# COMMUNITY READINESS

## Assessing Community Readiness

Community readiness is the degree to which a community is willing and prepared to take action on an issue. A readiness assessment will help you to:

- determine your community's level of awareness of, interest in, ability and willingness to support substance abuse prevention initiatives
- pinpoint where you need to put your efforts to improve readiness
- select intervention strategies appropriate for your community's readiness level

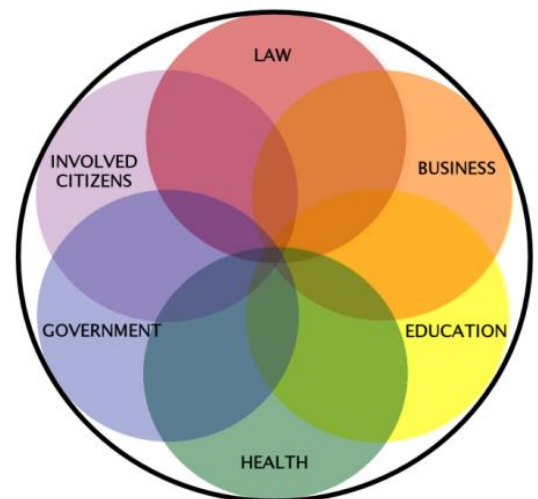The survey is designed to assess community readiness on five dimensions. The dimensions are:

✓ **Community Knowledge of Efforts**: How much does the community know about the current programs and activities?
✓ **Leadership**: What is leadership's attitude toward addressing the issue?
✓ **Community Climate**: What is the community's attitude toward addressing the issue?
✓ **Community Knowledge of the Issue**: How much does the community know about the issue?
✓ **Resources**: What are the resources that are being used or could be used to address the issue?

### CONDUCTING THE SURVEY

You may conduct this survey in an online or paper survey, face-to-face or in a group setting. These are the steps to completing your assessment:

- Identify and clearly define your issue
- Identify your community
- Prepare your introduction and instructions on how to complete the survey
- Identify key respondents in each sector
- Conduct the survey
- Score the surveys
- Calculate the average dimension scores using the table provided on page 6.

Audience: We strongly recommend sampling individuals from each of the 6 sectors (see figure). Careful selection of key individuals is pertinent. Respondents who are not actively engaged in this issue may provide you with an inaccurate picture of your community's readiness.

**Sample Instructions**

*Thank you for agreeing to take part in this survey. We are contacting key people to ask about (opioid misuse) in (community). The entire process, including individual names, will be kept confidential. This survey is one aspect of a broad community needs assessment. In order to plan effective strategies to improve (opioid misuse) in (community) we must first identify the community's level of readiness. Your responses in this survey will be very useful in determining the community's readiness. It is very important that you rate the actual state of the community and not what you would like to see. Keep in mind that there are no "good" or "bad" scores.*

*Just to be clear, when I refer to opioid misuse, I specifically mean:*
- ✓ *The use of a prescription drug without a prescription from a physician, e.g. receiving or stealing from a friend or relative*
- ✓ *Taking a prescription opioid simply for the experience or feeling the drug causes or for any reason other than prescribed*
- ✓ *Taking a prescription opioid in a different manner than prescribed, e.g. crushing and injecting an oral tablet or taking a higher dose than prescribed*
- ✓ *Heroin use and abuse is also included in this definition*

*This survey is in the format of five tables. For each table:*
- ▪ *Start with the first anchored rating statement. If the community exceeds the first statement, proceed to the next statement.*
- ▪ *Continue until you cannot move on to the next statement in the rating scale.*
- ▪ *In order to receive a score at a certain stage, the entire statement must be true. You do not have to use whole numbers in choosing a score.*
- ▪ *Circle your score in the appropriate place.*
- ▪ *Repeat this process for all 5 tables.*

You may ask respondents to give a written explanation of their score. Use probing questions from the interview template or simply ask why they chose that score.

