POSITIVE CULTURE FRAMEWORK

A Foundation for Cultural Transformation
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Introduction

“Without health there is no happiness.”

Thomas Jefferson

In 2001-2002, a panel of experts was convened by the National Academies of Sciences to develop a vision for public health in the coming decades. The panel identified six areas of action:

1. Adopt a population health approach;
2. Strengthen the governmental public health infrastructure;
3. Build a new generation of inter-sectoral partnerships that also draw on the perspectives and resources of diverse communities;
4. Develop systems of accountability;
5. Make evidence the foundation of decision making; and,
6. Enhance and facilitate communication within the public health system.¹

We, at the Center for Health and Safety Culture, support these six areas of action. Our purpose is to be an interdisciplinary center serving communities and organizations through research, training and support services to cultivate healthy and safe cultures. Our research seeks to learn and share how to effectively address these areas of action from a cultural perspective. Most of our research projects focus on three core areas of public health: traffic safety, substance abuse, and violence (including child maltreatment).
We believe a cultural approach to public health is critical. Behavior does not occur in isolation of one’s environment, and efforts that embrace a cultural approach are much more likely to be sustained. Furthermore, even within these three areas of public health (traffic safety, substance abuse, and violence prevention), there is tremendous overlap. For example, those engaged in addressing these issues at the community level are well aware that substance abuse is a contributing factor to both violence and traffic safety.

“The Costs of Traffic Safety, Substance Abuse and Violence

These three areas of public health cause tremendous harm and cost. In the U.S. in 2013, over 32,000 people were killed in vehicle-related incidents (NHTSA FARS), and the cost of medical care and productivity losses exceeded $80 billion (CDC). According to the National Institute on Drug Abuse, the annual total cost of substance abuse exceeds $700 billion annually (with health care costs accounting for $166 billion). The Centers for Disease Control and Prevention estimate the costs of child maltreatment at $124 billion. Significant additional costs are associated with elder abuse, intimate partner violence, sexual violence, suicide, and youth violence.

“Health is not merely a product of individual biology, psychology, and behavioral factors; it is the sum of collective social conditions created when people interact with the environment. Thus, preventing unintentional injury requires attention to the entire social system.”

One area of our research involves developing, refining, and sharing a framework for improving health and safety using a cultural approach called the Positive Culture Framework. This document provides a brief overview of this approach.
“Knowing is not enough; we must apply. Willing is not enough; we must do.” —Goethe

The Positive Culture Framework (PCF) is a structure for improving health and safety. PCF addresses key skills (the “how”), steps in a process (the “what”), and the context for doing the work (the “where”).

As a framework, PCF is designed to be applicable to different health and safety issues (e.g., substance abuse, violence, traffic safety, etc.) in a variety of settings (organizations / workplaces, schools, communities, states, etc.).
Let’s begin by clarifying several terms.

A core assumption that we use in our work is that the positive exists and is worth growing. This means that in every community or organization, there is an opportunity to grow the goodness that is there. This does not mean that we ignore or diminish the pain and suffering that may be occurring. However, we embrace and appreciative approach where we generally view the work as what we are trying to grow as opposed to only viewing what we are trying to eliminate.

Health is a state of physical and mental well-being that supports a desired quality of life. Safety is the absence of risk to bodily harm or death (e.g., fatalities, serious injuries, etc.). Our ultimate goal is to improve health and safety.

Engaging in various behaviors can either increase or decrease the likelihood that health and safety will improve. Protective behaviors have been shown to improve health and safety (e.g., always wearing a seat belt, families using rules). Risky behaviors typically decrease health and safety (e.g., binge drinking, speeding). The prevalence and frequency of protective and risky behaviors are important intermediaries (or intermediate variables) to predict whether health and safety will improve or degrade.

Cultural factors are shared values, beliefs and attitudes among an identified group within a social ecology that predict engagement in risky or protective behaviors.

