Culture in Evaluation #6:
Low Socio-Economic Status Populations Tobacco Control Evaluation With Low Ses Populations In California

TCEC
Tobacco Control Evaluation Center

"Socio-economic status is the <u>single greatest predictor</u> of smoking behavior. Americans below the poverty line are 40% more likely to smoke than those at or above the poverty line." [1]

What constitutes low socio-economic status (SES) in California?

The low socio-economic status community is comprised of people with low income (below the poverty line), low education level (less than 12 years of school) and low opportunity (fewer life choices). This status results from either generational poverty (persistent poverty over several generations of a family) or situational poverty (poverty due to conditions such as divorce, unemployment, disability, or recent immigration). Although there can be many cultural differences across ethnic groups within this population, most suffer from being medically underserved, under- or uninsured, under- or unemployed.

Just how prevalent is low socio-economic status in California? In 2006, an estimated 35.9 million people lived in the state.[2] Of those, 13 percent, or 4.8 million lived below the federal poverty line (an annual income of $9,645 for individuals or $19,307 for a family of four).[2] When adjusted for higher CA housing costs, the relative poverty rate of the state was 16.1 percent, the third highest in the nation (behind Washington D.C. and New York).[3] Twenty-five percent of the state's households earned less than $25,000 a year.[4] Almost 19 percent of Californians had no health insurance.[2] And close to one-fifth of the adults in the state over 25 years old did not graduate high school.[2] So a significant portion of Californians are affected by low socio-economic status.

Since low socio-economic status is derived from both low income and education level it can be difficult to come up with a completely accurate number of those affected. To report statistics for your community, it is acceptable to present two separate figures: 1) the number of individuals with low income and 2) the number of those with low education levels. Of course, not everyone that falls into either one of these categories is of low socio-economic status.

Because poverty and low literacy affect numerous facets of California's population, there are many subgroups within the low SES community. While a greater proportion of women and people of color comprise this population, low socio-economic status is common among:

- Recent immigrants
- Farm workers
- Single-mother families
- People with disabilities
- Substance abusers
- Those with mental health issues
- The homeless
- Victims of domestic violence
- Veterans
- Incarcerated or parolee populations
- The working poor
- Both rural and urban dwellers
- Portions of the elderly population
- Relocated victims of the Hurricane Katrina disaster

1   Robert H. Anderson et al. *Smoking Habits and Prevention Strategies in Low Socio-economic Status Populations* (2004).
2   CA State Dept. of Finance, Demographic Research Unit, *Current Population Survey Report* (2006).
3   Deborah Reed, "Poverty in California" (2006).
4   US Census, "DP-1, DP-2, DP-3 Profile of Selected Economic Characteristics (2000).

Characteristics

While there is great diversity among low socioeconomic status populations and no single set of cultural norms is held by all of the subgroups that fall into this category, there are a number of characteristics that are commonly seen in many low SES settings. (This may be more true when lower status is due to generational poverty rather than situations like recent divorce or new immigrant status.) Although some anthropologists dispute the notion of a "culture of poverty," writer/educator Dr. Ruby Payne found that people in low income communities tend to: [5]

- Speak in the casual register (use limited vocabulary and rely on nonverbal cues) and may "meander" before getting to the point

- Tolerate a high noise level (the TV is always on, people talk over each other)

- Feel motivated primarily by personal relationships rather than by goals or rules

- Have a matriarchal family structure (men come and go)

- Be unaware of middle class values, norms and courtesies

- View "organized society and authority with dislike/distrust"

- Operate with risk and stress as a way of life

- Hold a fatalistic attitude with little hope for the future

In addition, low SES individuals are less likely to practice healthy behaviors or have access to adequate health care than the rest of the population.[6] These can be important factors to keep in mind as you interact with and collect and interpret data from your target populations.