If respondents are completing this in a group setting, you can work toward consensus scores for each dimension:
- ▪ Ask each individual to write their score for Community Knowledge of Efforts on a flipchart or board, without discussion.
- ▪ After all scores are revealed, have each individual explain their score.
- ▪ Hold a group discussion about the scores for 15 minutes or until a consensus score is reached, encouraging all individuals to speak. Take notes on the discussion.
- ▪ Follow the same procedure for each dimension.
- ▪ If respondents are completing this in a non-group setting, average the scores for each dimension across all respondents and summarize the respondent comments. These are your final community readiness scores.

Once you have received all your scores, use the Scoring Sheet in page 6 to record the scores and calculate the averages. Your community's readiness is comprised of the averages for each dimension. The scores range from 1 – 9 and can be interpreted using Table 1 on pages 7 - 8.

| **Community Knowledge of Current Efforts** | |
|---|---|
| *Note: If there are no efforts, this dimension receives a N/A (not applicable).* | |
| (Those directly involved in local efforts are not included in the definition of "community members".) | |
| **1** | Community has no knowledge about local efforts addressing the issue. |
| **2** | Community members have misconceptions or incorrect knowledge about current efforts. |
| **3** | A few community members have at least heard about local efforts, but know little about them. For example, they know local efforts exist and may recognize their names, but they have little other knowledge. |
| **4** | Some community members have at least heard about local efforts, but know little about them. For example, they know local efforts exist and may recognize their names, but they have little other knowledge. |
| **5** | Most community members have at least heard about local efforts. For example, they know local efforts exist and may recognize their names, but they have little other knowledge. |
| **6** | Most community members have at least basic knowledge of local efforts. For example, they can identify specific efforts and their basic purposes. |
| **7** | Most community members have more than basic knowledge of local efforts, including names of specific efforts, basic purposes, target audiences, and other specific information about the efforts. |
| **8** | Most community members have considerable knowledge of local efforts, including the level of program effectiveness. |
| **9** | Most community members have considerable and detailed knowledge of local efforts, including the level of program effectiveness and evaluation data on how well the different efforts are working and their benefits and limitations. |

| **Leadership** (includes elected and appointed leaders & influential community members) | |
|---|---|
| **1** | Leadership believes that the issue is not a concern. |
| **2** | Leadership believes that this issue is a concern, in general, but believes that it is not a concern in this community. **OR** Leadership believes that this issue is a concern in this community, but doesn't think it can or should be addressed. |
| **3** | Leadership believes that this issue may be a concern in the community. They show no immediate motivation to act. It may not be seen as a priority. |
| **4** | Leadership acknowledges that this issue is a concern in the community and that some type of effort is needed to address it. They may be supportive of current efforts. They are not involved in work to develop, evaluate, or improve efforts. |
| **5** | Leadership is actively supportive of continuing or improving current efforts or in developing new efforts (possibly attending committee or group meetings that are working toward these efforts). They are not key players or driving forces in these activities. |
| **6** | Leadership plays a key role in planning, developing and/or implementing new, modified, or increased efforts, possibly as key players in groups or committees, as public proponents, and/or as driving forces behind these activities. |
| **7** | Leadership is actively involved in ensuring or improving the long-term viability of the efforts to address this issue. |
| **8** | Leadership plays a key role in expanding and improving efforts, through evaluating and modifying efforts, seeking new resources, and/or helping develop and implement new efforts. |
| **9** | Leadership is continually reviewing evaluation results of the efforts and is modifying financial support accordingly. |

| Resources Related to the Issue (people, money, time, space, etc.) |
|---|
| **1** There are no resources available for dealing with the issue. |
| **2** Community members and/or leaders do not support using available resources to address this issue. |
| **3** Current efforts may be funded, but the funding is not necessarily stable or continuing. There are limited resources (such as a community room) identified that could be used for further efforts to address the issue. There is little motivation to allocate these resources to this issue. |
| **4** Current efforts may be funded, but the funding may not be stable or continuing. There are limited resources identified that could be used for further efforts to address the issue. Some community members or leaders are looking into using these resources to address the issue. |
| **5** There are some resources identified that could be used for further efforts to address the issue. Some community members or leaders are actively working to secure these resources; for example, they may be soliciting donations, writing grant proposals, and seeking volunteers. Current efforts may be funded, but the funding may not be stable or continuing. |
| **6** Resources have been obtained and/or allocated to support further efforts to address this issue. |
| **7** A considerable part of allocated resources for efforts are from sources that are expected to provide continuous support. |
| **8** A considerable part of allocated resources are from sources that are expected to provide continuous support. Community members are looking into additional support to implement new efforts. |
| **9** Diversified resources and funds are secured, and efforts are expected to be ongoing. There is additional support for new efforts. |