What Works in Prevention

In a review of four health-related areas addressed by prevention activities (substance abuse, risky sexual behavior, school failure, and juvenile delinquency / violence), researchers found seven key factors to address to achieve effectiveness:

1. Comprehensive
2. Varied Teaching Methods
3. Sufficient Dosage
4. Theory Driven
5. Positive Relationships
6. Appropriately Timed
7. Socio-culturally Relevant

Believing that binge drinking is harmful and being confident in asking others to wear a seat belt are cultural factors. Cultural factors are identified using assessments based on behavioral models. An identified group might include employees, high school students, parents, and law enforcement officers. A social ecology could be a community (e.g., town or county), a school, or an organization or business.

The social ecology is defined by the layers of the social environment in which members of a community grow, work, learn and live. On a community scale, a social ecology includes individuals, families, schools, workplaces, and community-wide agencies (e.g., local government, law enforcement, etc.). However, an organization (like a school or workplace) can have a smaller form of a social ecology with staff, supervisors, managers, leaders, and executives.

A strategy is an approach or series of actions to address cultural factors for a specific behavior. Increasing visible enforcement and parent training are strategies. As a type of strategy, a campaign is a media-based approach to influence a large number of people about a specific behavior or issue. “Click it or Ticket” is an example of a campaign to increase seat belt use.

A portfolio is a collection of strategies that address specific behaviors across the social ecology. For example, a portfolio to increase seat belt use may involve several strategies including a family component (increasing family rules about always wearing a seat belt); a school component (encouraging youth to ask their friends to always wear a seat belt); a workplace component (better workplace seat belt policies and enforcement of those policies); and a community component (more consistent, visible enforcement of seat belt laws).

A process is different than a strategy or campaign. A process involves a sequence of steps without specifics about the content being addressed. In other words, the same process may be used to address different behaviors (such as
decreasing underage drinking or increasing seat belt use). Clearly, the details are different for each behavior, but the process can be the same. Thus, the process is not behavior specific. Processes to improve health and safety are often repeated in an iterative fashion because we are never “finished” improving health and safety. Even though the process is repeated, the details of the actions performed in each iteration are different because the community has changed, and the repetition is valuable because it moves the community towards improved health and safety.

Having a skill means we have the ability to do something well. The skills defined in the PCF are applicable to all steps of the process. Two communities may engage in the same steps, and the community with stronger skills will typically experience greater outcomes. These skills are developed among those leading the work as well as those throughout the organization or community.

Simple change (often called “first-order” change) describes the kind of change that occurs as a cultural factor changes for an individual. For example, a mother changes her beliefs about the importance of always wearing a seat belt and creates a family rule that everyone always wears their seat belt in the car.

Transformation involves “second-order” change – where entire systems begin to understand and act differently. Therefore, transforming culture is more than just changing a single behavior. Transforming culture involves changing many different individual behaviors across the social ecology as well as changing people’s fundamental understanding. When multiple layers of the social ecology change beliefs and behaviors, these changes become reflected in the “culture” of the community.
"People are partly the products of their environments, but by selecting, creating and transforming their environmental circumstances they are producers of environments as well."

The PCF is a framework for improving health and safety. Specifically, skilled leaders engage in a process to enhance and grow a portfolio of strategies that change specific cultural factors across the social ecology, thereby growing protective behaviors and decreasing risky behaviors. It is a cultural approach that engages different groups across the social layers of community. The framework addresses three key skill areas: leadership, communication and integration.

The green arrow symbolizes what we want to grow. Determining what aspects of health and safety we want to grow is not always simple, but may require research and further exploration. For example, in reducing underage drinking, what exactly do we want families to do? What do we want healthcare providers to do? The important recognition is that reducing underage drinking is more than just getting more youth to choose not to drink. It is about addressing a variety of behaviors across the social ecology.

Each behavior has a variety of cultural factors. Cultural factors are thoughts or cognitions and are identified by conducting assessments and analyses based on behavioral models. Growing beliefs like “seat belts will protect me in a crash” and “most parents use curfews” may increase seat belt use and parents using curfews, respectively.

