RECONCILING CONCEPT AND CONTEXT: A GROUNDED THEORY STUDY
OF IMPLEMENTING SCHOOL-BASED HEALTH PROMOTION

by

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ABSTRACT

In response to high prevalence rates of alcohol and other drug use by adolescents in British Columbia (BC), the BC Ministry of Health initiated a pilot project in secondary schools aimed at preventing alcohol and drug misuse among students. The School-Based Prevention Project involved placement of a Prevention Worker (PW) in selected secondary schools. The PW was expected to engage the school community in a collaborative process to develop and implement a comprehensive prevention program in the school using the School-Based Prevention Model (SBPM), an adaptation of the Precede-Proceed Model for health promotion planning.

This grounded theory study explored the process by which the PWs implemented a PW role and the SBPM in the schools. Initial data collection involved one hour telephone interviews with 28 of 31 eligible PWs from across the province, conducted 4 to 6 months after the second annual training session. On the basis of the theoretical conceptualizations emerging from analysis of the PW interviews, 6 schools with varied implementation experiences were selected to conduct one week site visits to explore implementation in context. Field notes were kept on all interactions with PWs and schools over the four year study period. Over 100 interviews were conducted in the 6 sites with various members of the school community. Data analysis was conducted using the constant comparative method of grounded theory.

Analysis yielded the core category of Reconciling Concept and Context. The core category is composed of three sub-categories, Entering the Field, Confronting the Model and "Doing" the Model. Before implementation of the SBPM could begin, PWs had to gain entry to the school by establishing program legitimacy and personal credibility, and by learning the ropes. This was often a challenging and lengthy process. As part of Entering the Field, PWs created a role by finding a focus that was acceptable to all concerned, and by striking a balance between: a) the schools' demand for intervention and the program focus on prevention, and b) the schools' propensity for crisis management and the program focus on pro-active planning. Many schools were not "ready" to implement the prevention program as intended, so PWs also had to enhance school readiness to develop and implement the program in the
school. Before PWs could begin "Doing" the Model, they went through a personal Confrontation with the Model, which involved reacting to, learning and contemplating it. When PWs ultimately tried to "Do" the Model, conditions in the school context led them to reinvent, retrofit, reframe, approximate, or abandon the model rather than implement it as intended.

Thus, in Reconciling Concept and Context, PWs had to facilitate changes in the school context to accommodate the concept. The concept, in turn, did not fit with the schools' goals and ways of doing things. The challenge for PWs was to modify the concept to fit the context, while retaining the integrity of the concept. In most instances, the concept was modified to a much greater extent than the context and was therefore coopted by the status quo.
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Dedication

This dissertation is dedicated to the memory of my father, Ronald Lawrence MacDonald, who died before I could share the joy of my accomplishment with him, and to my mother, Mary Avelle MacDonald, without whose love, faith, support, and encouragement I might never have begun this journey, let alone completed it.
PART A

THE RESEARCH INVESTIGATION

The first part of this document will provide an overview of the problem of alcohol and drug misuse among adolescents, identify the research question and its significance, outline the existing knowledge in school-based health promotion, and describe the School-Based Prevention Project that was established to prevent the problem of alcohol and other drug misuse among secondary school students. Theoretical perspectives on implementation, symbolic interactionism, grounded theory, and health promotion will be discussed, particularly as they relate to this study. The research method used to explore and develop an understanding of the implementation of this program will also be described.
CHAPTER ONE

In 1992, the Alcohol and Drugs Programs Branch\(^1\) (ADP) of the British Columbia Ministry of Health and Ministry Responsible for Seniors (MOH) initiated a three year pilot project entitled the School-Based Prevention Project (SBPP). The aim of the SBPP was to prevent alcohol, tobacco, and other drug misuse\(^2\) among secondary school students in British Columbia (BC). The SBPP involved the placement of a Prevention Worker (PW) in selected secondary schools in the province. The PW was expected to use the School-Based Prevention Model (SBPM), a systematic planning process based on the PRECEDE-PROCEED model for health promotion planning (Green & Kreuter, 1991). The intent of the SBPP was that the PW would engage the school community\(^3\) in a collaborative and participatory process to identify and define their own health issues related to substance misuse, and to develop, implement, and evaluate strategies to address these concerns. The key features of this innovative project were the implementation of a new position/role in the schools and the implementation of a defined planning process to guide program development. A detailed description of the SBPP is provided in Chapter Two.

The Institute of Health Promotion Research (IHPR) at the University of British Columbia (UBC) was contracted by the Ministry of Health to conduct an evaluation of the SBPP. The study reported here is a

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\(^1\) A subsequent reorganization of the Ministry of Health renamed this branch Alcohol and Drug Services (ADS) and located it in the Prevention and Health Promotion Branch. The acronym ADP will be used in reference to documents, reports or decisions made by that branch prior to their name change in 1994. Otherwise, the acronym ADS will be used.

\(^2\) The term 'substance misuse' is used officially by Alcohol and Drug Services in all goal statements related to their funded programs. It is defined in the School-Based Prevention Model Handbook (Alcohol and Drug Programs, 1994) as "any use of a psychoactive (consciousness or mood altering) substance that is harmful to the user, or that has significant risk of causing harm" (p.5). By this definition, use of a drug is not necessarily equated with misuse. The word misuse will be used when referring specifically to SBPP program objectives. Otherwise, the definitions presented in the footnote on the next page apply when the terms drug or substance use, abuse, and dependence are used. Where relevant, specific drugs (such as tobacco and alcohol) will be named. Unless otherwise indicated the terms "drugs" or "substance" are used in the generic sense to include alcohol, tobacco, and illicit drugs.

\(^3\) 'School community' is defined by the SBPP as "all of those who are connected in some way with the school; teachers, students, parents, staff, school nurse, school administrators, and agencies who come into and offer programs in the school. The school itself, is a community in its own right as well as being a member in the larger community in which it resides" (Alcohol and Drug Programs, 1994, p. 132).
component of the process evaluation. An overview of the design for the overall SBPP evaluation can be found in Appendix A. The purpose of this study was to explore the process by which PWs implemented both the PW role and the SBPM in their schools.

The Problem of Alcohol and Drug Use Among Adolescents

The need for the SBPP was premised on the results of two surveys conducted in British Columbia by ADP in 1987 and 1990 (Alcohol and Drug Programs, 1992a; BC Ministry of Health, 1988a). These surveys reported relatively high rates of alcohol and other drug use among BC adolescents, whatever the measure, compared to those in other parts of Canada and the United States, despite an overall reduction in use between 1987 and 1990.

Data from a national survey concluded that BC had the highest lifetime prevalence rate of marijuana use by young people of all provinces in Canada. Among those aged 15 to 24 in BC, just over 50% reported having used marijuana at some point in their lives. In contrast, the rate for all of Canada was 34%. BC also had the highest annual prevalence rate for marijuana use by 15 to 24 year olds (27.6%). The next highest provincial rate was in Quebec at 16.9% (Eliany, Wortley, & Adlaf, 1991). At the same time, BC was the only province in Canada that showed increases in the number of reported drug offences among adults and juveniles from 1989 to 1991 (Coordinated Law Enforcement Unit, 1994).

Alcohol is the drug of choice across all age groups in Canada. Among adults, 78% of Canadians were current users in 1989; BC had the highest rate of current use at 83% (Health and Welfare Canada, 1987).

The following definitions of drug use, abuse, and dependence are those put forth by the American Psychiatric Association (1987) in the Diagnostic and Services Manual (DSM-III) and by the Ninth International Classification of Diseases (World Health Organization, 1980). Drug use involves low doses or infrequent use with rare or minor negative consequences. This level of use is sometimes referred to as experimental, social, recreational, or casual, although some might object to these adjectives on the basis that they believe any use in adolescents constitutes abuse. Drug abuse usually involves higher doses and frequencies than those characterizing dependence, and there may be occasional heavy use periods. Generally there are detectable health consequences and some adverse effects on functioning. Drug dependence involves high doses or frequent instances of continuous use over a period of at least one month, and includes elements of compulsion, craving, and withdrawal symptoms. There are generally severe health consequences and serious functional impairment. Injury and violence can often be involved. Glantz and Pickins (1991) suggest that there is no clear demarcation in the spectrum of use to abuse, but that there is general consensus on the extreme poles of the continuum.
Among adolescents, annual prevalence rates of alcohol use and weekly use were highest in British Columbia and Quebec (Health and Welfare Canada, 1996). North American surveys of adolescent drug use indicate that there has been a declining trend in prevalence rates over the past decade or more. Data from Ontario, and the United States suggest that the downward trend has either halted or is reversing (Adlaf, Smart, & Walsh, 1993; Johnston, 1994). Early data from the evaluation of the School-Based Prevention Project support this conclusion (School-Based Prevention Project Evaluation Team, 1994b, 1995c). For example, in 1990 the percentages of students who reported having used alcohol, tobacco, cannabis, and LSD in the previous year were 72%, 27%, 23%, and 9%, respectively. In 1993, the percentages in the SBPP survey population were 71.4%, 46%, 33.7%, and 15.3%, respectively (School-Based Prevention Project Evaluation Team, 1995c). Thus, while alcohol use remained relatively constant (as it has been throughout the 1980s), tobacco, marijuana, and LSD use has increased.

At the time this project was initiated, however, there was no indication that drug use rates were on the increase. The intent of the SBPP was to support the continued decline in drug use prevalence rates that was apparent in BC rates between 1987 and 1990. The goals of the SBPP, as described in Chapter Two, reflect this intent. ADP viewed this as an important focus in light of the generally higher rates of alcohol and other drug use by BC adolescents, compared to rates of use by youth in the rest of Canada.

Addiction, and the problems associated with chronic drug use are complex (Wilkinson & Martin, 1991), difficult, and costly to treat (Hawkins, Catalano, & Miller, 1992; Single et al., 1996) so it makes sense, both from a human and an economic perspective to prevent these problems before they begin. Because most drug use is initiated in adolescence, the majority of prevention programs target young people prior to initiation to prevent or delay onset or during the early stages of experimentation to prevent progression to regular use.

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5 There was a slight difference in the wording of the smoking question between the 1990 ADP survey and the 1993 SBPP survey which may, in part, explain the large differences between 1990 ADP rates and the 1993 SBPP smoking rates.
The case for prevention is also supported by data on the patterns of morbidity and mortality in adolescence and adulthood. Unintentional injuries, suicide, and interpersonal violence are the three most common causes of death among adolescents (Blum, 1991). Non-fatal injuries are the major cause of morbidity (Peters & Tonkin, 1994). Drug use, particularly alcohol use, by adolescents can be implicated in all of these (Morisky, McCarthy, & Kite, 1986). Tobacco use is associated with the major causes of morbidity and mortality in adulthood (i.e., cancer and cardiovascular disease), and with respiratory tract symptoms and poorer overall physical health in adolescence (Arday et al., 1995). Tobacco also is a highly addictive substance. Illicit drug use is implicated strongly in the acquisition of HIV. Although few adolescents who use alcohol and illicit drugs during adolescence go on to develop a chemical dependency (Farrow, 1994), those who begin smoking regularly in adolescence do have a high probability of continuing to smoke regularly into adulthood, with all of its attendant health consequences (Kandel, 1988).

The health consequences of tobacco and alcohol use have been well documented (Farrow, 1994; MacDonald, 1984; Task Force on Smoking, 1982; U.S. Public Health Service, 1979, 1982). The evidence on the effects of marijuana use on health status is less conclusive. A recent review of this evidence by the World Health Organization (1995) concluded that there are health risks associated with heavy cannabis use (emphasis added), especially when used over a prolonged period of time. The most probable health risks of chronic heavy use include: (a) the development of a dependence syndrome, (b) an increased risk of involvement in motor vehicle accidents, (c) an increased risk of developing chronic bronchitis, (d) an increased risk of respiratory cancers, and (e) an increased risk of giving birth to low birth weight babies when used during pregnancy.

At current levels of use, particularly the levels used by most adolescents in BC, cannabis is a much less serious public health problem than either alcohol or tobacco. There may be some cause for concern, however, given the increased rates of use by BC students between 1993 and 1995 in SBPP schools (School-Based Prevention Project Evaluation Team, 1995d). The risks for motor vehicle accidents, in particular, are
likely to be increasing as well. The legal consequences of marijuana use may be one of the most important harmful outcomes because of possible long-term enmeshment in the criminal justice system.

From a societal perspective, drug misuse in Canada exacts a heavy toll, both economically and socially. Single and colleagues (1996) have estimated the cost of substance misuse in Canada to be $18.4 billion in 1992, or 2.7% of Gross Domestic Product. The bulk of these costs are related to treatment, law enforcement, and lost productivity. The position of the BC Ministry of Health is that drug misuse is a major health problem with economic and social consequences that extend beyond the health system to the education, criminal justice, and social services systems, and to the private sector. "The cost of drug abuse includes: lost productivity; accidental injuries; deaths; disruption to families and communities; and increased public expenditures in law and order programs, correctional institutions, welfare agencies, and the health care system" (Alcohol and Drug Programs, 1992, p. 4). Thus, the rationale for this particular prevention program is grounded, not only in concerns about the health and educational impact of substance misuse on adolescents, but also on the associated economic and social costs.6

The Historical Context of Substance Misuse Prevention

Most of the literature on drug use prevention has involved school-based classroom curricula. Early generations of substance abuse prevention (knowledge-based and affective programs) have been almost universally judged to be ineffective at best, and to increase rates of drug use at worst (Bruvold & Rundall, 1988; DeHaes, 1987; Swisher, Crawford, Goldstein, & Yura, 1971; Tobler, 1986). Other approaches, including risk factor, behaviour, developmental, and community-specific approaches (Gerstein & Green, 1993; Leukefeld & Bukoski, 1993) have had equivocal results (Best, Thompson, Santi, Smith, & Brown, 1988; Gorman, 1992, 1995a, 1995b) or have been inadequately evaluated (Gerstein & Green, 1993). Much of the school-based research has centred on the social influences model, a behavioural approach, in which the emphasis is on developing skills to resist the most salient social influences on a young person's decision to

6 The above statement of the issue represents one particular social construction of the problem of adolescent alcohol, tobacco, and other drug use. It was constructed through a process of sifting, sorting, and selecting "relevant" pieces of data that help to frame the problem in a particular way, in this instance, from a public health perspective. There may be other social constructions of the problem.
use or not to use drugs. Results are equivocal. The most conclusive benefits have been demonstrated in the area of smoking prevention in which it can safely be concluded that the social influences model works some of the time for some of the youth (Gerstein & Green, 1993).

The latest thinking in alcohol and drug use prevention, stimulated by developments in health promotion, reflects an expanded focus in which single-focus, universal strategies are no longer the preferred option. Rather, preventive interventions must be based variously on the particular local culture, circumstances, traditions, and population needs. Prevention goals are being re-evaluated, and there is more concern now with prevention goals that are relevant for a broader age range in the population, which means extending the focus beyond junior high or middle schools (Gilchrist, 1991). Research on developmental stages in drug use is shifting the attention to other goals, such as preventing transitions in drug use, in addition to the traditional goal of delaying onset (Clayton, 1991; Kandel, 1988; Kandel & Yamaguchi, 1993).

Overall, the recent emphasis has been on the development of comprehensive programs targeting multiple levels of intervention. In terms of school programs, the emerging consensus is that drug use prevention is more likely to be successful when implemented in the context of comprehensive school health programs linked with community programs (Carnegie Council on Adolescent Development, 1989).

Thus, there has been a shift to a community-specific focus in drug use prevention; one that may be located in a particular setting such as a school but expands from that base to take action in the larger community in ways that support and reinforce school efforts. This recent shift in theorizing about effective substance misuse prevention is the context within which the SBPP was designed by the BC Ministry of Health. As such, the SBPP represents an innovative approach to prevention that has not yet been sufficiently tested. It was a question about the effectiveness of this type of approach that led to the development of the overall evaluation design to assess the impact of the SBPP on drug use prevalence rates in the school population (See Appendix A). To assess impact, however, it is important to know whether a program has been implemented as planned or intended, and ways in which its implementation has been adapted by
practitioners to its environment. Therefore, questions about the feasibility and extent of implementation led to this study.

**Developing a Study of SBPP Implementation**

The critical importance of studying implementation was recognized in the wake of disappointing results from the "Great Society" era programs in the United States during the 1960s (Palumbo & Callista, 1990; Van Meter & Van Horn, 1975). Many of these programs were found to be ineffective, but on closer examination, the reason for program failure could be traced to a lack of, or inadequate implementation (Pressman & Wildavsky, 1986). The problem was that policy makers and analysts had made the erroneous assumption that once policies were developed the difficult work had been done, and all that was left was *simply* to implement them (Chase, 1979; Van Meter & Van Horn, 1975).

Implementation assessment is important to determine what it was about the program that worked or did not work. Some evaluation theorists (Weiss, 1972; Chen, 1990) point out that many evaluations can be characterized as "black box" evaluations in that they focus primarily on the overall relationship between program inputs and outputs without concern for the transformational processes in the middle. This type of evaluation provides an assessment of whether the program, as implemented, works but does not identify inaccurate assumptions or changes in the program that might aid future program improvement/development or facilitate transfer of the program to a new setting. A black box evaluation does not attend to the political or organizational context of the program, not does it explore the relationships between the program as delivered versus the program as planned.

Most importantly, a black box evaluation may have little relevance to policy or practice. Claims of program success on the basis of a black box evaluation may be difficult to apply in other settings or situations because the conditions under which the program works are unknown. If a program is judged to be a failure on the basis of a black box evaluation, this finding may be virtually uninterpretable. A judgment of program failure might be the result of a flawed theory on which the program was based, incomplete or inadequate program implementation, or insensitivity of measurement. Assessment of implementation opens
up the black box of the program and allows judgments about the appropriateness of theory, the strength of implementation, and factors that influence the transformation of ideas to action. It also enhances our understanding of the contingencies under which a program may or may not be effective.

The SBPP is an innovative idea that is based on health promotion principles, including the principles of participation and community ownership. These principles suggest that, for a program to have the desired impact, community members must participate in defining their own issues and determining and implementing their own solutions. These are important ideas in health promotion. But how relevant are they in the school context? Prior research has demonstrated that schools are reluctant to take on health education and health promotion programs for a variety of reasons (Shamai & Coambs, 1992; Vertinsky, 1989), not the least of which is the lack of time in the curriculum and lack of staff expertise in the area.

In recognition of the challenges in implementing health promotion programs in schools because those in schools lack time and expertise, the SBPP was conceptualized to include a PW position in the school. The PW would be responsible for facilitating the development of a comprehensive prevention program. To do this, the PW was expected to implement a health promotion planning process (the SBPM) that would encourage the school to develop and implement primary prevention strategies in the school setting. This conceptualization of the SBPP raises a number of unanswered questions that have not been addressed in the literature. Is the PW role able to be integrated in the school context in a way that facilitates the development of a comprehensive and potentially effective prevention program? How well is the PW able to implement the SBPM to develop such a program and what are the factors that influence the implementation of that process? Is the PW able to implement a new role and the SBPM in the way that was intended by the developers of the program? How well did PWs understand the SBPM? What did it mean to them?

I came to this study with an interest in implementation issues and a curiosity about the answers to the questions raised above. Ottoson’s (1993) findings that participants in her study used the Precede-Proceed model (on which the SBPM is based) in a wide variety of ways, intrigued me. Participants in her study were not required to use the model for their jobs. Was there a difference in application by PWs who were required
to use the model? My original research question was therefore related to whether PWs were able to implement the model in the school context and if so, how did they actually apply it? As I began to interact with PWs as they started to work in schools, however, it became clear that to implement the model, PWs first had to implement the PW role in a challenging context. Implementing the model might only be a small part of the story. I struggled with the need to focus my research question to keep the study manageable, but it became impossible for me to explore the SBPM implementation without understanding the context within which implementation evolved in its various ways. Thus, my interest shifted from a focus on how the model was implemented to a focus on how PWs implemented both a PW role and the model and the contextual influences on that process.

Purpose

The purpose of this study was to explore the process by which PWs managed the implementation of the SBPM and the PW role in a sample of secondary schools in BC, and to identify and describe the influences on that process. I used the grounded theory method as outlined by Glaser and Strauss (1967), Glaser (1978), Strauss (1987), and Strauss and Corbin (1990) to explore the experiences of PWs and other members of the school communities participating in the project.

Research Questions

Grounded theory begins with a broad research problem that identifies the phenomenon to be studied (Glaser, 1978). The phenomenon, in this instance, was the implementation of the SBPP, specifically the implementation of the PW role/position, and the implementation of the SBPM, a defined planning process. Strauss and Corbin (1990) suggest that a novice grounded theory researcher should delimit the broad problem into a more specific question or questions, but these should be stated in a way that remains broad enough to allow emerging possibilities. In relation to this, the research questions were:

- *What is the basic social problem experienced by the participants in implementing the SBPM and the PW role?*

7 The "basic social problem" is a grounded theory term to describe the basic concern or problem that participants in the action scene must handle or manage.
• How do schools and PWs manage the implementation process?
• What are the major influences on implementation of the PW role and the SBPM?

Significance of the Study

The SBPP was an innovative pilot project aimed at preventing substance misuse among adolescents in the secondary school system. It was developed and funded by the Ministry of Health and implemented in collaboration with the Ministry of Education. The project is therefore an example of interministerial collaboration and so the findings have significance for developing future collaborations. The organizational challenges of implementing a complex project, involving multiple levels of two distinct systems provides an excellent opportunity for “policy learning” (Springer & Phillips, 1994), particularly in relation to how projects of this nature can be implemented in the school system and how the two systems can work together to achieve complementary goals.

As mentioned above, the SBPP is based on health promotion principles and embodies a set of values that may differ from those of the education system into which it was being introduced. The study will therefore provide a theoretical understanding of the contextual conditions that need to be in place for a program of this nature to be implemented successfully and ultimately, to succeed in its goals. Alternatively, it may provide an understanding of the ways in which the program needs to be adapted in design to fit the contextual conditions in most schools. In focussing on the implementation experiences of the key participants in the process, this study identifies the challenges of translating basic principles of health promotion, embodied in the SBPM, into practice at the local level. In doing this, the study may also provide useful information to policy makers and program managers about how the process can be improved in future sites or similar programs.

Overview of the Dissertation

This dissertation is organized into three major sections: Part A, the Research Investigation, Part B, Reconciling Concept and Context, and Part C, Implications. Part A, The Research Investigation, is composed of five chapters. Chapter One provides the introduction and overview of the dissertation. Chapter Two
reviews the literature on the history of school-based health education and alcohol and drug misuse prevention, describes the SBPP, the implementation of which is explored in this study, and then provides an overview of current thinking in substance misuse prevention. Chapter Three discusses what is meant by implementation and how the understanding of implementation is influenced by the theoretical perspectives within which an implementation issue is framed. The chapter closes with a review of the implementation issues that shape the focus of this study.

Chapter Four reviews symbolic interactionism, the theoretical and philosophical perspective that forms the basis for grounded theory methodology. Criticisms of grounded theory and symbolic interactionism are identified and challenged. Symbolic interactionism and grounded theory are explored for their relevance to the study of health promotion concerns. The final chapter in Part A, Chapter Five, describes the methodology of this particular study. It begins with a rationale for using grounded theory, then describes the data source, research participants, case selection, and the analytic methods. The chapter ends with a discussion of rigour in qualitative research.

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8 Grounded theory method (Glaser & Strauss, 1967) attempts to avoid the possibility that prior theoretical conceptions force data collection and analysis into preconceived categories. Glaser, in *Theoretical Sensitivity* (1978) cautions against reading too much in the substantive area for fear of contaminating the ability to generate concepts from the data by gathering data according to preconceived concepts identified in the literature. This is an impossible methodological dictate to adhere to as a graduate student. In preparation for the dissertation research, course work in the subject area(s), and wide reading in the substantive and theoretical literature of the discipline(s) was necessary. In this case, it is impossible to take a "pure" atheoretical stance by avoiding the literature altogether. There is a balance to be struck between cultivating the necessary theoretical sensitivity and avoiding the imposition of prior theoretical conceptualizations on the data, as the authorities below suggest.

Given that it is often impossible to avoid exposure to prior theoretical conceptualizations, it is important to put these on the table for exposure, critique, and deconstruction. In fact, Denzin (1989) talks about the process of "deconstruction" as a first step in interpretive research in the symbolic interactionist tradition. Deconstruction is a way of laying bare prior conceptions of the phenomenon in question so that biases surrounding existing understandings of the phenomenon can be presented, challenged, and critically examined. In doing this, the researcher is "coming clean" (Locke, Spirduso, & Silverman, 1993), and the reader will be able to make a judgment about the extent to which preconceptions and biases may have influenced data collection and analysis. In part, this is what I have attempted to do in my review of the literature. Strauss and Corbin (1990) have expanded their conception of theoretical sensitivity, and sensitizing concepts to encompass this type of situation. They view the systematic analytic techniques of grounded theory as safeguard against preconceiving the theory.
Part B of this dissertation presents the findings of the research investigation. The analysis of the data yielded the core category of Reconciling Concept and Context, which is comprised of three major categories: Entering the Field, Confronting the Model, and "Doing" the Model. Entering the Field is a large and complex category, so it is presented in three separate chapters, one for each of the three processes that make up Entering the Field. Chapter Six presents gaining entry, which describes the process PWs go through to establish the legitimacy of the program in the school, establish personal credibility and learn the ropes. In Chapter Seven, the process of creating a role is presented, which describes the PW's struggle to manage find the focus of the role and to strike a balance in managing several dilemmas they encounter in trying to implement the PW role in the school. Enhancing school readiness is presented in Chapter Eight and explains how PWs met the challenges of selling the issue of alcohol and drug prevention, selling the model, facilitating participation and steering the steering committee.