Common Stereotypes & False Assumptions

While it can sometimes be helpful to understand traits that are common to many low income communities, be careful not to accept harmful stereotypes and false assumptions held about low SES populations and causes for their condition. It is important to be aware of these myths so that they don't affect your approaches to data collection and interaction with target populations in low income or poorly educated communities.

Stereotype/ Assumption	Fact
Poor people don't want to work; they'd rather live on welfare.	Actually, the majority of adults in California living below the federal poverty level are employed.*
People without much education lack intelligence.	Intelligence is not measured by education. Every cultural community has its own set of skills and intelligences which are required to navigate successfully in that setting.**
Low SES smokers aren't informed about the negative health effects of tobacco use.	Studies show that they do know about the hazards of tobacco use and, as a result, most have tried to quit at least once. However, the combination of life stressors and the social role of tobacco in their communities leads to frequent relapse.***

* Theresa Boschert, "Up Close and Personal: Low Income Californians" (2006).
** Ruby Payne et al. (2000)
*** Robert Anderson et al. (2004).

What role does tobacco play?

Tobacco use is seen as the norm in low SES communities. In fact, many poor people think that a majority of the overall population smokes.[7] In 2002, while 30 percent of low SES adults in California smoked, only 15 percent of adults in the state did;[8] (that overall rate dropped even lower to 13.3 percent in 2006).[9] Cigarettes are used in low SES communities as a way to reduce stress and relieve boredom.[9] For people with few resources, tobacco is one enjoyment that is within reach and legal.

The lack of resources in low SES neighborhoods is used by the tobacco industry to its advantage. Because so many basic needs are more pressing, tobacco control

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5   Ruby Payne et al. *Bridges Out of Poverty: Strategies for Professionals and Communities* (2000).
6   CA Dept. of Health Services, Tobacco Control Section, *Communities of Excellence in Tobacco Control: Module II* (2006).

7   CA Dept. of Health Services, Tobacco Control Section, *Communities of Excellence in Tobacco Control: Module II* (2006).
8   RESPECT, (accessed 2007) "Getting to Know Low Income, Low Education and Low Opportunity Communities," http://www.respect-ala.org/key_getting.htm
9   CA Dept. of Health Services, Tobacco Control Section, "California Adult Tobacco Survey" (2006)

is not seen as a compelling priority. Even if it was, these communities usually lack cessation services and materials in appropriate languages or literacy levels. To make things worse, these populations are targeted by big tobacco with ethnic-specific media messages that blanket the small convenience stores and corner grocers so prevalent in low income neighborhoods. The industry further extends its presence by sponsoring family-oriented and community events where it can recruit the next generation of smokers by exposing them to images of tobacco branding, promotional items and free samples.

What stress factors affect this population?

Low socio-economic status communities are susceptible to stress by a number of factors over which they have little control. This added stress can increase the likelihood of people in these situations to turn to tobacco for release and comfort. Potential stressors include:

- Financial insecurity
- Food insecurity
- Joblessness
- Homelessness/unstable environment
- Domestic violence
- Addiction/substance abuse
- Depression
- Crime
- Lack of transportation
- Lack of health care

The cost and effects of tobacco use itself can intensify stress factors on low SES households. For example, despite frequently not having enough money to buy adequate food throughout the year, in 2001 poor families spent an average of nine percent of their annual household income on cigarettes.[10] This leaves less money to pay for housing, food, transportation and health care needs, all of which heightens adult stress and the potential for domestic violence. The negative health effects of tobacco cause illness, increasing the need for access to health care and affecting the ability to work.

10 Brian Armour et al. "Is Food Insecurity a Price of Smoking Among the Poor?" (2005).

How can you connect with low SES populations?

Getting to Know the Community
(Ideas from the American Cancer Society's *Guidebook for Divisions & Units*)

Before you can design your evaluation activities, you'll need to get an idea of who the players and the subgroups are within a community. Start with demographic information and low SES data specific to the community. Get a current map of the area to note the location of subgroups within the population, service providers, important gathering places, etc.

