CACC could then become directly competitive with its member organizations.

There are other options to consider as well. For example, the group may decide to incorporate as a non tax-exempt 501(c)(4) or 501(c)(6) organization, in order to take advantage of opportunities to become more actively engaged in the political process. Members who are 501(c)(3) organizations should consult legal counsel to determine the implications of such a decision so that their own status is not affected.

**Step 7-3: Determine the most suitable CACC organization**

At some point, the group will have to decide on incorporation as a separate entity. Factors to consider are:

- The group’s capacity to raise funds as a coalition
- Resources the group has collectively (e.g., office space, equipment, loaned or paid staff, and volunteers)
- Willingness of partners to formalize commitments to provide “in-kind” support to the CACC in the form of a Memorandum of Understanding, which should include at a minimum:
  - Description of the contributing organization or individual

“Never doubt that a small group of thoughtful, committed people can change the world. Indeed, it is the only thing that ever has.”

Margaret Mead
- A value or dollar amount of the contribution
- Length of time the commitment will be in effect
- Identification of organizational liaison or party to provide services
- Process for avoiding conflicts of interest
- Relationship between the CACC’s mission and that of the contributing organization
- Signatures from the organization’s leaders and from the CACC’s officers or authorized representatives

For reasons more fully explained in Strategy 7, the CACC initially may decide not to incorporate, and to select one of the coalition partners (generally with 501(c)(3) status) to provide administrative oversight and/or handle business transactions. Alternatively, the CACC may select a fiscal sponsor or fiduciary agent outside of the coalition’s partner groups.

Step 7-4: Hire an appropriate level of staff to work on the CACC’s behalf

People of color are accustomed to “making bricks without straw.” Obviously, groups that serve under-served racial/ethnic groups face daily challenges as they seek to stretch their resources. They may be able to contribute their time and energy only up to a point, but they cannot sacrifice their own organizations in the process. In short, the CACC will need its own staff. Completion of most or all of the foregoing steps should make hiring appropriate staff possible.

The process for selecting staff, therefore, must be fully transparent. A representative committee should develop a job description that specifies tasks to be performed and skills/experiences expected. Member organizations should offer candidates, and the pool from which selections are made should be as broadly representative as possible. Ideally, staffing decisions will be made by either the entire body or by a designated group (e.g., management/executive committee), with more than one finalist recommended. To the extent feasible, salaries paid to CACC should reflect rates comparable to those paid in the surrounding area.

Step 7-5: Provide training, as needed, to strengthen CACC’s capacity and skills

If the group decides to remain together for some time, it is recommended that it adopt written operating guidelines (e.g., a culturally appropriate adaptation of Robert’s Rules of Order). This decision may call for technical assistance and training by a respected facilitator, approved by the group. In fact, the group may want to rotate facilitation duties so that each group at the table feels included. As previously presented, Exhibit 4 outlines some criteria for choosing a trusted facilitator.

Step 7-6: Share leadership

It is important to establish a precedent as early as possible to share leadership among the participating racial and ethnic groups to strengthen the organization and build trust and mutual respect. Such a commitment calls for constant awareness of the need for inclusion and equity of representation. CACC organizers need to check the process regularly to see which group is “over- or under-represented” with respect to leadership roles.

The intention to share leadership can be reinforced in various ways. These can include rotating the hosting and chairing of meetings, or ensuring that diverse individuals have chances to lead conference workshops and report on workshop sessions. Representatives of different participating groups should be heading task forces and committees. As stated in Strategy 2, funding opportunities should also be rotated as much as possible among CACC partners. Moving the meeting locations from one group to another is another excellent way to reinforce the message that everyone in the coalition is important.

Another strategy to share (and identify) leadership is the creation of sub-committees to address short- or long-term tasks. These entities can work outside the full committee and are usually smaller and focused on specific accomplishments in a definite time frame. Use of subcommittees allows the group to bring in experts and other supportive participants who may not be full
CACC members. Subcommittees can also serve as testing or training ground for future CACC members and leaders, since they offer an opportunity to assess expertise, commitment, and levels of accomplishment.

Notwithstanding the desire to share leadership as much as possible, it is also important that someone is seen as the “leader” who is authorized to speak for the CACC. Although such a person may have “emerged” naturally over the course of events, it is important for the group to consent formally to her or his leadership role at some point, by means of an elective process or some other means.

**Step 7-7: Welcome and involve new recruits as CACC members of equal standing**

Frequently, founding members of CACCs develop close personal ties and relationships that stand as possible barriers to newcomers who don’t share their institutional memories. As a result, the newer CACC members may not feel that their views and contributions are valued as highly. They may become less involved over time and even disengage completely.

CACC leaders need to be sensitive to the need to include new members, by urging their participation in leadership and support roles, and by making a conscious effort to orient them to the coalition’s history. This is another reason why maintaining archives that chronicle the group’s activities — through photos, brochures, newsletters and web site — is so important. (See also Strategy 10, Celebration.)

**Step 7-8: Anticipate problems that could pull the coalition apart, and develop plans to handle them**

CACCs have a mixed record when it comes to longevity. Sometimes a short life span is a natural occurrence, especially when the coalition is issue-focused and they have either won or lost a battle. In other cases, the coalition comes apart because time was not spent in building enough trust to weather lean times or internal disputes. Frequently, CACCs are caught off guard by misunderstandings, usually regarding funding issues, because there are no “rules of engagement” in place to help the group decide what to do. One answer is to have an open discussion in which the group is invited to put examples of possible conflicts on the table, so that they can anticipate them and develop operating procedures before the fact. (For an example of conduct to avoid, see *Hoarding the Wealth*. See also Exhibit 7, Six Stages in Conflict Resolution.)

**Step 7-9: Plan to pass it on**

Coalitions, like all other organizations, must be aware of the need for continuity. What happens, for example, when the initial organizers and leaders change jobs, move away, retire, or otherwise move on? One coalition used a two-fold plan to keep key players involved when their organizational roles changed.

1. They engaged them as advisors/consultants to the leadership group.
2. They created a category of coalition membership for individuals who brought special gifts to the group.

Planning to “pass it on” can include several ideas. An important principle is to keep the organization dynamic. When one of the member organizations changes leadership, the CACC should move quickly to find out the interest and intentions of the new leaders, and to obtain in writing a commitment for continued participation. If that is not forthcoming, the CACC should immediately recruit another organization from that racial/ethnic category.

Rotating leadership and sharing stewardship are other ways to expand the circle of commitment to the CACC and its goals. Using CACC members to share the CACC’s experiences with other groups is also a strategy for building confidence and “buy-in” among CACC members. Out of Many, One periodically canvasses its members, at all levels of the organization, to determine how they have used their CACC experiences and lessons in their own and in other organizational settings.

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**Hoarding the Wealth**: A multi-racial/ethnic coalition in a city on the West Coast had come together in order to respond to a funding opportunity. Although four communities of color were involved, only African Americans and Hispanic/Latino Americans received funding. These two groups accepted the funding, and the coalition fell apart.

**Lesson Learned/Insight**: An effective CACC could have responded very differently. The group could have decided to press the funding agency to share the resources more fairly, or could have subcontracted a portion of the grants received to the Asian American and American Indian groups who did not receive grants. Another option could be to develop a memorandum of understanding that spelled out the commitment to lobby as a group for funding in the second year for the communities that did not receive funds initially. A third strategy would be to advocate for more funds for everyone as a group so that everyone’s slice of the pie could be larger.
Exhibit 7

Six Stages in Conflict Resolution*

1. **Rhetoric** – the language of the parties’ initial statements and positions, which is rarely clear and concrete

2. **Issue definition** – defining the issues that really matter so that agreement can be reached about the crucial points in dispute

3. **Exploring positions** – offering those in conflict the chance to state their positions on the key issues being disputed

4. **Broadening the issues by exploring underlying interests** – brainstorming to look at the issues with a wider lens and discover new ways to look at the conflict

5. **Refining issues to be settled** – giving parties in the conflict the chance to decide which positions are “bottom-line” and which can be dropped or compromised

6. **Agreement** – culminating in a written agreement that is signed by all parties.

Strategy 8: Plan for and Establish Financial Stability

As described in Strategy 1, coalitions are frequently launched with initial seed money or other resources provided by the initiator or from some other source. These funds may be sufficient to get things started, and in-kind support from volunteers can keep the ball rolling for a while, but at some point, the CACC arrives at a “moment of truth.” It will become obvious to the group that developing its resource base and organizational capacity increases the prospect that the CACC can fulfill its vision and meet its goals. Further, the coalition will need its own resources and staff to maintain momentum and avoid “burn-out” of those who have contributed thus far on a voluntary basis.