The second major category, Confronting the Model, is presented in a single chapter because it is a smaller and less complex category than Entering the Field. Chapter Nine, Confronting the Model is about the process by which PWs find themselves reacting to the model and the context within which it was presented to them at the SBPP training session. PWs' experiences in learning the model are then explored followed by a description of the process of contemplating the model, in which the PWs sized up the model, assessed its fit with their own practice and with the school's way of doing things, and tried it on for size. The tenth and final chapter in Part B, "Doing" the Model, describes how PWs actually implemented the SBPM or adapted it to fit the school context.

Part C of the dissertation is the Implications chapter in which the limitations and strengths of the study are presented. The findings of this study are then examined in relation to previous research and the implications for policy, practice, and future research in health promotion are discussed.
CHAPTER TWO

SCHOOL-BASED HEALTH PROMOTION: PAST AND PRESENT

The literature reviewed here explores briefly issues related to using schools as the site for preventive interventions. The SBPP is described, including its key elements and organizational structure. Following a description of the project, current thinking in substance misuse prevention is discussed, and the implications of this thinking for exploring implementation issues using a qualitative approach are presented. The remainder of the review focusses on implementation issues and theoretical perspectives on implementation drawing from the literature of diverse disciplines. The intent is to identify the gaps in the literature, to establish the significance of this research, and to situate it in the larger body of theoretical work on implementation, particularly in relation to health promotion.

Schools as the Site for Preventive Interventions

"...the school should because the school can and, therefore, the school must"

Seffrin, 1990 p. 152

The school health education and health promotion literature generally reflects an agreement that schools are important settings for action to improve the health status of the population (Allensworth & Wolford, 1988; Basch, 1984; Cleary, 1991; Green & Iverson, 1982; Green, 1984; Kolbe et al., 1985; Mason & McGinnis, 1985; Mutter, Ashworth, & Cameron, 1990; Stone, 1990; Vertinsky, 1989). In the United States, schools were viewed as "powerful and effective agents to facilitate attainment of the 1990 Health Objectives for the Nation" (Allensworth & Wolford, 1988, p. 3). Approximately one third of these 227 health objectives were identified as those that could be achieved either directly or indirectly through the school setting (Iverson & Kolbe, 1983). The Carnegie Council on Adolescent Development (1989) also stated that "orchestrated drug abuse prevention in schools might constitute society's most cost effective prevention strategy" (Gerstein & Green, 1993, p. 131).

The Canadian literature has also been supportive of, or implicitly assumed the appropriateness of, the use of schools for achieving health objectives (Best, Thomson, Santi, Smith, & Brown, 1988; Best,
Brown, Cameron, Smith, & MacDonald, 1989; Cameron, Mutter, & Hamilton, 1991; Cogdon & Belzer, 1991; Mutter et al, 1990). In 1988, seven national Canadian education organizations sought funding from Health and Welfare Canada⁹ to bring together a multi-disciplinary group representing government officials, teachers, school administrators, and health professionals to discuss strategies to address health issues, particularly in high schools. This 'Exchange 88' conference reached a consensus that children's health was a prerequisite for learning, and that a comprehensive approach was both necessary and preferable to the traditional fragmented, issue- and crisis-oriented approach that had characterized health teaching in Canadian schools (Anonymous, 1991).

An Emerging Consensus

In 1990, the Harvard School Health Education Project (Lavin, Shapiro, & Weill, 1992) initiated a national policy analysis in the United States on school-based health promotion. The authors reviewed 25 reports, published between 1989 and 1991, by diverse individuals and groups representing government, private, and professional organizations, and experts in the field. Some of these reports reflect an education perspective, others a public health perspective. The authors of this article conclude that these reports reflect a growing consensus on the issues and strategies for action.

Five main conclusions emerged from that analysis: (a) education and health are interrelated in that each can contribute to improving the other, (b) a more comprehensive, integrated approach is needed because most efforts have been fragmented, targeting categorical symptoms rather than the underlying causes of the problems, (c) the biggest threats to health of school-aged children are social morbidities, many of which are preventable, (d) health promotion and education efforts should be centred in and around schools because schools are community institutions, and need to play a larger role in addressing the health and social problems that limit academic achievement, public health, and economic productivity, and (e) prevention efforts are cost-effective, and the social costs of inaction are too high.

⁹ Now Health Canada, following a federal government reorganization.
Concerns About Health Promotion in Schools

The reports reviewed by the Harvard School Health Education Project (Lavin et al., 1992) make it clear that many educators and educational policy makers believe that the school is an appropriate place for education and action on health concerns. Despite this emerging consensus, the practice-based educational literature has been equivocal in its support of health education and health promotion efforts in schools (Shamai & Coambs, 1992; Walker, 1992). Many have expressed concerns that the demand for curriculum time to address a broad range of categorical health problems will dilute the educational mandate of schools (Nader, 1990). Certainly, the experience of school-based health professionals suggests that whatever the rhetoric about support for school health at the policy, government, and even school district levels, when it comes to implementation in schools, there is often a gap between the rhetoric of support, and the actual implementation of health education and health promotion programs (School-Based Prevention Project Evaluation Team, 1993).

Gerstein and Green (1993) observed that "those concerned about drug abuse sometimes promote the health or social objectives of prevention without much apparent attention to the priorities of cooperating organizations" (p. 131). For example, in their article on the role of the schools in achieving the U.S. 1990 Health Objectives for the Nation, Allensworth and Wolford (1988) cited the views of those primarily from the health sector. The views of the education sector were not represented in the literature cited in support of their conclusions. For some, the school is an important arena for health promotion efforts simply because it is a convenient way of reaching a large number of adolescents (Millstein, 1993) or, as Seffrin (1990) suggested, "...the school should because the school can and, therefore, the school must" (p. 152).

Werner (1991b), however, questions the extent to which schools can be accountable for solving all of society's social ills. He said that Canadians expect a lot of schools, and sometimes these expectations are unrealistic. It may be that the expectations of health professionals concerning the role and impact of school health education is based on an invalid interpretation of the function of education in general (Kolbe et al., 1985). Most school health education models aim to improve cognitive, affective, and skill development to
achieve positive changes in unhealthy behaviour thus resulting in improved health outcomes. A focus on health outcomes may not be in keeping with the primary concerns of educators. A more appropriate model may be the comprehensive school health model that incorporates school health services, school health education, and school environment interventions to increase educational performance directly through preventive health services and the environment, or indirectly through changes in behaviour, and thus health (Green & Iverson, 1982).

Substance Misuse and Educational Performance

For many, the justification for school health programs lies in their potential to improve school performance, and to meet educational objectives (Kolbe et al., 1985). Substance misuse in the developing adolescent may undermine motivation and interfere with cognitive processes (Hawkins, Catalano, & Miller, 1992) including memory and concentration (Farrow, 1994). This has obvious implications for educational performance. Use of drugs and alcohol also affects school functioning because it is often associated with disciplinary problems in the classroom and at school functions (Perry, Kelder, & Komro, 1993).

Perhaps the most serious educational consequence of drug abuse may be dropping out of school. Although we know that youth who drop out of school are more likely to abuse drugs after they leave school (Clayton, 1991), there is also evidence that young people who drop out are more likely to have previously used cigarettes, marijuana, and other illicit drugs (Mensch & Kandel, 1988). If drug use has resulted in problems with school performance, then it may have contributed to dropping out, either directly or indirectly.

The paradox for schools is that, on the one hand, they are being asked to solve a growing list of health and social problems, including substance use/misuse, while on the other they are under increasing pressure to get "back to the basics," all while resources are diminishing (Elia, 1990). As schools are confronted with increasing demands and reduced resources, some authors suggest that decisions about including health programs in an already crowded curriculum are likely to be based on its value in meeting the school's educational objectives (Green & Iverson, 1982b; MacDonald & Green, 1994b). Educational studies, however, have found that school district administrators and principals often make decisions about adopting
innovations on the basis of factors other than their potential to improve academic achievement, and other student outcomes (Huberman & Miles, 1984).

Because schools do not exist in isolation from the community, which sanctions and supports their existence through tax dollars, many believe that schools do have an obligation to address their communities' needs, concerns, and interests (Killip, Lovick, Goldman, & Allensworth, 1987). There is some evidence that drug abuse is viewed by the general public as one of the most important problems facing the educational system (Vertinsky, 1989). On the other hand, this is only one of many issues being promoted by a range of interest groups. Werner (1991a) reports on a study by Anderson (1983) in which at least 66 government departments, and other agencies, had specific interests to advance in schools and were backed by the financial resources to make their representations. It is clear that a lack of recognition of the concerns and dilemmas of schools in relation to health promotion, and other interests, will contribute to problems in implementation and may be wasteful of precious resources.

The problem has been conceptualized at times by health professionals and researchers as a diffusion or dissemination problem (Anderson & Portnoy, 1989; Basch, 1984). That is, experts outside of schools know what 'works' in schools. All that is needed is to get people inside of schools to understand how important it is, and to agree to adopt and implement the curricula developed by the outside experts. Thus, 'we' want the schools to come around to 'our' view of what is important for 'them' to do. This view is exemplified in the definition of a "health promotion gap" as the gap between what health professionals think people should do, and what they actually do. The role of health education is to close this gap (Orlandi, Landers, Weston, & Haley, 1990). This view appears to violate an historical principle of health education and philosophical tenet of some definitions of health promotion; that is, those affected by a problem must be involved in naming it and seeking solutions. What rarely seems to be acknowledged in the school health education literature are the inevitable trade-offs and value conflicts that must be addressed at the school level. Also, what works is not always so clear cut.
An emerging rationale for locating prevention programs in schools is that schools themselves may be sources of risk for the initiation and maintenance of drug use. One line of prevention research suggests that academic failure, a low degree of commitment to education, and low attachment or bonding to teachers, and schools increase the risk for adolescent drug abuse (Hawkins, Doueck & Lishner, 1988; Hawkins & Catalano, 1990). Data from the World Health Organization multi-national survey on youth health behaviour support this conclusion (King & Coles, 1992; Nutbeam & Aaro, 1991). There is strong association between regular smoking and alienation from school. This finding is consistent across gender, culture, and the social organizations represented by different countries. Youth who are alienated from school because of low levels of achievement, and who experience difficulties in relationships with their parents are more likely to engage in health risk behaviours, including substance use.

Schools as Both a Setting and a Target for Intervention

Trickett and Doherty Schmid (1993) suggest that adolescents may bring into the school their problems that originate in other contexts, but the way the school manages these difficulties can exacerbate existing problems, and even create new ones. In reviewing a range of studies that examined the impact of school structures and processes on student outcomes, they concluded that schools do affect adolescents in a variety of important ways. Thus, the school becomes an important social context that may contribute to the development and/or maintenance of problems such as substance misuse. This makes it an important setting for prevention but also an important target for intervention as well.

Walker (1992) even questions whether schools, as they are currently organized and structured, can bring about significant changes in drug use behaviour through curriculum efforts because schools themselves are settings that actually encourage drug use. He argues that drug use is prohibited by adult authority yet school communities informally sanction use among adults. Schools also provide a "venue for close peer relationships and social networks and an implicit culture of deception and risk taking that appears designed to support a culture of resistance" (Walker, 1992, p. 47). In other words, the adolescent culture in schools promotes drug use and risk taking in opposition to adult authority.
Thus, the problem of drug use may not lie in the curriculum but in the institution of schooling itself. However, the analysis supporting Walker's conclusion that schools are inappropriate settings for prevention programs might equally be used in support of a conclusion, or at least a hypothesis, that effective prevention requires simultaneous change on the structure and organization of the school itself in addition to health education in the classroom.

The BC Ministry of Health, in implementing the SBPP, makes the basic assumption that the school is the appropriate locus for substance misuse prevention efforts. In an official background and rationale document for the SBPP (Alcohol and Drug Programs, 1992b) the following is stated:

The school setting is a natural place for learning. There are many who believe that schools are the best place for teaching children about the complex risks to health and about how both individuals and society can attempt to control those risks (Vertinsky, 1989). Efforts to prevent drug use and misuse by adolescents and to effectively intervene when problems do arise requires a focus on the school setting. Research has demonstrated that overall rates of treatment effectiveness can be substantially improved if alcohol and other drug problems are identified early. Traditional approaches to alcohol and other drug intervention typically do not touch adolescents until a crisis is reached. It is the school setting that offers an opportunity to promote and encourage healthy behaviours, and to identify and intervene with adolescents to ultimately reduce the social and economic costs associated with drug misuse.

The School-Based Prevention Project (SBPP) is based on the concept that it is within the school environment that the greatest potential exists to: capitalize on the energy of adolescents; reach adolescents during their formative stages; and develop services that are comprehensive, continuous and age appropriate (p. 15). The School-Based Prevention Model Handbook (Alcohol and Drug Programs, 1994) extends this rationale for substance misuse prevention in schools by making the argument that it is in keeping with a comprehensive school health model, and that PWs are an important adjunct to the Learning for Living curriculum.

The School-Based Prevention Project

The School-Based Prevention Project (SBPP) was developed and funded by the Alcohol and Drug Programs (ADP) Branch, originally of the Ministry of Labour and Consumer Services in British Columbia (BC). The branch was subsequently relocated to the Ministry of Health and Ministry Responsible for Seniors and renamed Alcohol and Drug Services (ADS) in the Prevention and Health Promotion Branch where it
remained during the conduct of the field work for this study. As of January 31, 1997, the part of the branch responsible for youth programs and services was moved to the newly created Ministry for Children and Families. The SBPP was initiated as a 3 year pilot project that began September 1, 1992, and ended on August 31, 1995. The pilot phase began several months after the first PWs were hired and had begun to work in the schools. In September of 1995, the SBPP achieved official program status with the Ministry of Health, and was renamed the School-Based Prevention Program.

The aim of the SBPP was to involve youth, parents, and other members of the school community in activities that promote health by preventing and reducing substance use/misuse by BC youth in selected secondary schools in the province. The SBPP was based on a community participation philosophy. The Ministry of Health provided the basic structure and personnel for the programs, but the intent was that schools and communities would plan and direct the specific activities of the SBPP. The intended role of the PW was to facilitate collaboration and consultation among students, the school, parents, and the community related to substance use specifically, and health promotion more generally.

In 1991, a request for proposals (RFP) went out to alcohol and drug agencies and school districts across the province requesting that agencies and school districts form partnerships to develop a school-based prevention program, and submit a proposal for funding. The central feature of the program was the provision of contract funding to hire a school-based PW. A small amount of money was also provided to support the school planning process, and to fund local strategy development. The specifics of program development and implementation were left up to the local community partners but the emphasis was to be on preventing alcohol and other drug misuse by adolescents aged 12 to 18 in the secondary school system.

The objectives of the SBPP, as outlined in the program documentation, included both process and outcome objectives. The outcome objectives were: (a) to increase the mean age of onset of substance use, (b) to decrease substance use by youth, (c) to reduce the proportion of youth at high risk for substance misuse, (d) to decrease the negative consequences of substance use in youth, and e) to increase the proportion of youth abstaining from substance use. The process objectives of the project were: (a) to develop activities for
students who do not have a substance use problem, with the purpose of avoiding or reducing the likelihood of a problem occurring or improving or reinforcing healthy attitudes and/or behaviours, (b) to plan activities intended to develop the capacity of school and community personnel to be effective partners in the prevention of substance use, (c) to assist school personnel in developing programs for students at risk of developing substance misuse, and (d) to assist teachers with the implementation of the Learning for Living\textsuperscript{10} curriculum (School-Based Prevention Project Evaluation Team, 1993).

The SBPP began in the fall of 1991 when 18 PWs were hired to work in selected middle and secondary schools across the province. Most of the original contracts (N=15) were held by a local alcohol and drug agency that was responsible for hiring the PW and overseeing the project. A few of the contracts (N=3) were established directly with school districts.

The School-Based Prevention Model

Shortly after the first wave of PWs were hired, a new Director was hired in the ADP branch. This person introduced the Precede-Proceed model (Green & Kreuter, 1991) as the generic planning framework for the project and contracted an evaluation with the Institute of Health Promotion Research at the University of British Columbia. Many PWs believed that the new Director was the driving force behind the commitment of ADP to the Precede-Proceed model and then the SBPM. See Appendix B for an overview of the original model and subsequent revisions made to the model by ADP. The new Director of the Prevention Branch in ADP had been a university professor involved in training health education specialists using the model. Several people in the ADS service system, including PWs, believed that Precede-Proceed had been instituted to ensure a sound theoretical basis for the program although a Ministry representative suggested that this was not the primary reason. "The concern from the ADS perspective was to help the programs focus and remain accountable to definable prevention goals. The theoretical basis was secondary, and viewed as a support to

\textsuperscript{10} Learning for Living was the comprehensive school health program, formerly mandated by the Ministry of Education in British Columbia. Learning for Living had three components: a health education curriculum, services for students in the school setting, and a healthy school environment (Ministry of Education, 1990). In 1995, Learning for Living was subsumed (in a diluted form) by the new Career and Personal Planning (CAPP) program, which was not based on a comprehensive school health framework but included only the curriculum component (Province of British Columbia, 1995).
No training had been provided for the original 18 workers prior to their entry to the school system, and the majority of these PWs had not worked previously in schools. This was not unusual in the Ministry because it was rare for Ministry-wide training to be held for this type of program. The PWs were assumed to have been hired with the requisite skills to work in the area of alcohol and drug prevention. Once the Precede-Proceed model was introduced, however, ADS believed that training was necessary for PWs to learn the model. The first training session was held in February of 1992 in Vancouver for PWs, and their agency and school supervisors. The main focus of the training session was to introduce the Precede-Proceed Model, to provide an opportunity for PWs and their supervisors to learn the model, and to help them develop a clear understanding of what was expected from the program in each local setting. The majority of Wave One PWs had been working in their schools for up to 6 months before the first training session.

In the summer and fall of 1992, several new PWs were hired\(^\text{11}\), and an orientation/training session was held in October for the existing, and the recently hired PWs. Based on comments about the Model from the previous training session, several modifications had been made to simplify it prior to this second training session. A diagram of this revision is presented in Appendix B. The major changes involved turning the diagram around so that it began on the left, and moved to the right rather than vice versa, revising the titles of each phase in the model, and changing the names of the predisposing and reinforcing factors to motivating and rewarding factors. The model was renamed the School-Based Prevention Model (SBPM). Although the model direction was reversed in this first revision, the text in the training manual (Alcohol and Drug Programs, 1992) still stated that the process begins with the final desired goal, which was now on the left of the page instead of the right, and works backwards to identify what preceded it. Thus, there was no real change to the core elements of the model.

\(^{11}\) By 1993, there were 43 PWs working in 56 schools, and 8 contracts were held by school districts. By February of 1995, there were 42 PWs working in 53 schools, and 10 of the contracts were held by school districts. The program was dropped from 3 schools for a number of reasons, primarily related to difficulties in getting the program established satisfactorily in those schools.
At this point, the policy and regulatory components of the Proceed portion of the model remained in the SBPM. A handbook was developed for PWs that was intended to provide a user-friendly, step-by-step set of guidelines for using the model. A draft of the handbook was introduced to PWs at the second training session for feedback and discussion (Wharf Higgins & MacDonald, 1992). Feedback from this second training session, and subsequent discussions with PWs led to further revisions to the model (see Appendix B). The model was simplified in that stages were merged, the Proceed portion of the model was omitted, and a preliminary "Getting Ready" stage was added as the first stage. The diagram was now represented as a circle, rather than as a linear model with boxes and arrows. The core of the Precede model was retained (i.e., emphasis on the predisposing, reinforcing, and enabling factors) as the central element of the planning process. Recall that the predisposing and reinforcing factors had been renamed motivating and rewarding factors in the first revision to the model. In the second revision, the motivating and rewarding factors reverted to their original names, but the enabling factors were renamed facilitating factors. Many of the PWs had been addictions counsellors, and the term "enabling" had a negative meaning for them.

The first draft of the model handbook (Wharf Higgins & MacDonald, 1993) was revised in line with the changes to the model (Alcohol and Drug Programs, 1994) and distributed to PWs several months following the second training session, just prior to the final year of the pilot phase of the project. A description and diagram of the final revised model (i.e., the SBPM) is outlined in Appendix B.

**Contractual Arrangements**

At the beginning of the SBPP, Alcohol and Drug Programs was organized into five service regions. In each region, Area Managers were responsible for managing SBPP contracts within a defined area. This changed with the restructuring that followed the formation of the new Ministry for Children and Families. For the purposes of this study, however, the relevant organizational structures are those that were in place.

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12 The Proceed portion of the model did not appear to be deliberately omitted but in the attempt to make the entire process more user friendly, the policy and regulatory components were somehow left out. However, there was an explicit requirement in the PW contract that specified that the PW was to develop school policies related to alcohol and other drug use. Thus, despite the elimination of the Proceed portion of the model in the revision of the SBPM, there remained an expectation that school policy would be an important prevention strategy in the SBPP.
prior to 1994, and from 1994 to January 31, 1997. Appendix C presents the organizational charts for these two periods of time.

In each region, an ADS area manager was assigned to manage the contract with either the alcohol and drug agency or the school district. The reporting relationship for the PW varied depending on which organization held the contract. If a school district held the contract, the lines of authority, responsibility, and accountability were straightforward. In this case the PW was responsible to the school district through the local school administration. The school district was accountable to the local ADS area manager for meeting the terms of the contract. Schools did not have any other contractual relationships with ADS, and for the most part, there was no history of a prior relationship between the two organizations.

If a community agency held the contract, the PW was accountable to the agency who paid her or his salary, but was also accountable to the school in which he or she worked, usually through an administrator or head counsellor. Thus, there was one more organizational level to which the PW was accountable, and two service delivery systems to accommodate. The agency, as for the school district, was accountable to ADS for the management of funds, and completion of the contract terms. The majority of these community alcohol and drug agencies had long-standing relationships with ADS and relied on them for a large portion of their funding. Thus, most agencies had more than one contractual relationship with ADS.

The contract specified the terms and conditions of payment to the organization and outlined a service schedule for the PWs. The terms of the contract were revised at the end of the second year of the 3 year pilot phase to reflect more closely the stages in the SBPM. Copies of the original and revised generic service schedules, and their associated Schedule A, which outlines specific contract requirements, are presented in Appendix D.

The original service schedule outlined the requirement for the SBPP to provide prevention services within the context of a comprehensive school health program. In addition, the PWs was responsible for carrying out the following: (a) developing and maintaining a prevention steering committee comprised of students, teachers, administrators, and parents, (b) development of comprehensive school health policies, (c)
developing and implementing health promotion programs specifically in substance misuse prevention, (d) providing short term early intervention services including screening, referral and support groups; and (e) providing teacher in-service training and support on strategies relevant to substance misuse prevention. 

During the first 2 years of the project, PWs were expected to engage in activities defined in terms of primary prevention (30%), secondary prevention (25%), and community development (45%). The original contract did not specify that the SBPM was a required element of the program but this requirement was made explicit to PWs and their agency and school supervisors at the training sessions.

The revised contract service schedule (implemented at the end of Year 2 of the program) continued to be framed within a comprehensive school health model but explicitly required the use of the SBPM to plan programs to meet three stated goals: preventing the onset of alcohol and other drug use, encouraging students who use alcohol or other drugs to decrease or cease use, and reducing the consequences associated with use. The service requirements were now specified in the language of each phase of the model, and the contract required the submission of a program proposal developed according to each stage of the SBPM. There was no time allocation specified for any single component of the model but 75% of the PW’s time was to be spent in prevention, and 25% in screening and referral. The community development requirement was subsumed in the early stage of the revised SBPM, and in the 75% prevention component. Thus, unlike the original contract, the revised contract made the requirement for using the SBPM explicit. PWs did not have input into the revisions to the contract.

The major documentation provided to the first group of PWs to guide their work in schools included Schedule A of the contract between ADS and the agency/school district, and a binder providing an overview of the Precede-Proceed model. The second wave of PWs received Schedule A of the contract, the first draft of the School-Based Prevention Model Handbook (Wharf Higgins & MacDonald, 1993), a statement outlining the Prevention Worker role, a statement of policy guidelines concerning reporting, confidentiality, and classroom presentations, and a statement outlining guidelines for standards of ethical conduct. Copies of these last three documents can be found in Appendix E. The first wave of PWs also received these
documents at the same time as the second wave. The final version of the SBPM handbook was sent out to all PWs at the end of the second year of the pilot phase. This handbook (Alcohol and Drug Programs, 1994) outlined the "final" components of the SBPP, which included the following:

1. Placement of a full or part-time\(^{13}\) PW in a secondary school. The PW was responsible for facilitating a collaborative planning process in which members of the school community defined their major health concerns, specifically related to substance misuse, and determined a course of action. The key tasks of the PW, as defined in the SBPM handbook, included: (a) building consensus on the nature of the underlying problems, (b) building consensus on possible solutions, (c) building a healthier community with the assistance of as many stakeholders as possible, and (d) displacing simplistic notions of behaviour change, and the causes of lifestyle problems. The handbook states that the SBPM was considered by ADS to be the mechanism for accomplishing these tasks.