Contact the United Way and the CA/Nevada Community Action Partnership to find out which organizations operating in the community serve your target population. Conduct key informant interviews with directors of those agencies. Ask them who the leaders are in the community. Often the true leaders are not in positions of power, but are people who serve as information sources, role models and problem solvers in the community.

Map out all locations that could be access points to your population. Note community organizations by location, ethnic makeup and size. Ask for recommendations of reliable informants who can act as your cultural guides to the community — providing entrée to people's trust, advising on the cultural appropriateness of your evaluation approach and data collection, and by translating cultural cues.

Minimize the fears the community may have about you as an outsider by building a relationship with them as a trustworthy, caring person. This will take time. As you attend community events and become known to people, they will be more likely to trust you and participate in your tobacco control intervention and evaluation activities. So be prepared to be a resource, not just a data collector. People living in low SES communities have many unmet needs. If you can help them access resources or services, it will be a fair trade of information.

Make it a point to always carry through with any promises you make. Low SES populations have been betrayed so often that they are already skeptical of services, providers and outsiders.

How can you involve low SES populations in your evaluation activities?

Planning Your Evaluation

As you set out to plan the who, what, where and when of your evaluation activities, remember that spending the extra time in the beginning stages to gain the acceptance and input from key community members can save you a lot of time in the end.

- Involve key community informants in all levels of the planning and collection processes. They'll be able to tell you what approaches will/won't work. In this way you can ensure your tools and process are more culturally acceptable.

- Ask about the language (and dialects), cultural norms and literacy levels of the community. Find out what would be offensive or intimidating to that population.

- When asking advice of leaders or community sources, be open to what they're saying. Don't appear to be already informed about everything.

- Ask people who give you a contact if you can mention them as the source of the information. Maintaining their confidentiality shows your respect for them.

- Even though you've asked key informants what they believe their community thinks, feels or does, be sure to validate those assessments with members of the target population themselves.

- Figure out which data collection methods will work best to gather the type of information you need. Will people be more comfortable responding individually or in a group? Find out if there are cultural norms against expressing negative or strong opinions.

- Frame the issues in terms of protecting children and the family. Even though many low SES individuals smoke, they are concerned about the risks of secondhand smoke and don't want their children to smoke.

Creating/Adapting Data Collection Instruments

Because every cultural community has its own norms, social cues and lingo, a one-size-fits-all approach to designing data collection instruments can often hamper your attempts to collect unbiased data. Therefore, it is always a good idea to do a little research about what will most likely make sense to your target community.

- First investigate which subgroups might exist in your sample. Decide if it would be useful to be able to separate out data by subgroups. If so, include demographic questions in your data collection instruments to identify the various populations.

- Simply translating materials into another language is not enough. The appearance, format, examples as well as the wording need to be made culturally appropriate for this specific community. Be sure to involve cultural insiders in this development process.

- Take the literacy levels, education and language of respondents into consideration when designing the format and type of data collection.

- Always pretest data collection instruments with members of the target community (who are not already in your planned sample). Ask if the wording of the questions makes sense; how they interpret the meaning of each question; whether there are more culturally relevant examples that could be used; if there are any other questions you should be asking; if there are other choices that should be added to multiple choice questions; and how the format or method will work in this community. Make sure that all subgroups understand things in the same way.

Working with Low Literacy Populations

(Ideas from *Clear & Simple: Developing Effective Print Materials for Low-Literate Readers*)

While it's always best to avoid using written data collection formats with low literacy populations, sometimes that's just not possible. Often, too, the literacy level of individuals is not known. When you intend to collect information from sources you suspect may include those

with low literacy, it will be important to design materials with the following advice in mind:

- Put the most important information either first or last — these points will be remembered best. Cluster information by topic and use subheadings to clarify the format.

- Reading can be difficult for low-literate individuals, so include only the most essential information.