With this realization, the CACC has arrived at a “make or break” point, where many coalitions fall apart. In an era of ever-shrinking resources, competition for funding is intense. If everyone at the table is not in agreement that the coalition needs its own funding, and is committed to help make that happen, groups will start to fall away and momentum comes to a halt. Exhibit 8 presents a case study that illustrates some of these challenges.

Developing organizations, especially those that are formed from a number of groups, face obstacles when seeking funding to sustain their projects. Usually, they do not have legal status to accept donations, grants, or sponsorships as a tax-exempt basis. (See also Strategy 7.) Larger individual and institutional donors generally seek the tax incentives associated with a charitable organization.

In addition, potential funding sources may question the CACC’s viability. They will want to be assured that the CACC will:

- Use its funds properly
- Account for use of funds and document properly
- Demonstrate that it has the infrastructure and administrative capacity to carry out projects and manage them appropriately

Step 8-1: Take inventory of resources CACC members can offer

Although few underserved racial and ethnic organizations have funds to spare, some do; and they should be asked to contribute to the CACC. Many more have “in-kind” resources to offer. A CACC that is moving toward financial responsibility needs to know what these contributions could be, so that they can be factored into budget planning. In-kind resources include the obvious – loaned staff, space and equipment, but they may also entail:

- Access to training, webmaster, legal, and financial expertise without cost to the CACC
- Assuming responsibility for printing, copying, and mailing costs
- Mentoring support for member organizations and the CACC itself
- Paying for conference calls, or arranging for off-site meeting space and meals
- Proposal development, research, and evaluation services
- Media access and coordination

One of the most important contributions CACC individual and organization members can make is to facilitate introductions on the coalition’s behalf to funding sources known to them. Obviously, this activity would take place after decisions about the group’s fiduciary agent have been made.

Step 8-2: Decide who should receive funds for the CACC

If the coalition has made a decision not to put itself in the position to receive tax-exempt funds, other decisions should be made. First, will the group receive non-tax-exempt funds directly (requiring incorporation at least), or will one or more of organizations participating in the CACC be designated to serve as the fiduciary agent and assume fiscal responsibility for the CACC and receive tax-exempt or other funds?

Clearly, choosing a member organization requires full participation and agreement by all coalition members. We recommend a selection process based on the following criteria:

- Demonstrated long-term commitment to the CACC and its purpose, mission, and goals
- Reputation for integrity
- A proven track record for administrative and financial management capacity (CACC leaders may want to review a number of annual financial reports, audit statements, and other information from the group’s funding agencies to make that determination.)
- Willingness to have the decisions of the CACC stand as final with respect to funds received on the CACC’s behalf (unless there are legal prohibitions)
- Willingness to assume fiscal liability and tax documentation and reporting responsibilities for CACC functions and to provide written statements to that effect
Exhibit 8
Case Study in Coalition-Building: Successes and Lessons Learned

The Coalition of Limited English Speaking Elderly (CLESE) was incorporated in 1989 after its founding members served as an advisory council for the Chicago Department of Aging’s ethnic needs assessment in 1987. It has functioned as an umbrella organization for ethnic community-based organizations in the Chicago area. The coalition’s membership has grown from 12 founding members to more than over 40 organizations representing the following ethnic groups:

- Assyrian
- Japanese
- Korean
- Laotian
- Latino/Hispanic (Central American, Cuban, Mexican, Puerto Rican, South American)
- Lithuanian
- Middle Eastern
- Pakistani
- Polish
- Romanian
- Russian
- Vietnamese
- Indian
- Bosnian
- Cambodian
- Chinese
- Croatian
- Filipino
- Greek
- Haitian

The coalition was established to serve as a single point of contact and to advocate on behalf of its constituents with city and state officials, while at the same time providing technical assistance to its members. The CACC has a staff of three individuals, who assist non-English proficient elders in accessing health care services.

Successes: This CACC has served as an effective voice for immigrant populations, speaking out on inadequate language support and the lack of equal access to health services. The coalition has also provided nursing/home care services to needy individuals through its member organizations, and has made technical assistance available to members.

Challenges: Competition among groups is an issue. Recently, program funds were made available for only seven organizations serving five ethnic communities, to be selected from the 40 members.

Lessons Learned: Stress the importance of reaching binding consensus. Ensure committed participation from board of directors. Welcome new coalition members. Recognize the value of investing in staff to help achieve the CACC’s mission, not just deliver services.
• Commitment to develop budgets with group members and to allow CACC to review and approve full proposals prior to submission
• Review any actual or potential conflicts of interest in advance of applying for grants, seeking funds from potential sponsors, or any activity that would likely benefit both the CACC and the fiscal agent
• Willingness to share organizational and financial information with the group on a regular basis, as determined by the CACC
• Provision of services at reasonable overhead and administrative fee rates

Some CACCs have decided to address this issue by rotating fiduciary responsibility among several member organizations, which represent the coalition’s primary racial and ethnic groups. This approach can work well to build trust and “share the wealth” (in the form of overhead and administrative fees). Groups can also decide to appoint a primary fiduciary agent, who will then subcontract with other coalition members.

Another option is to select a fiscal sponsor outside of the CACC’s member organizations. There are such entities whose mission is to support emerging organizations. Most provide financial, human resource, and administrative services, and serve as an “incubator” for emerging organizations. The fiscal sponsor holds 501(c)(3) status and charges a percentage of the income/grants received on behalf of each client or “project” as its fee.

The package of services provided under such an arrangement can vary. Staff hired are often employees of the fiscal sponsor and may receive health and dental benefits offered by the fiscal sponsor to its clients. Most fiscal sponsors also provide training and technical support for administration. The fiscal sponsor assumes legal liability for the CACC’s projects, and must ensure that the funds received are conducted in accordance with Internal Revenue Service provisions for charitable uses. Generally, these entities do not engage in fundraising for client organizations.

There are advantages and disadvantages for each of these options. The CACC’s leadership or a designated subcommittee should conduct a review early in the group’s formation to look at various choices with respect to the CACC’s short- and long-term goals.

**Step 8-3: Identify acceptable and non-acceptable donors**

Another decision to be made early in the CACC’s life is the identification of non-acceptable donors. The group should not make any assumptions that its members are on the same page with respect to seeking and receiving funds from corporate conglomerates (that have alcohol or tobacco-manufacturing subsidiaries), fast food companies, managed care companies, etc. The best way to test these waters is to find out where member organizations draw the line for themselves, and then to determine what the group as a whole wants to do.

The CACC should also decide on acceptable donors. This discussion calls for full disclosure on the part of member organizations. For example, if Organization X is in the middle of negotiations with a foundation, it would not be to that organization’s advantage for the CACC to approach that foundation for funding. This is an issue that must be addressed when all parties are present, or at least represented, since proceeding without full information and agreement could be harmful. As important, decisions made at such a session should be well documented and distributed to CACC members for the record.

**Step 8-4: Develop short- and longer-term budgets**

Recommended is a process that involves open discussion by the full CACC as to the work to be performed (see Strategy 4) so that everyone can be clear about the organization’s needs. Then, CACC leaders should appoint a committee that is fully representative of all racial/ethnic groups at the table to develop a preliminary short-term (e.g., 12 months) and longer-term (e.g., 36 months) budget. The committee should be charged to present information on both projected income and expenses, so that the entire group can offer comments regarding both. Adoption of the budget is another discussion topic that calls for special efforts to ensure full attendance by CACC members.

**Step 8-5: Develop business, marketing, and fundraising plans**

Once a budget is in hand, a critical next task is to plan to raise the necessary funds. A business plan will be an essential tool to help achieve that end. Given the importance of this task, this should be assigned to a committee in which CACC leaders play key roles. This effort can be supplemented by seeking an outside resource to provide marketing and fundraising services on a pro bono basis.

CACCs that have reached this level of development are clearly on their way to becoming firmly established and, hence, should be prepared to think about activities that will help the group become self-sustaining. A business plan will be an essential tool to help achieve that end.

**Step 8-6: Seek funding from non-traditional sources**

One of the most difficult challenges for any group seeking funding is to broaden horizons and seek
resources beyond the usual “safe” donors and support. In recognition of the growing numbers of people of color and the markets they represent, there are corporate, foundation, and other institutional entities that seek to be recognized as being supportive of racial and ethnic minority groups. By so doing, CACCs can also spread the message that addressing health disparities is in everyone’s self-interest.

Step 8-7: Provide CACC members with financial reports on a regular basis

It is important that the entire CACC membership receive financial reports on a pre-determined, regularly scheduled basis (e.g., quarterly). The CACC’s financial officer is responsible for establishing reporting periods and providing the membership with summaries of all monetary transactions that occurred during the reporting period. In other words, a report identifying all income and all expenses for the reporting period will be distributed.