| Community Climate<br>(Those directly involved in local efforts are not included in the definition of "community members".) |
|---|
| **1** The community believes that the issue is not a concern. |
| **2** The community believes that this issue is a concern, in general, but believes that it is not a concern in this community. **OR** Community believes that this issue is a concern in this community, but doesn't think it can or should be addressed. |
| **3** The community believes that this issue may be a concern in the community. They show no immediate motivation to act.  It may not be seen as a priority. |
| **4** The community acknowledges that this issue is a concern in the community and that some type of effort is needed to address it. They may be passively supportive of current efforts.  They may feel as if current efforts are sufficient to address the issue. |
| **5** The attitude in the community is —We are concerned about this and we want to do something about it.  They may believe that current efforts are not sufficient to address the issue or that current efforts should be improved. |
| **6** The attitude in the community is —This is our responsibility, and some community members are involved in addressing the issue through planning, developing and/or implementing new, modified, or increased efforts. |
| **7** The attitude in the community is —We have taken responsibility. There is ongoing community involvement in addressing the issue. |
| **8** The majority of the community strongly supports efforts or the need for efforts.  Participation level is high – We need to continue our efforts and make sure what we are doing is effective. |
| **9** Most major segments of the community are highly supportive. Community members are actively involved in evaluating and improving efforts and they demand accountability. |

| Community Knowledge about the Issue<br>(Those directly involved in local efforts are not included in the definition of "community members".) |
|---|
| **1**   Community members have no knowledge about the issue. |
| **2**   Only a few community members have knowledge about the issue. There may be many misconceptions among community members about the issue, how and where it occurs, and why it needs addressing. There may be little knowledge among community members about its occurrence locally or why it may be a problem locally. |
| **3**   Community members have only vague knowledge about the issue (e.g. they have some awareness that the issue can be problem and why it may occur). Among some community members, there may be misconceptions about the issue, how and where it occurs, and why it needs addressing. |
| **4**   Community members have limited knowledge about the issue. For example, they are aware that the issue can be problem and they know some limited information about causes, consequences, signs and symptoms. They may know that the issue occurs locally, but they have little knowledge about how much it occurs locally and/or its causes and consequences. |
| **5**   Community members have basic knowledge about the issue. For example, they are aware of why the issue is a problem, and they have some basic knowledge about causes, consequences, signs and symptoms. They are aware that the issue occurs locally, but they may have little knowledge about how much it occurs locally and/or what can be done to address it. |
| **6**   Community members have basic knowledge about the issue. For example, they are aware of why the issue is a problem, and they have some basic knowledge about causes, consequences, signs and symptoms. They are aware that the issue occurs locally, and they have some knowledge about how much it occurs locally, its effect on the community, and/or what can be done to address it. |
| **7**   Community members have more than basic knowledge about the issue. For example, they understand the causes, consequences, signs and symptoms.  They are aware that the issue occurs locally, and they have some knowledge about how much it occurs locally, its effect on the community, and/or what can be done to address it. |
| **8**   Community members have more than basic knowledge about the issue (e.g., they understand the causes, consequences, signs and symptoms). They also have significant knowledge about local prevalence, its effect on the community, and what can be done to address it. |
| **9**   Community members have detailed knowledge about the issue, are aware of its effect on the community, and have significant knowledge about local prevalence. |