- People with low literacy may have trouble understanding graphs, percentages, scales or even multiple choice questions. Non-literate cultures are not used to thinking abstractly.

- Use graphics to elucidate the text, not to decorate. Place captioned images or graphics next to the text it illustrates. Photos with word bubbles work well. Choose images familiar to the culture.

- Childlike visuals or all capital letters are a turn-off to adults. Use cues like arrows, checks, or circles to highlight important information. Decorative backgrounds make it harder for people with low literacy to read the text.

- Make sure the wording, images and directions are clear and have only one meaning by pretesting your data collection tools with your target population.

- Use a readability calculator to assess the level of education your materials require for comprehension of the vocabulary and sentence structure. (see resource list)

- Some people are not comfortable reading or answering a survey in any language because they are functionally illiterate. To address this, have culturally competent interviewers ask questions rather than handing out written questionnaires.

Finding Low SES Populations

Go to where the population lives, works, congregates and obtains services, such as:

- social services agencies
- law enforcement agencies
- ethnic networks
- veterans groups
- churches
- hospitals/clinics
- food pantries
- schools (k-12 and adult)
- MUH complexes/subsidized housing
- laundromats
- check cashing outlets
- barbershops/salons
- residential treatment facilities
- shelters
- English as a Second Language classes
- legal aid programs
- community centers/events
- jobs programs
- migrant worker housing
- agricultural packing sheds
- parks
- street corners
- community/technical colleges
- assisted living facilities

Getting People to Participate in Evaluation Activities

Although finding ways to persuade individuals to take part in your evaluation work is an issue with all populations, there are a number of factors unique to low SES communities which you should be aware of.

- Because time is relative in many low SES communities, give people a range of time when they can meet you. Always add an extra 10 minutes for conversations to allow for making small talk before getting to the point.

- Choose gathering places that are familiar and comfortable to the population. Rather than institutional settings like schools or community centers, arrange to meet in parks, churches, packing sheds or even grocery store parking lots.[11]

- Select times that are convenient for your population. Take their work, child care or family duties into consideration. For example, right after elementary school starts is a good time for Latina moms.[12] Few people will stay more than 1.5 hours.

- Provide transportation and allow children to accompany their parent/s (and/or provide childcare); you'll get more people to participate.

- Be aware of participants' need and desire to feel valued. Convey your respect to people with your speech and actions.

- Provide incentives for participation – a meal, a T-shirt, cash, or something useful to your population. To minimize expenses, give a raffle ticket to each participant for the potential to win a prize.

- Serve refreshments — food has a powerful cultural value and symbolism that cuts across all ethnic groups. It acts as an "icebreaker" and an incentive. It conveys to participants that you value their time.

Collecting Data

Because of the many subgroups within the low SES population, it will be nearly impossible to know what behaviors exhibited by your data collection team could prevent you from obtaining unbiased data and high response rates unless you've done your homework first with key informants from the community.

- Be aware of the intimidation factor. Find out what NOT to do in terms of what you wear, the way you talk, how to approach someone, as well as which data collection method is best suited, whether male or female data collectors will be given better access to participants, etc. Every subgroup will have its own cultural norms that you need to be attuned to if you want cooperation.

- Engage people without alienating them. Don't make the mistake of using the "parent voice" (admonishing or talking down to inferiors). Talk to people as equals, not as uninformed children.[13] Avoid making them feel defensive (about smoking). Don't preach about the health benefits/issues of non-smoking. Be non-judgmental; they already feel pushed.

- Accept what an individual cannot say about a person or situation and don't press for more information. When asking about family relationships, be aware that people sometimes discuss the dead as if they were still living.[14]

- Because most everything in many low SES communities is relationship-based, it is important to start every conversation with small talk. Don't try to cut the conversation short to get to the point; that is considered "rude and uncaring".[15]

- If you don't understand someone's accent, it's ok to ask them to repeat what they've said or to ask for clarification. Don't correct their speech, however. Work with someone from the population who can help you understand (or interpret) what people are saying.