Strategy 9: Communicate Effectively

Communication is a primary activity of coalitions. As the thread that weaves the fabric of the coalition together, it is the process by which CACC strategies and activities are developed, implemented and realized. The effectiveness of its communication is a barometer by which it can measure its success – or lack of success. (See also Strategy 4, Step 4-11)

Every CACC should be constantly aware that it is engaged in two kinds of communication — internal and external. Internal communication is involved at every stage of operations, ranging from establishing goals and objectives to developing consensus and self-image. These communications may take many forms, such as:

- Phone calls and phone “trees”
- Teleconferences
- E-mail messages
- Web sites and web site linkages
- Written memos
- Formal and informal letters
- Individual face-to-face conversations
- Photos, diagrams, and other pictorial messages

External communication serves as the coalition’s public “face.” Every CACC should remember that – whether it wants one or not – it has a public image! A public image is a perception that the general population develops of the coalition and its activities. For-profit companies spend billions of dollars each year developing positive public images for their products. While advertising and media coverage are generally presumed to be sources of public image, the reality is much more complex.

CACCs, which often have little or no money to spend on their public image, must rely on external communications to do the job. The scope of external communications can be vast, including such things as:

- Informal interactions CACC members have with the public
- Participation in public events
- Radio, television, cable announcements, and programs
- News and op-ed articles, letters to the editor
- Business correspondence
- Formal publications
- Policy papers
- The CACC’s web site.

External communications should be taken very seriously since they are the way the public sees the CACC. We only have one chance to make a first impression, which to outsiders, may be a lasting one. In terms of public relations, a rude telephone answer or a business letter with typos and poor grammar can undo months of careful communications work. In other words, effective external communications are the key to the coalition’s programmatic, advocacy, economic, and overall success. – and thus, are central to the achievement to the CACC’s mission.

There is no single formula for effective communication, which is as diverse as all human interactions. In general, however, effective coalition communications are:

1. Frequent. Coalition members — both organizational and individual — generally become involved because they are interested in the CACC’s mission, but coalition activities are seldom their number one interest or employment focus. Frequent communications from the coalition serve to reinforce their sense of commitment, remind them that the coalition is active, and keep them informed of coalition issues and activities.

2. Simple. Good communicators make it easy for others to get the message. Simple, straightforward communications invariably work more effectively than
sending long, rambling, repetitive or overly complex messages.

3. **Focused.** Coalition members are often inundated with spam e-mail and junk advertisements and may have little patience with unfocused mass communications from the CACC. Remember, frequency of communication does not, by itself, assure success. Too many messages or too much contact can be counter-productive.

4. **Two-Way.** Communication implies an exchange of thoughts, not a one-sided lecture. Effective communicators are good listeners, and good communications almost always involve opportunities for comments, further dialogue, or other exchanges of ideas. Communicators should never assume that one-way messages are sufficient to meet the CACC’s needs.

5. **A Process.** Communications occur at every level of the coalition, and are constant. Communication is every member’s responsibility, not just part of one person’s job description.

6. **Appropriate.** As in every other aspect of the CACC’s activities, communication must be culturally and linguistically appropriate, as illustrated in *Communicating Appropriately with Migrant Workers* on this page.

Here are some steps that can be taken to improve CACC communications.

**Step 9-1: Develop an internal and external communications plan**

This plan can be developed by CACC leaders, with broad consultation with group members, at the CACC’s organizing meeting (see Strategy 3) or at an early meeting of the membership. The plan can be informal, but should be confirmed by consensus. It is ideal if it is documented in writing. The plan should include agreements that spell out who will initiate “official” communications (most likely the coalition’s leadership); how communications will be conducted (e-mail, faxes, or mailings); how regularly CACC communications will be sent (and the schedule for distribution); and special communications needs (see Step 9-6).

A membership contact list, including address, fax, phone, e-mail, and other relevant information, should be quickly developed and shared with members. The plan should also reflect an awareness of different communication styles of group members, as described in Strategy 2, Step 4.

**Step 9-2: Designate a communications monitor or task force**

Like a growing plant, communications have to be tended with care. It will be helpful to have a person or a group within the CACC that has the responsibility to monitor the flow of internal communications. This individual or group might also receive suggestions or complaints from other members about communications and would be authorized to make recommendations for improvement to the CACC. They could also make certain that the language needs of members are met, for example, through interpreters or sign-language specialists.

**Step 9-3: Identify and utilize members’ specialized communications skills**

Press relations, graphics and publication design, editing, and vendor negotiations are among key requirements for the implementation of an effective communications strategy. These are not tasks for beginners and should be undertaken with respect for the complexities involved. Whether your coalition is producing flyers, press releases, newsletters, reports, or a website, the appearance and content will affect readers’ impressions of the CACC’s professionalism and capabilities. They should reflect the coalition at its best.

It will be useful to conduct a survey of CACC members to determine their ability to contribute. Hopefully,

**Communicating Appropriately with Migrant Workers:** Project staff in Wisconsin who were promoting an HIV/AIDS prevention campaign sought to communicate with Latino migrant workers about the availability of free HIV testing. The individuals to be reached had little formal education, and did not read either Spanish or English well. There was only one telephone available to the workers and that was in a public restaurant. In order to get the word out, staff visited with stakeholders known to be respected in their community, and asked them to talk to the migrant workers they knew.

**Lesson Learned:** There are communities where traditional communication methods will not work. In these, and in many communities of color, the spoken word is far more effective than the written word.
some coalition members have expertise to share regarding these tasks. If not, they may be able to identify contractors who might provide competitive pricing and design assistance.

**Step 9-4: Develop the CACC’s logo and other “trademarks”**

When the coalition has matured to the point where the participants, mission, and goals have been identified, the group should create a logo and letterhead design. The design should be approached with care, ideally with the assistance of a professional graphic designer. The graphics selected should reflect the CACC’s character, composition, and mission, and should have the “buy-in” of the CACC’s membership since the design will be used widely on correspondence, cover sheets, publications, newsletters, and web sites. What’s more, when others see the logo, they should be able to connect it with the CACC immediately.

Some elements to consider when establishing design guidelines are:

- **Letterhead** – Is it well-designed and attractive?
- **Written communications** (e.g., e-mail notes, business letters, cover sheets for faxes, newsletters, flyers) – Are they professional? Attractive? Do they convey seriousness of purpose? Do they incorporate the CACC’s vision, e.g., as a tagline?
- **Verbal communications** – Are calls returned promptly and courteously?
- **Publications** – Do they reflect careful and consistent editing? Are they of high quality? Do they cover important topics? Will they advance the CACC’s reputation?

CACC organizers caution that the coalition’s presentation should be professional but not too “slick.” The “flavor” of the community should permeate all communications, and graphic designers should keep in mind that “simple is best.”

**Step 9-5: Speak with one voice**

The CACC should be clear about who speaks for the group on every occasion. The spokespersons may change, and in the spirit of “rotating leadership,” that will happen frequently. Still, staying with one speaker at a time prevents confusing “mixed messages” from being associated with the CACC.

There is room for diversity when it comes to press conferences and releases, but again, the message conveyed by the CACC should be singular. The group may solicit participation and quotes from different organizations involved in the coalition for purposes of a press briefing or the preparation of a press statement, and that is a good way to depict the diversity of the communities involved. However, all quotes should be focused and consistent with the coalition’s main message.

**Step 9-6: Address members’ special communication needs**

CACC members’ cultural and linguistic needs were addressed in Strategy 4, but there are other factors to be considered in being truly responsive to constituents. The group should be aware, by means of an inventory, observation, or other means, of the needs of deaf, visually impaired, and other persons with needs that require special accommodations. As described above, moreover, there may be individuals with low literacy levels in their own language as well as English. Arranging for interpreters, translators, or other strategies to assist these individuals is the right and legal thing to do; it will also help strengthen the coalition.
TAB 5

Celebrate

Strategy 10: Build on Success
Strategy 10: 
Build on Success

One of the most important ways to create high morale and maintain momentum is to celebrate the accomplishments of the CACC. Coalitions frequently miss the opportunity to become stronger by postponing celebrations until large victories are won. But big “wins” may take years to achieve. That is why CACCs should be prepared to acknowledge and celebrate reaching milestones along the way. For example, one coalition pressed for legislation to create a special sales tax for health. Although the proposal died in committee, the group gave itself kudos for convincing an elected official to sponsor the bill in the state assembly.

Step 10-1: Identify opportunities for victories along the way

It is very important for the CACC to discuss what constitutes a “win.” The results of this discussion will feed into the process of setting goals and planning for evaluation. Discussing what a victory is can also serve to motivate CACC members to make a longer-term commitment than might otherwise be the case since it allows the coalition to know that there is “light at the end of the tunnel.”