The PCF process defines seven steps. These steps are initially done in order; however, over time, we may be engaged in multiple steps at the same time. The process is repeated as we make improvements and seek even better outcomes. In essence, we are always engaging in the process as we seek to improve the health and safety of our communities and organizations.
The social ecology indicates where we engage in our efforts. When we think about community, we need to think about multiple layers – each with a role in improving health and safety. While addressing all levels of the social ecology is essential for community transformation, we need to prioritize where to focus initial efforts as resources may be limited.

The process, skills and social ecology are all interconnected. While they are presented in this manual in separate sections, they should not be viewed as distinct or separate. For example, the process gives guidance for both communicating and integrating. The social ecology provides structure for understanding cultural factors and existing strategies. Truly, the skills, process and social ecology compromise a “large system” impacting health and safety in our communities.

**Process**

“The first step toward effective action is non-action: the ability to avoid the all-too-often common impulse to leap into action when an adaptive challenge rears its head.”

While the seven steps of the PCF process are described as discrete, they really overlap. For example, actions occurring in the first step (e.g., recruiting new stakeholders) may also take place throughout the process. Furthermore, some actions may need to be repeated based on new information gathered during the process. During the third step of prioritization, it may be determined additional assessment data are required, thus requiring additional assessment actions (second step).
The following is a brief summary of the steps.

1. **PLAN AND ADVOCATE** – A local individual, agency or coalition provides leadership in planning the process outlined in the remaining steps and advocacy to bring together and train the key stakeholders. Steps 2 – 7 require engagement by a broad array of stakeholders representing both public and private entities across the social ecology.

2. **ASSESS CULTURE** – Each of the many layers of community has both common and unique values, beliefs, attitudes and behaviors. An assessment of these reveals baseline measures and opportunities to foster alignment as well as gaps needing to be addressed. Assessing culture includes understanding cultural factors as well as mapping existing strategies.

3. **ESTABLISH COMMON PURPOSE AND PRIORITIZE OPPORTUNITIES** – The assessment of the many layers of the community reveals common themes which can align strategies around a common purpose. This common purpose fosters engagement. Furthermore, the assessment reveals critical gaps in strategies and cultural factors that inform communication efforts and the selection of strategies.

4. **DEVELOP PORTFOLIO OF STRATEGIES** – Based on the prioritization of opportunities completed in Step 3, a portfolio of strategies is developed appropriate for different levels of the social ecology. Each strategy should be based on the best available research regarding effectiveness and outcomes.

5. **PILOT AND REFINE** – To make best use of limited resources and optimize outcomes, strategies should be piloted and refined before seeking system-wide implementation. Communication messages should be piloted with stakeholders and focus audiences prior to broad release in campaigns.
6. **IMPLEMENT STRATEGIES** – Once refined after piloting, strategies should be implemented broadly across the community with ongoing monitoring and evaluation. Communication campaigns can be used as a catalyst to cultivate transformation, engage new stakeholders, and initiate new strategies.

7. **EVALUATE EFFECTIVENESS AND NEEDS** – Evaluation facilitates ongoing effectiveness and informs future needs. The process of cultural transformation is never complete; with every cycle, new opportunities to improve health and safety are revealed and inform future efforts.

"While project sustainability is a mandatory piece of politically correct rhetoric, it is less often achieved. ... The solution: build sustainability from the outset by maximizing a community's capacity to maintain safety initiatives within their own resources."³

Transforming culture is a new endeavor for many stakeholders – especially at the community level – and therefore requires new capacities within the community to support the process. Capacity building includes changing “an organization’s or community’s ability to address health issues by creating new structures, approaches and/or values.”⁴ One approach to capacity building is to address four levels: organizational (policies, resources, structures, etc.), individual (workforce development, skill building, training, etc.), partnerships (collaboration, networking, etc.), and community organizing (community leader involvement, engagement of disadvantaged groups, local ownership, etc.).