- Ensure you're getting the real story by asking the person/group the same question in several ways during the interview or focus group. Gather data from more than one person.

- Tell your sources why you're collecting data, how it will be used, what level of confidentiality you can give, and how the process will benefit the community.

- Don't try to use street talk. You'll just end up looking ridiculous.[16]

11 Mary Portis, "Language Sensitive Health Education – Lessons from the Field," (2003).

12 Mary Portis, "Language Sensitive Health Education – Lessons from the Field," (2003)

13 Ruby Payne et al. (2000).

14 American Cancer Society, Guidebook for Divisions and Units, (1993).

15 Ruby Payne et al. (2000).

16 American Cancer Society, Guidebook for Divisions and Units, (1993).

Using Qualitative Methods

When it appears that you're just not getting the kind of information you should from a survey, you might consider trying a different approach to data collection. Because oral storytelling is a tradition in many low SES subgroups, that can be an effective way to get a richer, more realistic understanding of the issue. Some strategies to try are:

- Rather than asking direct questions, invite subjects to tell you their stories about the topic (e.g., life in their household). Pick the data you need out of the story as it is told to you. Pay attention to what is <u>not</u> said. It is often the key to understanding the story.[17]

- Be aware that in some low status cultures, stories tend not to proceed chronologically. Instead, they are told in an episodic, random manner with the most emotionally intense part first and then in vignettes (with audience interjections expected).[17]

- Use participant observation to learn more about the community or to validate data you've already collected.

Barriers and Challenges

Low SES populations tend to be suspicious of government or authority of any kind. They have often been ignored, disappointed or even persecuted by government agencies, so they have reason to fear or disdain authorities, even those trying to help. Therefore, avoid driving up in a government car. It helps if you have an entrée into the community through someone they know and have dealt with before in a positive way (e.g., an outreach worker or food bank staff, etc.).

Low SES populations are often oversurveyed and don't see outcomes that benefit them resulting from their cooperation. Some people will feel gratified that their voice is being included; others will feel overburdened/overasked or that their participation won't make a difference anyway. If they perceive a tangible benefit or reward from interacting with you, they will be more likely to give you their time.

Segments of the low SES population can be quite transient. Without adequate income or a stable home environment, some people may have to move frequently. This can make it difficult to track individuals and have repeat contact with them. So be aware of this limitation when deciding on your evaluation design.

Personal Safety Issues

(Ideas from American Cancer Society's *Guidebook for Divisions and Units*)

Many of you may feel uncomfortable or apprehensive/unsafe about going into low SES communities. Here are some practical tips to prepare your team and help minimize risk.

- Get advice from community informants about safety issues. Ask someone to accompany you.

- Learn the routines of the community: when clinics, schools and churches open and close, when people get off work, when the last bus leaves to avoid being alone or stranded in an unfamiliar place.

- Identify places you could go if there is danger and learn their hours of operation: grocery stores, gas stations, drug stores, community centers, police stations, hospitals.

- Find out the specific time you should arrive so you don't have to wait outside an unopened building. Ask ahead of time where to park. Leave with others, especially at night.

- Give someone your itinerary, including the address and phone of places you'll be visiting. Carry a current map and flashlight.

- Avoid asking for help or directions from strangers; only ask people you know.

- Asking personal questions may unintentionally provoke anger in respondents. Learn how to act in and how to diffuse conflict situations. Get advice from service providers or other key sources.

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17 Ruby Payne et al. (2000).

Conclusion

The idea for developing this guide for doing evaluation with low socio-economic status populations sprang out of a workshop on culturally competent evaluation conducted by the Tobacco Control Evaluation Center (TCEC) in August 2005. Notes generated by participant comments during the priority population-specific breakout session served as the starting point. From there, a review of relevant literature was conducted and input was added from evaluators, tobacco control project staff and other experts who work with low SES populations. However, the work is still unfinished. **We haven't yet heard what evaluation strategies have worked for you** when conducting evaluation activities in the low SES communities you serve! We hope you'll share your stories, advice, strategies and resources so we can continually improve this document. Please send your comments to Robin Kipke at TCEC via email at: rakipke@ucdavis.edu.