Exhibit 9 presents a list of interim victories that CACCs can measure and claim. Although most CACCs measure ultimate “success” in terms of their broad goals, these indicators are benchmarks on the path, the achievement of which is worthy of celebration.

Step 10-2: Transform challenges into opportunities

When evaluation is used for program improvement, the inability to meet an objective holds as much potential for learning as that of outright success. Periodic monitoring allows the CACC to see what is working or what is not, and to make the necessary “course corrections.” For example, if interim objectives are not being met, the group may decide that the original goal was too ambitious or too unrealistic for the time period projected. But taking the risk to go after the ambitious goal is important for growth, and that should be acknowledged and rewarded.

Some CACCs hold organizational retreats to allow for mid-point evaluations in which all members participate. This allows the group as a whole to look at what they did together in light of what they planned to do. Where a clear “win” can be declared, there is reason to celebrate. Where there are shortfalls, the group as a whole can decide how to adjust. This is a true “win/win” strategy.

Successful CACCs may invite stakeholders from communities of color and other sectors to participate in these performance reviews. They share their challenges with the communities as well as their achievements and, by so doing, invite the broader community to help interpret the results. This involvement can promote “buy-in” and also provides a different point of view. Community participants may also provide documentation of a wider reach and impact of CACC activities than was first understood.

Step 10-3: Record the CACC’s history and important events

Ideally, an individual or a committee will take responsibility for recording the group’s history, collecting pictures, newspaper clippings, and memorabilia of key events, etc. Preparing proposals offers a great opportunity to trace the CACC’s origins for the record. A brief overview of the group’s beginnings should be a part of new members’ kits, press releases, and other information about the CACC. Pictures of previous coalition events can be posted at meetings, receptions, and other events to project a sense of continuity and vitality. Web sites can also be repositories for this kind of information.

Step 10-4: Invite the community to share in the celebrations

CACCs that work well celebrate often. They may “piggy-back” on celebrations already in existence in their communities, such as Kwanzaa and Chinese New Year; they may seize opportunities offered by established conferences or meetings where CACC members will be in attendance (e.g., giving a reception or honoring one of their own); or they may create celebrations independent of other events. A good principle to follow is to involve non-CACC members wherever possible, from communities of color represented and from the broader community, so that everyone will know why the coalition is proud.

Step 10-5: Celebrate individuals, too!

Celebrations of individuals are a key way to build trust and mutual respect within the CACC as described several places in this guide. Such celebrations also bring positive attention to the coalition. So when a CACC member receives an award, it is important for the other members of the coalition to be present to join in the celebration. Similarly, persons receiving awards from others should be recognized in CACC meetings, press releases, newsletters, etc.
Exhibit 9
CACC Potential Victories

**CACC Is Strong Organizationally**
- Coalition members have built and maintained new personal relationships.
- Coalition can survive personnel changes.
- Many people are trained to lead.
- Stakeholders are invested, productive and effective.
- CACC members participate in coalition events regularly.
- Community members participate in CACC events.
- Coalition has sustained itself over time.
- Coalition is institutionalized.
- Members contribute their assets to help CACC.

**CACC Demonstrates Parity**
- Coalition has diverse and equitable representation of affected communities of color and others as leaders and members.
- Member groups share power, funding and other resources.
- Communities of color participate in CACC in equal numbers.
- Participating communities have equal access to resources provided through CACC activities.
- Recognition and acceptance of individual cultural practices and beliefs.

**CACC Has A Collective Voice**
- Shared belief that the CACC is stronger working together than individual groups working separately.
- There is consensus on vision, mission, goals, objectives, agenda, implementation and expected outcomes.
- CACC speaks in unity on issues.

**CACC Commits to Evaluation**
- CACC has defined success for itself.
- CACC has an evaluation plan, with performance measures (qualitative/quantitative) to assess progress and outcomes.
- Coalition members are comfortable with evaluation and participate willingly in data gathering and assessment.
- CACC produces interim evaluation reports.
- The coalition discusses evaluation findings as a whole.

**CACC Has Broader Impact**
- Coalition has developed consultants/trainers – in coalition-building, evaluation, community mobilization, etc. – that share their expertise with others.
- CACC has raised awareness of health issues and solutions in communities of color and in general public.
- Coalition has compiled evidence of positive changes in knowledge, attitudes and behavior among people of color in community.
- CACC has contributed to improvement in health status and outcomes in targeted communities.
- Coalition can document policy changes it promoted that will contribute to changes in individual/community health status and outcomes.
- CACC has contributed to documented systems changes in private or public sectors that contribute to improved health status and outcomes.
TAB 6

Next Steps
Next Steps

This guide is intended to stimulate both thinking and action for coalition-building among communities of color. Users are encouraged to augment the information presented with their own insights. Accordingly, exhibits, case studies, scenarios, and other examples offered herein can easily be exchanged for comparable illustrations reflecting one’s own experience.

As you put this guide to use in your own environment, the Office of Minority Health would like to hear from you. OMH urges you to:

1. Share quotations, stories, case studies, and other examples that you believe are illustrative of the strategies and steps recommended.

2. Suggest additional strategies and steps that you believe to be essential to building CACCs and were not addressed.

3. Identify any exemplary CACCs that could be presented as “best practice” candidates.

4. Report on your use of this guide, including exercises that worked and/or learning activities you substituted that worked better.

5. Suggest training and related resources and resource persons that should be included in the guide, with as much detailed contact information as possible.

6. Give us your feedback, ideas, and general comments.

WE ARE GRATEFUL FOR YOUR INTEREST AND COMMITMENT TO ATTAIN HEALTH PARITY THROUGH YOUR INDIVIDUAL AND COLLECTIVE EFFORTS.

EN LA UNION, ESTA LA FUERZA!
TAB 7

Organizational and Individual Acknowledgments
SHIRE 2004

Organizational and Individual Acknowledgments

Office of Minority Health (OMH), Office of Public Health and Science (OPHS), U.S. Department of Health and Human Services (HHS)
The guide, Building Coalitions among Communities of Color: A Multicultural Approach, was made possible by funding from OMH's State Partnership Initiative. The mission of OMH is to improve and protect the health of racial and ethnic minority populations through the development of health policies and programs that will eliminate health disparities.

OMH, which was established in 1985 by HHS, advises the Secretary and OPHS on public health program activities affecting American Indians and Alaska Natives, Asian Americans, Blacks/African Americans, Hispanics/Latinos, Native Hawaiians, and other Pacific Islanders. OMH works with HHS operating divisions and other federal departments to improve collection and analysis of data on the health of racial and ethnic minority populations, and the Office monitors efforts to achieve Healthy People 2010 goals for minority health. OMH also helps national and community-based organizations to develop the capacity to address health-related issues.

For additional information, go to www.osophs.dhhs.gov/ophs, and click on the OMH link.

Summit Health Institute for Research and Education, Inc. (SHIRE)
This guide was developed by staff members of SHIRE. Since its inception, SHIRE has worked toward the twofold purpose of achieving health parity and aiding vulnerable populations in attaining optimal health.

SHIRE serves as a trusted resource to communities, government agencies, corporations, educational institutions, and foundations seeking to address health disparities and expand access to health care. The organization’s client list includes, but is not limited to, several agencies within HHS, The Commonwealth Fund, The California Endowment, The Meyer Foundation, and Consumer Health Foundation. SHIRE’s significant accomplishments have been to:

- Launch successful “close-the-gap” health campaigns in seven states;
- Coordinate the first strategic plan and national program to achieve health parity for designated racial and ethnic groups;
- Complete and publish the first comprehensive analysis of Federal minority health data policies; and
- Plan and coordinate a national conference on informed consent and health disparities.

It is SHIRE’s sincere hope that communities of color will use this guide in their efforts to build coalitions. Further, it is hoped that these communities will find this guide to be helpful, as they commit themselves to effecting a positive change in the health status of their constituents.

For additional information, phone 202-371-0277 or visit www.shireinc.org.

Out of Many, One (OMO)
In developing this guide, SHIRE collaborated with OMO — one of the numerous activities that focus on minority health issues, implemented in response to the President’s 1998 Racial and Ethnic Health Disparities Initiative. This Initiative resulted in Healthy People 2010, which calls for the elimination of minority health disparities.

In November 2000, history was made when the Asian & Pacific Islander American Health Forum, the National Latino Council on Alcohol and Tobacco Prevention, the National Indian Council on Aging, the Native Hawaiian organization Papa Ola Lokahi, and SHIRE convened a national multicultural working summit among the communities of color to create an advocate for a united health agenda. From this, the conference report, Out of Many, One: A Multicultural Action Plan to Achieve Health Parity was developed. This plan provides a strategic path for achieving health parity for communities of color within the next decade.