2. The use of a defined and systematic planning process known as the SBPM, based on the Precede-Proceed model for Health Promotion Planning (Green & Kreuter, 1991). The model begins with the ultimate goal desired by the school community, and works backward to determine what must "precede" it. It includes gathering relevant data that are expected to help the community make sound programming decisions\(^{14}\). A description of the model and its stages can be found in Appendix B.

3. The formation of a steering committee comprised of representatives from the school community including students, teachers, parents, administrators, and sometimes members of related or concerned community agencies. The steering committee was viewed by ADS as the central mechanism for participation of the school community in decision making in the SBPP, and was expected to result from a community networking process engaged in by the PW early in the process.

\(^{13}\) This was a local decision. In many instances, school size determined whether a PW would be hired full- or part-time, but in other instances, school districts and community agencies sought to maximize the PW resource by utilizing the service in more than one school.

\(^{14}\) Earlier in this chapter, a Ministry official was quoted as saying that the model had been introduced to help the programs focus and remain accountable to definable prevention goals. This purpose might not be the same thing as using the model to make sound programming decisions, which was the purpose of the model as stated in the SBPM handbook.
4. Staff development activities by ADS intended to provide PWs, agency personnel, and regional ADS staff with an understanding of the purpose and the process of the SBPM, and skill development related to working in schools with young people. Staff development included an annual training conference held in Vancouver for PWs, school, and agency personnel, and workshops in the regions for ADS staff. In the third year of the project, ADS meetings and workshops were held in some regions for all workers in the ADS continuum of care, which included PWs. Funds were also provided in the contract for PW staff development. Many PWs availed themselves of a variety of staff development opportunities depending on their personal continuing education needs.

In summary, as the above description of the SBPP indicates, there are a number of features of the program that reflect an attempt to put health promotion principles into action in the school setting. Several features of the program represent real innovations for schools. In many ways, the ideas and principles underlying the SBPP reflect current and emerging thinking in health education and health promotion. For example the intent of the SBPP was that the PW would facilitate a collaborative process by which the school would determine the direction of their own prevention program and be involved in its implementation. The PW's role was to help build the capacity of the school to take on its own health issues and concerns. The SBPP does not involve a defined or specified intervention or program. Rather, it involves the implementation of a systematic planning process that is expected to result in the development of strategies that suit the unique needs and circumstances of every school. No two programs will look alike.

In the next section of this chapter, current thinking in substance misuse prevention is reviewed. This helps to place the development of the SBPP into a context that helps us to understand the elements of the SBPP in relation to emerging theoretical perspectives in substance misuse prevention.

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15 The ADS "continuum of care" refers to the full range of alcohol and drug services from primary prevention through early intervention, and brief therapy to more intensive, longer term treatment.
Current Thinking in Substance Misuse Prevention

Historically, most interventions aimed at preventing alcohol and drug misuse have involved school-based classroom curricula, implemented by teachers or health care providers. A variety of theoretical frameworks have undergirded these approaches. Overall, however, the results of these studies have been disappointing. In recent years, a number of reviews have concluded that, to be successful, prevention programs must go beyond the classroom to make changes in the larger school environment (Parcel, Simons-Morton, & Kolbe, 1989; Gerstein & Green, 1993).

Community-Specific Approaches to Prevention

The vast differences between communities in terms of population make-up (e.g., ethnicity and culture), socio-political environment, and the scope and extent of drug abuse problems, suggest that a community-specific approach may be most relevant. There is a large body of literature on community-specific approaches to a wide variety of health and social issues. Until recently, however, there have been few published studies of community-specific drug and alcohol prevention interventions. Therefore the relevance of community-specific approaches to drug use prevention has not been established (Gerstein & Green, 1993).

There is considerable variability in what constitutes a community-specific approach. Many approaches are referred to as “community-based” although they differ significantly in how “community” is defined, on the theoretical and philosophical underpinnings, and on the key features of the intervention. Green and Kreuter (1991) identify two types of community-specific interventions: community-wide interventions and interventions-in-community.

Community-wide interventions

Community-wide interventions attempt to obtain small changes at the individual level, but among a large proportion of the population thereby generating a significant population impact. These interventions are based on the assumption that risk factors for a particular condition or behaviour are normally distributed in populations. Examples of this approach include the large-scale cardiovascular and cancer risk-reduction trials such as the North Karelia project in Finland (Puska et al., 1983), the Stanford Three- and Five-City
projects (Farquhar et al., 1982; Flora, Maccoby, & Farquhar, 1989), the Minnesota Heart Health Project
(Lando et al., 1995; Luepker et al., 1994), the Pawtucket Hearth Health Program (Carleton, Lasater, Assaf,
Lefebvre, & McKinlay, 1987), the Community Intervention Trial for Smoking Cessation (COMMIT)
(Lichtenstein, Wallack, Pechacek, 1991; The COMMIT Research Group, 1995a & b) and the CART project
in Australia (Hancock et al., 1997).

Interventions in community

The second category of community-specific programs are “interventions-in-community.” These tend
to operate from a specific site or institution within the community, such as a school, a work site, a clinic, or a
hospital. In contrast to community-wide interventions that seek small changes across an entire population,
these approaches seek more intensive or extensive moderate change in a sub-population. Most of the drug
prevention research has been in school settings, and thus would be classified in this category. As discussed in
the introduction, however, there is an emerging consensus that drug use prevention is more likely to be
successful when implemented within the context of comprehensive school health programs linked with
community programs. This could be said of the institutionally-based programs in other settings as well.

The types of interventions characterized as interventions-in-community vary widely. Rothman and
Tropman (1987) distinguished three models of community organization: locality development, social
planning and social action. Locality development and social planning are what others have characterized as
community development and community-based programming (Chavis & Florin, 1990; Labonte, 1994a;
Minkler, 1990).

Community-Based Programming

In community-based planning, health agencies or professionals define the problem, develop
strategies to remedy the problem, and involve local community members or groups in solving the problem.
Ultimately, the intent is to transfer responsibility for the on-going program to local community members and
groups. Generally, there are clearly defined program timelines, and decision making power is in the hands of
the institution or agency although community members may be involved in advisory groups to the decision
makers (Labonte, 1994a). Overall, these tend to be more "top down" initiatives directed by experts/professionals.

Community Development Programming

By contrast, community development programming is "the process of supporting community groups in their identification of important concerns and issues, and in their ability to plan and implement strategies to mitigate their concerns and resolve their issues" (Labonte, 1994a, p. 37). Thus, the problem is locally defined, the time-lines may not be set, and power relations are continually negotiated within the process. Ultimately, the intent is that the group will have improved its capacity to solve its own problems effectively. This approach is more "bottom up," directed by community members.

Thus, it appears that the first classification scheme distinguishes community-specific approaches in terms of the size and scope of the program, and the number of agencies and levels of organization involved. The second scheme has more to do with the nature of the relationships and transactions between health professionals and community members, and the types of processes involved, although it is clear that each type in the second scheme could easily fit within each type of the first. In other words, community-based and community development programming could characterize both community-wide interventions and interventions-in-community.

The difficulty with these classifications is that, in practice, the boundaries between them are somewhat blurred. Characteristics of each can be found in any one project. For example, the SBPP is situated in a school but it operates in partnership with at least one other community agency. Many of the PWs have established collaborative relationships with other community agencies around the issue of drug use prevention in particular and adolescent health promotion more generally. In some schools, there is a steering committee in which members of the community participate. Some PWs also sit on advisory committees for other community agencies. Thus, although the program is clearly not a community-wide intervention, it is intended to be more than just a school-based program. In the SBPP, the problem of alcohol and other drug use by adolescents has been named by the sponsoring agency. But the approach that is advocated, at least in
its official policy documents and conceptualization, has some features in common with the community development model outlined above.

**Principles of Community Health Promotion Practice**

In relation to community health promotion practice, Gerstein and Green (1993) have identified a set of fundamental propositions that have come to be widely accepted by a variety of practitioners as basic principles of practice in community settings. These are: (a) begin from a base of community ownership of the problems, and the solutions; (b) plan thoroughly using relevant theory, data, and local experience as bases for program decisions; (c) know what types of interventions are most acceptable and feasible to implement for specific populations and circumstances; (d) have an organizational and advocacy plan to orchestrate multiple intervention strategies into a complementary, cohesive program; and (e) obtain feedback and evaluation of progress as the program proceeds (Gerstein & Green, 1993, p. 119). They question, however, whether these broad generalizations apply as well to drug abuse prevention as to the other fields of research and practice from which they emerged (e.g., education, public health, community psychology) since they have not been widely applied in a systematic way in this field. The intent of the SBPP is to apply these principles in the school setting, guided by a defined planning process based on the Precede-Proceed model for health promotion planning.

**The Social Ecological Perspective of Health Promotion**

The emergence of the community-specific approach to drug use prevention has paralleled (and been influenced by) developments in health promotion. A central feature of the post-Ottawa Charter (World Health Organization, 1986) health promotion is its ecological perspective which sees health as "the product of the continuous interaction and interdependence of the individual within his or her ecosphere: that is, the family, community, culture, societal structure, and physical environment" (Green & Raeburn, 1988, p. 154).

Stokols (1992) describes 'ecology', which had its earliest roots in biology, as referring broadly to the interrelations between organisms and their environments. It has evolved in several disciplines into a *general framework* for understanding the nature of people's transactions with their physical and social environments.
Social ecology is concerned with social, institutional, and cultural contexts of people-environment relations. Stokols outlines several assumptions underlying this perspective: (a) the healthfulness of a situation and the wellbeing of its participants are influenced by multiple facets of both the physical and the social environment, (b) analyses of health and health promotion should address the multidimensional and complex nature of human environments, (c) the socioecological perspective incorporates multiple levels of analysis and diverse methodologies for assessing the healthfulness of settings and wellbeing of individuals and groups, (d) the effectiveness of health promotion programs can be enhanced significantly through the coordination of individuals and groups acting at different levels, and (e) people-environment interactions are characterized by cycles of mutual influence.

The ecological approach is transactional in nature, with reciprocal effects between the individual/family/group/community and the environment. To exploit this theoretical understanding fully, actions based on this approach are directed at influences in each of the levels, and consideration is given to outcomes at levels other than the individual (Green, Richard, & Potvin, 1996; Kickbush, 1989; McLeroy, Bibeau, Steckler & Glanz, 1989; Richard, Potvin, Kishchuk, Prlic, & Green, 1995; Stokols, 1992).

Perry, Kelder, and Komro (1993) have described an ecological framework for examining the health of adolescents. They use Bronfenbrenner's (1979) nested spheres of micro-, meso-, exo-, and macro-systems. The rationale for using such a framework is that "...explanations of behaviour and developmental patterns cannot be sought at only one level, but need to include several layers of context" (Perry, Kelder, & Komro, 1993, p. 75). Thus, the other spheres are assessed as a source of 'explanations' for behaviour but not necessarily targeted for change. Behaviour remains precisely at the heart of the model as the primary focus and concern. This appears to be a unidirectional model. There is no analysis of the influence of adolescents' behaviour in affecting their own social or environmental context or, in health promotion terms, of taking action on their environments to gain control over the factors influencing their health or lives. The absence of this analysis is surprising, given the notion of reciprocal determinism that lies at the foundation of Social Learning Theory (Bandura, 1977), which undergirds virtually all of Perry's work.
In contrast, Leventhal and Keeshan (1993) have a different understanding of the concept of interdependence and mutual influence in relation to adolescent health generally, and substance use in particular. They identify that there is a great need in drug prevention research "to improve the conceptualization of the individual in the social context" (Leventhal & Keeshan, 1993, p. 265). For example, they argue that treating peer influences as solely an environmental factor ignores the adolescent’s representation of the relationship between peer and self. Adolescents are not passive recipients of social influences from the external context, but actively construct and regulate the world around them in relation to the meanings these influences hold for them. Thus, "young people, in action with their context, create the basis for their own development" (Leventhal & Keeshan, 1993, p. 268).

Green and colleagues (1996) identify some limitations of the ecological approach. They argue that health promotion is drawn to ecology because it enlarges the focus from behaviour to the environment. They contend, however, that we are forced to "retreat to behaviour at some level" because "we do not manage ecosystems, we manage our interactions with them" (Green et al., 1996, p. 273). What they mean by a retreat to behavior is that we cannot abandon a concern with human behaviour in a truly ecological perspective. The term “retreat to behavior” is also meant to convey the understanding that the “management of interaction” is, in fact, human behaviour (personal communication, L.W. Green, October 15, 1996). This notion of managing interactions with the environment was exactly the point I was making above. Adolescents actively manage their transactions with their environments rather than responding solely to external influences. Thus,

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16 Although the authors do not specifically refer to symbolic interactionism, the notion that adolescents actively construct the world around them in relation to the meanings they make of that world, is a key precept of symbolic interactionism (Blumer, 1969). This theoretical perspective will be discussed in more detail in Chapter Four.

17 I have used both the British and American spellings in this document. I use the British spelling as a matter of course; the American spelling is used in direct quotations where that particular spelling was used in the original.
the centrality of human action is acknowledged but there is also a recognition of the reciprocal and interdependent relationship between human beings and their social/physical worlds.\textsuperscript{18}

**Implementation and Evaluation Issues in Community-Specific Approaches**

In part, the limited evidence for the effectiveness of community-specific approaches to drug prevention may be due to the inherent difficulties in evaluating community interventions that are based on ecological principles. The move to recognize the importance of community context in prevention programs has added enormous complexity to the issue. It is difficult to evaluate interventions that consider the multiple levels of influence across multiple settings and to track the iterative and ongoing process of reciprocal influence between human action and environmental conditions. The applicability of traditional experimental and quasi-experimental approaches to evaluating such interventions increasingly is being questioned (Potvin, 1995; Green, Richard, & Potvin, 1996).

The complexity of these interventions also raises questions about what is actually being implemented, and how that implementation is taking place. The challenges of implementation have been demonstrated in situations in which the intervention is well defined and clearly circumscribed. Implementation is surely a greater challenge when the intervention is more complex. In recent community-based substance misuse prevention interventions, in which there was a standardized and controlled intervention, the researchers reported a number of implementation challenges. One of the challenges was:

...to maintain a structure for the study that encourages collaboration between scientist and citizen, that is sufficiently rigorous for the scientific enterprise and yet flexible enough to incorporate ideas from the community on how to proceed, and thereby to embrace the idiosyncrasies and local community problems that are expected to occur when the community is the 'subject' of research (Perry et al., 1993, p. 135).

An international symposium on *Experiences with Community Action Projects for the Prevention of Alcohol and other Drug Problems* (Greenfield & Zimmerman, 1993) focussed much of their discussion on

\textsuperscript{18}The concept of mutual interdependence is central to both social ecology and symbolic interactionism. As discussed in Chapter Four, this observation has implications for a choice of methodology in a study of health promotion.
the issues associated with melding the differing agendas of researchers and community members around
issues of alcohol and drug prevention. The issue raised above is only one of many that researchers and
communities are grappling with in the wake of sustained interest in community approaches to prevention. The
same question has been raised by the various traditions of participatory research (Green et al., 1995).

Research Dilemmas

Several dilemmas were identified throughout that symposium in relation to the issue of research
versus community-driven prevention programming. Wagenaar and Wolfson (1993) identify six tensions
between scientific research and community action. Three of these are particularly relevant to this discussion.
The first is the issue raised above about the tradeoffs between scientific rigour and community relevance.
The value-free assumptions of the traditional scientific method often conflict with the explicit values inherent
in community action. The value-free stance has been widely called into question and few researchers today
would argue that the scientific method is itself value-free. Wagenaar and Wolfson argue that the conflict is
not between value-free objectivity (since science cannot be value-free) and community advocacy, but between
competing values.

The second dilemma has to do with the power of the research design versus the power of the
intervention. A powerful research design, in the traditional scientific sense, is likely to minimize the impact
of the intervention because of the need for standardized protocols and researcher control. On the other hand,
a powerful intervention may require extensive community control, and therefore is antithetical to the scientific
method. Thus, to the extent that research values take precedence, the success of the intervention may be
jeopardized. Some researchers address this dilemma by attempting to strike a balance between research and
community needs; that is, attempting to maximize community participation while maintaining scientific
rigour.

The third dilemma is related to the first two; that is, the issue of community empowerment versus
researcher control. Community organization theory suggests that problems and solutions that are
community-defined and owned are likely to be more effective than those imposed from outside (Minkler,
The dilemma here is that generally, local autonomy leads to treatment heterogeneity. The scientific method, of course, relies on stringent researcher control over the intervention (i.e., the 'independent variable') and desires, if not requires, standardized interventions across sites. These dilemmas have also been described in relation to health education research and reflect a long-standing tension in the evaluation of health education interventions (Green, 1977).

Resolving the Dilemmas

Fisher (1995) comments on this difficulty posed by the dilemma noted above, and proposes an alternative approach that may help researchers and practitioners to get around this dilemma. He suggests that it is important to distinguish between "defined, community-based" interventions with standardized protocols and "community organization" approaches that are truly community-driven, and that place greater emphasis on intended audiences' active participation in program development. Instead the intervention might focus, not on specifying the intervention components and governance structures, but on defining the process by which an intervention is developed. In the SBPP, a key component of the intervention is the use of a defined planning process, the SBPM.

Process as intervention. Unfortunately, few studies have been published in which a "process" such as the SBPM is the intervention. For example, the Precede-Proceed model, on which the SBPM is based, has been applied in over 700 published applications. Although I have not reviewed all of these, a search of close to 400 of these has not turned up an instance in which the model itself is the intervention. In most applications, the model is used to develop a defined intervention which is then tested and evaluated. Some researchers have used the model as a framework for assessing the comprehensiveness of the program, as a conceptual framework for deriving variables to study in relation to a specific research question, or to define variables for evaluation of a program.

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19 A bibliography of this literature can be obtained through the internet by browsing the web site of the Institute of Health Promotion Research, University of British Columbia at http://www. ihpr.ubc.ca
A recent project in Minnesota (The Communities Mobilizing for Change on Alcohol - CMCA) is testing a similar proposition. That is, it is evaluating a defined approach to community organization for alcohol use prevention, not a defined intervention (Wagenaar, Murray, Wolfson, Forster, & Finnegan, 1994). CMCA is an 18-community trial that targets community-level influences on alcohol use. This program differs from those previously cited in that it does not involve a standardized program developed by the research team. Rather, the communities themselves develop and devise the strategies they feel are most appropriate to meet community-defined needs. Researchers serve as consultants only, providing information and materials as required related to such issues as the nature and extent of alcohol use among youth, and the effectiveness of various strategies. The project aims to test a theory-based process of community organization, and "the objective is to change community policies and practices, not simply the behaviour of an aggregate of individuals in a community" (Wagenaar et al, 1994, p. 80).

The intervention model utilizes a community organization process to influence formal community policies, and the practices of law enforcement agencies, parents, schools, alcohol merchants, youth, and other major players in the community. The specific policies and practices targeted are those influencing youth access to alcohol, including institutional policies, local ordinances, and enforcement of existing laws. Youth access is defined as the relative ease with which youth can acquire alcohol, and is assumed to be strongly related to the actual level of consumption in the community. The ultimate goal is the reduction of youth alcohol problems. Unfortunately, the results are not yet available.

Alternative means of knowledge construction. Another response to this dilemma is to examine alternate means of knowledge construction that are not based on the scientific method, and its associated definition of research rigour. Virtually all of the substance use/abuse evaluations cited above have involved quantitative designs based on survey data collection of self-reported, individual-level behavioural outcomes. Many questions have been raised about the appropriateness of using experimental and quasi-experimental designs in these types of community interventions. The complexity of the programs now being advocated make it very difficult to implement these more traditional designs, and to model program processes and
outcomes. Even the most intransigent of positivists are beginning to acknowledge that qualitative designs serve an important function in the evaluation of the new generation of community interventions for alcohol, tobacco, and other drug use prevention, particularly in terms of describing and theorizing implementation processes.

A new development in the generation of knowledge about effective substance abuse prevention may be the findings beginning to emerge from a series of community partnership grants programs. These programs were funded and implemented by such organizations as the Kaiser Family Foundation (Henry J. Kaiser Family Foundation, 1989), the Robert Wood Johnson Foundation (Green & Kreuter, 1991), and the Centre for Substance Abuse Prevention (CSAP)\(^\text{20}\) of the U.S. Department of Health and Human Services (Kaftarian & Hansen, 1994). Because there are similarities among these community grants programs, I will use the CSAP partnership project as an example to illustrate my point about the importance of new approaches to knowledge development that do not rely on traditional quantitative methods.

The CSAP partnership project is a demonstration project that has a number of features in common with the SBPP. First, the CSAP project emphasizes the importance of local control over program design, delivery and evaluation. In this regard, it is similar to the SBPP. Second, in the CSAP project, funding is channelled directly to community agencies in the expectation that coalitions will be formed to address the issue of alcohol and other drug use. In the SBPP the partnership is not a community coalition as such, but a relationship between at least the school/school district and a community alcohol and drug agency. The local steering committee in the SBPP is the central mechanism for partnership while the coalition is the central mechanism in the CSAP project. The SBPP specifically addresses alcohol and other drug use prevention among adolescents rather than drug use more generally among the community at large, as in the CSAP projects.

\(^{20}\) Formerly, Office of Substance Abuse Prevention (OSAP). The name change to CSAP followed a federal reorganization of the parent organization - Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) which became the Substance Abuse and Mental Health Services Administration (SAMHSA) on October 1, 1992.
Third, in both CSAP projects and SBPP, the sponsors were not disseminating a defined program. Each community is expected to engage in their own planning process to develop a credible approach to alcohol and other drug use that is grounded in the local context, and includes a local understanding of the issues and appropriate solutions. Local control over the planning process, the solutions implemented, and the evaluation is considered to be a critical element in both the SBPP and the CSAP. This could be said of most community grant programs of federal, state, and provincial agencies, and of foundations (e.g., BC Health Research Foundation).

Finally, community level participation is a key feature of both innovations. What this actually means at the local level is likely to vary across communities. The intent, however, is that local participation will engender community concern and ownership of the issue and the solutions. It will also develop the capacity of the community to deal with these and similar issues in the future.

As a demonstration project, the CSAP projects are concerned primarily with "policy learning" (Springer & Phillips, 1994). That is, grants are provided to communities to encourage local partnerships to develop new and innovative approaches to substance abuse prevention that will provide important lessons for future programming and policy development. For these purposes, it is as important to understand the local context and its interaction with the local program as it is to understand the program's impact. Policy learning, in this sense, is also an important focus in the SBPP evaluation.

To date, limited outcome data have been published from any of the CSAP partnership programs implemented in 251 communities across the U.S. There have been, however, numerous publications that report on formative and process evaluation data with an important emphasis on describing the implementation issues that emerge in these complex and comprehensive community interventions.

There are several other reasons why traditional evaluation designs in substance abuse prevention are a poor fit with the types of tasks faced in evaluating programs such as the Community Partnership Programs, or the SBPP for that matter. First, there is an increasing recognition that the possibility of identifying and using appropriate control communities is rapidly becoming an inviable option in evaluation. This concern
was echoed throughout a recent CSAP monograph (Greenfield & Zimmerman, 1993). This was an important issue in the SBPP evaluation, in which an inadequate number of control schools were recruited, and those that did agree to participate were so unique that any comparisons between them and the experimental schools are suspect (School-Based Prevention Project Evaluation Team, 1995c).

Second, classic experimental and quasi-experimental designs aim primarily to reduce Type I errors, that is, to avoid reporting an effect that does not exist. Hansen and Kaftarian (1994) argue that Type II errors (i.e., failing to detect effects that do occur) are potentially more limiting to an emerging field than Type I errors because a field cannot progress without hypotheses. Experimental and quasi-experimental designs are only appropriate when a body of knowledge already exists about a topic. In new or emerging fields, there is often insufficient theory development to allow the deduction of sophisticated hypotheses that can later be tested. The testing of ill-formed hypotheses can be wasteful and an inefficient trial-and-error process.

In the case of the CSAP partnerships, there is little information currently available about what types of partnerships exist or the contexts in which they function effectively. Similarly, for the SBPP, there is little information on drug use prevention at the high school level that does not centre around classroom curricula as the primary strategy. We do not know what types of SBPP programs are being implemented successfully in schools nor do we know anything about the school contexts in which they function effectively. Most importantly, we do not know whether and how the intended planning process is actually implemented in the schools. Thus, generating this understanding through exploratory research may be a more important task for evaluation, at this stage of SBPP development, than demonstrating effectiveness. Thus, it seems that a focus on the implementation process in the SBPP represents an important area for exploration and theoretical development that will make an important contribution to knowledge in the field of drug use prevention as well as in the field of health promotion.

The next chapter reviews the rationale for studying implementation, defines it, and provides an overview of various theoretical perspectives on implementation. The specific implementation issues for this study are then discussed.
CHAPTER THREE
IMPLEMENTATION

"The process unwinds in its own terms, mocking standard frameworks, and challenging the researcher to make a coherent summary of the welter of observed and reported events" (Huberman & Miles, 1984, p. 1).

Much of the literature on implementation does not define the term, and assumes the meaning to be self-evident (Hasenfeld & Brock, 1991; Monahan & Scheirer, 1988). On the other hand, multiple definitions of implementation have been offered by various theorists, and although there are similarities across definitions, each reflects a particular theoretical, disciplinary, or philosophical perspective on implementation. This chapter therefore addresses two questions in relation to implementation: What is implementation, and what are the implementation issues for this study? To answer the first question, the literature on various theoretical perspectives on implementation is summarized, followed by a discussion of two major issues identified in the implementation literature: the macroimplementation versus microimplementation debate, and the fidelity versus reinvention debate. The chapter closes with a discussion on the implementation issues for this study.