# Community Readiness – Scoring Sheet

Community: _____

Date: _____

Scorer: _____

| Participant Sector | Knowledge of efforts | Leadership | Resources | Community Climate | Knowledge of Issue |
|---|---|---|---|---|---|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| Total | | | | | |
| **Average** | | | | | |

| Table 1. STAGES OF COMMUNITY READINESS | |
|---|---|
| **1**<br><br>**No Awareness** | Community has no knowledge about local efforts addressing the issue. Leadership believes that the issue is not really much of a concern. The community believes that the issue is not a concern. Community members have no knowledge about the issue. There are no resources available for dealing with the issue. |
| **2**<br><br>**Denial/Resistance** | Leadership and community members believe that this issue is not a concern in their community or they think it can't or shouldn't be addressed. Community members have misconceptions or incorrect knowledge about current efforts. Only a few community members have knowledge about the issue, and there may be many misconceptions among community members about the issue. Community members and/or leaders do not support using available resources to address this issue. |
| **3**<br><br>**Vague Awareness** | A few community members have at least heard about local efforts, but know little about them. Leadership and community members believe that this issue may be a concern in the community. They show no immediate motivation to act. Community members have only vague knowledge about the issue (e.g. they have some awareness that the issue can be problem and why it may occur). There are limited resources (such as a community room) identified that could be used for further efforts to address the issue. |
| **4**<br><br>**Preplanning** | Some community members have at least heard about local efforts, but know little about them. Leadership and community members acknowledge that this issue is a concern in the community and that something has to be done to address it. Community members have limited knowledge about the issue. There are limited resources that could be used for further efforts to address the issue. |
| **5**<br><br>**Preparation** | Most community members have at least heard about local efforts. Leadership is actively supportive of continuing or improving current efforts or in developing new efforts. The attitude in the community is —We are concerned about this and we want to do something about it. Community members have basic knowledge about causes, consequences, signs and symptoms. There are some resources identified that could be used for further efforts to address the issue; community members or leaders are actively working to secure these resources. |
| **6**<br><br>**Initiation** | Most community members have at least basic knowledge of local efforts. Leadership plays a key role in planning, developing and/or implementing new, modified, or increased efforts. The attitude in the community is "this is our responsibility", and some community members are involved in addressing the issue. Community members have basic knowledge about the issue and are aware that the issue occurs locally.<br><br>Resources have been obtained and/or allocated to support further efforts to address this issue. |

| | |
|---|---|
| **7**<br>**Institutionalization** | Most community members have more than basic knowledge of local efforts, including names and purposes of specific efforts, target audiences, and other specific information. Leadership is actively involved in ensuring or improving the long-term viability of the efforts to address this issue. The attitude in the community is "we have taken responsibility." There is ongoing community involvement in addressing the issue. Community members have more than basic knowledge about the issue. A considerable part of allocated resources for efforts are from sources that are expected to provide continuous support. |
| **8**<br>**Confirmation/**<br>**Expansion** | Most community members have considerable knowledge of local efforts, including the level of program effectiveness. Leadership plays a key role in expanding and improving efforts. The majority of the community strongly supports efforts or the need for efforts. Participation level is high. Community members have more than basic knowledge about the issue and have significant knowledge about local prevalence and local consequences. A considerable part of allocated resources are expected to provide continuous support. Community members are looking into additional support to implement new efforts. |
| **9**<br>**High Level of**<br>**Community**<br>**Ownership** | Most community members have considerable and detailed knowledge of local efforts. Leadership is continually reviewing evaluation results of the efforts and is modifying financial support accordingly. Most major segments of the community are highly supportive and actively involved. Community members have detailed knowledge about the issue and have significant knowledge about local prevalence and local consequences. Diversified resources and funds are secured, and efforts are expected to be ongoing. |

# Strategies to Increase Community Readiness

**Formulating Objectives and Actions**
With the information gathered, you are now ready to write specific objectives for your goals. An objective is a clear statement of the specific activities required to achieve a goal. It is narrower than a goal; it is tangible, concrete, and measurable.

An example of an objective might be: By June 30, 2012, our group will have met with each city council member and the mayor to discuss our issue.