OMO is a national advocacy coalition that also assists community-based organizations, as well as federal, state, and local government agencies to build effective multicultural coalitions addressing minority health and health disparities. Using proven coalition-building techniques, many of which are presented in this guide, and a dedicated network of organizations that comprises its core management structure, OMO is able to outreach to multiple communities nationwide, to build the capacity of organizations to be effective in addressing local and national concerns regarding disparities in health care.

For additional information, visit OMO’s web site at www.outofmany1.org.
Summit Health Institute for Research and Education, Inc. (SHIRE) acknowledges with great appreciation the contributions of more than 100 individuals, who shared so generously their time, experiences, and wisdom during the development of this guide. Dr. Nathan Stinson and Gerrie Maccannon, representing the Office of Minority Health (OMH), deserve special thanks for their vision, invaluable guidance, and steadfast support. The guide’s principal author, Ruth T. Perot, was also aided immensely by SHIRE staff and consultants, particularly Suganya Sockalingam, Susan Richardson, Wanda Robinson, Sara Bardin, Khalil Abdullah, Sheila Jackson, Russell Davis, Rosemary Davis, Sheila Davis, Danielle Benjamin, Ronald Bailey, Sheila Thorne, Robert Cosby, Natoya Walker and Linda White-Ballou.

SHIRE is truly grateful to OMH regional consultants, State OMH entity directors, representatives of community coalitions and other organizations, as well as members of Out of Many, One, who participated in developing this document in various ways. Over a period of sixteen months, these individuals helped develop the initial conceptual framework for the guide; reviewed early drafts; participated in pilot and field tests; and also provided text additions, case studies, quotations, design, and formatting recommendations. Their contributions are incalculable and profoundly appreciated.

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**asset**: A useful quality or thing of value. A person’s assets could include valuable life experiences that can inform solutions, or negotiating skills that serve to bring divergent personalities or views together. It is not uncommon that a community undervalues its assets, often because it has internalized unconstructive stereotyping. It is useful, therefore, to engage a facilitator or evaluator who, unencumbered by negative cultural assumptions or judgments, can assist community members to look at themselves through a positive lens. The Asset-Based Community Development Institute is the source of information about the use of assets in community development and coalition-building. See www.northwestern.edu/ipr/abcd.html.

**coalition**: An entity comprising organizations and individuals that have come together for a common purpose, and that functions independently on behalf of the coalition’s members. Essentially, a coalition is an alliance of concerned parties willing to set aside differences in order to achieve a mutual objective. If handled well, the coalition also will be a vehicle for discovery as often organizations and community groups find common ground they did not know they shared.

**community**: A group of people, not necessarily limited by geographical boundaries, who share or believe they share a set of common characteristics or social bonds. Community characteristics could include a common language, shared country of origin, or a set of mutual concerns. Implicit in the definition is the existence of an emotional connection — that members of a community associate with and will assist each other. Ultimately, how communities define themselves is more important than how others seek to define them.

**consensus**: Although consensus is sometimes understood as total agreement, the word is used in this document to mean the articulation of the common will of the group, a common understanding that allows a group to move forward together. Reaching a consensus implies mutual education, an exchange of viewpoints, and even negotiation. A simple majority can be reached by taking a vote, but, within a coalition, attaining a consensus refers to the process of interchange. Reaching a consensus on even a small issue, particularly in a newly-formed coalition, can be an important milestone. Attaining a consensus is an expression of trust where, in the interest of harmony, solidarity, or the attainment of the coalition’s goal, permission is granted to proceed to the next step. If it were to be expressed in medical terms, consensus would be best described as “informed consent.”

**environmental scan**: A compilation of data drawn from diverse sources that results in an accurate portrayal of a given community or specific conditions within it. In the context of coalition-building, particularly around health parity, an environmental scan would include statistics, facts, and other “hard” data, but also would survey the attitudes, values, mores, and belief systems of the community, i.e., its cultural landscape. An environmental scan that fails to account for the cultural reality of a community will inevitably fail to identify critical barriers to achieving health parity.

**fiscal agent**: An individual or organization that manages the funds received by the coalition. The fiscal agent can be a coalition member or an individual or group contracted to perform agreed-upon services. The selection of a fiscal agent is an important responsibility that should be taken with care and consensus among coalition members.

**inter-group coalition**: A coalition that is formed between or among groups. In the context of this handbook, a coalition formed by a Latino/Hispanic organization with a Native American entity would be an inter-group coalition.

**intra-group coalition**: A coalition formed by members within the same group. For example, a coalition of organizations representing African American professionals, though originating from different disciplines, typically would be considered an intra-group coalition because all of its members are African American. It is important to note, however, that the selection of the appropriate term “intra” or “inter” is primarily dictated by the perspective of the observer and the consent of the observed.

**inventory**: A list or catalog of resources that, in coalition-building, includes subjective and objective evaluations of each item. An inventory may be limited to hard assets, like furniture and office equipment, but a separ-
rate inventory of “human capital” should be conducted, i.e., civic and government leaders, health care professionals and advocates, volunteers, etc. Inventories can be developed for each category. It is important to continually update an inventory as the availability of resources, be they hard assets or human capital, is usually dependent on factors that are subject to change.

**logic model:** An assessment tool that seeks to incorporate all the known variables of a coalition’s efforts, including its assumptions, in order to project definable outcomes. A logic model would include the environmental scan, the various inventories and assets of a community, and also encompasses, among other things, the actions taken by the coalition. Results are documented and analyzed to improve and refine the various processes through which the coalition achieves its goal. The logic model is not a static tool, but an organic one. If well done, it will be useful to other coalition efforts and the documentation of the coalition’s history.

**network:** A supportive system that shares information and/or services. Coalitions can emerge from networks, but networks may include individuals or organizations that do not share mutual objectives or ideologies. At its most rudimentary, a network can be a useful source of gathering information as well as a means to disseminate it. Often, coalitions lapse into gathering information only from sources that share the same vision. An effective network is a resource for assisting in the compilation of an environmental scan, which, by definition, should provide a comprehensive analysis of a community and not just promote a deeply held view.

**ownership:** the state of being an owner, especially of property, but now used to convey a sense of personal responsibility and commitment to an idea, value, or issue.

**partnership:** A collaboration of individuals or organizations designed to combine resources to achieve a mutual goal. A partnership often implies a greater willingness of its members to share resources and develop extended relationships with each other than does the term coalition. During the process of coalition-building, partnerships between and/or among members may emerge to address issues outside of the scope of the coalition’s objectives. Ideally, the coalition will result in long-term partnerships if not the continued existence of the coalition itself.

**stakeholders:** Stakeholders can be either individuals or groups of individuals deeply concerned with an issue, its proposed solutions, and eventual outcomes. In coalition-building, the term is used to further describe individuals who have made a commitment to or sacrifice for their community, and who have earned an elevated degree of trustworthiness among community members. Leaders are typically drawn from stakeholders, articulate their concerns, represent their interests, and capitalize on their commitment while moving toward achievable objectives.

**status quo:** The existing condition or state of things, but often used to describe a condition that has become commonly accepted as permanent regardless of its negative effects or aspects.
President
Asian American Council on Health Disparities
Anywhere, USA

Dear Colleague:

On behalf of our People of Color Health Empowerment Coalition (POCHEC), I would like to express my sincere appreciation for the cordial reception our organization received when we visited you and your colleagues last week. Your organization is very impressive, and we congratulate you on your many accomplishments.

It is our sincere hope that our discussion about the need for collective action on health in our community encouraged you to consider becoming a part of POCHEC. We would be very pleased to enlist the Asian American Council among the ranks of community organizations that are committed to make health a priority issue in our city.

As we discussed when we met, POCHEC is deeply concerned that serious health gaps exist for all Asian Americans and other people of color in our community. We are committed to several strategies to address this challenge, which include advocating for government policies and resources that will increase the availability of high quality health services. Equally important are health education, navigation, and promotion strategies that strongly encourage our people to take charge of their health as equal partners with the health providers who care for them.

Collaborating with a highly respected organization such as the Asian American Council will be critical to the success of all of our efforts. We hope that it will be possible for you or your representative to be a part of POCHEC’s next meeting. That will take place on ______________ in the Sunshine Room in the Shining Star Community Center, at 2000 Riverwalk Drive. We have enclosed directions.

Agenda topics will include planning for neighborhood campaigns on diabetes, a presentation from the Department of Public Health on racial and ethnic data, and a report from POCHEC’s legislative advocacy committee. We will also ask each organization attending the meeting for the first time to share with the group highlights of your goals and activities.

It was our pleasure to become better acquainted with you and your outstanding work. If you have any questions or would like more information about POCHEC, I will be delighted to respond. Please complete the enclosed form and return it in the enclosed SASE at your earliest convenience, but no later than ____________________.