What is Implementation?

Implementation is usually studied as a stage or component of a larger change process. The term implementation implies that “something” is to be implemented; that is, carried out, put into place, or acted upon. It further implies that this “something” is new and different. Thus, implementation involves a change from the current situation or practice. In general, implementation refers to a process by which intentions are translated into action. These intentions are reflected in various instruments including policies, plans, technologies, programs, and innovations. It seems likely that the implementation process will be affected by the nature of the “thing” being implemented (Ottoson & Green, 1987). Implementing a broad policy may be quite different than implementing a clearly specified program. How implementation is defined will also be influenced by the disciplinary and/or theoretical lens one adopts in viewing implementation. The following discussion identifies and describes five theoretical lenses on implementation.
Theoretical Perspectives on Implementation

Much has been written about different theoretical perspectives on implementation, although each author seems to use a different label when talking about essentially the same thing. The social policy literature described two general perspectives on implementation: the “top down” (Sabatier & Mazmanian, 1979; Van Meter & Van Horn, 1975) and the “bottom up” approach (Lipsky, 1970; Moore, 1987; Weatherley & Lipsky, 1977). These perspectives have also been termed “forward mapping” and “backward mapping” (Elmore, 1985) or “implementation as control” and “implementation as interaction” models (Majone & Wildavsky, 1979). They have also been closely associated with macro- and micro-implementation. A third perspective is the iterative or evolutionary view of implementation (Berman & McLaughlin, 1975; Majone & Wildavsky, 1979; Ottoson & Green, 1987; Palumbo & Oliverio, 1989; Van Meter & Van Horn, 1975).

Also in the field of social policy, Hasenfeld and Brock (1991) describe five theoretical perspectives that explain implementation: the “pursuit of rationality,” the “organization-policy environment fit,” the “bureaucratic discretion and adaptation,” the “power relations,” and the “leadership skills” models. The organizational development literature describes four general perspectives; “implementation as systems management,” “implementation as bureaucratic process,” “implementation as organizational development,” and “implementation as conflict and bargaining” (Elmore, 1978).

In the education field, House (1981) suggested that three major theoretical perspectives have been used to analyse and interpret the implementation of change in education systems and schools; the “classical or technological model”, the “political” model and the “cultural” model. This classification has been used widely by educational researchers to guide research and analyse the process of implementation (Larson, 1992; Musella, 1989; Rossman, Corbett, & Firestone, 1988; Williams & Smith, 1993). Although a “bureaucratic adaptation” model was not included in House's classification, it has, in fact, been used to explain implementation in educational studies (e.g., Lipsky, 1980; Radin, 1977; Weatherley & Lipsky, 1977).
In the area of public administration, Yanow (1987, 1990) identifies five conceptual lenses for analyzing and interpreting implementation; the “human relations,” the “political,” the “structural,” the “systems,” and the “cultural” lenses. These overlap considerably with the models already identified. In contrast to other reviews of the various perspectives, however, Yanow explicitly identifies different levels of analysis as the focus of implementation in each of these perspectives.

In health education, the research and development model (Basch, 1984; Williams & Smith, 1993) has guided much of the implementation research in that field. It has been closely tied to diffusion of innovation theory (Lorig, 1986; Goodman, Tenney, Smith, & Steckler, 1992; McCormick, Steckler, & McLeroy, 1995; Orlandi, Landers, Weston, & Haley, 1990; Parcel et al., 1989; Rogers, 1983; Schinke & Orlandi, 1991). Classical diffusion theory is closely related to what others have called the technological model; however, Basch (1984) identifies four different diffusion perspectives that have guided implementation research in this area. These are the “research and development” model (R&D), the “social diffusion” model, the “innovative organization” model, and the “organizational development” model.

A careful review of all of the above perspectives reveals that there is considerable overlap in these, with five more or less distinct perspectives emerging. Table 1 identifies the five major perspectives found in the literature (technological, bureaucratic adaptation, organizational development, political, and cultural) and lists their various synonyms with supporting references.
<table>
<thead>
<tr>
<th>Synonyms</th>
<th>Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TECHNOLOGICAL</strong></td>
<td></td>
</tr>
<tr>
<td>Top Down</td>
<td>Van Meter &amp; Van Horn, 1975; Sabatier and Mazmanian, 1979;</td>
</tr>
<tr>
<td></td>
<td>Palumbo &amp; Callista, 1987; Palumbo &amp; Oliverio, 1989</td>
</tr>
<tr>
<td>Implementation As Control</td>
<td>Majone &amp; Wildavsky, 1979</td>
</tr>
<tr>
<td>Pursuit of Rationality</td>
<td>Hasenfeld &amp; Brock, 1991</td>
</tr>
<tr>
<td>Systems Management</td>
<td>Elmore, 1978</td>
</tr>
<tr>
<td>Foreward Mapping</td>
<td>Elmore, 1985</td>
</tr>
<tr>
<td>Research and Development</td>
<td>Clark &amp; Guba, 1967; Basch, 1984; Rogers, 1983</td>
</tr>
<tr>
<td>Diffusion of Innovations</td>
<td>Rogers, 1983; Basch, 1984; Orlandi et al., 1990</td>
</tr>
<tr>
<td><strong>BUREAUCRATIC ADAPTATION</strong></td>
<td></td>
</tr>
<tr>
<td>Bottom Up</td>
<td>Palumbo &amp; Oliverio, 1989; Palumbo &amp; Callista, 1990</td>
</tr>
<tr>
<td>Backward Mapping</td>
<td>Elmore, 1985</td>
</tr>
<tr>
<td>Street-Level Bureaucracy</td>
<td>Weatherley &amp; Lipsky, 1977; Lipsky, 1970; Moore, 1987</td>
</tr>
<tr>
<td>Adaptive</td>
<td>Palumbo &amp; Oliverio, 1989</td>
</tr>
<tr>
<td>Bureaucratic Process</td>
<td>Elmore, 1978</td>
</tr>
<tr>
<td>Structural</td>
<td>Yanow, 1987 &amp; 1991</td>
</tr>
<tr>
<td><strong>ORGANIZATIONAL DEVELOPMENT</strong></td>
<td></td>
</tr>
<tr>
<td>Mutual Adaptation</td>
<td>Berman &amp; McLaughlin, 1975; McLaughlin, 1978 &amp; 1990; Berman, 1978;</td>
</tr>
<tr>
<td></td>
<td>Palumbo &amp; Oliverio, 1989; Ottoson &amp; Green, 1987</td>
</tr>
<tr>
<td>Evolutionary</td>
<td>Majone and Wildavsky, 1979</td>
</tr>
<tr>
<td>Organization - Policy</td>
<td>Hasenfeld and Brock, 1991</td>
</tr>
<tr>
<td>Environment Fit</td>
<td></td>
</tr>
<tr>
<td>Human Relations</td>
<td>Yanow, 1987 &amp; 1990</td>
</tr>
<tr>
<td>Organizational Development</td>
<td>Basch, 1984; Goodman &amp; Steckler, 1990; Elmore, 1978</td>
</tr>
<tr>
<td><strong>POLITICAL</strong></td>
<td></td>
</tr>
<tr>
<td>Power Relations</td>
<td>Hasenfeld &amp; Brock, 1991</td>
</tr>
<tr>
<td>Conflict and Bargaining</td>
<td>Elmore, 1978</td>
</tr>
<tr>
<td></td>
<td>Musella, 1989</td>
</tr>
<tr>
<td>Implementation as Politics</td>
<td>Brodkin, 1990</td>
</tr>
<tr>
<td><strong>CULTURAL</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rossman, Corbett &amp; Firestone, 1988; Larsen, 1992; Musella, 1989;</td>
</tr>
<tr>
<td></td>
<td>Corbett, Dawson, &amp; Firestone, 1984; Sarson, 1982; Fullan, 1991</td>
</tr>
</tbody>
</table>
Table 2 summarizes the key features of each perspective in terms of several characteristics. Each of the models represent "ideal types" in that the characterizations presented in Table 2 synthesize information from the sources listed in Table 1. The first characteristic is the type of model, in terms of whether it is a normative model or descriptive model. Normative models contain assumptions about what "should" be, whereas descriptive models describe empirical findings from the literature. Each perspective also is described according to: the basic assumptions about implementation, the nature of implementation within that particular perspective, the nature of the implementation problem, strategies for managing implementation, success criteria, and explanations for implementation failure. Then, each perspective is identified in terms of its focus on macro- versus micro-implementation and its position on fidelity versus reinvention.

Finally, the major criticisms of the model are identified. The criticisms have been made from the position of the other implementation perspectives. Because there is no overarching meta-theoretical perspective from which to critique each of these five theoretical perspectives, the source of criticism is necessarily the other models. This is somewhat problematic because the criticisms derive from assumptions that differ from the assumptions of the perspective being criticised. This is much like a quantitative researcher criticising qualitative research on the basis of assumptions that do not fit the paradigm being criticized. Nonetheless, I have included these criticisms in Table 2 because they do raise important questions about the validity of the assumptions underlying each perspective.

Each perspective focuses on a different level of analysis, and each has its own set of assumptions, its own definition of the implementation problem, and its own prescription for success. In this way, each might be seen as a competing frame of reference for analyzing and explaining implementation. Yanow (1990), however, notes that two or more of these perspectives are often combined to provide more explanatory scope. In fact, she suggests that under the interpretive logic of the cultural perspective, the various lenses cease to be competing frames of reference because the cultural view acknowledges multiple interpretations. Thus, each perspective might be viewed as one aspect of the "bigger picture".
## Table 2 - A Comparison of Theoretical Perspectives on Implementation

<table>
<thead>
<tr>
<th>Reasons for Implementation Failure</th>
<th>Technological</th>
<th>Bureaucratic Adaptation</th>
<th>Organizational Development</th>
<th>Political</th>
<th>Cultural</th>
</tr>
</thead>
<tbody>
<tr>
<td>• bad management</td>
<td>• implementor resistance to control</td>
<td>• arises out of lack of consensus and commitment among implementors and the organization</td>
<td>• results when no single group or individual sufficiently powerful to ensure enactment of intent</td>
<td>• failure occurs when meanings are not widely shared among those responsible for implementation</td>
<td></td>
</tr>
<tr>
<td>• inadequate socialization to goals of organization</td>
<td>• explained by observation that policy makers or senior bureaucrats have neither understood not taken into account front line conditions</td>
<td>• poor interpersonal skills, individual motivation, disposition of implementors, amount of change required</td>
<td>• failure occurs when there is inability to reconcile divergent interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• lack of sound program theory</td>
<td>• competing priorities</td>
<td>• results from not involving those affected by decisions</td>
<td>• aims for fidelity of intent but assumes it is not possible, or willing to sacrifice for other valued ends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• ambiguous goals and directives</td>
<td>• inadequate training</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• lack of knowledge and skills on part of implementors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• implementor resistance to control</td>
<td>• explained by observation that policy makers or senior bureaucrats have neither understood not taken into account front line conditions</td>
<td>• results from not involving those affected by decisions</td>
<td>• failure occurs when meanings are not widely shared among those responsible for implementation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• conflict</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• poor interpersonal skills, individual motivation, disposition of implementors, amount of change required</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• results from not involving those affected by decisions</td>
<td>• arises out of lack of consensus and commitment among implementors and the organization</td>
<td>• results when no single group or individual sufficiently powerful to ensure enactment of intent</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>• results when no single group or individual sufficiently powerful to ensure enactment of intent</td>
<td>• failure occurs when meanings are not widely shared among those responsible for implementation</td>
<td></td>
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<tr>
<td>• failure occurs when meanings are not widely shared among those responsible for implementation</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• change is unlikely when it is too great, and does not fit with values of the culture</td>
<td>• externally motivated efforts by those with different world view unlikely to be successful</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• successful implementation must fit the normative core of the organization’s culture</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fidelity vs Reinvention</th>
<th>Fidelity</th>
<th>Reinvention</th>
<th>Mutual Adaptation</th>
<th>Fidelity the goal, reinvention the reality</th>
<th>Fidelity, reinvention, mutual adaption are all possibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Macro vs Micro</td>
<td>Macro-implementation</td>
<td>Micro-implementation</td>
<td>Micro-implementation</td>
<td>Macro-implementation</td>
<td>Both</td>
</tr>
<tr>
<td>Critique</td>
<td>• does not reflect descriptive reality of many orgs.</td>
<td>• does not take into consideration the nature of professional practice and how this might influence discretion</td>
<td>• the presence of trust, collaboration, consensus, and shared vision does not reflect the reality of all organizations</td>
<td>• there are no criteria by which to judge success or failure</td>
<td>• this conservative view of implementation raises questions about the extent to which major change in schools can be brought about</td>
</tr>
<tr>
<td></td>
<td>• front line workers many have knowledge and experience not credited</td>
<td>• view that implementors must set aside own views harder to defend in today’s orgs.</td>
<td>• bias toward consensus and collaboration does not deal with conflict &amp; politics of change.</td>
<td>• inherently pessimistic</td>
<td>• lack of attention to citizen participation</td>
</tr>
<tr>
<td></td>
<td>• organizations do not always engage in goal directed behaviour</td>
<td>• danger in moving from descriptive claims to normative assertions</td>
<td>• challenges function of the implementation process is to satisfy the needs of workers</td>
<td>• some studies have found that change agents from outside can be effective in initiating and supporting change efforts</td>
<td>• lack of attention to outcomes</td>
</tr>
<tr>
<td></td>
<td>• policies &amp; goals not always clear &amp; unambiguous</td>
<td>• conservative perspective</td>
<td>• implementation is divorced from outcomes</td>
<td>• does not fit so well those situations that are not controversial</td>
<td>• failure to address issues of power and conflict</td>
</tr>
<tr>
<td></td>
<td>• often organizations engage in action first and find justification later</td>
<td>• discretion threatens democratic rule and may drive out social justice and moral claims</td>
<td>• the intended beneficiaries do not figure in the emphasis on participation in this model</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• some studies show purpose only become clear through action</td>
<td>• disabling tendencies of professionals may marginalize some groups</td>
<td>• norms in schools mitigate against the strategies required to influence change according to this model</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• implementation does not always proceed in step by step fashion</td>
<td>• implementor resistance not always the problem, may be a rational response</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Critique

- does not reflect descriptive reality of many orgs.
- front line workers many have knowledge and experience not credited
- organizations do not always engage in goal directed behaviour
- policies & goals not always clear & unambiguous
- often organizations engage in action first and find justification later
- some studies show purpose only become clear through action
- implementation does not always proceed in step by step fashion
<table>
<thead>
<tr>
<th>Implementation Problem</th>
<th>Technological</th>
<th>Bureaucratic Adaptation</th>
<th>Organizational Development</th>
<th>Political</th>
<th>Cultural</th>
</tr>
</thead>
<tbody>
<tr>
<td>Success</td>
<td>defined as fidelity to the original idea</td>
<td>defined as fidelity to policy/program intent</td>
<td>success judged by extent to which implementors involved in the process</td>
<td>involves maintenance of the bargaining relationship and the management of conflict</td>
<td>no one successful version</td>
</tr>
<tr>
<td></td>
<td>performance is maximized on goal achievement</td>
<td>might tolerate adaptations for sake of efficiency and effectiveness</td>
<td>successful to extent that capacity is built</td>
<td>success not judged against original intent or goals, because no one set of goals reflects all interests</td>
<td>to the extent that meanings are shared, implementation can occur</td>
</tr>
<tr>
<td></td>
<td>fundamentally optimistic because it assumes that with good management and careful planning will be successful</td>
<td>pessimistic about successful implementation because assumes implementor behaviour can rarely be controlled</td>
<td>mutual accommodation has occurred</td>
<td>success often defined by those who wield most power</td>
<td>the result may be something different than original intent</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>results of process not optimal, but convenient and temporary points of closure</td>
<td>outcomes can be variable, ranging from marginal changes through mutual adaption to co-option of the innovation to the organizational context.</td>
</tr>
<tr>
<td>Strategies for managing implementation</td>
<td>uses tools of hierarchical management to control implementor behaviour</td>
<td>standard hierarchical management techniques</td>
<td>emphasis on building capacity rather than on enforcing compliance</td>
<td>role of incentives for change is important, but recognizes that there are few incentives for front line workers</td>
<td>opportunities for reflection and dialogue are critical</td>
</tr>
<tr>
<td></td>
<td></td>
<td>monitoring, evaluation, performance review, policy and procedure manuals, incentives, indoctrination, or socialization to the organization</td>
<td>monitoring, directing and rewarding behaviour</td>
<td>clarity of expectations is important</td>
<td>strategies for change are about transforming the culture</td>
</tr>
<tr>
<td></td>
<td></td>
<td>establishing clear lines of authority and accountability</td>
<td>establishing clear lines of authority and accountability</td>
<td>training and staff development integral, but attends to concerns of implementors, not teaching to “do it the right way”</td>
<td>attending to desired values and deliberate role modelling</td>
</tr>
<tr>
<td></td>
<td></td>
<td>changing organizational arrangements to reduce possibility of discretion</td>
<td>changing organizational arrangements to reduce possibility of discretion</td>
<td>minimizing of hierarchical control in organizational structures</td>
<td>interpreting symbolic elements of organizations in ways that support the change</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>collaborative work arrangements</td>
<td>shaping organizational system to express new cultural assumptions,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>staff development to encourage deep critical reflection and questioning</td>
</tr>
<tr>
<td></td>
<td>Technological</td>
<td>Bureaucratic Adaptation</td>
<td>Organizational Development</td>
<td>Political</td>
<td>Cultural</td>
</tr>
<tr>
<td>--------------------------</td>
<td>---------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
<td>-------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| **Implementation Problem** | • main concern is to translate initial plan into its realization  
• should be no gap between intentions and service delivery | • overcoming resistance of implementors who fight to stay the same, i.e. overcoming dynamic conservatism.  
• aim is to minimize discretion to narrow gap between intent and implementation | • central problem is to develop a process that results in goal consensus, individual autonomy and commitment.  
• implementors must take policy and shape it to make it their own. | • problem lies in addressing power relations inherent in the process.  
• goal is to reach a negotiated consensus, irrespective of the intent of policy/program | • problem is to come to a shared understanding of the meaning of the innovation and implementation  
• does not assume the gap between intention and action should be closed |
| **Strategies for managing implementation** | • uses tools of hierarchical management to control implementor behaviour  
• monitoring, evaluation, performance review, policy and procedure manuals, incentives, indoctrination, or socialization to the organization | • standard hierarchical management techniques  
• monitoring, directing and rewarding behaviour  
• establishing clear lines of authority and accountability  
• changing organizational arrangements to reduce possibility of discretion | • emphasis on building capacity rather than on enforcing compliance  
• clarity of expectations is important  
• training and staff development integral, but attends to concerns of implementors, not teaching to “do it the right way”  
• minimization of hierarchical control in organizational structures  
• collaborative work arrangements | • role of incentives for change is important, but recognizes that there are few incentives for front line workers  
• assumes change can only be made from within and cannot be facilitated by external assistance  
• bargaining and negotiation are central to the management of conflict, which inhibits implementation | • opportunities for reflection and dialogue are critical  
• strategies for change are about transforming the culture  
• attending to desired values and deliberate role modelling  
• interpreting symbolic elements of organizations in ways that support the change  
• shaping organizational system to express new cultural assumptions,  
• staff development to encourage deep critical reflection and questioning |
| **Implementation Success** | • defined as fidelity to the original idea  
• performance is maximized on goal achievement  
• fundamentally optimistic because it assumes that with good management and careful planning will be successful | • defined as fidelity to policy/program intent  
• might tolerate adaptations for sake of efficiency and effectiveness  
• pessimistic about successful implementation because assumes implementor behaviour can rarely be controlled | • success judged by extent to which implementors involved in the process  
• successful to extent that capacity is built  
• mutual accommodation has occurred | • involves maintenance of the bargaining relationship and the management of conflict  
• success not judged against original intent or goals, because no one set of goals reflects all interests  
• success often defined by those who wield most power  
• results of process not optimal, but convenient and temporary points of closure | • no one successful version  
• to the extent that meanings are shared, implementation can occur  
• the result may be something different than original intent  
• outcomes can be variable, ranging from marginal changes through mutual adaption to co-optation of the innovation to the organizational context |
Despite the enlarged explanatory scope of this bigger picture view of implementation, none of the perspectives presented in Table 2 address important concerns that might arise in the implementation of a health promotion program or process. As noted in the table, none of the theoretical perspectives adequately take into account the role of citizens, community members, or program beneficiaries in the implementation process. Health promotion, with its core concepts of participation and empowerment, presents new challenges to the existing theoretical perspectives on implementation. What does citizen participation mean for implementation? How does it influence the process? Several of the perspectives also tend to focus on the implementation process to the exclusion of client or population outcomes. Despite the importance of process in health promotion, it remains committed to accountability for outcomes at the community or population level. Program outcomes are linked logically to the notion of implementation fidelity in the technological perspective. But, is it possible to reconcile a concern for program outcomes with a mutual adaptation perspective on implementation?

The parallels between the socio-ecological perspective in health promotion and both the organizational development and cultural perspectives on implementation cannot go unnoticed. Social ecology is concerned with social, institutional, and cultural contexts of people-environment relations (Stokols, 1992). Similar concerns are inherent in the organizational development and the cultural perspectives on implementation. There are also strong similarities between these concepts and key precepts of symbolic interactionism, the theoretical perspective that informs grounded theory methodology. This will be discussed in more detail in the next chapter.

The notion of "cycles of mutual influence" in social ecology parallels the transactional nature of the relationship between organizational culture and its members. Culture becomes defined as organizational members react to, interpret, shape, and reinterpret the organization, its structure and what goes on within it. At the same time, culture shapes and constrains behaviour (Rossman et al., 1988). Both the cultural and organizational development perspectives assume an interaction between organizational settings and individual behaviour. The notion of mutual adaptation is also consistent with the concept of mutual
interdependence in social ecology. That is, practitioners modify their behaviour to meet program requirements at the same time that program technologies are adapted to the day-to-day realities of the organization (McLaughlin & Marsh, 1978). In relation to policy implementation, Majone and Wildavsky (1979) contend that policies are continuously transformed by implementing actions that simultaneously alter resources and objectives. The alteration of objectives, in turn, changes the meaning of the behaviours.

Each of the theoretical lenses described in Table 2 adopts a particular position in relation to two key issues that have been identified in the implementation literature. These issues could be construed as debates in the implementation literature: macro-implementation versus micro-implementation and fidelity versus reinvention.

**Macro-implementation versus Micro-implementation**

Much of the literature defines implementation in terms of local program delivery; that is, the service, or extent of service, provided to program recipients or beneficiaries. Thus, the emphasis is on local practice in the intra-organizational context. An alternative definition views implementation more globally as a process that begins with policy formulation, and proceeds through various levels to local service delivery. In this case, implementation is viewed as a multi-level, multi-stage process that takes place in the inter-organizational context. These two perspectives have been categorized as micro-implementation and macro-implementation (Berman, 1978).

Macro-implementation is concerned with the processes a policy or program goes through as it moves through multiple levels of organizations from its origins in the policy formulation environment to its application by implementors at the local level (Winter, 1990). Micro-implementation focuses on what goes on inside the local agency primarily responsible for program implementation (Berman, 1978; Berman & McLaughlin, 1975, 1976; McLaughlin, 1990; Palumbo & Callista, 1990). In either of these approaches, depending on the implementation framework, there may or may not be an emphasis on population or client outcomes.
The Rand Change Agent Study (Berman & McLaughlin, 1975, 1976; McLaughlin, 1985; McLaughlin & Marsh, 1978) was extremely influential in shaping thinking about implementation in the education, organizational development, and social policy fields. The study concluded that it was at the level of micro-implementation where most of the important influences on implementation could be found. Berman (1978) argued that a policy's implementation problem derives not from its design, but from its relationship to its institutional or organizational setting. In other words, the structure of the local setting shapes implementation, and thus influences policy/program outcomes. Subsequent educational research has confirmed the importance of the micro-implementation perspective in demonstrating the critical influence of local organizational context on implementation (Corbett, Dawson, & Firestone, 1984; Fullan, 1991; Huberman & Miles, 1984; Rossman, Corbett, & Firestone, 1988).

Another perspective has emerged in recent years in the social policy/political science literature which challenges the notion that influences at the micro level are the most important in implementation. The earliest macro-implementation perspective argued that policy design was an important influence on implementation outcomes. More recently, however, the macro-implementation perspective sees implementation as being influenced, not only by the design of policy, but by the local setting, the policy culture within which policy is formulated, the initial stimulus for policy, and the interaction of the program with its target population and the larger social environment within which it is delivered (Alexander, 1985; Ferman, 1990; Linder & Peters, 1990; Palumbo & Callista, 1990). In other words, influences at multiple levels are important in outcomes.

Whether the focus is on macro or micro-implementation really depends on the nature of the innovation, the level in the inter- or intra-organizational network at which it originated, and where the observer sits in relation to the process. If it is a program developed and implemented at the intra-organizational level in response to a locally identified concern, then the focus is more likely going to be on local level factors that influence the process. If it is an already-developed program or innovation imported into an organization to address a particular issue, then the emphasis for implementation may be on changing local organizational structures and influencing implementor motivations. This too, occurs at the micro level.
On the other hand, if a public health issue has been identified that affects the health status of the population, then policy initiatives that originate at the political and legislative level may be translated into general or specific program guidelines that are mandated for implementation by a number of agencies. This is a macro-implementation perspective, but the important considerations in the process will vary depending on whether the observer is a senior level bureaucrat or a local practitioner. The innovation may also involve a pre-packaged program diffused to schools from elsewhere in response to a provincial level policy directive. Thus, a macro versus a micro perspective reflects differing levels of analysis.