We would like to especially thank a number of tobacco control project personnel as well as poverty issue experts who reviewed our drafts and shared their expertise about working with low socio-economic populations with us. These include: Janet Porter, of the National Network on Tobacco Prevention and Poverty and the Health Education Council; Robert Anderson from the West Virginia University Prevention Research Center; Patricia Jones, evaluator with the Tuolumne County Tobacco Program; Denise Gannon, of the Pajaro Valley Prevention and Student Assistance project; and Delilah Raybee, from the Bay Area Community Resources project. Their cultural knowledge helped make this document more relevant and practical for practitioners in the field.

Reference List

Anderson, R. H., D. S. Oto-Kent, J. Porter, K. Brown, L. Quirk, S. B. Johnson. 2004. *Smoking Habits and Prevention Strategies in Low Socio-economic Status Populations.* National Network on Tobacco Prevention and Poverty. Available at: http://www.healthedcouncil.org./nntpp/pdf/preres.pdf

American Cancer Society. 1993. *Guidebooks for Divisions and Units: Methods & Techniques of Reaching and Serving the Cancer Control Needs of the Socioeconomically Disadvantaged and Diversified Cultures.* (Out of print, but available through the TECC library.)

Armour, B., M. M. Pitts, C. Lee, T. Woollery, and R. Carballo. April 2005. "Is Food Insecurity a Price of Smoking Among the Poor?" [abstract] *Preventing Chronic Disease* [serial online] http://www.cdc.gov/pcd/issues/2005/apr/04_0142z.htm. Quoted by Janet Porter in her presentation "Connecting with 'Hard to Reach' Populations" at the CA Tobacco Control Section conference, October 2006.

Boschert, T., and C. Martin. "Low Literacy Material Development." Presentation at the CA Tobacco Control Section conference "Building Bridges – Working with Diverse Populations," Marina del Rey, October 3-5, 2006.

CA Dept. of Health Services, Tobacco Control Section. 2006. *Communities of Excellence in Tobacco Control: Module II Priority Populations,* section 7, p. 103.

CA State Department of Finance, Demographic Research Unit. March 2006. *California Current Population Survey Report.* Available at: http://www.dof.ca.gov/HTML/DEMOGRAP/ReportsPapers/ReportsPapers.php

National Cancer Institute. *Clear and Simple: Developing Effective Print Materials for Low-Literate Readers.* NIH Publication 45-3594. Available at: http://www.cancer.gov/aboutnci/oc/clear-and-simple

Payne, R., P. DeVol, and T. Smith. 2000. *Bridges Out of Poverty: Strategies for Professionals and Communities.* Highlands, TX: aha! Process, Inc.

Portis, M. 2003. "Language Sensitive Health Education: Lessons from the Field." *California Journal of Health Promotion* 1, no. 2:3-12.

Reed, D. May 2006. "Poverty in California: Moving Beyond the Federal Measure." *California Counts* 7, no. 4. Public Policy Institute. Available on http:www.ppic.org/main/pubs.asp

RESPECT. (accessed September 2007) "Getting to Know Low Income, Low Education and Low Opportunity Communities." http://www.respect-ala.org

US Census Bureau. "Weighted Average Poverty Thresholds by Size of Unit: 1980 to 2004." In *Statistical Abstract of the United States: 2007*, Table 691. http://www.census.gov/prod/2006pubs/07statab/income.pdf

— "DP-1. Profile of General Demographic Characteristics: 2000." In *Census 2000 Summary File 1 (SF 1) 100-Percent Data.* http://factfinder.census.gov/servlet/QTTable?_bm=y&-geo_id=04000US06&-qr_name=DEC_2000_SF1_U_DP1&-ds_name=DEC_2000_SF1_U