When formulating objectives, it is important to understand your readiness levels for each dimension and the appropriate types of actions for those readiness levels. In working to raise readiness levels, you will likely be working to change awareness, knowledge, attitudes, and norms. In doing this, you will need to pay special attention to the following:
• Targeting the right audience
• The type of message
• Connections and relationships
• Communicating the message

Below we will speak to each of these and where appropriate, we will include how these are influenced by readiness levels.

**Targeting the Audience**
Think about the audience you are trying to influence. Is it elected officials? Is it the broader community? Is it a specific age group in the community? Who you are trying to influence will be very important in your message formulation and how you reach them. Remember: This is not necessarily the audience that you have targeted for a behavior change, e.g. underage youth, but rather the audience whose readiness levels you are trying to raise.
Think carefully about what motivates your audience and its beliefs and attitudes. If you don't know, find out.

**Your message**
Your message is the point you are trying to get across. It is likely to be very similar to the goals you have set. The key is how you package the message to make an impression and influence your audience.
A key point is that information does not necessarily change norms, attitudes, beliefs, and behaviors. Emotion precedes our conscious feelings and works in tandem with rational thinking to help us make better decisions. In addition, people are overwhelmed with information these days. Think about the number of books being published each year or the number of items in an average supermarket. When we are inundated with information, the mind tends to accept only what matches prior knowledge or experience, and it is nearly impossible to change a mind once it is made up.

This will be especially true when our audience is at low levels of readiness. For lower levels of readiness:
  ▪ Little effort is given by your intended audience to noticing and processing information about the issue. We don't see what we're not interested in.
  ▪ Your audience is not likely to expend much time or resources focusing on this issue.

- You cannot require much of your audience. For example, any events must be fun and easy or have some other purpose

In other words, you will need to find creative ways to package your message. Emotional or moral appeals are likely to be much more effective in gaining the attention of your audience instead of rational appeals. Numbers and dry facts will not sway your audience. Go for their heart, not their head. Personal stories from affected individuals can be very powerful. You can still supplement these with facts and figures.

The communicator - who is carrying the message

Research in marketing and in political science has found that who delivers a message is extremely important to whether the message is paid attention to and believed. Therefore, you will want to consider:

- Who influences the audience?
- Who does the audience trust?
- Who are important role models?

For one-on-one meetings, make sure you choose the right person, in terms of trust, respect, and influence. When presenting to a group, think about who the group respects and trusts. You are not necessarily looking for the most knowledgeable, but rather the most believable, the most heartfelt, and the most trustworthy to the audience you are seeking to influence.

Think about social networks. Mapping them out or writing them down can be very helpful in identifying the best individuals for communicating your message.

**The Method of Communication**
There are a variety of methods of communication, including
• One-on-one meetings
• Small groups
• Large group presentations
• Events
• Traditional media, such as posters, billboards, TV and radio
• Social media, such as Facebook and Twitter

When readiness levels are low, your audience is not likely to expend much energy toward your issue. Thus, large group presentations are not likely to be effective, and traditional media may not be noticed by your audience, unless it has an especially compelling message. Many organizations like to hold community events. When readiness levels are low, these events should be fun or should provide your audience with benefits unrelated to your issue.

For low level of readiness (1-3), the following are more likely to be effective:
• One-on-one meetings
• Small groups, especially unrelated, casual groups (e.g. knitting circles, book clubs)
• Having outside individuals' post your information to their social media, such as their own Facebook page and Twitter account. Though your organization may have its own Facebook page and website, the most effective way to reach people is through others' sites and posts.

One-on-one meetings work well when readiness levels are low, as long as you have paid attention to your message, the audience, and the communicator. Likewise, attending small unrelated group meetings can be a way to start raising awareness of your issue. One organization had individuals start attending unrelated small get-togethers. These individuals presented information about their issue in a non-threatening atmosphere; they used stories about people that the group members knew (with permission from the affected individuals). This allowed the information to flow throughout the informal social networks of the community, and ultimately changed the community attitudes toward the issue.