Successfully improving health and safety requires capacity building in all four levels: a new organization (a community coalition) may need to be formed; those involved need to develop skills and capacities; existing organizations may
need to increase collaboration; and more people need to become engaged. Building capacity should occur throughout the process.

Skills

Leadership, communication and integration are the skills needed to be effective at improving health and safety. Improving health and safety is an act of leadership – we are leading people to make healthier and safer choices. Changing cultural factors can be challenging – people often resist questioning their core assumptions. Developing leadership skills increases effectiveness.

Virtually all efforts to improve health and safety involve communication. However, often communication efforts addressing health and safety have minimal results – and sometimes have even made things worse. It is very important to ground our communication efforts in strong research and to recognize that even conversations are important communication opportunities.

When we recognize the work of improving health and safety is about impacting many behaviors across the social ecology, we realize that there is no single strategy that will address these complex issues. Accepting that we need a portfolio of strategies means we must also accept the need to actively manage and align these strategies. This management and alignment of strategies is the work of integration.

Integration is about making things whole. Developing skills in integration means we can foster better resource utilization, reduce competition and foster cooperation, align purpose, and increase the effectiveness of our efforts.
Center for Health and Safety Culture

“We shall not cease from exploration, and the end of all our exploring will be to arrive where we started and know the place for the first time.”

The Center’s purpose is to be an interdisciplinary center serving communities and organizations through research, training and support services to cultivate healthy and safe cultures. Conducting research and providing training and support services for the Positive Culture Framework is one of our primary areas of interest.

Our research areas continue to explore the cultural factors that lead to improved health and safety. We engage in projects to refine and improve the skills and process. We share our learning with you and look forward to learning from you as well.
Appendix A: Center Resources

The following is a description of services we can provide to help you in your Positive Culture Framework journey:

1. Introductory 1, 2 or 3 Day PCF Training Sessions

   The Center for Health and Safety Culture provides one, two, or three-day training sessions on the Positive Culture Framework (PCF). Attendees will learn about three critical skills involved with the framework: leadership, communication and the integration of effective prevention strategies. Participants will leave with specific next steps for implementing the PCF’s seven step process in their community. Materials included: PCF Manual and Worksheets and (by request) How to Use Social Norms Marketing to Prevent Driving after Drinking.

2. Guide Service

   Communities often find that ongoing support from a Center researcher contributes to their success. A trained PCF Guide is your personal consultant available by phone and email to support you and your community’s efforts. This Guide becomes familiar with your specific project and helps you apply PCF in your community. The Guide is available to provide feedback on leadership development, implementing communication efforts and managing prevention strategies at the local level. Specific feedback may be provided on defining your group’s purpose, engaging stakeholders, understanding local data sources, reviewing communication plans and media and aligning a variety of prevention strategies with a common frame. Our experience has shown that unexpected challenges often arise, and your personal Guide can help you successfully find your way. In addition to personal assistance, the Guide provides you with access to the Community of Practice website. The Community of Practice website is an exclusive interactive site in which participants can share media, stories of transformation, ask questions, download tools and engage with other communities that are engaged in PCF. At the end of each year, you and your community receive an Executive Summary designed to help you celebrate successes, learn from the experiences and prepare for the next year. This service is only available to communities that have participated in PCF training.
3. Positive Culture Surveys

We have and are developing a variety of surveys designed to address alcohol, tobacco, and other drug use for student, parents, school staff, law enforcement and community members. Accurate data gathered in a way which facilitates strategy development is absolutely necessary for a successful Positive Community Norms project. The Student Survey can be administered as an online or paper survey. Parent and community surveys are administered using first class mail. Prices vary due to size of the population and number of reports needed.