Sincerely,
RSVP FORM

Name:______________________________________________________________

Affiliation: ___________________________________________________________

Address: ____________________________________________________________

City/State/Zip Code: ___________________________________________________

Phone/Fax: __________________________________________________________

E-mail/Web site: ______________________________________________________

❑ I will attend the POCHEC meeting
❑ I will not be able to attend the POCHEC meeting

If you are unable to attend this meeting, would you be interested in hearing about future meetings or activities?

❑ Yes    ❑ No

Thank you for your prompt reply.
Sample Meeting Attendance Form

Meeting of the [Name of Coalition]

[Date]

<table>
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<tr>
<th>Name</th>
<th>Organization</th>
<th>Contact Information (phone #/E-mail address)</th>
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[Name of Coalition]  
MEMBERSHIP FORM

PERSONAL INFORMATION

Name: _______________________________________________________________________________________
Address: _______________________________________________________________________________________
_____________________________________________________________________________________________
Phone: _______________________________________________________________________________________
E-mail: _______________________________________________________________________________________
Race/Ethnicity: _________________________________________________________________________________
Relevant background: __________________________________________________________________________
_____________________________________________________________________________________________

ORGANIZATIONAL INFORMATION

Organization Represented: _______________________________________________________________________
Type of Organization: __________________________________________________________________________
Major Organizational Successes: __________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
Are you authorized to officially represent this group?  ❑ Yes  ❑ No

GENERAL INFORMATION

On which specific area(s) would you like to see the [name of coalition] focus? ______________________________
_____________________________________________________________________________________________
What would you like to do to advance the goals of the [name of coalition]? _________________________________
_____________________________________________________________________________________________
Is there anyone else who you would recommend for coalition membership?  ❑ Yes  ❑ No
If "yes," please provide name(s) and contact information below. __________________________________________
_____________________________________________________________________________________________
Sample Meeting Evaluation Form

Evaluation of [Date] Meeting of the [Name of Coalition]

Please assess the items below using the scale to the right of each item, where “1” represents “Not at all,” and “5” represents “Excellent.”

1. To what extent did/was this meeting:
   a. Follow the agenda
   b. Meet your individual needs
   c. Meet your organization’s needs
   d. Effectively organized
   e. Provide useful information

2. To what extent did/was:
   a. The leadership appear to be prepared
   b. The leadership provide useful information
   c. The content of the meeting informative
   d. The seating arrangement adequate
   e. The atmosphere in the room pleasant

3. What was the most beneficial element(s) of the meeting?
  ________________________________________________________________________
  ________________________________________________________________________

4. What was the least beneficial element(s) of the meeting?
  ________________________________________________________________________
  ________________________________________________________________________

5. List recommendations or modifications for future meetings.
  ________________________________________________________________________
  ________________________________________________________________________

Please give this form to the [officer]  
Your feedback is appreciated and will be used to enhance future meetings.
PRESS RELEASE

FOR IMMEDIATE RELEASE

Members of Racial/Ethnic Communities
Launch 18th Street Corridor Community Health Coalition

WASHINGTON, DC — April 8, 2005 — Residents of the 18th Street corridor have united to form a coalition focused on ensuring the elimination of racial and ethnic disparities in health care. Members of the coalition represent the following populations: African American, American Indians and Alaska Natives, Asian Americans, Hispanic/Latino Americans, and Native Hawaiians and other Pacific Islanders.

“It makes sense for people of color to mobilize and to work together on shared health challenges,” commented Sam Johnson, the coalition’s primary organizer. Robert Hightower of the Navajo Nation and another coalition organizer added, “Our members share a number of commonalities, such as a special sensitivity to the issues being addressed, valuable life experiences that can inform solutions, and similar encounters with societal institutions.”

The first organizing meeting is scheduled to be held on May 13, 2005, at the Republic Gardens Restaurant in Washington, DC. It is anticipated that the focus of this meeting will be the introduction of members to each other, as well as the planning of a future event or activity at which the participating communities can come together to discuss shared health concerns and possible solutions.

Contact:
Sam Johnson
sjohnson@verizon.net
Phone: 202-888-2004
FAX: 202-888-2005
18th Street Corridor Community Health Coalition
2288 18th Street, NW
Washington, DC 20000
http://www.c18chc.org
Selected References and Resources

Racial and Ethnic Health Disparities


Institute of Medicine, In the Nation’s Compelling Interest: Ensuring Diversity in the Workforce, 2004.

Institute of Medicine, Unequal Treatment: Confronting Racial and Ethnic Disparities in Health, 2002.


Coalition-Building/General and in Communities of Color


Center for Health Policy Development, How to Build a Community HIV/AIDS Coalition, 1998


Web Sites

The following web sites offer information pertinent to coalition building in general, coalition building among people of color, and health disparities. A brief description follows each site address.

www.omhrc.gov – The Office of Minority Health Resource Center’s web site, which presents such information as Closing the Health Gap fact sheets; Take a Loved One to the Doctor Day information; Cultural Competence Standards; highlights of the National Leadership Summit to Eliminate Racial and Ethnic Disparities in Health; and relevant Executive Orders and statistical information documenting the health status of African Americans, American Indians and Alaska Natives, Asian Americans, Latino/Hispanic Americans, Native Hawaiians and other Pacific Islanders.

www.cfpa.org – Center for Policy Alternatives is the nation’s leading nonpartisan public policy organization serving state legislators. The Center’s Spring 2002 newsletter, Alternatives, includes an interview that focuses on coalition building among people of color.

www.clemson.edu/A2020/annual.htm – Web page of Clemson University’s alliance with South Carolina includes information on health-related projects and the significance of collaboration.

www.communitychange.org/about/stratplan01.pdf – The Center for Community Change’s Marshalling the Power of Many is the Center’s strategic plan for increasing its impact. The Plan describes how the Center assists communities in launching coalitions and in pursuing strategies that bring about change.

www.cpnp.org – Civics Practices Network is a collaborative and nonpartisan project dedicated to bringing practical tools for public problem solving into community and institutional settings across America. Under the Topics tab is a link to CPN’s Health section, which provides a variety of essays and case studies on how to build community capacities.

www.grnp.org – Global Rural Network Project is a collaboration between the Center for Communities of the Future and the Tennessee Valley Authority. Although the site’s focus is on rural communities, among its links are Building Capacities for Transformation and the COTF Web Workbook.

humwww.ucsc.edu/CultStudies/PUBS/Inscriptions/insc_top1.html – Journal of the Center for Cultural Studies at the University of California Santa Cruz. Volume 7 presents a discussion with Angela Davis and Elizabeth Martinez on Capacity Building Among People of Color.

www.mchlibrary.info/KnowledgePaths/kp_race.html – Knowledge Path: Racial and Ethnic Disparities in Health, compiled by the Maternal and Child Health Library at Georgetown University, offers links to a selection of current, high-quality resources and information tools. (Note: This site is highly recommended.)


www.preventioninstitute.org – Prevention Institute is a California-based organization that works with the California Endowment to inform its health disparities initiative. The site offers descriptive tabs (e.g., Tools) with links to valuable information (e.g., Eight Steps to Effective Coalition Building).

www.tdh.state.tx.us/minority/aboutus.htm – Texas Department of Health, Minority Health Transition Information provides an informative message from Texas’ Commissioner of Health. The site also has links to a “Functional Model” and “Measurable Results & Evidence of Improvement.”
Figure 1
Four Cs of Coalition-Building among Communities of Color

Create

Connect

Celebrate

Commit
### Figure 2
Summary of Coalition-Building Strategies and Steps

#### TAB 2 — CREATE

**Strategy 1: Launch the Coalition**
- **Step 1-1** Recruit a core coalition planning committee
- **Step 1-2** Put relationships first
- **Step 1-3** Identify an initial vision and common concerns as possible organizing issues

**Strategy 2: Build an Initial Framework for Working Together**
- **Step 2-1** Create an appropriate decision-making and governing process
- **Step 2-2** Determine extent of decision-making by consensus
- **Step 2-3** Share power from the very beginning
- **Step 2-4** Honor different communication styles
- **Step 2-5** Respect that not all partners will feel the same way about every issue
- **Step 2-6** Take inventory and, if necessary, seek funds for the coalition’s work — as a team

#### TAB 3 — CONNECT

**Strategy 3: Expand the Circle**
- **Step 3-1** Agree on criteria for coalition candidates
- **Step 3-2** Compile a list of potential coalition members
- **Step 3-3** Check interest and availability of coalition candidates
- **Step 3-4** Plan and hold organizing meeting of the coalition