The differences between macro and micro perspectives, however, may involve more than this. Both Fox (1990) and Yanow (1990) suggest that the distinction between macro and micro-implementation is fundamentally epistemological; it involves a dispute over the nature of knowledge and being. Linder and Peters (1990) say that the difference between the two is about the appropriate normative stance; that is, who should be in control, and how that control can best be exercised. A macro-implementation perspective tends to take the position more associated with a "top down" view of the implementation process, while micro-implementation is more "bottom up."

Fidelity versus Adaption or Reinvention

A major concern of implementation research has been to describe the extent to which implementation reflects intentions. The normative assumption is that what is implemented should closely reflect the original intent. This is the "fidelity" perspective. Another point of view acknowledges that most programs or policies are modified or adapted during implementation, for a variety of reasons. This is the "reinvention" perspective. Given that adaptation is the rule rather than the exception, the question is not "should reinvention be permitted?", but rather, "what is going to change, how and what will be the effect on desired outcomes?" (Bauman, Stein, & Ireys, 1991).

In the social policy, political science, and public administration literatures, the concern with fidelity stems from a view of representative democratic accountability in which elected officials are seen as the only legitimate policy makers because only they can be held accountable through the ballot box (Fox, 1990; Linder
Health educators and evaluators generally have taken the view that fidelity to the original plan is desirable because the main concern is with outcomes. If the causal mechanism inherent in the intervention has not been carried out then desired outcomes are unlikely to be achieved. This is tied closely to a concern with program theory (i.e., purported means-end schemes that are necessary to achieve desired outcomes).

In the evaluation and health education literatures, the concern with fidelity is based on the assumption that alterations in a program will reduce effectiveness, and make evaluation across settings difficult. In fact, the dictates of research design have driven much of the focus on fidelity in the health education and evaluation literature. For example, Pentz and Trebow (1991) discuss fidelity of implementation in terms of adherence to experimental conditions. This understanding of fidelity has somewhat different implications than adherence or fidelity to program design. From a traditional evaluation perspective, reinvention is a concern because the independent variable is unknown if the program is modified, and thus interpretation of findings is difficult.

Implementation evaluation is conceived as being one aspect of formative evaluation which, according to Green and Lewis (1986) documents: (a) "the extent to which the program is faithfully implemented as planned" (p. 28), and (b) what is actually occurring at the program sites. This focus is based on the assumption that program delivery across sites will vary but fidelity remains the goal. The job for the evaluator is to document where variability occurs, and to provide feedback when variability exceeds "tolerable limits." Green and Lewis present a "rule of thumb" for setting tolerable limits, allowing greater variability when the population is larger, more heterogenous and more dispersed. Conversely, when the population is small, homogeneous or cohesive, there should be less variability. Although the authors do not provide a rationale for this rule of thumb, it seems likely to be related to the probability of finding a statistically significant program effect.

The fidelity perspective on implementation usually assumes a defined program with specifiable components, a tightly articulated program theory, and a preferred method for program delivery (Green &
Lewis, 1986). Not only is this not the case with the SBPP, but increasingly, it is not the case with many community-specific health promotion programs (see for example Kaftarian & Hansen, 1994). Thus, the classic view of implementation evaluation is not entirely consistent with the empirical reality of current program development, particularly in the area of health promotion. But this is also true in other areas. Scheirer (1987) suggests that most federally funded programs are similar to the SBPP in that a clearly articulated set of activities and cause-effect relationships are not provided. In this situation, the program ends up with multiple theoretical bases at the local level, while at the macro-level, the program is primarily a funding mechanism.

Evaluating the implementation of fully-developed, tested programs with clearly specified objectives and activities and an explicit theoretical basis is likely to be very different than evaluating implementation of a non-specific program where the intervention strategies are to be developed by the user. In the first instance implementation fidelity is at least a possibility. In the second instance, there is nothing to which one can be faithful. In one respect, the second instance is the case with the SBPP. On the other hand, the SBPP does involved a defined process. Thus, fidelity to the process becomes a possibility even if fidelity to a specific program is not. From the perspective of ADS, fidelity to the process was an expectation of the SBPP.

For the most part, school health education research has operated within a diffusion of innovation paradigm in which a defined innovation is assumed and fidelity of implementation is the goal. Despite conclusions by some health education researchers that implementation fidelity is not likely to occur even under conditions designed to maximize fidelity (Basch, Sliepcevich, Gold, Duncan, & Kolbe, 1985; Brunk & Goeppinger, 1990), the emphasis on fidelity continues (Parcel et al., 1991; McCormick, Steckler, & Mc Leroy, 1995; Santi, Best, Payne, Brown, & Cameron, 1992; Steckler, Goodman, Mc Leroy, Davis, & Koch, 1992). Thus, it is not clear how relevant most of the school health education literature on implementation is to the exploration of implementation in the context of the SBPP.

Much of the implementation literature also has focussed on implementation of a “thing,” either a program or a policy. There has been limited exploration of implementation of a defined process. The extent
to which much of the implementation literature is relevant to SBPP implementation is therefore not clear. We do know that even when program components are clearly specified in advance, many researchers have argued that reinvention or mutual adaptation is essential both for effective implementation, and to achieve optimal outcomes (Fullan, 1991; Ottoson & Green, 1987). If implementation fidelity is a rarity even when program components are clearly specified, what might happen when fidelity to a process is expected?

The reinvention perspective derives from the sociological proposition that organizational innovations do not exist as a separate entity independent of the context (Bauman, Stein, & Ireys, 1991). Rogers (1983) has defined reinvention within the context of diffusion of innovation theory as "the degree to which an innovation is changed or modified by a user in the process of its adoption and implementation" (p. 175). Reinvention involves on-site modification of an innovation to accommodate the unique context within which it is implemented. The assumption underlying this view is that reinvention is necessary to preserve program effectiveness. The goal is to maintain the basic integrity of the program model while matching the innovation to the unique features of the setting. Thus, reinvention means modifying the program to suit the context, but does not necessarily suggest that the context itself be modified to accommodate the program.

The mutual adaptation perspective proposes that both program and the organizational context must be modified for effective implementation to occur (McLaughlin, 1985, 1990; Ottoson & Green, 1987). Not all proponents of the mutual adaptation perspective, however, discuss the need to preserve the basic causal mechanisms of the program, although the inference has been made (Ottoson & Green, 1987). What proponents do say is that rigid adherence to a prescribed program limits the impact of the program because it does not permit a fit with the organizational context (Majone & Wildavsky, 1979). Thus, it seems that there are at least three normative stances on the relation of intentions to action in the implementation literature: fidelity, reinvention, and mutual adaption.

Scheirer (1987) suggests that the distinction between "prespecified" and "to be developed" programs may resolve the adaptation-fidelity debate. The top down view of implementation takes a fidelity perspective, whereas the bottom-up view is associated with an adaptive perspective on implementation. As discussed
earlier in relation to macro- and micro-implementation, the differences in the approaches are fundamentally epistemological. Yanow (1990), for example, says that, from the top down perspective, implementing activities will always be expected to replicate their policy/program mandate, while a bottom up view (guided by an interpretive logic) will see all implementing activities as interpretations of a policy statement, which is itself an interpretation. For this reason, Palumbo and Callista (1990) and Yanow (1990) argue that it is not possible to have both faithful adherence to policy directives, and adaptation of those directives by implementing personnel.

Others, however, disagree. Bauman, Stein, and Ireys (1991) argue that it is possible to meet the mandates of both fidelity and reinvention without undermining the goals of either. They propose that it is possible to maintain fidelity at the level of program theory while reinvention can take place at the level of day-to-day implementation. Hall and Loucks (as cited in Bauman et al., 1991) also propose a modified view of fidelity. They suggest that some change is permissible, but not beyond a "zone of drastic mutation." As discussed above, Green and Lewis (1986) propose that adaptation can occur within "tolerable limits." What is necessary, however, is a clearly articulated program theory that specifies the set of cause and effect relationships that provide the rationale for the nature of the intervention. Scheirer (1987) has noted, however, that this is not often the case in many policy/program initiatives. How well articulated the local program theories are in each site of the SBPP remains to be seen.

**What are the Implementation Issues for this Study?**

In this study, I explore the SBPP implementation, the key features of which are the PW role/position and the SBPM, a defined planning process. The SBPP presents some unique implementation challenges that have not been addressed in any of the implementation studies I have found in my search of the literature. The SBPP was developed and funded by the Ministry of Health but it was be implemented within the education system. The SBPP involves an innovation designed and conceived by a group of people (ADS staff) who are neither responsible for local implementation, nor do they have authority over the sector (education) and the individuals (members of the local school communities) who implemented the program at the local level.
Much of the implementation literature in the area of social policy deals with policies and programs that are implemented within a single policy sector (e.g., health, education or social services) in response to a legislative mandate. Even within a single policy sector (e.g., education), the implementation research indicates that the process is extremely complex, particularly because multiple organizations or levels of organization are involved. A program that cuts across sectors introduces an additional layer of complexity that has not been addressed to any extent in the health promotion or even the implementation literature. Also, in contrast to many of the social policy studies, the SBPP was not initiated in response to a legislative mandate although it did result from a policy shift in the Ministry of Health.

There is a body of educational literature that reports on the challenges of implementing new educational programs in schools. If implementation is such a challenge, even when new programs deal with content and/or instructional technology that fall within the traditional educational mandate of schools (Berman & McLaughlin, 1976; Fullan, 1991; Huberman & Miles, 1984), then what happens when programs originate outside the education sector itself, and deal with content and process that may not fit with this mandate?

Few studies describe and explain the implementation process in which “outside” health promotion programs come into the school. The health education studies that have explored the relationship between implementation and outcomes, did not describe the influence of school context on the success or failure of implementation. Rather, they focussed on the extent of implementation for a clearly defined program with specified elements in relation to factors such as provider type and teacher training (e.g., Santi, Best, Payne, Brown, & Cameron, 1992). In reading these research reports, one gets the sense that there is a whole lot going on between the lines of the implementation story that no one tells us about.

A key feature of this innovation is the placement of a PW in the school setting to guide and facilitate an internal change process. Very little in the implementation literature seems relevant when the “thing” to be implemented is a new role or position. Is implementing a role or a new position any different than implementing some other innovation? Complicating factors in implementing this role include the fact that
the PW is hired by an agency operating within the health sector but the PW is also responsible to a particular school. The PW, with one foot in each sector, provides the link. Although there is an extensive body of literature on the role and effectiveness of external change agents in implementing innovations in schools (Corbett, Dawson, & Firestone, 1984; Huberman & Miles, 1984; Loucks-Horsley & Mundry, 1991; McLaughlin & Marsh, 1977), the PW role is unique. This external helper has been variously referred to as a field agent, process consultant, linking agent, or technical assistant.

Certainly, the PW role has much in common with these other types of roles as described in the educational literature. There are, however, some significant differences. For the most part, external helpers come into the school on a temporary basis from the outside, although they are not always external to the educational system at large. They might be school district or curriculum consultants, thus are assumed to have some credibility in dealing with educational innovation. The PW is in some ways is more “external” than the external helpers described in the literature because the PW is not an educator. PWs generally have had limited experience working in schools and have been hired by, and are responsible to, an agency outside the education system (a community alcohol and drug agency). At the same time, the PW is more “internal” than the external consultants described in the literature, because she or he is actually working within the school, and in many instances has become an integral member of the school community. Thus, a PW role is unique in the education literature so it is not clear how applicable the educational research on the role of linking/field agents in implementation is to our understanding of the SBPP implementation.

Green and colleagues (1996) suggest that evaluation questions that derive from an ecological perspective would focus on the changes that the introduction of a new social system (i.e., the SBPP) would bring to the ecosystem in which it is implemented. Additional questions that also seem relevant to this perspective might explore the process by which the “innovation-as-social-system” is introduced and implemented, how and whether the contextual features of the ecosystem influenced the process and the innovation itself. If a health promotion program is, as Richard and colleagues (1996) propose, a social

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21 Note that there are a small number of PWs who are hired by the school district rather than the local community alcohol and drug agency.
transformation process, then another important question would focus on how that process was managed, what influenced it and what was its outcome?

The SBPP involves a general process rather than a defined program. It has some core elements that are common across the sites where the program is being implemented, but the program that emerges in each site can be expected to look quite different. The SBPP involves the implementation of a health promotion planning process, embodying a distinct set of values, principles, and techniques. It originates in one system, and is being implemented into another system. Understanding how the PWs manage the implementation of a defined process and what influences that process, is an important focus in advancing implementation theory in health promotion.
CHAPTER FOUR
THEORETICAL PERSPECTIVE

Symbolic Interactionism, Health Promotion and Grounded Theory

*In the social sciences there is only interpretation. Nothing speaks for itself.*

*Denzin, 1994*

*The most creative thinking occurs at the meeting places of the disciplines.
At the centre of any tradition, it is easy to become blind to alternatives.
At the edges, where the lines are blurred, it is easier to imagine that the world might be different.*

*Mary Catherine Bateson, 1989*

Grounded theory is a systematic qualitative approach to social science research developed by Glaser and Strauss (1967). It has been elaborated since in separate publications by both authors (Glaser, 1978, 1992; Strauss, 1987; Strauss & Corbin, 1990) as well as by other researchers (e.g., Chenitz & Swanson, 1986; Hutchinson, 1986; Stern, 1980, 1985). The Chicago School of symbolic interactionism and American Pragmatism represent the theoretical and philosophical foundations of grounded theory methodology. The systematic analytic techniques of this approach were also informed by the quantitative methodology for the inductive derivation of theory from data developed by Paul Lazarsfeld and colleagues at Columbia University (Glaser, 1992; Strauss & Corbin, 1990).

In this chapter, I provide an overview of symbolic interactionism, which forms the philosophical and theoretical basis for grounded theory as a methodology. I then review briefly, some criticisms of symbolic interactionism.

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22 This chapter is an edited version of the original chapter I wrote for this dissertation which is planned for publication in an edited volume. See MacDonald (forthcoming). The book chapter provides an overview of the philosophical foundations of grounded theory, reviews criticisms of symbolic interactionism and grounded theory in terms of the implications for using grounded theory in health promotion research, and analyzes the apparent schism between Glaser and Strauss. Chapter Four of this dissertation provides an edited version of the same but does not provide an analysis of the Glaser-Strauss schism.

23 The Iowa School of Symbolic Interactionism is represented in the works of Manford Kuhn as described by Denzin (1992). Kuhn attempted to establish a "valid, testable, empirical, symbolic interactionist theory of human behaviour called "self" theory" (pp. 11-12) which he distinguished from the Cooley-Dewey-Mead-Blumer version of symbolic interactionism. From the mid-1960s onward, a neo-Iowa School has emerged under the direction of Carl Couch which has reworked Kuhn's vision based on the work of Simmel and Mead and returns to the notion of a "naturalistic, valid social science" (p. 15).
interactionism and grounded theory that raise questions about its applicability for studying health promotion phenomena. Drawing from Strauss' notion of the conditional matrix (Strauss, 1987; Strauss & Corbin, 1990; Strauss, 1994), I review its relationship to the ecological foundations of health promotion and conclude that grounded theory represents a useful method for studying health promotion concerns.

Symbolic Interactionism

Symbolic interactionism, as a theoretical perspective, derived from the philosophy of Pragmatism, articulated at the turn of the century by Charles Pierce (1839-1914), William James (1842-1910), and John Dewey (1859-1952) (Munch, 1994). The sociological perspective that emerged from pragmatism placed particular emphasis on the symbolic nature of social life, which has been studied primarily from the microsocial perspective of human actors involved in symbolically defining their situations, their selves, and their roles in social interaction. Thus, symbolic interactionism views human beings as active participants and creators of the world in which they live. This view was seen by many to be in distinct opposition to the classical European sociological perspective that was concerned with the macro-social analysis of societal structures (e.g., economy, polity, culture) as the primary determinants of human action (Munch, 1994).

An important contributor to the development of what came to be known as symbolic interactionism was George Herbert Mead who synthesized pragmatism with Darwin's theory of evolution and behaviourism, primarily as represented by Watson. Mead conceptualized the development of self and society as an interaction between the person and his or her natural environment. The evolutionary view was reflected in two assumptions. First, human beings must cooperate in social groups in order to survive due to their natural biological vulnerability. Second, those behaviours and actions that facilitate cooperation are adaptive, contribute to survival, and thus will be retained by individuals and social groups (Schreiber, 1995).

Mead translated Watson's behaviourism into what he called "social behaviourism" and explicitly explored the evolution of mind and thought, something a self-respecting behaviourist of the day would never do. Whereas behaviourism conceives of behaviour as occurring in response to a stimulus, social behaviourism says that gestures made by one person will arouse a response in another. The difference
between a gesture and a stimulus lies in the meaning attributed to the gesture by both the person making the gesture and the person who responds to it. "[A gesture] has meaning and needs to be interpreted in order for it to be understood and for the recipient to respond in a way that makes sense in relation to the gesture" (Münch, 1994, p. 213).

Although symbolic interactionism emerged in the early part of this century, it became prominent again in the 1960s as a reaction to the dominance of structural-functionalist perspectives in sociology (Münch, 1994). As a reaction to this perspective, symbolic interactionism has often been interpreted as being unconcerned with social and structural conditions as influences on human action. This criticism has been called the "astructural bias" and has been applied to symbolic interactionism in general (Denzin, 1992; Reynolds, 1993) as well as to grounded theory methodology (Layder, 1982, 1989a).

Herbert Blumer, a sociologist of the Chicago School, further developed Mead's symbolic interactionism into a distinct sociological paradigm and formally articulated the methodological position associated with this perspective (Blumer, 1969). In fact, Blumer officially coined the term “symbolic interactionism” in a 1937 article (cited in Blumer, 1969). Blumer identifies three basic premises of symbolic interactionism: (a) human beings act toward things on the basis of the meanings that these things have for them, (b) the meaning of objects derives from social interaction, and (c) meaning is arrived at through an interpretive process.

Meaning, according the Blumer, is important in its own right but has been ignored by most social theorists and is treated as a neutral link between the determinants of behaviour and behaviour itself. In symbolic interactionism, meaning is neither inherent in the object itself, nor is it something perceived entirely in the minds of persons. Rather, meaning arises in the process of interaction between and among people in regard to the object holding meaning. These interactions serve to define meaning. Thus meanings are a socially constructed product, created in a definitional process that occurs through social interaction. These meanings are then used and revised to guide and form action (Blumer, 1969).
Blumer (1969) also identified the methodological implications of symbolic interactionism. Because the empirical world is the central concern in this perspective, an appropriate methodology would involve exploration and inspection of that world in order to get as complete a picture as possible of the world under study. Methods that allow the researcher to explore the meanings people construct are critical. Data are, for the most part qualitative and include observations, interviews, documents, life-histories, and public records, to name a few. The inquiry problem, the direction of inquiry, the data analysis, and interpretations all rise out of and remain grounded in the empirical world under study. There is a need to constantly test and revise the images, beliefs, and conceptions of the researcher as the study progresses. There is no need for a prior theoretical scheme because an explanation for the basic problem of the group under study will emerge from the data. Clearly, these same implications are reflected in grounded theory methodology.

**Criticisms of Symbolic Interactionism and Grounded Theory**

As discussed above, symbolic interactionism was perceived as a reaction to the dominance of structural-functionalist perspectives in sociology. For this reason, and because of its emphasis on personal meaning-making in shaping human behaviour, symbolic interactionism has been interpreted as unconcerned with the influence of social and structural conditions on human action. This has been called the astructural bias. The charge that symbolic interactionism and, by extension, grounded theory do not address structural issues is a particular concern to health promotion. If this charge is true, then its relevance to health promotion may be limited especially since health promotion is concerned with the social and environmental determinants of health and health behaviour. I argue, however, that grounded theory is an appropriate approach for studying health promotion for several reasons but, in particular, its relevance is related to the consistency between key precepts of symbolic interactionism and the social ecological perspective in health promotion.

Denzin (1992) has summarized the major criticisms of symbolic interactionism that have emerged over the years. In addition to the charge of an astructural bias, symbolic interactionism has also been criticised for being ahistorical, apolitical, acultural, overly rational, and non-emotional. It is important to note that many of these criticisms emerged from within the tradition itself leading to concerted efforts by many interactionists to
address these issues. Nonetheless, debate has continued over a number of years, within and outside the
tradition, in relation to these criticisms (Alexander, Geisen, Münch, & Smelser, 1987; Huber, 1974; Layder,
1982, 1989a, 1989b; Meltzer & Herman, 1990; Prendergast & Knotternerus, 1993; Reynolds, 1993; Vaughn
& Reynolds, 1968).

As suggested above, the most damaging criticism of symbolic interactionism, from both a sociological
and a health promotion perspective, is that it suffers from an astructural bias. This issue has also been
characterized as the "macro-micro debate" or as the case of "structure versus agency". The astructural bias
charges that symbolic interactionism is not able to deal with macro-structural issues; that is, it fails to deal
with social organization and social structure as important influences on human action. Put another way,
symbolic interactionism is accused of not adequately recognizing the objective constraints on social action
that stem from conditions in the social, economic, organizational, cultural, or political environments.

In response to these criticisms, Denzin (1992) reviews the large body of interactionist work that
"addresses head on the questions of social structure, social organization, power, the economy, capitalism,
history, class structure, race and gender" for which he provides an extensive bibliography (p. 59). Thus,
Denzin concludes that interactionists do not neglect social structure, especially since the mid-1970s. Some
critics (e.g., Meltzer & Herman, 1990) also concluded that symbolic interactionists have contributed to the
understanding of social structural influences on human interaction and therefore the notion of the astructural
bias should be reconsidered.

There are historical reasons why critics have charged both symbolic interactionism and grounded
theory with an astructural bias. In reading two important early texts, one by Glaser and Strauss (1967) and
one by Blumer (1969), it is difficult not to make the judgment that grounded theory does indeed ignore issues
of power, culture, social organization, economics, gender, and other structural influences on human action.
For example, Glaser and Strauss (1967) say "why not take the data and develop from them a theory that fits
and works instead of wasting time and good men [sic] in an attempt to fit a theory based on 'reified' ideas of
culture and social structure" (p. 262). Blumer (1969) also emphasized that the phenomena of concern to
symbolic interactionists are "acting units" rather than the "structures" and "systems" that are found in orthodox sociological approaches.

A micro level analysis generally is the purpose for which most grounded theorists have used the approach. For example, a great deal of grounded theory research has been conducted in nursing. Hutchinson (1986), a nurse researcher, says that the purpose of grounded theory is to discover and conceptualize the essence of complex interactional processes. This understanding permits the development of relevant nursing interventions. She goes on to say that most of the grounded theories in nursing focus on the micro analyses of social processes, and do not address the relevant macro analyses of social structural processes. This is likely because much of nursing is concerned primarily with individual care and face-to-face interaction. The exception, of course, is community and public health nursing in which population and community level concerns are important and the social structural determinants of health are recognized increasingly as critical foci of community practice.

Nursing and other health disciplines, however, are moving away from a strictly individualist perspective, particularly since the Ottawa Charter (World Health Organization, 1986), and the emergence of a health promotion discourse. Increasingly, health promotion practitioners are becoming concerned with societal and institutional level influences on health and health behaviour. There is recognition that these structural factors are more important in affecting the health of communities and populations (versus individuals) than most health care services.

The Conditional Matrix in Grounded Theory

If one tracks Strauss' personal intellectual biography through Denzin's (1992) stages of symbolic interactionism history, one can see clearly that Strauss, in his own work (Strauss, 1993) was engaging critically with the challenges to symbolic interactionism and grounded theory. At the same time, he remained true to his pragmatist and interactionist roots. As far back as Negotiations (1978), Strauss himself raised the issue of the astructural bias in relation to "negotiative action" then proceeded to address it in his theoretical
work. In particular, Strauss’ conceptualization of the conditional matrix\(^{24}\), and the process of tracing conditional paths, allowed him to bring conditional influences on action/interaction into grounded theory methodology.

The conditional matrix is important in understanding Strauss’ theory of action and his methodological approach. It had its origins in Strauss' 1978 work *Negotiations* (as discussed in Strauss & Corbin, 1990, p. 165) in which he observed that most research in this area did not detail the structural conditions under which negotiations occur, nor did it provide any discussion of the linkage of broad social conditions or the more immediate organizational context to action/interaction. He proposed a "negotiations paradigm" to address the problem of relating various levels of conditions to the "negotiative interaction," which included two types of conditional contexts: the broad structural context and the more immediate negotiation context.

Grounded theory, according to Strauss and Corbin (1990, pp. 161-162) is a transactional system made up of interactive and interrelated levels of conditions ranging from the most general features of the world at large to those closest to the phenomenon under study. Conditions at any level may pertain to a phenomenon: (a) as a cause, leading to the phenomenon, (b) as context within which action/interaction takes place, (c) as intervening conditions standing between context and action/interaction, which facilitate or constrain action. At the centre of this system is action/interaction, which is within a range of conditions at different levels of the context. Action/interaction takes place in related sequences, which are not necessarily linear, and which are “processual” in nature. Action/interaction leads to consequences which may then impact on conditions at various levels or become conditions themselves thus affecting the next action/interaction sequence. These conditions facilitate or constrain action/interaction. Contingencies that change conditions pose problematic and unanticipated situations, and these must be handled.