For More Information

Please contact Erica Burrell (Erica.Burrell@coe.montana.edu) for more information about any of our services.
Appendix B: PCF and 7 Strategies

Using the Positive Culture Framework (PCF) Model with the Seven Strategies for Community Change

Community-based prevention is complex. Substance abuse is a result of many factors and conditions throughout our communities. The Positive Culture Framework (PCF) provides a powerful way to organize prevention efforts and impact these factors across our community’s environment. By focusing on leadership, communication, and integration of prevention strategies, we can foster meaningful change and transform how our communities approach preventing substance abuse.

There is no single strategy to prevent substance abuse. Communities must engage in multiple strategies to impact the environment including increasing access to quality prevention, reducing availability and access to substances, enhancing deterrence and enforcement, and fostering policies that minimize unsafe behaviors and promote protection. PCF can help align these multiple strategies and build broad support among diverse groups in our communities.

PCF does not focus on the individual, but rather on the entire social environment. By using a positive approach and seeking to grow the solutions that already exist in our communities (in other words, grow out community’s positive norms), we foster hope and engagement among individuals, families, schools, workplaces and community organizations and entities. As these align, prevention efforts become more effective. By focusing on both change and transformation, we create lasting impacts that are sustained and make health and safety just “what we do in our community.”

The following document provides guidance on how PCF aligns with the Seven Strategies for Community Change. Following the table, there is more information about specific services we can provide to help your coalition’s efforts.
### Strategy #1 - Provide Information
This may include town hall meetings, billboards, websites, media campaigns, newsletters, power point presentations, fliers, and press releases.

**Strengthen Collaboration**
- Embrace positive frame combining concern and hope. Examples may include:
  - Review and re-write coalition materials
  - Developing PCF speaking points and brief speeches to recruit new coalition members
- Actively communicate coalition successes and outcomes
- Develop relationships across the social ecology
  - Strengthen existing relationships
  - Engage new potential partners

**Reduce Youth Substance Abuse**
- A PCF communication campaign seeking to clarify misperceptions of norms as well as other gaps (ex: knowledge or skills) among key focus audiences. Examples may include:
  - Youth campaign
  - Parent campaign
  - Community campaign
  - Law Enforcement campaign
  - Key Leaders campaign
  - Alcohol Retailers campaign
  - Pharmacy campaign
  - Health Care campaign
  - School campaign

### Strategy #2 - Enhance Skills
This may include workshops, seminars or activities designed to increase the skills.

**Strengthen Collaboration**
- Attend Positive Cultural Framework (PCF) 3-day training
- Educate coalition on the PCF framework
- Develop a common purpose to enhance ownership of coalition’s strategies
- Develop PCF leadership skills to foster change transformation
- Develop skills in understanding the limits of present data and current paradigms
- Develop skills relating to planning, advocating, increasing community readiness and building capacity for interventions
- Develop skills in effectively communicating with multiple audiences, framing a new story, and combining hope and concern
- Develop skills to foster reflection and praxis to celebrate success and generate passion for sustaining efforts
- Develop skills in portfolio mapping
- Educate coalition on affectively managing a portfolio

**Reduce Youth Substance Abuse**
- Attend Positive Community Norms (PCF) 3-day training
- Develop skills necessary to assess the environment and collect data
- Develop skills to identify gaps in perceptions and behaviors
- Develop knowledge around selecting and implementing prevention and intervention programs and strategies
### Strategy #3 - Provide Support
This may include creating opportunities to support people to participate in activities that reduce risk or enhance protection.

#### Strengthen Collaboration
- Conduct PCF presentations with new key stakeholders and new agencies
- Map Community’s Portfolio
  - Identify opportunities for collaboration
  - Seek additional funding sources

#### Reduce Youth Substance Abuse
- Develop PCF speaking points and media tools that embrace a positive frame and combine concern and hope to support better utilization of existing programs and resources.
  - Examples may include fostering community-wide support for:
    - parent education programs
    - after-school or mentoring programs
    - interventions for indicated youth
    - evidenced-based school curricula

### Strategy #4 – Enhance Access and Reduce Barriers / Reduce Access and Enhance Barriers
This may include improving systems and processes to increase the ease and opportunity to utilize systems and services.