**Strategy 4: Build Trust and Mutual Respect**
- **Step 4-1** Create opportunities for self-examination within communities of color before bringing different racial and ethnic communities together
- **Step 4-2** Establish boundaries of acceptable behavior
- **Step 4-3** Share personal experiences with representatives from other racial and ethnic groups
- **Step 4-4** Hold cultural celebrations
- **Step 4-5** Exchange gifts
- **Step 4-6** Identify, compare, and celebrate assets
- **Step 4-7** Share stories on advocacy and policy development successes and challenges
- **Step 4-8** Put listening on the agenda
- **Step 4-9** Provide support for group identification and cohesion
- **Step 4-10** Acknowledge and respond appropriately to cultural and language differences
- **Step 4-11** Solicit input and participation in various ways
- **Step 4-12** Take time to discuss issues of race and ethnicity
- **Step 4-13** Plan events/activities where people can experience success in working together
- **Step 4-14** Remember the personal touch

**Strategy 5: Organize Around a Vision, Mission, and Goals that Promote Change and Continuity**
- **Step 5-1** Bring the right support to the table
- **Step 5-2** Complete and document an environmental scan
- **Step 5-3** Take a community inventory
- **Step 5-4** Conduct focus groups to identify specific racial/ethnic group issues and possible cross-community issues
- **Step 5-5** Identify areas of consensus and supply supporting documentation
- **Step 5-6** Take time to craft a CACC vision, mission, and values that everyone endorses
### Figure 2 (cont’d)

<table>
<thead>
<tr>
<th>Step 5-7</th>
<th>Establish an action agenda with achievable goals and objectives</th>
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<tbody>
<tr>
<td><strong>Strategy 6: Evaluate</strong></td>
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<tr>
<td>Step 6-1</td>
<td>Hold a group discussion about how evaluation could and should be used</td>
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<tr>
<td>Step 6-2</td>
<td>Establish an evaluation committee</td>
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<tr>
<td>Step 6-3</td>
<td>Recruit an evaluator to work with CACC evaluation committee</td>
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<tr>
<td>Step 6-4</td>
<td>Review CACC action plan and determine evaluation benchmarks and criteria</td>
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<tr>
<td>Step 6-5</td>
<td>Monitor progress on ongoing basis</td>
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<td>Step 6-6</td>
<td>Report to CACC and others</td>
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<th><strong>TAB 4 — COMMIT</strong></th>
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<tr>
<td><strong>Strategy 7: Solidify the CACC’s Organizational Structure</strong></td>
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<tr>
<td>Step 7-1</td>
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| **Strategy 8: Plan for and Establish Financial Stability** |
| Step 8-1 | Take inventory of resources CACC members can offer |
| Step 8-2 | Decide who should receive funds for the CACC |
| Step 8-3 | Identify acceptable and non-acceptable donors |
| Step 8-4 | Develop short- and longer-term budgets |
| Step 8-5 | Develop business, marketing, and fundraising plans |
| Step 8-6 | Seek funding from non-traditional sources |
| Step 8-7 | Provide CACC members with financial reports on a regular basis |

| **Strategy 9: Communicate Effectively** |
| Step 9-1 | Develop an internal and external communications plan |
| Step 9-2 | Designate a communications monitor or task force |
| Step 9-3 | Identify and utilize members’ specialized communications skills |
| Step 9-4 | Develop the CACC’s logo and other “trademarks” |
| Step 9-5 | Speak with one voice |
| Step 9-6 | Address members’ special communication needs |

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<th><strong>TAB 5 — CELEBRATE</strong></th>
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<td><strong>Strategy 10: Build on Success</strong></td>
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<td>Step 10-1</td>
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Figure 3
Phasing of Strategies for Developing Collaborations among Communities of Color

Strategy 10
Build on Success

Strategy 1
Launch Coalition

Strategy 9
Communicate

Strategy 2
Build Framework

Strategy 7
Solidify Organization

Strategy 3
Expand Circle

Strategy 8
Stabilize Finances

Strategy 4
Build Trust

Strategy 5
Set Vision etc.

Strategy 6
Evaluate
Figure 4
Building Community Coalition Capacity: A Logic Model

**Inputs**

**Resources**
- 1.1 Coalition Funding
- 1.2 Funds for trainers and consultants for statewide meetings
- 1.3 OMH staff time
- 1.4 Coalition-generated funds
- 1.5 Coalition consultants

**Environment**
- Level funding
- Focusing on evidence-based practice
- HP 2010 goal: eliminate health disparities
- Increasing interest in community coalitions as ‘change agents’

**OMH Activities**
- 2.1 Administer grants
- 2.2 Establish design and communication strategy
- 2.3 Provide technical assistance
- 2.4 Conduct coalition site visits
- 2.5 Provide feedback on coalition implementation
- 2.6 Convene coalition meetings (2x/year)

**Coalitions Activities**
- 3.1 Create implementation plans
- 3.2 Deliver services
- 3.3 Maintain coalition
- 3.4 Engage communities
- 3.5 Self evaluate
- 3.6 Initiate quality improvement activities
- 3.6 Share coalition work

**Partnering**
- 4.1 Reporting format
- 4.2 Fine-tuning coalition-building model
- 4.3 Communication strategies
- 4.4 Special Projects

**Outputs**
- 5.1 Well managed coalition contracts
- 5.2 Ongoing open communication
- 5.3 Accountability
- 5.4 Quality improvements

**Outcomes**
- 6.1 Community-wide & direct services
- 6.2 Member recruitment & retention
- 6.3 Quality improvements
- 8.1 Functioning coalitions
- 8.2 Coalition products and services
- 8.3 Asset identification and utilization
- 8.4 Evidence of coalition value-addedness

**Impact**
- 10.1 Evidence of reduction of health disparities among community residents linked to coalition work

New York State Department of Health – Office of Minority Health
Exhibit 1
Steps in Reaching Group Consensus

**Set the context** and clarify the topic about which consensus is being sought – establish what is the group trying to achieve and why

**Brainstorming** – elicit the group’s best thinking through a brainstorming (Through this process everyone’s ideas are valued and included in the critical thinking of the group.)

- First, members list all the ideas individually
- Next, in pairs or small groups, set priorities and select several cards reflecting those priorities to share with the group

**Cluster the ideas presented**, discover points of agreement and reveal where more inputs or data are needed

**Name the ideas** through a facilitated dialogue to clarify the consensus of the group

**Confirm the consensus** made by the group and encourage individuals to own the collective decision

- Conference calls, list serves, and other electronic means can be an effective way to maximize participation, especially when coalitions cover large areas (e.g., country, state, regional, national), and all participants have access to the necessary technology.

CACC leaders may also need to make sure that a representative from the same organization is available to participate in conference calls and to keep missing stakeholders informed. If a CACC member has been absent for one or two meetings or conference calls of the core group, the chairperson or convener of the coalition should call the absent member to inquire about the reason(s) for the missed meetings.

Exhibit 2
Suggested Ground Rules for CACC Members

1. **Self-management:** Manage your level of interaction and participation within the group. You are responsible for managing the time given to you as effectively as possible and for staying within the allotted time frames. This will allow others to have the opportunity to interact and communicate equally.

2. **Confidentiality:** It is important to create an atmosphere of safety and trust within which to work. Commit to maintain all confidences within the confines of the room. It is acceptable to share one’s own experiences and issues raised, but not to share others’ experiences and issues that are shared in confidence.

3. **Avoid Dumping or Blaming (no “put-downs”):** Blaming other participants for the ills of society or for negative experiences caused by others is counterproductive and diminishes trust.

4. **Be Open:** Be open to hearing the information others provide. Listen carefully to what they are saying. You don’t have to accept everything you hear…just take it in and think about it.

5. **Self-Responsibility:** Take responsibility only for yourself. Squarely and honestly confront your own attitudes and behavior. You are not responsible for how others learn or change their attitudes or behavior.

6. **Participate at Your Own Comfort Level:** Feel free to interact only as much as you choose. Share only what you want to share of your thoughts, feelings, and experiences. You have a right to “pass.”

7. **Be Honest:** You will gain more from CACC meetings if you honestly look at your own strengths, biases, and prejudices. This may be strictly internal.

8. **Take Risks:** Share bold ideas, step outside of the norm, and be willing to express openly, diplomatically, those opinions or issues that may be difficult to convey.

9. **Have Fun:** Working on multicultural issues need not be an arduous process. Freeing ourselves of the emotional baggage that we all carry around — prejudice, anger, frustration, guilt, feelings of helplessness — can be truly emancipating.
Exhibit 3
Managing Communications

Here are steps to ensure that all participants have the opportunity to communicate equitably in CACC meetings.

1. Set the stage for conversation by addressing the need to hear all points of view. Establish the reality that “we all see facts in a variety of ways.”

2. Listen actively to participants – restate participants’ comments to confirm that you have understood their point and affirm their contribution.