— "DP-2. Profile of Selected Social Characteristics: 2000." In *Census 2000 Summary File 3 (SF 3) Sample Data.* http://factfinder.census.gov/servlet/QTTable?_bm=y&-geo_id=04000US06&qr_name=DEC_2000_SF3_U_DP2&-ds_name=DEC_2000_SF3_U

— "DP-3. Profile of Selected Economic Characteristics: 2000." In *Census 2000 Summary File 3 (SF 3) Sample Data.* http://factfinder.census.gov/servlet/QTTable?_bm=y&-geo_id=04000US06&-qr_name=DEC_2000_SF3_U_DP3&-ds_name=DEC_2000_SF3_U&-redoLog=false

Resources

Cultural Competence

Health Promotion in Diverse Cultural Communities

- Recommended by a tobacco control project director, this 58 page book by Virginia M. Gonzalez et al. was published by the Stanford Center for Research in Disease Prevention in 1991.

National Center for Cultural Competence
http://www11.georgetown.edu/research/gucchd/nccc/

- This center, a part of Georgetown University, is a rich source of information about cultural competence. At their website, you can access

a resource database filled with articles, papers, self-assessment checklists, demographic information and even curricula on cultural competence. In particular, see "Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials."

Tobacco Control Evaluation Center (TCEC)
http://www.tobaccoeval.ucdavis.edu

- Provides technical assistance, training and materials on culturally competent evaluation (as well as all other evaluation topics). The six how-to guides in the Culture in Evaluation series offer practical tips for conducting evaluation with various priority populations. These free publications can be downloaded from TCEC's website.

Demographic Statistics

There are a number of sites where you can find good statistics on the characteristics of your target population. Unfortunately, they may not all come from the same year. So be careful to cite the source and year of the data. Also, be sure to clarify in your text if the statistics are for the entire US, California or for your county.

CA Department of Corrections and Rehabilitation.
Monthly Report of Population. http://www.cdcr.ca.gov/Reports_Research/Offender_Information_Services_Branch/Population_Reports.asp

- Source of monthly statistics of incarcerated and paroled populations in CA

CA Department of Education
http://data1.cde.ca.gov/dataquest

- Source of data on high school exit exam results, which may be more useful than high school graduation data from the CA census which may not include current data for rural areas. It also provides data by ethnic group.

CA Department of Social Services (CDSS)
http://www.cdss.ca.gov/research/default.htm

- Source of data and reports on poverty rates by county, population, unemployment, disability, refugee arrival, welfare and other assistance programs

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CA State Department of Finance, Demographic Research Unit

http://www.dof.ca.gov/Research/Research.php

- To get demographic statistics by CA county, search data sets for specific characteristics, and find useful reports to use as background and context for your activities or in discussions with decisionmakers

US Census Bureau website allows you to get state specific data from the Statistical Abstract of the United States.

- For a reference guide about how to use the annual data supplements from the US Census: http://factfinder.census.gov/home/saff/aff_acs2006_quickguide.pdf

- To find data for your county from the US Census go to http://factfinder.census.gov and type your county in the top left box.

- To find the federal poverty standard used to identify low SES thresholds (Table 691): http://www.census.gov/prod/2006pubs/07statab/income.pdf

- For data on the number of female-headed households in CA (Summary File 1):

- http://factfinder.census.gov/servlet/QTTable?_bm=y&-geo_id=04000US06&-qr_name=DEC_2000_SF1_U_DP1&-ds_name=DEC_2000_SF1_U

- For data on education level, veterans, the disabled, foreign born in California (Summary File 3):

- http://factfinder.census.gov/servlet/QTTable?_bm=y&-geo_id=04000US06&-qr_name=DEC_2000_SF3_U_DP2&-ds_name=DEC_2000_SF3_U