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\(^{24}\) Most people tend to think of a matrix in terms of its mathematical meaning; that is, a rectangular array of numeric or algebraic quantities subject to mathematical manipulation. The first meaning of matrix listed in the dictionary, however, is “a situation or substance within which something else originates, develops or is contained” (Microsoft Encarta, 1996). It is this meaning of matrix that applies to Strauss’ conditional matrix in grounded theory.
It is clear that this transactional system reflects elements of the pragmatist action scheme, as outlined by Dewey (1922), the central feature of which is the mutual interdependence of individual action/interaction and environmental conditions at various levels of context. The conditional matrix is represented graphically as a nested set of concentric circles, each representing a level of analysis. The phenomenon itself is embedded within one of those levels, but regardless of the level in which it occurs, "the phenomenon will stand in conditional relationship to levels above and below it" (Strauss & Corbin, 1990, p. 162). At the centre of the matrix is action/interaction pertaining to a phenomenon. The layers range from individual-group-collective, through community and organizational levels to national and international levels. Each condition within the matrix possesses the properties of time (through temporality) and place, and history is woven throughout.

The process of tracing conditional paths, first introduced in Strauss (1987), and elaborated by Strauss and Corbin (1990), explicitly links the conditions across the levels of the matrix but these linkages must be clearly drawn from the data. The linkages may not, however, be transparent in the data and so it may be necessary to go back to the data, or to the field, to track these conditional paths.

Glaser, however, rejects the conditional matrix as an element of grounded theory analysis and says it is alien to it. In his view, grounded theory is not a transactional system. He denies categorically that all phenomena are embedded in sets of conditions. He rejects Strauss and Corbin's statement that conditions at all levels have relevance to any study. Glaser's response is that, "It just depends on what emerges; it just does!" (Glaser, 1992, p. 98). The conditional matrix, however, is an essential component of an elaborated grounded theory that is relevant to the concerns of health promotion.

The Relationship between Symbolic Interactionism and Health Promotion

In the previous chapter, I discussed health promotion and its ecological perspective and noted that there was a parallel between social ecology's notion of mutual interdependence with a similar precept in symbolic interactionism. Now I would like to make the connections between symbolic interactionism and health promotion explicit and discuss the implications for a research methodology that allows us to capture
this understanding. The relationship of symbolic interactionism and grounded theory to the ecological perspective in health promotion is most obvious in Strauss' conditional matrix, which is really just an elaborated version of Bronfenbrenner's (1979) ecological model of micro-, meso-, exo-, and macro-systems. In relation to health promotion, for example, Richard and colleagues (1996) have applied the ecological model to a conceptualization of health promotion programs.

In a summary of the basic characteristics of symbolic interactionism, drawing from the works of prominent interactionists, Reynolds (1993) makes the following observation: "A dialectical relationship exists between individuals and their environments; people and their environments are mutually determinative" (p. 127). Similarly, Robertson and Minkler (1994), in the health promotion literature, summarize the basic ecological premise of health promotion theory in the following statement: "Although it is true that the larger structural (economic, political, cultural, organizational) forces (the macro level) in any society shape the everyday lives of individuals (the micro level), it is also true that the everyday practices of individuals shape those same larger structural forces. This position tempers the notion of sociological determinism with the notion of human agency." (p. 297).

Poland (1992) observes that debates in social theory parallel those currently going on in health promotion. A major debate in social theory centres on the relative contribution of social structure (the social) or of human agency (individual) on human action. The emphasis in health promotion is on the integration of the individual and social determinants of health. In the wake of the Ottawa Charter (World Health Organization, 1986), Green and Raeburn (1988) observed and described the emergence of the structure versus agency debate, although they characterized it as the "individual versus the system" debate. An ecological model of health says that health is the product (consequence) of the continuous interaction (action/interaction) and interdependence of the individual with her/his community, culture, social structure, and physical environment (conditions - causal, contextual, and intervening)25 (Green & Raeburn, 1988).

25 Note that the terms in parentheses reflect grounded theory terms that parallel the terms in health promotion's ecological view of health.
Just as Prendergast and Knotternerus (1993) have suggested that symbolic interactionism must deal with the astructural bias if it is not to be increasingly marginalized in sociology, health promotion insists that social/structural determinants of health must be taken into account if one is to make progress in improving the health status of populations. At the same time, neither health promotion, nor health education before it has taken seriously enough (in my opinion) the importance and role of meaning in constructing human action. Thus, a more balanced integration of structure and agency is critical if the “new public health” (Bunton & Macdonald, 1993), with health promotion as its central plank, is to resolve the current tension, and bring guidance to the contradiction-riddled practice environment. Green and Raeburn (1988) predicted and attempted to avert these contradictions, in their plea for people to resist the polarization of ideological viewpoints.

So where does this leave us in terms of an appropriate methodology for health promotion? I agree with Poland (1992) that there is no single "correct" methodology, but the elements of an effective approach can be identified. Poland proposes that it is important for health promotion to adopt a theoretical stance that balances the dualism of structure and agency in order to seriously engage the rhetoric of integrating individual and social influences on health and human action. On the one hand, he argues that an explicitly interpretive approach could make an important contribution to our understanding of health and health behaviour. This is particularly true in terms of exploring the significance of context in explaining variations in individual meanings and individual actions. Context is minimized or ignored in traditional public health methodologies that seek to standardize interventions and control "extraneous" factors and confounding contextual variables. On the other hand, we must go beyond the purely interpretive emphasis on personal meaning to question and challenge the taken-for-granted influences of social and environmental conditions on the construction of meanings that guide human action. This is important, because the influences on social action often go beyond the awareness of individuals.

Despite the fact that many writers recognize the importance of a thorough integration of macro and micro levels of analysis, few have offered methodological guidance about how that might be done. Strauss
and Corbin’s (1990) conceptualization of the conditional matrix in grounded theory may provide that
guidance. For Strauss, context has always been relevant and this is reflected in the conditional matrix which
provides the analyst with the theoretical sensitivity necessary to uncover the unspoken and the
unacknowledged. Strauss and Corbin’s conceptualization of grounded theory as a transactional system is
fitting for the study of health promotion phenomena, integrating as it does macro-level social environmental
conditions and micro-level influences on action/interaction, especially the meaning-making and symbolizing
in which human actors engage in their day-to-day lives. Its relevance to a study of implementation processes
in health promotion is also apparent, because the concept of a conditional matrix can accommodate micro-
implementation which focusses on situated action/interaction within a particular context. It also allows an
exploration of macro-implementation influences that originate in other levels of the conditional matrix.

Strauss and Corbin have not, in my opinion, converted from an emergent theory-generation process to a
theory-driven model as Glaser charges. Rather, they have extended and emphasized the range of theoretically
sensitizing concepts that must be attended to in any analysis of human action/interaction. Although I find
some of their new analytic techniques26 do not fit well with the Glaserian approach to coding with which I am
more comfortable (Glaser, 1978), I believe that the notion of the conditional matrix is useful. What is
important in judging this process is the extent to which the analytic process can remain grounded in the data
to produce a theory that fits, works and has relevance. In health promotion, no theory is likely to fit and work
if it is not relevant to health promotion’s substantive concerns, and these include the social environmental
influences as well as individual influences on health and health-related human behaviour.

26 For example, the “flip flop technique” or “waving the red flag” (see Strauss & Corbin, 1990, p.
84-93).
CHAPTER FIVE

METHODOLOGY

There are more things in heaven and earth than are dreamt of in our hypotheses, and our observations should be open to them. 

Cronbach, 1975

The purpose of this study was to explore the process by which PWs managed the implementation process for the PW role and the SBPM in the school setting. Grounded theory was the method of choice to conduct this study for a variety of reasons. Because I was interested in exploring the implementation experiences of PWs for the purposes of developing a theoretical understanding of the implementation process, an exploratory, interpretive research approach was most appropriate. As an interpretive approach, the grounded theory method stems from the premise that "interpretation must include the perspectives and voices of the people whom we study" (Strauss and Corbin, 1994, p. 274).

Grounded theory is a general methodology for developing theory that is grounded in data gathered and analysed in a systematic fashion (Glaser & Strauss, 1967; Glaser, 1978; Strauss, 1987; Strauss & Corbin, 1994). It is an inductive approach to theory development so it does not begin with a commitment to a particular theory, conceptual framework, or set of pre-defined concepts in relation to the substantive area under study (Schreiber, 1995). At the same time, there is a clear relationship between concepts in symbolic interactionism and the general methodology.

Grounded theory is both relevant and appropriate for this study. At its inception, the SBPP was a new program being pilot tested in over 50 secondary schools across the province. It was a non-standard program without pre-defined strategies that could be controlled across sites. Furthermore, changes were being introduced continually to the program as it was being implemented. For example, the contractual arrangements with community agencies changed during the last year of the pilot phase and the SBPM was revised twice from the original Precede-Proceed model in the first two years of the project. These conditions challenge, if not invalidate entirely, the application of traditional experimental and quasi-experimental
evaluation designs. Implementation is a process and this process took place over time. For these reasons, a method that could capture change, process, and temporality was critical. Grounded theory is such a method.

The SBPP is not based on a clearly articulated program theory and the "science" used to guide practice is limited in this situation. A method that can uncover the implicit program theory, at both the provincial and the local levels, is important for the purposes of evaluation to determine whether the SBPP, as implemented, makes sense, either on the face of it, or in terms of what we know about effective prevention. Given that knowledge about effective health promotion practice under the conditions of this particular program is limited, the use of grounded theory may help to identify and specify effective health promotion practice in this type of setting.

Although there is a body of educational literature that reports on what happens with education programs that originate within the education sector itself, few studies describe and explain what happens when outside health promotion programs come into the school. An approach that does not begin with a pre-defined conceptual framework may help to challenge prior assumptions and permit new understandings to emerge that will guide future program and policy development in relation to school health promotion.

The importance of studying implementation was outlined in Chapter One, particularly in terms of opening the black box of the program to identify and describe the transformational processes that go on within. Opening the black box may help us to understand the contingencies under which the SBPP may or may not be adequately implemented. A method that allows the identification of contingencies, as grounded theory does, is important for this understanding.

There are several competing theories of implementation in the literature. Although each has elements that may be relevant, none of them seem entirely appropriate to the current situation. A theory of implementation that 'fits, works, and is relevant to the school context' will have important policy implications. The notion of 'policy learning' (Springer & Phillips, 1994) is important in this type of evaluation. Because the SBPP is a new and innovative program, one that encourages local creativity in development, important lessons can be learned for future programming and policy development.
Grounded theory and other qualitative methods are viewed by many as useful only when there has been limited research in a substantive area. This is a narrow view of the scope of qualitative research, which is not in keeping with more recent perspectives on its benefits and relevance in other research situations (Denzin & Lincoln, 1994). As qualitative methods have become more accepted and widespread, they have been recognized as useful in expanding the depth and scope of understanding in previously researched areas or when a new point of view on familiar topics is warranted (Stern, 1980).

The Study

This study began in February of 1992, several months before the pilot phase of the SBPP had officially begun, which was in the fall of 1992. It continued throughout the pilot phase, which ended in August of 1995. A few additional interviews took place over the next two years, so the data collection for this study ended in the summer of 1997. Data analysis continued through the winter of 1996, the summer of 1997, and the winter and spring of 1998.

The Data Source

The original design for the qualitative component of the SBPP evaluation called for data collection in all three years of the SBPP pilot phase (see Appendix A). During the first year, post-training telephone interviews were scheduled with PWs who attended the second annual SBPP training session. These were to be followed by focus groups in each of the five ADS regions of the province, with PWs, agency, and ADS personnel. These focus groups were planned to take place at the end of the first and second year of the study to explore implementation issues that had arisen to that date. The focus groups were cancelled in the second year due to budget constraints.

In the third year, case studies where to be carried out in four schools in which PWs, students, teachers, counsellors, school administrators, and others would be interviewed. The purpose of these site visits was to explore SBPP implementation in context. A pilot case study was added to the protocol to ensure feasibility and to develop the procedures for the subsequent case studies. This was conducted at the end of the second year of the study. The remainder of the case studies were conducted in the third year. A sixth case study was
added to the protocol to ensure that data could be obtained on relevant issues that emerged during the first few site visits. Follow-up interviews were also conducted with three PWs who had participated in the case studies. Thus, the PW telephone interviews, the site visit and follow-up interviews, and my participant-observation field notes written over the three years of the study, provided the data source for this study.

Preliminary Participant Observation

Qualitative data collection in this study did not begin with an intent to use grounded theory. From the inception of the program, I had been involved in the SBPP in various ways including membership on the first planning committee for the initial PW training session (February 1992). I was involved in both the February and the October 1992, 5 day PW training sessions as a participant-observer\(^27\) (Jorgenson, 1989). During both training sessions I had opportunities to talk extensively to most of the PWs, many of the school and agency people, and the ADP central office program developers and regional staff. Over the next three years, I had numerous occasions to meet with and talk to PWs, agency, and ADS staff. I kept field notes containing my observations, conversations, and experiences in these sessions.

Telephone Interviews

Based on my observations and experiences, and drawing from my field notes, I identified several areas of concern by PWs, agency personnel, and ADP central and regional staff, related to program development and implementation. From these data, I developed a semi-structured interview schedule (see Appendix F) and conducted one hour telephone interviews with 28 of the 31 PWs who participated in the training session. These interviews took place 4 to 6 months following the second training session held in October of 1992. PWs were called by telephone, the purpose of the interview was explained, and participation was solicited. Every PW I contacted agreed to be interviewed. At that time, we scheduled the interview for a mutually convenient time in the near future. I was unable to schedule interviews with the remaining three PWs either because of incompatible schedules or because I was unable to contact them during the allotted time frame.

\(^27\) I attended the full week sessions, observing sessions on each day of the training, and participated in many of the group discussions. I also presented a session on forming a steering committee and participated with others in presenting a session on applying the Precede-Proceed model in a school setting. I also participated in debriefing/evaluation sessions with the planning committee that were held at the close of each day's session.
My purpose in conducting the interviews was to explore the early implementation experience of the PWs, to identify barriers and facilitators to implementation, to determine the level of support for the PW and the SBPP in the school, and to determine how PWs were using the SBPM to inform the development of their prevention programs in the schools.

There are some limitations of telephone interviews. First, it is not possible to attend to body language and contextual factors in the environment that might be influencing what the PWs were saying. Because the researcher is the instrument, the quality of the data is determined, in part, by the relationship that is established between the researcher and the participant. Thus, telephone interviews are limiting when this is the only opportunity for data collection, and when a prior relationship has not been established. In this case, however, I was well acquainted with all participants, and a sufficiently trusting relationship had been established as suggested by their willingness to tell me things that could place their jobs at risk.

From January to April, 1994 I took a graduate qualitative research course at UBC that was based on the grounded theory method. I used data from the PW telephone interviews to apply the course concepts and do my assignments. On the basis of this experience, I realized that the thematic analysis we had conducted on the PW interviews was limited. I also recognized that grounded theory would be an excellent approach for conducting the qualitative component of the SBPP evaluation. Dr. Lawrence Green, my dissertation supervisor and SBPP Principal Investigator, agreed to this change in plans.

Pilot Case Study

In May of 1994, I conducted a pilot case study in one school. The pilot study served several purposes. Marshall and Rossman (1995) recommend doing a pilot study for the purpose of supporting the researcher's claim that she or he is capable of conducting the study. Given my novice status with qualitative research, this seemed appropriate. Additional purposes were: (a) to gain experience in conducting qualitative field research, (b) to determine the feasibility of going into schools to observe and to interview members of the school community, (c) to determine the accessibility of participants, (d) to identify those members of the
school community who would provide the most relevant and richest data, (e) to hone my interviewing and analytic skills, and (f) to guide sampling decisions for the remainder of the case studies.

Case Studies

The objectives of the pilot case study and the subsequent case studies were three fold: to explore the SBPP implementation process and identify factors influencing implementation, to explore variations in SBPP implementation, and to identify the contextual conditions within which different implementation experiences occurred. Two site visits took place during the third year of the study, in the fall of 1994. The remaining three site visits were conducted between February and May of 1995.

Although generalizability, as such, is not the goal in qualitative research, most qualitative researchers do want to say something about the relevance or applicability of findings to other similar settings (Miles & Huberman, 1994). Guba and Lincoln (1989), and others (e.g., Sandelowski, 1986) refer to this as "transferability", and it is one of the criteria by which qualitative research demonstrates its trustworthiness (i.e., rigour). In grounded theory, cross case analysis is done to deepen understanding and explanation. Glaser and Strauss (1967) have argued for using multiple comparison groups to determine the structural conditions under which specific hypotheses will hold. Multiple cases help the researcher to find enough variability in the phenomenon of interest to strengthen theory, built through examining similarities and differences across cases. The analyst also is better able to develop the more general categories of how different conditions may be related when multiple cases are used (Miles & Huberman, 1994).

Case and Participant Selection

The Prevention Workers

As noted above, 28 of the 31 PWs who participated in the second training session were the main participants in this study. Six of these PWs also participated in this study by virtue of their placement in the six schools selected for the case studies, as described above. Fifteen of the participants were among the first wave of PWs who began their employment during the 1991-92 school year. The remainder were second wave
PWs who began their positions in the 1992-93 school year. Eight of the PWs were male and 20 were female. Of the PWs involved in the case studies, two were male and four were female.

PWs had varied educational backgrounds. Twelve of the 28 had training in alcohol and drug counselling, five had a degree in child and youth care or early childhood education, three were health educators, one had a degree in education, and three had masters degrees in counselling psychology. Two of the PWs had a degree in nursing and one had a sociology degree. The educational background of the 28th PW participant is unknown. Work experiences among PWs were also varied. Two PWs had worked as nurses prior to this position, one had been an alternative school teacher. For three PWs, this was their first job after graduating from university. Six PWs had worked in youth centres or as community development workers with young people. Finally, ten PWs had been alcohol and drug counsellors and three said they had worked in the area of general counselling. Of the six PWs involved in the case studies, one was a teacher, one had an masters degree in counselling psychology, two had training in addictions counselling (one of these had an undergraduate degree in linguistics), one had a degree in sociology and had worked extensively with youth groups, and the last one was a nurse.

Pilot Case Study

Selection criteria for choosing the pilot case study site included: (a) the school had participated in the student survey, (b) teacher, administrator, and PW data were available, (c) the school and PW agreed to participate, and (d) the school was within daily driving distance of Vancouver. The first two criteria ensured that a broad range of diverse materials and data were available for analysis to meet the goals of the overall evaluation. The third and fourth ensured accessibility, particularly within existing budget constraints, because a pilot study was not included in the original proposal.

Once the schools that met these criteria were identified, the school was chosen on the basis of several additional criteria, including: an articulate, personable, and cooperative PW, a supportive school, a supportive community agency, and a smooth early implementation process based on data from the telephone and focus group interview data. Because this was a pilot case study, I wanted to ensure that I would have access to the
necessary data and the support of those who were most influential in the program. In a learning situation, I did not want to be hampered by barriers to accessing the data. Permission to conduct the case study was sought from the school district superintendent, the school principal, and the Prevention Worker, and ethics approval was sought and obtained from the Research Office at UBC.

Case Studies

In the fall after the pilot case study, a school selection protocol was developed for the remaining case studies. Sampling decisions were made on the basis of concepts that seemed most relevant to the emerging theory. The logic and power of this type of purposeful sampling lies in selecting information-rich cases for in-depth study (Patton, 1990). The sampling strategy used to select cases is what Patton (and others) have described as "maximum variation sampling", which aims to capture the central themes or principal outcomes that cut across a great deal of program variation. The logic is that any patterns that emerge from this variation are of particular interest and value in capturing the core experiences and central shared aspects. This type of sampling is particularly appropriate for the development of a grounded theory. The process begins by identifying diverse criteria or characteristics for the sample.

In this situation, the relevant characteristics included some that were important for the overall evaluation (e.g., availability of survey data). Other relevant selection characteristics were those that the analysis of the earlier data, both quantitative and qualitative, suggested were most likely to provide data on the main concepts of interest in the study. This is an example of theoretical sampling. Appendix G describes the characteristics of the pool of schools eligible for selection and summarizes the selection criteria proposed.

PW telephone interview data indicated that the level of support for the program at the school level, by principals, teachers, and others was one of the most important factors in their ability to initiate, develop, and implement a prevention program in the school, and there was considerable variability in the level of that support across schools. Sampling therefore focussed on identifying schools with varying levels of support for the program and the PW, and ensuring that those selected represented a range of administrative and teacher support.
Other factors identified in the telephone interview and pilot case study analysis suggested that the following issues/categories were relevant criteria to guide school selection: (a) a narrow alcohol and drug focus versus a broader health promotion focus, (b) a school district versus an agency contract, (c) prevention versus early intervention focus, (d) teacher versus non-teacher as PW, (e) Learning for Living versus School-Based Prevention Model as an organizing focus for planning prevention activities, (f) role of ADP regional offices and the community agencies, (g) the extent of student, teacher, parent, and community participation in the SBPP, (h) level of commitment to and use of the SBPM, and (i) part-time versus full-time presence of PW in a school (School-Based Prevention Project Evaluation Team, 1994f).

Schools were therefore selected to represent a range of these characteristics where it was possible to identify them in advance on the basis of prior data. A total of 11 schools were eligible to be selected for the case studies. Based on the above characteristics, four schools were selected tentatively. Two schools were approached initially for permission to do the site visit in the fall of 1994. The selection of the next two schools was finalized following completion of the first two site visits. This was done in case additional relevant issues emerged during the course of the first two site visits that might alter the sampling plan for the subsequent schools. As it was, data collection in the first two schools, and preliminary analysis of that data, suggested that we might need to sample an additional school to ensure that all relevant characteristics were represented. Thus, five case studies rather than four were carried out. When the pilot case study school is included, six schools participated in the study. The addition of two extra schools over the original plan, helped to ensure adequate variability on the important concepts and categories so that saturation could be achieved.

The Nature of the Data

PW Interviews

Twenty-four of the 28 interviews were tape recorded. Two PWs declined permission for tape recording so written notes were kept. The tape recorder did not work for the first two interviews but I did not discover this until the interviews were over. I made notes immediately following the interviews but the level of detail
for these, and the other two non-recorded interviews, was considerably less than for the remaining 24 interviews. I used a different tape recorder for all subsequent telephone interviews, and thus did not encounter further problems with recording. Consent for the interview and for tape recording was obtained over the telephone and recorded on tape. Twenty-one of the interviews were transcribed. Although transcription makes data analysis easier, it is not a requirement for analysis (Strauss & Corbin, 1990). All 28 interviews were included the analysis.

In retrospect, there are many flaws in the wording of the questions. The length and structure of the interview schedule do not conform to the usual grounded theory format (which is generally shorter and less formally structured). In actuality, however, few of the questions on the schedule were asked directly of participants. Once the PWs had the opportunity to open up about their experiences, they often spontaneously raised the issues that were to be asked about in later questions, and therefore those later questions were omitted. Thus, most of the questions functioned as probes rather than as specific questions so the interview schedule was more of a checklist than a structured set of questions. The data from the interviews was extremely rich in that PWs were anxious to talk about their experiences in depth and often raised issues of concern to them that were not on the interview schedule. Many of the PWs closed the interview by thanking me for the opportunity to talk about their experiences because they were not often able to do this with someone willing to listen.

When PWs raised specific issues that were not contained in the set of interview questions, these issues were explored in subsequent interviews with other participants. For example, although the interview schedule did not contain any questions about the steering committee, PWs spontaneously described their experiences with trying to establish a steering committee. If PWs in the later interviews did not raise the issue then I asked them about their experience in establishing the steering committee.

Pilot Case Study

Interviews were conducted with a range of individuals in the school having direct or indirect involvement in the SBPP and with the PW. Time spent on site was the equivalent of 8 working days. The
logic of sampling in grounded theory is to obtain "information rich" cases and as much variation in perspectives as possible. Thus, selecting people who were most familiar with the phenomenon was the first step. I had asked the PW to make arrangements for me to interview those members of the school community who worked most closely with her as well as with a focus group of students who had been involved with the program or had worked with her.

Information letters and consent forms were sent to the PW ahead of time for distribution to the adult participants and to be sent home to parents. When I arrived on site, no students had returned the consent form for the focus group. Several students indicated that they did not want their parents to know they had been involved with the PW. Unfortunately, the ethics approval from UBC required active informed consent from parents. Thus, even though the students wanted to participate and were willing to sign the consent, I could not proceed without parental consent. With the permission of six students, who were under the age of 19, the PW and I telephoned the parents to obtain verbal consent for these students to participate. The students also signed the consent form. Two 19 year old students did not require parental consent. Thus, we were able to make arrangements to interview eight students individually. It was not possible to organize a focus group because there was insufficient time to schedule an interview given the time of year. It was close to graduation, and students had many other priorities. Adult participants also signed the consent form, and all participants were provided with a copy of the letter and the consent form for their own records.