#### Strengthen Collaboration
- Seek broad participation in development of coalition’s purpose to foster ownership in the coalition’s strategies
- Develop knowledge to understand how improving systems and processes can enhance/reduce access and reduce/enhance barriers among coalition members and partners

#### Reduce Youth Substance Abuse
- Use PCF 7 Step Communication Process to reduce access and enhance barriers, examples may include:
  - Reduce alcohol density
  - Increase alcohol taxes
  - Reduce alcohol special events
  - Increase source investigations
  - Decrease availability of prescriptions drugs by altering prescribing practices
  - Promoting appropriate disposal of unused prescription drugs
- Reduce barriers to resources, programs, and interventions across the continuum of care
### Strategy #5 – Change Consequences
This may include penalties or incentives.

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<th>Strengthen Collaboration</th>
<th>Reduce Youth Substance Abuse</th>
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<tr>
<td>• Develop knowledge to understand the consequences associated with use rates and best practice to modify/enforce consequences among coalition members and partners</td>
<td>• Use PCF 7 Step Communication Process to influence consequences such as: sentencing practices, school participation guidelines, alcohol server violations, prescription violations, etc.</td>
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<td></td>
<td>• Map PCF Portfolio</td>
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<td></td>
<td>o Address gaps among indicated populations</td>
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<td>o Focus on incentives/disincentives for indicated youth (including interventions)</td>
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<td></td>
<td>o Seek a spirit among policies with the intention to improve health and safety</td>
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<td>o Use current research to inform consequences across the social ecology</td>
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### Strategy #6 – Change Physical Design

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<th>Strengthen Collaboration</th>
<th>Reduce Youth Substance Abuse</th>
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<tr>
<td>• Develop knowledge to understand how physical design can contribute to substance abuse among coalition members and partners</td>
<td>• Use PCF 7 Step Communication Process to influence physical design. Examples may include:</td>
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<tr>
<td></td>
<td>o Alcohol outlet density</td>
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<td></td>
<td>o Storage of prescription drugs</td>
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<td></td>
<td>o Disposal options for prescription drugs</td>
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<td>o Lighting a park at night to discourage underage drinking</td>
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<td>o Reducing outdoor alcohol advertisements in a neighborhood</td>
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### Strategy #7 – Modify/Change Policies

These may include formal written procedures, by-laws, proclamations, and rules and laws with written documentation and/or voting procedures.

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<th>Strengthen Collaboration</th>
<th>Reduce Youth Substance Abuse</th>
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<tr>
<td>• Develop knowledge to understand how policies can reduce substance abuse among coalition members and partners</td>
<td>• Use PCF 7 Step Communication Process to influence policy. Examples may include:</td>
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<tr>
<td></td>
<td>o Sentencing practices</td>
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<td>o School participation policies</td>
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<td>o Enforcement policies</td>
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<td>o Social hosting laws</td>
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<td>o Prescription databases</td>
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<td>o Source investigations</td>
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<tr>
<td>• Map PCF Portfolio</td>
<td>o Seek a spirit among policies with the intention to improve health and safety</td>
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<td></td>
<td>o Address policy gaps across the social ecology</td>
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<td></td>
<td>o Address enforcement policy gaps across the social ecology</td>
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<td></td>
<td>o Modify policies to include interventions for indicated populations</td>
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<tr>
<td>• Develop guidelines for public policy addressing youth substance abuse. Examples may include:</td>
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<td></td>
<td>o Guidelines for alcohol special use permits</td>
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<td></td>
<td>o Guidelines for public events involving alcohol and tobacco</td>
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<td>o Guidelines for prescribing practices among health care facilities</td>
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*Note: The Seven Strategies are recognized by CADCA and were developed by the University of Kansas Work Group on Health Promotion and Community Development—a World Health Organization Collaborating Centre.*
Appendix C: References