- For statistics on income and poverty in California (Summary File 3): http://factfinder.census.gov/servlet/QTTable?_bm=y&-geo_id=04000US06&-qr_name=DEC_2000_SF3_U_DP3&-ds_name=DEC_2000_SF3_U&-redoLog=-false

Evaluation Resources

Tobacco Control Evaluation Center (TCEC)

http://www.tobaccoeval.ucdavis.edu

- Provides technical assistance, training and materials to help tobacco control projects funded by the California Department of Health Services with their evaluation plans and activities. Maintains a repository of data collection instruments to share with client organizations. Posts on its website a variety of "how-to" publications, archived teleconferences and mini trainings on evaluation topics including culturally competent evaluation.

Literacy Resources

California Health Literacy Initiative

http://www.cahealthliteracy.org/resource_center.html

- This website has links to a variety of resources: clip art for health literacy, multilingual resources, materials for adult educators, a list of who's who in the field and research on health literacy.

Clear and Simple: Developing Effective Print Materials for Low-Literate Readers

http://www.cancer.gov/aboutnci/oc/clear-and-simple

National Cancer Institute. NIH Publication 45-3594.

- This practical document covers how to research and define your target audience, develop the concept, content and visuals of your materials, and how to pretest them.

Harvard School of Public Health, Health Literacy Study

www.hsph.harvard.edu/healthliteracy

- An excellent collection of practical tips and resources for designing and assessing materials for low literate audiences.

"Low Literacy Material Development."

A presentation by T. Boschert and C. Martin at the CA Tobacco Control Section conference "Building Bridges – Working with Diverse Populations," Marina del Rey, October 3-5, 2006.

- Includes a Dolch list of the 200 most commonly used words recognizable for low literate levels. Available on TCS' Building Bridges Conference CD.

The SMOG (Simple Measure of Gobbledygook) Readability Calculator

http://www.harrymclaughlin.com/SMOG.htm

- A literacy assessment tool. Type (or paste) a document (or portion of) into this calculator to assess amount of education needed to understand it.

Poverty and Working with Low SES Populations

aha! Process, Inc.

www.ahaprocess.com

- Dr. Ruby Payne's publishing and training company. Bridges Out of Poverty is a really useful book describing the values, communication styles and outlooks of people in poverty. Purchase from the company's website or borrow from TECC (call#RF1073)

American Cancer Society. 1993. *Guidebooks for Divisions and Units: Methods & Techniques of Reaching and Serving the Cancer Control Needs of the Socioeconomically Disadvantaged and Diversified Cultures.*

- A rich resource of practical information about how to gain access to and work with poor populations. No longer in print, but available from TECC (call # TECC RF 353)

Community Action Partnership

http://www.communityactionpartnership.com/about/links/map.asp

- A coalition of community organizations that serve the economically disadvantaged. These include programs that provide services like: emergency food and clothing; homeless shelters; Headstart; WIC (women, infants and children); employment and training; adult literacy; alcohol/drug abuse counseling. Go to the state association website (www.cal-neva.org/network/membersDirectory.cfm) to look up member organizations by county.

Health Education Council

http://www.healthedcouncil.org

- Offers training and technical assistance in coalition development, needs assessment and development of materials in different languages or for specific populations.

National Network on Tobacco Prevention and Poverty

http://www.nntpp.org

- Publishes NNTPP News, a quarterly newsletter with latest trends as well as very readable studies on tobacco control topics with low SES populations. Includes links to other key stakeholder groups and information on best practices.

Public Policy Institute of California (PPIC)

http://www.ppic.org

- A nonprofit research organization that has great publications on poverty and other public policy issues. Its resource page http://www.ppic.org/main/otherresources.asp has links to lots of state agencies and research organizations, including those working on poverty.

RESPECT

http://www.respect-ala.org/about.htm

- A statewide program of the American Lung Association of the East Bay designed to provide information, educational materials and technical assistance aimed at reducing the smoking rate of California's low SES community

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