The interview schedules can be found in Appendix H. Although all of these questions were addressed in most interviews, new questions emerged as relevant to the discussion at hand, as is appropriate in grounded theory, whereby data collection is driven by theoretical sampling. In a grounded theory study, it is impossible to know all the relevant questions in advance. All interviews, however, were begun with an open-ended question that asked "Tell me about your experience with the SBPP". This question permitted the

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28 Active consent by parents was required by UBC Research Services. Although telephone consent was not part of the original consent protocol, it was necessary to make a quick decision about consent in the situation. Because telephone consent did constitute active consent, and because I believed that not conducting the interviews would damage the relationship between the researcher and participants, including the PW, I decided to go ahead with telephone consent.
participants to tell their own stories without being directed by the researcher. From this initial story, appropriate and relevant questions become apparent. Short hand notes were made during the interview. These notes served two purposes; first, to prompt me about points to follow up on with the participant, and second, to jog my memory later when I completed a post-interview coding form. This is described in more detail in the section on data analysis below.

All but one interview was audio-taped for later transcription. Each interview lasted from 30 to 60 minutes. One teacher refused to be tape-recorded. Her responses were recorded in writing. I conducted a total of 22 interviews with the following participants: the PW (several tape recorded sessions), seven teachers (science, fine arts, physical education, home economics, social studies, and mathematics), the principal and vice-principal, eight students, the school secretary, the agency Executive Director, two school counsellors, one SBPP volunteer, the British Columbia Teachers’ Federation (BCTF) shop steward, and the teacher director of the young mothers’ program. In addition, several spontaneous conversations (not tape recorded) were held with students and staff over the course of the time spent in the school. I recorded observation notes throughout the site visit by making notes or by direct typing into a laptop computer. At the end of every day, on the one-hour drive back to Vancouver, I tape recorded my thoughts and observations of the day, identified potentially important concepts in the data gathered that day, and noted ideas to follow up on the following day. I listened to these tapes on my way back to the school the next morning.

I sought additional interviews, other than those the PW had suggested, with people who could provide relevant information pertaining to the emerging issues and concepts. These participants were selected by asking other interviewees who might be a good person to talk to about a particular issue. For example, I sought participants who were not directly involved with the program to determine whether the PW influence had diffused in the school, and to get a sense of how well the school as a whole understood and supported the SBPP. I also looked for participants who were not supportive of the program in an attempt to seek out negative instances. The local representative of the BCTF was the only person I could find who did not wholeheartedly endorse the SBPP, although he did endorse the PW herself.
Several meetings/gatherings (not tape recorded) were observed, including: a steering committee meeting, a Counter Attack group meeting, a planning session with a student for the Grade 10 health conference, two spontaneous planning sessions with teachers, one scheduled planning session with a teacher, several consultations with teachers on alcohol and other drug issues, one class presentation by the PW, and lunch time observation and conversation in the staff room. Field notes were made during or shortly after these observations.

**Case Study Data**

The same protocol for data collection was followed with the case studies as with the pilot case study with the exception that fewer days were spent in the subsequent schools. Interviews were conducted with a similar group of participants and they were selected in the way described for the pilot case study. In each of the five case study schools, I interviewed between 11 and 19 participants. Similar observations were made, as in the pilot case study, although I did not get the opportunity to observe a classroom presentation by the PW in one school. In some instances, fewer interviews were obtained because a particular school was less cooperative overall, or because it was more difficult to obtain interviews from the appropriate participants.

The SBPP evaluation team had some difficulty finding good transcribers that could produce a transcript within the desired time frame and within the limited budget available. This resulted in a delay in getting the transcripts back after the first two case studies. Therefore, it was not possible to do much open coding on the data before it was necessary to return to the field for the final case studies. Theoretical sampling was therefore guided by the preliminary coding on the post-interview coding forms (Appendix I) and on my field notes. Prior to going out to each school, I reviewed the PW's telephone interview transcript and listened to the audio tape. A summary of the interview was prepared and stored as a document memo along with list of questions to ask the PW during the follow-up interview (see Appendix J). Thus, the review

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29 Counter Attack is a program sponsored by the Insurance Corporation of British Columbia, in which a teacher sponsor works with a group of high school students to develop activities in the school aimed at preventing drinking and driving among adolescents.
facilitated follow-up with the PW on issues she or he had identified as important the previous year, and captured important changes in the PW's perspective, implementation strategies, and concerns.

Records were kept of all interviews with names, date, time, and circumstances. During taping, all audio tapes were labelled prior to use and put back in labelled cases when finished. Tapes were stored in a locked file drawer in a locked office. Tapes were duplicated, and the originals stored safely before the copies were sent out for transcription. Some of the transcriptions were of poor quality which meant considerable editing and clean up before I was satisfied with the quality of the document. Because of the difficulties obtaining good quality transcriptions, I transcribed the interviews for the last three case studies myself.

Despite the care I took to ensure that the tape recorder was working before beginning an interview, I did encounter a technical problem that resulted in some data loss. During the third and fourth site visits, the tape recorder developed a loose connection in the adaptor so that the recorder would sometimes cut out during an interview for short periods of time. Because I had established at the beginning of every interview that the tape was working, I did not think to check it during the interview. This began to happen toward the end of the third site visit so only a few minutes of data from three interviews was lost in that case. Unfortunately it occurred more frequently during the fourth site visit so substantial chunks of data were not recorded. Approximately half of one teacher interview was missing. In the remainder of interviews small segments lasting 5 to 10 minutes were missing. Fortunately, I also kept my shorthand notes so I was able to fill in most of the gaps. I discovered the problem at the beginning of the final case study so was able to rent a new tape recorder for the remainder of the data collection.

I listened to every interview while editing the transcript on the word processor. All errors were corrected, notations were made to indicate emphases, tone, and subtle nuances that could not be picked up in a written transcript but which were evident in the audio taped interview. All names and identifying information were substituted with code names, and the key for these codes was stored in a locked filing cabinet and in a password-protected file on the hard drive of my office computer. In addition to the files
stored on my hard drive, two disk copies of all files were made and kept in two separate locations, one in my office filing cabinet and one in my home filing cabinet.

Follow-up interviews were conducted with 3 PWs from the case study schools. These were conducted for four reasons: (a) to gather more information to elaborate on the emerging theoretical formulations, (b) to clarify inconsistencies in the data, (c) to saturate specific categories as necessary, and (d) to validate the emerging theoretical ideas with the PWs. The first interview was held with the PW from the pilot case study school approximately 15 months after the site visit. The main emphasis of this discussion was to check out new theoretical ideas that had emerged in the subsequent case studies to determine their relevance to the implementation process in that school. The second interview was conducted with the PW from the fifth case study school to follow up on the demise of the SBPP in his particular school, which occurred within three months of the site visit and at approximately the same time that the first follow-up interview was conducted.

A third follow-up interview was held with the PW from the fourth case study school approximately 15 months after the site visit. One aspect of the discussion was on the disparity in perspective between the PW and various members of the school. It became clear as the data were being analyzed that other members of the school community had understandings that were quite different than the PW about what the SBPP was all about, the role of the PW, and the types of interventions he was carrying out in the school. This particular PW had also reflected a great deal on the SBPP and had done some interesting analyses around the issues of SBPP implementation.

It was not possible to locate two of the case study PWs because they had left their positions. The sixth PW lives in the north, and I was unable to conduct a follow-up interview with that particular PW. All of the follow-up interviews were audiotaped and transcribed. Over the past two years, I have been in periodic contact with several other PWs for professional reasons. I took these opportunities to describe and validate the emerging conceptual framework. Field notes were made during and after these conversations.
The Data Base

Because the focus of my study was on how PWs managed the implementation process, the core of the data base for this study was composed of the following: 28 PW telephone interviews, six PW site visit interviews (each of which included discussions with the PW over several days), field notes on interactions and discussions with many PWs over a four year period, and 3 follow-up PW interviews. The data from other participants (e.g., members of the school community) were used to supplement, verify, expand, and saturate the main categories that emerged from my analysis of the PW data.

Each file was prepared for import into NUDIST (Non-numerical Unstructured Data Indexing, Searching and Theorizing), the software package I used to analyse the data. Document headers were created and sub-headers inserted to divide the document into relevant sections. Each line of text was designated a text unit, as required by NUDIST, and hard returns inserted after every line. The files were saved as ASCII text files and imported into NUDIST. A hard copy of every interview was printed out, with each text unit numbered, and stored in a separate file for each school. NUDIST provides an excellent way of managing a large data base of qualitative materials and documents. It provides a list of all documents in a project, stores details about them, and keeps documents organized by case. A memo summarizing each document was created and stored in NUDIST's document memo facility. Thus, it is easy to assess the status of the data base at any time, and to quickly identify the key ideas expressed in any given document. NUDIST allows documents to be organized by case which facilitated within-case analysis, but its powerful searching, indexing, and theorizing capabilities also allowed cross-case comparisons.

My typed observation notes for each site visit were edited in much the same way as the interview files and entered into NUDIST as a separate document for each case. I transcribed my tape-recorded field

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30 The entire data base contained 98 transcribed interviews, 14 taped interviews that were not transcribed, five notebooks of handwritten field notes, 12 IHPR research reports, and 4 ADS documents. Only the transcribed interviews and typewritten field notes were incorporated as on-line documents in the NUDIST data base. The bulk of the analyses utilized the hand written field notes, and the transcribed interviews which comprised approximately 1450 pages of typewritten text and a total of 57,000 text units.
notes and prepared them in the same way. Several off-line documents were coded and entered into the data base, including my hand written field notes. NUDIST provides a way of managing off-line as well as on-line documents so that these external documents can be incorporated into the analysis.

The Analytic Method

The underlying operation of grounded theory research is the integrated collection, coding, and analysis of data throughout the research process. The central feature of this approach is the constant comparative method in which data are constantly compared with other data (incident to incident, incident to concept, and concept to concept) at each stage of theory development. It is based on what Glaser (1978) and Strauss (1987) call a "concept-indicator model," which provides the essential link between data and concepts, thus resulting in a theory that is grounded in the data. Empirical indicators in the data are continuously compared to determine similarities and differences. When a conceptual code is generated, the indicators are compared to the emerging concept. By comparing the meaning of indicators in the data to each other and to the emerging concept, the analyst slowly builds up concepts and their properties (Glaser, 1978, p. 62), and discovers the relationships among them.

Theoretical Sampling

As the theory emerges, theoretical sampling is used to direct additional data collection to enrich, expand, and modify the theory. It is the means "whereby the analyst decides on analytic grounds what data to collect next and where to find them" (Strauss, 1987, p. 38). During the process of collecting, coding, and analyzing data, choices about the incidents, events, activities, settings, individuals, and populations to be sampled are guided by the emerging conceptual formulations arising from the data. In grounded theory, only the initial sampling can be planned in advance. It is not possible to determine a priori the exact number of

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31 An off-line document is one that is not stored on the computer. Text units can be coded in the off-line document and added to the data base, but in doing a retrieval, the researcher will have to return to the original document to view the text attached to a particular code. In contrast, an on-line document is one that is stored in the data base. When retrieving the data attached to a particular code, the text associated with that code is available on screen for viewing.
participants, the specific incidents, or the exact questions that will be asked. These decisions are controlled by the emerging theory.

Strauss (1987) observes, however, that in most studies there are structural constraints that can limit the possibilities for sampling and that "mitigate against a neat codification of methodological rules" (p. 7). Contingencies are inevitable; thus, discretion is essential. These constraints need to be acknowledged, however, so the potential for "derailing" the theory generation process can be assessed. My experience with these constraints suggests that the method is quite robust and can tolerate some deviation from strict rules of method.32 Thus, there are no hard and fast rules in grounded theory analysis, but there are "rules of thumb" (Strauss, 1987, p. 7).

Data Analysis

Data analysis and data collection go on simultaneously. Therefore, their separation into distinct sections in this text is somewhat arbitrary. Data analysis of the telephone interviews had begun before entering the field for the pilot case study. The hard copies of each interview were read and re-read before line-by-line coding began, and I listened to each tape. A summary of each interview was written as a document memo in NUDIST. Open coding began by going through each interview line-by-line, attaching codes to each piece of text that represented an idea. Many of the codes at this point are in vivo codes that are derived directly from the words of the participants. In NUDIST, open coding is done by highlighting a text unit and attaching one or more codes to that piece of text. As I coded, I asked myself the neutral question suggested by Glaser (1978) to guide open coding. That is, what category, or what property of what category does this incident indicate? I also kept in mind the other neutral questions that Glaser says are necessary: "What is this data a study of? And What is actually happening in the data?" (Glaser, 1978, p. 57). I proceeded until there was an extensive proliferation of these first level codes.

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32 A heavy reliance on method as a guarantee of validity has been seriously challenged by interpretive and critical perspectives in qualitative research. Janesick (1994), for example, uses the term "methodolatry", a combination of method and idolatry, to describe the preoccupation with method to the exclusion of the substance of the story being told. She argues that methodolatry, the slavish attachment and devotion to method, moves the researcher away from understanding the actual experience of participants, and what they are saying and experiencing (p. 215).
Second level coding, or theoretical coding, followed open coding. This type of coding involves grouping and regrouping the emerging concepts into categories, their properties and associated types, circumstances and conditions. Glaser (1978) proposes using a family of codes, one of which is the 6C family, which includes: causes, consequences, conditions, circumstances, context and contingencies. Some of the other coding families are strategies, processes, dimensions, degrees, and types. Strauss and Corbin (1990) refer to this second level of coding as axial coding which involves grouping the concepts according to a coding paradigm: causal conditions, the phenomenon, context, intervening conditions, and consequences.

Throughout the coding process, I wrote memos about my emerging ideas about the codes, the concepts and their relation to each other. These memos recorded my changing and emerging ideas about the concepts and the categories. Memos also helped me to keep track of ideas and to guide my theoretical sampling. They were also invaluable in helping me to regain my momentum after being away from the analysis for a time. When it came time to begin writing the findings section, the memos became incorporated into text of the document and the attached text units were used to illustrate the concept or idea.

By the fourth telephone interview, it appeared that few new codes were emerging, and I had begun to develop a coherent set of categories. At this point, I had to stop coding the telephone interviews to go into the field for the case studies. Analysis of the case study data began in the field in a preliminary way. Because the case studies were so close together with no time between them for transcription and line-by-line coding, a mechanism had to be developed to facilitate preliminary coding to guide theoretical sampling. This preliminary coding occurred as soon after an interview as possible, but at the very least, at the end of every day. During each interview, short hand notes were kept. Following the interview, a hand-written preliminary coding form was completed on each interview, identifying key issues that emerged in the interview and identifying important concepts and categories. Ideas for theoretical sampling were noted and specific questions to be asked of participants were identified and written out. These forms were later typed into the document memo in NUDIST for that particular interview. The idea for this coding form comes from Miles
and Huberman's (1994) "contact summary sheet" (p. 51). See Appendix I for a sample of the post-interview coding form in its typed format.

At the end of every day in the field, I typed out my observation notes and reflected on the emerging conceptualizations in the data. On the basis of this reflection, I developed a plan to collect additional data, either the next day or before leaving the field. I also noted specific questions to ask of individuals. Generally, I went to the PW to seek her or his assistance in locating and scheduling the person I needed to question, or in making arrangements for the necessary observations.

After completing all the site visits, I was unable to get back to the analysis immediately because of the demands of the overall evaluation and because I began a new job at the University of Victoria. Over the next two years, I continued the data analysis whenever I had an opportunity. When I eventually returned to the analysis in the summer of 1997 and full-time in the winter of 1997-98, I completed coding the telephone interviews. This included all twenty one transcribed interviews, the three interviews that were not transcribed, as well as the data from the three interviews I did not audiotape. For the most part, I used theoretical and selective coding but occasionally I came across new concepts that had not yet been introduced into the framework. At that point I returned to open coding for those parts of the data that contained new ideas and concepts.

I next coded the six PW interviews from the case studies, although analysis of these interviews had begun in the field using the post-interview coding forms. Few new concepts emerged from these interviews that had not already been identified in the telephone interviews. These data, however, helped me to saturate several categories and expand on the dimensions and properties of these categories. I then read all of the interviews conducted in each school as I listened to the tapes, and selectively coded these for the main concepts and categories in the emerging framework.

Early in the analysis, I began to suspect that Reconciling Concept and Context was my core category, but I was reluctant to commit to it because I feared that I was being influenced by my own prior theoretical conceptions. I spent several months trying to disprove this as the core category by looking for negative
instances. I also presented my emerging framework to my grounded theory seminar group, and they agreed that the data did indeed reflect Reconciling Concept and Context as the core category. I discussed my ideas with one PW who provided confirmation of the main categories in the theory. I spoke to the authors of the original theory of Reconciling Concept and Context (Ottoson & Green, 1987) as asked permission to use that title for my grounded theory. Once I settled on Reconciling Concept and Context, I went back to the school members’ data selectively coding to saturate the main categories and properties of the theory. Analysis continued during the process of writing up the findings. As one begins to describe a concept or category, holes in the analysis become apparent. This required going back and forth from the data to writing in an iterative fashion.

I used NUDIST software, Version 4.0 to conduct my data analysis. The size of the data base makes organization and data management critical, and NUDIST greatly aids in this process. This software was developed by Richards and Richards (1991, 1994) and fits well with the principles of grounded theory analysis. Specific advantages of NUDIST include: (a) the ability to code directly on-screen or to code the data manually on hard copy and then transfer it to the NUDIST system with a few simple commands, (b) the ability to move quickly either from the concept (node) to the data so that data can be immediately recontextualized, or from the data to the various codes that have been constructed so that the range of coding for any piece of text can be seen at a glance, (c) the ability to store and readily access ideas about any aspect of the index system and the emerging theory in memos for each node, (d) the ability to change the indexing system easily and at will as ideas develop and change, (e) the ability to create qualitative matrices, which is particularly effective for cross-case analysis, and (f) the ability to maintain an audit trail to account for analytic decisions along the way.

For this study, I used NUDIST primarily to support data management and indexing or coding functions. NUDIST supports, though it does not require, a tree-structured indexing system. This is consistent with the coding process in grounded theory which hierarchically arranges concepts into categories and their properties, each of which have further subcategories representing types, conditions, circumstances,
dimensions, causes, consequences (to name a few). The index data base does not need to be designed before coding begins. This is an important feature given the emergent nature of grounded theory analysis. Text segments are indexed at the nodes, which represent the concepts in the emerging theory. Thus, the indexed text represents the empirical indicators for the abstract concept represented by the index node. NUDIST allows the emerging index structure to be readily modified, thus supporting again the constantly evolving and emerging theoretical conceptualizations. Nodes (i.e., the concepts) can be given names just as one would do in manual coding in the margins of text. Nodes can also be defined (and redefined), and memos can be stored at each node to record the analyst's evolving thinking about the concepts and their relationships to other concepts. Memos can be added to, modified, or deleted at will. Nodes can be moved freely throughout the tree structure, and can be duplicated or deleted.

**Trustworthiness**

Scientific rigour is the term applied to the criteria by which a research process and its product are judged. Qualitative researchers have begun to use other terms in place of this; the most common of which is "trustworthiness" coined by Lincoln and Guba (1985). There is much controversy in the qualitative literature about the appropriate criteria for judging the quality of naturalistic inquiry, and a vast body of literature has developed (Altheide & Johnson, 1994; LeCompte & Goetz, 1982; Lincoln & Guba, 1987; Lincoln, 1995; Sandelowski, 1986; Sandelowski, 1993; Smith, 1984). Some have argued that the traditional canons of quantitative research can be used but they must be redefined to fit the assumptions of qualitative research. This is the position taken by Strauss and Corbin (1990). Still others argue that the non-foundationalist assumptions of interpretive or constructivist inquiry do not permit any kind of foundational criteria to be applied (Smith, 1984).

Glaser and Strauss (1967), in their original book, identified four criteria by which the product of a grounded theory study should be judged; fit, understanding, generality, and control. The first three of these parallel or are encompassed by Glaser's (1978, 1992) criteria; fit, work, and relevance, to which he has added
modifiability. It is the researcher's responsibility to provide enough information so the reader can make the judgment on the basis of the information provided.

In addition to the criteria proposed by grounded theory's originators, I have also incorporated criteria proposed by other qualitative researchers (e.g., Guba & Lincoln, 1989; Lincoln & Guba, 1985; Sandelowski, 1986) because these criteria generally reflect what many others argue are the most relevant. Lincoln and Guba (1985) say that there are four factors related to tests of rigour in both quantitative and qualitative inquiry. These are truth value, applicability, consistency, and neutrality. Truth value is determined in quantitative and post-positivist research in terms of internal validity. Applicability in the quantitative tradition relates to external validity or generalizability whereas consistency is determined by the extent to which the findings are reliable and replicable. Finally, neutrality is determined by the objectivity of the researcher and the measurement. The parallel terms for these factors in qualitative inquiry are: credibility, transferability, dependability, and confirmability. These parallel concepts are consistent with the assumptions of qualitative inquiry.

Credibility

This criterion parallels the internal validity criterion in conventional inquiry. The focus is on establishing the match between the constructed realities of respondents and the realities represented by the researcher. Several techniques have been proposed for establishing credibility: (a) prolonged engagement in the field, (b) persistent observation, (c) peer debriefing, (d) negative case analysis, 5) progressive subjectivity (or self-reflexivity), and 6) member checks.

I have had prolonged involvement with the PWs in this study spanning a time frame of over 4 years. I have had numerous phone conversations with all of them, participated with them in annual, week-long training sessions, consulted with many of them on various aspects of the evaluation, and I have seen many of them at other conferences and events. The purpose of this technique is to overcome the effects of misinformation, distortion, presented "fronts", and to establish the rapport and trust necessary to develop an understanding of the context (Guba & Lincoln, 1989, p. 237).
Other techniques may help to overcome some of the problems that might be a result of insufficient time in the field. One of these is the triangulation of data sources that occurred in this study. Multiple perspectives on the same issues, incidents, and events were gathered, and over the course of the week-long site visit, it was evident that trust was building and people were opening up. Of course, a longer visit would have enhanced the credibility of the study, but this was simply not possible. This is a limitation of the study that cannot be overcome. Longer periods of observation would have necessitated fewer site visits; thus, there was a tradeoff in this situation between prolonged engagement and obtaining sufficient variability on the relevant school characteristics.

Persistent observation was achieved by observing similar incidents involving the same people, the same incidents involving different people, and by getting multiple perspectives on the same issue/incident. Peer debriefing occurred in a regular grounded theory seminar in which I participated with both novice and experienced grounded theorists. I also engaged in discussions with other graduate students engaged in grounded theory studies. Negative case analysis is built into the study in terms of selecting schools with successful and unsuccessful implementation experiences. Within each case, program detractors were sought to provide their perspectives on the various implementation issues.

Progressive subjectivity is achieved by monitoring the researcher's own prior and emerging conceptions. If the emerging theory privileges the researchers' prior constructions, then questions must be asked about the extent to which the theory is truly grounded. In this case, negative case analysis may assist in exploring a different construction. In my journaling, I kept a record of my own ideas and conceptualizations on the problem/issue/situation. I continually referred to these as data collection and analysis proceeded. In many instances, my prior conceptions were not supported by the emerging theory, although in some situations they were. Peer debriefing is also an aid to ensure an adequate degree of self-reflexivity. I utilized my grounded theory seminar group for peer debriefing.

Member checks involve the process of testing hypotheses, data, preliminary categories, and interpretations with participants. This occurred naturally throughout the research because this process is, in
fact, built into the constant comparative method and encompassed by theoretical sampling. Follow-up interviews with PWs involved member checks.

Transferability

This term parallels the generalizability or external validity criterion in positivist and post-positivist research. Interpretive inquiry replaces external validity with an empirical process for checking the similarity between "sending and receiving contexts" (Guba & Lincoln, 1989, p. 241). Transferability is relative and depends on the extent to which salient conditions or characteristics match or overlap but the judgment is made by the reader and not by the researcher. The researcher is responsible for providing enough descriptive detail to allow transferability judgments on the part of others.

Confirmability and Dependability

These criteria parallel the objectivity and reliability criteria in conventional inquiry. Confirmability is concerned with assuring that data and interpretations are not simply constructions of the researcher, but are grounded in the contexts and constructions of those participating in the research. In contrast to the conventional paradigm, which assures objectivity by scrupulous adherence to method, the interpretive researcher assures confirmability by scrupulous adherence to the data themselves. Thus, the data can be tracked to their sources, the theoretical formulations are structurally coherent, and the logic used to put them together is both explicit and implicit in the narrative. Thus, both the products and the processes are available for outside inspection.

The use of NUDIST software for data analysis provides a readily accessible mechanism for tracking the data analysis process. All existing data, and the coding associated with it, are visible on screen. NUDIST has the capability of instant contextualization of the decontextualized text units and their associated codes, so it is possible to review and track the development of codes and categories. Memos associated with each node, track the emerging and changing theoretical conceptualizations. Automatic and manual date and time stamping keep track of temporal ordering. An automatic audit trail is constructed by NUDIST by means of a
comment inserted into each memo every time a node (i.e. concept) is changed. The entire data base and the
analysis is stored within the system in an easily retrievable format that can be externally audited.

Ultimately, a grounded theory must fit the data, work to explain the basic process under
consideration, and be relevant to the experience of people in the setting. The feedback I have received from
those in the field suggests to me that this is the case with this grounded theory.