At higher levels of readiness (4+), the following can be effective means of presenting your message to a target audience:
• One-on-one meetings
• Small groups
• Large group presentations
• Events
• Traditional media, such as posters, billboards, TV and radio
• Social media, such as Facebook and Twitter
• Website

**Connections and Relationships**
Communities are built on connections; having better connections will provide better opportunities for changing norms, attitudes, beliefs, and behaviors. It pays to actively manage your connections to the strategic networks in your community. The advice often given is: Know the network! Knit the network!

For each goal that you develop, identify social networks that will be involved or will be key in helping you to achieve the goal, such as sectors (Health, education, Council), interests (hobby groups), age networks (elders, youth, parents), or ethnicity networks. Then actively build relationships to those networks. Otherwise, your connections will evolve slowly. Work to build relationships, not just network.

Finally, seek out opinion leaders. These individuals have more influence on people's opinions, actions, and behaviors than the media. They do not have to be an executive or in a high position, but rather seen as trustworthy and non-purposive.

**Strategies for Each Stage of Readiness**
Below are suggested strategies to move communities to higher levels of readiness. It is important to keep in mind that it is not suggested that communities should try to skip stages. For example, if you find your community is in stage 1, do not try to force it into stage 5. Change must happen incrementally through preparation and process, rather than through coercion or force.

**Stage 1: No Awareness**
▪ Small-group and one-on-one discussions with community leaders to identify perceived positive or permissive attitudes toward substance abuse and how norms reinforce use
▪ Small-group and one-on-one discussions with community leaders addressing the health, psychological, and social costs of substance abuse with the goal of changing perceptions among those most likely to be begin addressing the issue and planning responses

**Stage 2: Denial/Resistance**
▪ Educational outreach programs to community leaders and community groups interested in sponsoring local awareness programs focusing on the health, psychological, and social costs of substance abuse
▪ Use of local incidents in one-on-one discussions and educational outreach programs that illustrate harmful consequences of substance abuse and the importance of addressing it

### Stage 3: Vague Awareness
- Educational outreach programs on national and state prevalence rates of substance abuse and prevalence rates in communities with similar characteristics, including use of local incidents that illustrate harmful consequences of substance abuse
- Local media campaigns that emphasize consequences of substance abuse

### Stage 4: Preplanning
- Educational outreach programs to community leaders and stakeholder groups that communicate the prevalence rates and correlates or causes of substance abuse
- Educational outreach programs that introduce the concept of prevention and illustrate specific prevention programs adopted by communities with similar profiles
- Local media campaigns emphasizing the consequences of substance abuse and ways of reducing demand for illicit substances through prevention programming

### Stage 5: Preparation
- Educational outreach programs to the general public on specific types of evidence-based prevention programs, policies, and practices, their goals, and how they can be implemented
- Educational outreach programs for community leaders and local sponsorship groups on evidence-based prevention programs, policies and practices, their goals, staff requirements, and other implementation issues
- A local media campaign describing the benefits of prevention programs for reducing consequences of substance abuse

### Stage 6: Initiation
- In-service educational training for program staff (paid and volunteer) on the consequences, correlates, and causes of substance abuse and the nature of the problem in the local community
- Publicity efforts associated with the kickoff of the program
- A special meeting with community leaders and local sponsorship groups to provide an update and review of initial program activities

### Stage 7: Institutionalization/Stabilization
- In-service educational programs on the evaluation process, new trends in substance abuse, and new initiatives in prevention programming, with trainers either brought in from the outside or with staff members sent to programs sponsored by professional societies
- Periodic review meetings and special recognition events for local supporters of the prevention program
- Local publicity efforts associated with review meetings and recognition events

### Stage 8: Confirmation/Expansion
- In-service educational programs on the evaluation process, new trends in substance abuse, and new initiatives in prevention programming, with trainers either brought in from the outside or with staff members sent to programs sponsored by professional societies
- Periodic review meetings and special recognition events for local supporters of the prevention program
- Presentation of results of research and evaluation activities of the prevention program to the public through local media and public meetings

### Stage 9: High Level of Ownership
- Continued in-service training of staff

- Continued assessment of new drug-related problems and reassessment of targeted groups within community
- Continued evaluation of program effort
- Continued update on program activities and results provided to community leaders and local sponsorship groups, and periodic stories through local media and public meetings