3. Demonstrate “hearing the speaker” by writing (using flip chart or identify note-taker) and reading the notes out loud to the group periodically.

4. If a participant is repetitious or long-winded, respectfully cut off the monologue with a statement such as: “I think we’ve got your main point. I would love to hear more at the break. Now somebody else.”

5. If the behavior persists – take the participant aside and check for concerns that he/she is not being heard, and address them. Convey the consequences of dominating the conversation – that others cannot participate equally and will feel marginalized or left out.

6. If discussion goes off point, respectfully but forcefully bring the conversation back to the topic at hand.

7. If a participant interrupts another, intervene respectfully and ask that the first person complete the point he/she is making, then ask: “Now what is your perspective on this?” Open it up to others, as well as the person who interrupted initially.

8. When asking questions, frequently repeat the need for one point or example and succinct answers. As soon as a person makes his/her first point, immediately turn your attention to another participant. This cuts off multiple answers or long answers.

Exhibit 4
Characteristics of a Trusted Facilitator

- Makes participants feel comfortable and supported in addressing issues of concern;

- Understands that there are varying self-interests and is able to encourage the expression of those interests while balancing the views of others;

- Recognizes that some group members may not participate unless specifically requested. Others may prefer to voice their opinions prior to, or after the meeting;

- Recognizes that some positions taken may stir controversy and heated debate. The facilitator’s role is to ensure that the participants need not be fearful or feel intimidated by raising such issues;

- Unifies the group at every opportunity, emphasizing mutual respect and trust;

- Calls upon participants, gauging their level of confidence in speaking publicly and encouraging them to participate at their comfort level;

- Keeps the momentum going and encourages the group to define goals, tasks and timeframes for accomplishment; and

- Recognizes that every individual has a valuable contribution to make.
Exhibit 5
OUT OF MANY, ONE
A VISION FROM PEOPLE AND COMMUNITIES OF COLOR FOR MULTICULTURAL HEALTH

We believe that the attainment of the highest level of care and quality of life is a basic human and civil right.

We embrace a vision of healthy communities that respects diverse cultural and spiritual values and empowers all people – individuals and families – in a loving, holistic, healing and compassionate manner.

We are committed to develop diverse leadership to build health environments and a prosperous, just and humane society.

We want to develop a universal system of care that is:

• Culturally and linguistically appropriate;

• Affordable, accountable and accessible, regardless of ability to pay or immigration status;

• Comprehensive and timely;

• Prevention-oriented;

• Community-based, people-centered, and community-owned;

• Acknowledges health as a holistic process;

• Incorporates ethnic healing practices; and

• Supports partnership, mobilization and coalition-building.
Exhibit 6  
Values of Health Action Forum of Prince George's County, Maryland

Prologue

We dare to hold fast to the dream that in the near future Prince George's County will be the model for providing effective health care services in the state of Maryland and eventually, the nation. We accept this challenge.

Our Values

1. Access to high quality health care is a basic human and civil right.

2. Health care and health advocacy are everybody's business and everybody's responsibility.

3. Optimal health and wellness are attainable.

4. Health care providers are responsible for providing quality cost-effective care, for being accountable and culturally sensitive, and for encouraging active participation in health care decisions.

5. All individuals have a right to a high quality health care system that is accessible, affordable and culturally appropriate.

6. Individuals, groups, families and communities are responsible for active participation in the process of attaining wellness and in making health care decisions.

7. Universal health coverage is an essential component of a quality health care system.

8. All individuals have the right to equal treatment without regard for color, age, income, gender, religion, sexual orientation, disability, employment status, health insurance status, race or ethnicity.

9. Wellness is individually defined and includes physical, social, spiritual, psychological, economic, cultural and environmental components.

10. Wellness includes health promotion, disease prevention and disease management.
Exhibit 7
Six Stages in Conflict Resolution*

1. **Rhetoric** – the language of the parties’ initial statements and positions, which is rarely clear and concrete

2. **Issue definition** – defining the issues that really matter so that agreement can be reached about the crucial points in dispute

3. **Exploring positions** – offering those in conflict the chance to state their positions on the key issues being disputed

4. **Broadening the issues by exploring underlying interests** – brainstorming to look at the issues with a wider lens and discover new ways to look at the conflict

5. **Refining issues to be settled** – giving parties in the conflict the chance to decide which positions are “bottom-line” and which can be dropped or compromised

6. **Agreement** – culminating in a written agreement that is signed by all parties.

Exhibit 8
Case Study in Coalition-Building: Successes and Lessons Learned

The Coalition of Limited English Speaking Elderly (CLESE) was incorporated in 1989 after its founding members served as an advisory council for the Chicago Department of Aging's ethnic needs assessment in 1987. It has functioned as an umbrella organization for ethnic community-based organizations in the Chicago area. The coalition's membership has grown from 12 founding members to more than over 40 organizations representing the following ethnic groups:

- Assyrian
- Japanese
- Korean
- Laotian
- Latino/Hispanic (Central American, Cuban, Mexican, Puerto Rican, South American)
- Lithuanian
- Middle Eastern
- Pakistani
- Polish
- Romanian
- Russian
- Vietnamese
- Indian
- Bosnian
- Cambodian
- Chinese
- Croatian
- Filipino
- Greek
- Haitian

The coalition was established to serve as a single point of contact and to advocate on behalf of its constituents with city and state officials, while at the same time providing technical assistance to its members. The CACC has a staff of three individuals, who assist non-English proficient elders in accessing health care services.

**Successes:** This CACC has served as an effective voice for immigrant populations, speaking out on inadequate language support and the lack of equal access to health services. The coalition has also provided nursing/home care services to needy individuals through its member organizations, and has made technical assistance available to members.

**Challenges:** Competition among groups is an issue. Recently, program funds were made available for only seven organizations serving five ethnic communities, to be selected from the 40 members.

**Lessons Learned:** Stress the importance of reaching binding consensus. Ensure committed participation from board of directors. Welcome new coalition members. Recognize the value of investing in staff to help achieve the CACC’s mission, not just deliver services.
Exhibit 9
CACC Potential Victories

CACC Is Strong Organizationally
• Coalition members have built and maintained new personal relationships.
• Coalition can survive personnel changes.
• Many people are trained to lead.
• Stakeholders are invested, productive and effective.
• CACC members participate in coalition events regularly.
• Community members participate in CACC events.
• Coalition has sustained itself over time.
• Coalition is institutionalized.
• Members contribute their assets to help CACC.

CACC Demonstrates Parity
• Coalition has diverse and equitable representation of affected communities of color and others as leaders and members.
• Member groups share power, funding and other resources.
• Communities of color participate in CACC in equal numbers.
• Participating communities have equal access to resources provided through CACC activities.
• Recognition and acceptance of individual cultural practices and beliefs.

CACC Has a Collective Voice
• Shared belief that the CACC is stronger working together than individual groups working separately.
• There is consensus on vision, mission, goals, objectives, agenda, implementation and expected outcomes.
• CACC speaks in unity on issues.

CACC Commits to Evaluation
• CACC has defined success for itself.
• CACC has an evaluation plan, with performance measures (qualitative/quantitative) to assess progress and outcomes.
• Coalition members are comfortable with evaluation and participate willingly in data gathering and assessment.
• CACC produces interim evaluation reports.
• The coalition discusses evaluation findings as a whole.

CACC Has Broader Impact
• Coalition has developed consultants/trainers – in coalition-building, evaluation, community mobilization, etc. – that share their expertise with others.
• CACC has raised awareness of health issues and solutions in communities of color and in general public.
• Coalition has compiled evidence of positive changes in knowledge, attitudes and behavior among people of color in community.
• CACC has contributed to improvement in health status and outcomes in targeted communities.
• Coalition can document policy changes it promoted that will contribute to changes in individual/community health status and outcomes.
• CACC has contributed to documented systems changes in private or public sectors that contribute to improved health status and outcomes.
PLEASE LET US KNOW WHAT YOU THINK OF THIS GUIDE!

Please rate the items below using the scale to the right of each item, where “1” represents “Not at all,“ and “5” represents “Excellent.”

1. Thoroughness of content 1 2 3 4 5
2. Clarity 1 2 3 4 5
3. Quality of writing 1 2 3 4 5
4. Organization 1 2 3 4 5
5. Overall readability 1 2 3 4 5
6. Usefulness of information 1 2 3 4 5
7. Use of graphics 1 2 3 4 5
8. General layout 1 2 3 4 5
9. Extent to which guide meets your coalition’s needs 1 2 3 4 5
10. Probability of recommending this guide to others 1 2 3 4 5
11. Please specify the most valuable element(s): __________________________________________
________________________________________________________________________________
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13. Please specify any revisions and/or other topics recommended: ________________________
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