**Ethics Review and Protection of Human Subjects**

All research protocols and data collection plans for each phase of the study were submitted to the
Office of Research at the University of British Columbia. The relevant certificates of approval are contained
in Appendix K. For the telephone interviews, PWs were informed of the purpose of the study, and their
agreement to participate was obtained verbally over the phone and tape recorded. For all other data
collection, participants were given a letter on UBC letterhead describing the purpose of the study, stating that
participation was voluntary, that there were no consequences for not participating, and that withdrawal at any
time could be done without penalty. Sample letters and consent forms can be found in Appendix K.
Participants were assured that their confidentiality would be protected, that no names or identifying
information would appear in any report, and that all reports would reflect aggregate data. The situation for
student participants in the case studies was described earlier.
PART B
RECONCILING CONCEPT AND CONTEXT

Using information obtained from PWs, school administrators, teachers, counsellors, and students, I have developed a grounded theory that represents a composite picture of the process by which PWs implemented the PW role and the SBPM. Although the specific details of this process may vary for each PW, it is their collective experience, as represented in this grounded theory, that helps us to understand how concept and context came to be reconciled. In this study, the basic social problem encountered by PWs was the challenge of implementing the SBPP, a concept that emerged from Alcohol and Drug Services (ADS) of the BC Ministry of Health, into the local school context. To manage this problem, the PWs engaged in the basic social structural process\(^3\) of Reconciling Concept and Context.

When PWs and others involved in the process were asked about their experiences, their collective perspective of this experience yielded three different, yet related, categories: Entering the Field, Confronting the Model, and "Doing" the Model. Entering the Field included three major processes: gaining entry, creating a role, and enhancing school readiness. Confronting the Model also included three major processes: reacting, learning, and contemplating. Both of these categories culminated in the category "Doing" the Model, which has two properties: planning and applying.

Part B of this research report presents each of these conceptual categories in seven separate chapters. These presentations will distinguish the different elements of each of these two major categories, clarify the meaning their properties give to each category, provide examples of these properties from the data, discuss how these properties function within the structure of each category, and finally discuss the meaning that each category gives to the overall problem of reconciling concept and context.

\(^3\) Glaser and Strauss (1967) identified two types of basic social process: a basic social psychological process (BSPP) and a basic social structural process (BSSP). A BSSP refers to "social structure in process" (Glaser, 1978, p. 102). Generally a BSPP occurs within the BSSP in that a BSSP "abets, facilitates or is the social structure within which the BSPP processes" (p. 102). Thus, in this study, there are several social psychological processes that occur within the BSSP of reconciling concept and context.
Figure 1 on the next page, graphically represents the process of Reconciling Concept and Context, and identifies factors in the school context and the ADS environment that influenced the process. PWs were introduced to the context in Entering the Field and to the concept in Confronting the Model. Every PW engaged in both of these processes, but began with one or the other depending on the start date of their position, and the timing of the SBPP training in relation to their start date. In other words, some PWs had been working in the school for a period of time prior to their SBPP training while others did not begin to work in the school until they had completed the training.

In Figure 1, Entering the Field is represented as slightly more prominent than Confronting the Model. This is because Entering the Field dominated the PWs’ experience, whereas the process of Confronting the Model was secondary, at least in the minds of most PWs. These two processes began in parallel and proceeded separately for a time despite the intention of the program developers that the model would be an integral part of the PWs’ work in the schools. The challenge for all PWs was to merge these two processes so that they were fully integrated. In other words, the aim was to be "Doing" the Model as the basis for their practice in the school.

For ease of reading, the following convention is used in the text to distinguish the various elements of the theory. The major categories of Entering the Field, Confronting the Model, and "Doing" the Model are capitalized. The three processes within each of these two categories are presented in bold print (e.g., gaining entry). The properties of these categories are underlined (e.g., establishing program legitimacy). The final level of code represents types, circumstances, conditions, strategies, and consequences in relation to each property (e.g., overcoming opposition). These are italicized the first time they are used but not italicized in subsequent uses within the section in which the code was introduced. If these codes appear in subsequent sections of the discussion, they will be italicized again to remind the reader of the level at which the code can be located in the framework.
Figure 1

RECONCILING CONCEPT & CONTEXT

MIN. OF EDUCATION
YEAR 2000/ L FOR L

SCHOOL DISTRICT
GROUNDWORK

GROUNDS WORK

AGENCY SUPPORT

ENTERING
THE FIELD

TIMING

RECONCILING
CONCEPT & CONTEXT

GAINING
ENTRY

CONFRONTING
THE MODEL

PW PARTICIPATION
IN PLANNING

PW BACKGROUND

SCHOOL SUPPORT
• ADMINISTRATOR
• TEACHER
• COUNSELLOR

PW TRAINING
EXPERIENCE

PW TRAINING
EXPECTATIONS
& LEARNING NEEDS

PRECEDE - PROCEED
MODEL

SCHOOL ADOPTION
PROCESS

CREATING
A ROLE

MODEL REVISIONS
SBPM HANDBOOK

LEARNING

ADS & AGENCY
SUPPORT

ENHANCING
SCHOOL
READINESS

CONTEMPLATING

“DOING”
THE MODEL

SCHOOL
& CULTURE

شد - ALCOHOL & DRUG SERVICES
LEVEL INFLUENCES

- PREVENTION WORKER
INFLUENCES

- SCHOOL LEVEL
INFLUENCES

- RECONCILING

SCHOOL READINESS

ADS TRAINING AGENDA
& MODEL PRESENTATION

ADS MANDATE

ADS PREVENTION
POLICY

- ADMINISTRATOR
- TEACHER
- COUNSELLOR
In the chapters that follow, all names used to identify speakers as well as people referred to in quotations are pseudonyms. Names were assigned at random to each quotation. This means that all quotations attributed to John, for example, may not have been spoken by the same individual. This was necessary to preserve anonymity of respondents because it was possible for someone who knows the PWs to identify certain individuals by putting together all the statements made by that person. Occasionally, a quotation was modified to remove identifying features in the statement.

Table 3, on the next page, presents an overview of the theoretical framework of Reconciling Concept and Context. This table serves as a map to assist the reader in following the development of the theory as presented in the text. The first column contains each of the categories within the two major categories of Entering the Field and Confronting the model as well as the final major category, "Doing" the Model. The centre column contains the properties of those categories. The third column contains types, circumstances, conditions, influencing factors, consequences, and strategies that relate to each property listed in the centre column. The level of abstraction increases from right to left in the table.
## Table 3
### Reconciling Concept And Context

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CHAPTER SIX
GAINING ENTRY AS A PART OF ENTERING THE FIELD

Gaining entry describes the PW’s attempt to become established as a credible and respected member of the school community who was seen to engage in legitimate and valued action in that setting. It was about the PW learning how the system worked, knowing what was possible, and what was not. Gaining entry is composed of four properties. The first three are the processes of establishing program legitimacy, establishing personal credibility, and learning the ropes. The fourth property is achieving peerage, which is the desired consequence of the gaining entry process.

For the PW to gain entry, she or he must first establish the program as a legitimate endeavour in the school. In many cases, the program’s legitimacy had been established at other levels of the system, but not at the school level. There were, however, a few PWs who did not have to begin their entry into the school by establishing program legitimacy because the school had accepted the SBPP as legitimate even before the PW arrived on the scene. PWs who did not need to establish program legitimacy at the outset were able to move right into establishing personal credibility and learning the ropes, both of which are simultaneous processes. If the PW has successfully established program legitimacy, personal credibility, and learned the ropes, the PW has achieved peerage in the school.

Establishing Program Legitimacy

Establishing program legitimacy was the process by which PWs were able to develop an acceptance in the school for the SBPP. It is composed of overcoming opposition and clarifying expectations. The process of clarifying expectations can also be seen as a strategy for overcoming opposition. It is, however, identified as a separate process because not all PWs had to overcome opposition, but most PWs had to go through a process of clarifying expectations, even if there was no opposition. In schools that experienced a collaborative and participatory school adoption process, there was more clarity and agreement on the expectations among stakeholders than in schools that experienced an imposed decision. Some of the same
conditions that resulted in program opposition were also instrumental in the lack of clarity and agreement on program expectations and expectations of the PW role.

If the groundwork at the ADS, agency, and district levels was thorough, then the SBPP school adoption process\textsuperscript{34} was more likely to be collaborative and participatory. This groundwork was variable from one ADS region to the next and from one ADS area manager to another. When the SBPP adoption process was collaborative and participatory, this tended to ensure program legitimacy at the school administrative level and with the district teachers' and counsellors' unions. In turn, if the school administration had involved the school community and the union locals in the adoption decision, then it was more likely that the legitimacy of the program was established at the faculty level. In some situations, the PW entered the field as a union member, either as a teacher member or as an allied professional member. This legitimized the program in the school and eliminated the opposition. For many PWs, however, the legitimacy of the program was in question from the moment they walked into the school, primarily because the staff felt that they had not been involved in the process. For these PWs, their first challenge was to overcome opposition to the SBPP and the PW role.

**Overcoming Opposition**

The opposition to the program was of three types: (a) opposition to an outsider coming in, especially a non-teacher, to provide a "contracted out" service, (b) opposition to the notion of drug use prevention in the schools, and (c) opposition arising from negative experiences with a previous prevention worker. The PW had to use various strategies and tactics to overcome this opposition if she or he was to establish an alcohol and drug prevention program in the school. The most common strategies used by PWs to overcome opposition were digging in and doing the job, negotiating boundaries and protocols, developing relationships, pulling rank, and clarifying misconceptions. If all else failed and the opposition continued unabated, the final strategy used by the PW was quitting the job. This happened in at least two

\textsuperscript{34} School adoption of the SBPP refers to the process by which the decision to adopt the SBPP was made. Adoption is distinguished from implementation, particularly the aspect of implementation explored in this study, which focused on implementation of the PW role and the SBPM in the school setting. Implementation thus took place after the decision was made to adopt the SBPP.
cases, and in one situation, ADS pulled the program entirely from the school as a result. Fortunately, there were few PWs who found themselves in such an untenable situation that their only perceived option was to quit.

**Opposition to an outsider coming in.** The first type of opposition came from teachers, counsellors, and union members who were concerned that the program involved “contracting out” services that would normally be provided by a teacher or counsellor. This was a real concern because budget cuts in several school districts had meant that counselling positions, in particular, had been eliminated. Because many schools believed initially that the PW job was a counselling position, this appeared to represent a violation of the collective agreements between the unions and the school districts. The head counsellor in one school describes this concern:

> And initially, I had the same concern that I guess our union expressed and that was, what are we doing? Are we on the road now to contracting out of counselling services? And through listening and watching it became really clear that wasn't at all what the intent was. They I think, just got into some murky waters, things that maybe hadn't been checked out carefully enough.

In situations in which the PW was a counsellor by profession, more opposition occurred because the danger that a PW would “overstep their bounds” seemed more likely to the unions. In a few cases, the opposition was intense and the atmosphere in the school was hostile. This precluded the PW from doing his or her job. Because these PWs did not have access to students, it was difficult to begin establishing relationships with students for the purpose of preventing alcohol and drug misuse. In schools in which there was strong opposition, PWs felt stonewalled in their efforts to gain access to students and to teachers. They were not provided with office space or a telephone, making it even more difficult to do their jobs. Union grievances turned teachers against PWs and often the PW was ostracized. PWs suspected that many of their efforts in the school were being sabotaged, as Veronica describes in the following quotation:

> Maybe I'm paranoid, but I see this as an overt and deliberate obstruction of my program. I get zero support from the administrators, teachers, and counsellors.

One can only imagine the feelings a PW might experience when he or she is excited to begin a new job and then finds such intense opposition to their position as soon as they set foot in the door.
This opposition had its origins in the *school adoption process*. Many of the schools were not involved in the initial decision to adopt the SBPP. Often this decision was made at the level of the school district, sometimes in collaboration with a community agency, sometimes not. In some instances, the agency knew about the funding and went to the school district to collaborate on a proposal, since the Request for Proposals (RFP) required collaboration. In other instances, the school district heard about the RFP and submitted alone. In a very few cases, the school itself was involved in writing the proposal. If the school district was involved, the decision then had to be made about which school would receive the PW position. In some instances, the school district “strong-armed” a particular school into taking on the program without any input or cooperation of the school at all, not even of the school administrators. They imposed the decision on them with no warning or discussion. Thus, the PW had to enter a situation where they were not wanted and the program was not supported, as the following quotation by Joanne illustrates:

> When this contract came to light it was looked at by the school board and the school board said, “Yes, yes -- we need this,” and to my understanding the school board did not contact the staff at the secondary school to see how they felt about it. And once I got into the school, and spoke to a number of teachers, a number of teachers said they felt it was another project imposed upon them from the board.

Once the schools became involved, there were varying degrees of participation in the decision making. Sometimes, the principal did not consult with his or her faculty about the program although there may have been consultation at the district level with union representatives. This created opposition in the school that many PWs had to overcome in order to get teachers to collaborate with them on the SBPP. There were times when, depending on who was speaking, the program did (or did not) have support. For example, a principal would describe in depth how he had worked through significant resistance, including union resistance, to what he felt was “clear sailing.” Yet, at the same time, the PW in that setting was frustrated at what she or he saw as “no sense of ownership” of the SPBB.

In other instances, the school administration ensured that relevant members of the school faculty were involved in the decision making. In these situations, there was considerable support for the program and the PW by teachers and counsellors as the following comments by a vice principal demonstrate:
There was a process of how to hire the person and difficulty with the union, should they be a union person, the union wanting some certain control over it, being also cautious about contracting it out, not wanting things to be seen that they're going to hire outside people to take the place of counsellors. So really we came up with the idea that the hiring be done through contracting out through the drug and alcohol service--and then she [the PW] would be placed in the school just like the health nurse and any of the other professionals who we're working with. And we discussed it with staff, discussed it with our union reps and those kinds of things. So Susan, I think compared to some areas, had a fairly good start and acceptance by staff. And as a result I think the project has sort of really taken off with staff support, I think.

In cases like this, the result was that the PW was welcomed into the school and did not have to begin the process by overcoming the opposition created by a poorly handled adoption process. Mary Ellen, a PW, describes her experience when there had been a participatory adoption process in the school:

It was like, okay, here I am. And talked a lot with the counsellor, but they really welcomed me in the school and introduced me in front of the staff and did all those things right up front. And everybody was like, okay, so we're not real sure what's going to happen here, but we're okay with it.

Thus, in situations in which a community agency, the school district, the school, and the union representatives were all involved in the process, there was considerably more acceptance of the program and less opposition in the school. This created a much smoother early implementation period. The PW was more likely to be accepted, there seemed to be a better understanding of the program and more clarity about the expectations. Unfortunately, this degree of collaboration in the adoption decision was not the rule and several union grievances were launched against the PW positions early in the program.

**Opposition to prevention in schools.** The second type of opposition was to the very notion of alcohol and drug use prevention in the school. There were several reasons for this. Some principals and teachers did not believe that alcohol and drug use was a problem in the school as the following quotation by Kathleen, a PW, shows:

When I went to my first meeting with my principal and my head counsellor, my principal said to me, so, what do you think you're going to be able to do here? We don't have a drug problem in this school. And if we do, we just get rid of it. So we don't see why we need you here.

Sometimes principals, in particular, did not want to admit that the school had a problem with substance misuse because it might affect their public image. Some PWs perceived that there was opposition to the
program from school staff because they feared the program might constitute an invasion of staff privacy. In other words, the program might require them to confront their own alcohol and drug use issues and they were not prepared to do this. Priscilla, a PW, described this fear among staff in her school:

Because I think sometimes staff members get pretty uptight because a lot of them drink and stuff like that and they’re thinking, “Oh no, is she going to be spying on us or what?” So it could be a very threatening thing. You hear this substance abuse worker and, “oh god.” And it affects adults as much as it does kids. So maybe to let them know that’s not what you are all about.

Thus, to establish program legitimacy, PWs had to reassure staff that they would not be challenging them on their own behaviour or otherwise invading their privacy.

Opposition due to prior negative experience with a PW. Opposition to the program also came about as a result of a prior negative experience in the school with a former PW. Because the school’s experiences with a previous worker had been troublesome, the program itself got a bad name. In the following quotation, Rita describes the school’s initial opposition to her entry into the school:

He [the principal] introduced me to the staff, and didn’t say too much about why I was there. He just said this is Rita, she is a prevention worker, so everybody’s mouth hung and they said, “Oh no we don’t have to do this again!” because of the simple fact of what happened before. Everybody was very negative about it.

In these situations, the PW had to work hard to overcome this negative heritage and it took longer for these PWs to establish program legitimacy than it did for those who were the first PWs to enter their schools.

Strategies to Overcome Opposition

PWs engaged in a number of strategies to deal with this opposition so they could begin to make progress in developing their program in the schools. For some PWs, the best way for them to handle the opposition was to prove themselves so they just started digging in and doing the job as the following statement by Kathleen indicates:

What I did is, I didn't make contact with him for about the next month and a half directly. I just went about doing my job sort of thing. And then when I had something to show him, when I handed in my first month's end report and it gave us a point of reference to talk and work from, he was really impressed. So we went from that point on.
Because much of the opposition to the SBPP had to do with those elements of the job that overlapped with teaching and counselling responsibilities, PWs negotiated boundaries and developed protocols for the job, and worked hard to ensure that they did not overstep their bounds. In some instances, this involved not doing some things without consulting with counsellors or it might mean establishing a referral protocol. In one instance, the PW ensured that he was viewed as an outside resource so students did not have direct access to him without going through the counsellor for a referral. In negotiating boundaries, PWs often had to make tradeoffs. Some PWs were satisfied with these tradeoffs and others were not. Those who were not satisfied with the tradeoffs generally felt the counselling aspects of the job were very important for the PW to maintain.

Perhaps one of the most natural strategies for overcoming opposition is developing relationships or capitalizing on already existing relationships. It became very difficult for school members to maintain opposition and hostility when a personal relationship was formed. One PW, in his own analysis of the strategies PWs use to gain entry in the schools, observed:

Imagine a prevention worker in a hostile school. Imagine going to work every day in that climate. Yuck! Most human beings, those who wouldn't simply quit that is, would immediately begin to seek informal associations or alliances within the school. The human need for belonging and acceptance dictates this (John, PW).

Developing relationships was particularly important because the teachers’ and counsellors’ unions, which were grieving the PW positions, encouraged their members not to communicate with, talk to, or work with the PW when there was a grievance in progress. Union directives apparently recognize that it is difficult for people to maintain their opposition when a personal relationship is established. Julia, a PW, describes the importance of personal relationships in keeping union opposition at bay:

It was worked out with the union when I initially came on so that there wouldn't be those type of issues. I keep in real close touch with the President of the Union about what is happening and I believe that developing a personal, friendly relationship with people will help keep those contractual issues at bay...When issues come up in other districts, our president always lets me know that that is happening, that he's been informed of that and that something may happen in our district and so he and I work out together how we're going to handle it.
Because ADS and the community agency had not always done the necessary groundwork to clarify the program and the expectations for the PW in relation to teaching and counselling responsibilities, there was considerable misunderstanding about what the PW role entailed. Clarifying misconceptions about the role was an effective strategy in many cases. Once people were aware of the nature of the SBPP, its mandate, goals, and strategies, they tended to be less resistant to the program, and if not actively supportive, at least were willing to allow the PW to proceed. Christine, a PW, described it this way:

And he wanted all this information from me and stuff and I said, I asked him, I said, "I would feel more comfortable going to one of your meetings and explaining to people what my role is" and things like that than having it go through the head...it was okay, and I did that and it was okay.

The PWs did not have to clarify misconceptions entirely on their own. At the same time that PWs were working in schools to communicate the nature of the role to the school community, Alcohol and Drug Services was actively working with the provincial teachers’ and counsellors’ unions to resolve the grievances that had been launched against many of the PW positions across the province. ADS courted the unions’ assistance and invited their representatives to sit on the provincial SBPP advisory committee and to participate in panel presentations at later PW training conferences. The union opposition diminished considerably by the third year of the program. The damage, however, had been done.

In some situations, the PW had to get some assistance to deal with the opposition. Pulling rank was the “court of last resort,” a strategy that most PWs preferred not to use because it might backfire on them and result in the program being eliminated. When they believed they had no alternative, however, it became necessary to go to a supervisor for help. This strategy had varying degrees of effectiveness, depending on the nature of the opposition and the nature of the supervisor’s response. It was often difficult, however, for the PW to use this strategy because neither the community agency nor ADS had much clout in the education system, short of pulling the program from the school. When there was significant opposition in the school to the program, the PW and ADS may have had more to lose than the school if the program was cancelled, as Valerie suggests in the following quotation:
I am being harassed and intimidated by the head counsellor in the school. He has done the same thing, verbally intimidated and insulted a parent at a PAC meeting [Parent Advisory Council] when she got up to say that there were no services or supports available for her child with a substance use problem. And I know of at least four instances where the same thing has happened. I reported this to my school supervisor [the principal] who has done nothing. The same with my agency supervisor who is worried about jeopardizing his position in the community. And the regional manager is more concerned about the position of ADP and jeopardizing the overall program. So I have started to put together a complaint against him to Human Resources, but I feel like I cannot go forward alone.

Pulling the program became a veiled threat used by agencies in negotiations with schools over office space and school support for the PW. For the most part, however, pulling rank meant going to the supervisor for assistance with something that the PW felt she or he really needed and could not get in the school, such as attending a continuing education program or securing office space. In one situation, the lack of support for prevention and for the PW resulted in the agency deciding to pull the program and move it to another school. Thus, pulling rank in this situation had an impact. In another instance, the agency supervisor was able to help a PW address some of the opposition experienced in the school, particularly because the agency had a longstanding relationship with the school. Having competed with other schools to get the SBPP, this particular school did not want to lose it. The PW also had strong support from parents, public health, and other community agencies. If the PW was pulled from the school, there would likely be opposition from the community and this school was particularly sensitive about its public image. In the following quotation, Tracy described the lack of support for prevention in the school, how she went about pulling rank, and the outcome:

Things got really bad last spring when it seemed that the administration was pulling away from supporting prevention. They weren’t supporting the activities, or we were never getting to prevention on the agenda. I had a really strong alliance with the parents’ association and the parents were asking me to address the climate and the tone in the school and to be proactive. In order for me to do that, I had to consult with Student Services, but they weren’t allowing me to consult. So I’d make meetings. I’d schedule meetings. I would ask for meetings. I would ask for some time and if they should say yes, then they cancelled or didn’t show up. Or when I went to show up for a meeting time they said, “Not now” and shut the door in my face. So, week after week, I’m feeling frustrated and I’m feeling like [the school] doesn’t deserve to have a prevention program when other schools in the community would probably use my time more effectively. And I was ready to leave. So I consulted [agency supervisor] and we were trying to make some plans how to address this problem. So we decided we would have a meeting. She [agency supervisor] would come in and we would address some of the barriers I was perceiving. And it was interesting, because the outcome
was everything I have been asking for, for three or four months and it was suggested by administration that we meet every week.

In this case, both the PW and the agency were prepared to pull the program if the administration was not more supportive. Pulling rank in this situation was effective.

The observation that the majority of PWs were able to overcome initial opposition to the program, at least to a degree sufficient to enable some level of action in the school, suggests that these strategies for overcoming opposition were effective. For a few PWs, however, opposition continued over a long period of time and they would find themselves slapped with a grievance for doing what seemed to be appropriate things. Other PWs found there was opposition to specific strategies or actions they wanted to take in the school. For at least two PWs, however, this intense opposition wore them down and although neither of them wanted to "give in," they finally overcame the opposition by quitting their jobs.

Clarifying Expectations

Inadequate ADS and agency groundwork also contributed to a situation in which there was a lack of clarity about the program expectations. To compound the lack of clarity, there was also a discrepancy between what ADS expected, as laid out in the contract, and what other stakeholders expected. Furthermore, the multiple expectations among the various parties were often conflicting and mutually exclusive, including discrepancies between levels within ADS. Thus, a second process within establishing program legitimacy is clarifying expectations.

In those few situations in which there had been a lot of preparatory groundwork done by the ADS area manager, the agency, and school district, there tended to be fewer discrepancies, and the expectations were less likely to be conflicting. Although there was still some lack of clarity about what was expected of the program in these situations, the PW and the school administration were a lot more tolerant of the ambiguity. Administrators were also willing to trust both the PW and the process, as Susan described:

And [the vice principal] was really good with that because he was really clear on ... just get comfortable, and have lunch with the teachers and that kind of stuff, know what our program is about, and find out what we already have in terms of family life, and that kind of stuff.

In this case, the PW felt comfortable taking her time figuring out what was going on in the school.
**Lack of clarity.** In general, however, the *lack of clarity* about the program expectations was pervasive. In almost all of the situations where a PW position had been established, there was uncertainty about what the program was about by everyone involved, including the PW, those in the agency, the school, and sometimes in the regional ADS office. As the following quotations demonstrate, the lack of clarity was widespread:

I think what I was told was that I would be working with staff and students in creating some awareness and doing some intervention. And it was pretty sketchy. I'm not sure that they [the school district] actually knew that much about it. I had no job description. And I came in here and had absolutely no job description (Kathleen, PW).

They were very, very, very unclear because nobody really knew. So, the first three weeks in school was,... I didn't know what I was supposed to do (Susan, PW).

**Discrepancy.** Not only were there unclear program expectations, but the expectations were often *discrepant* and conflicting. For example, one PW was surprised to learn that there was an expectation to be doing community development when he had been led to believe the job involved counselling and classroom presentations. Another PW found that what the agency had set up for her to be doing was completely counter to what ADS required. In fact, she was not even going to be working in a school.

Each organization involved in the SBPP had their own set of expectations. ADS (Central Office) expected that PWs would: (a) use the SBPM to guide all of their work within the school, (b) maintain a balance in their work among the categories of primary prevention (35%), secondary prevention (sometimes referred to as early intervention) (20%) and community development (45%), and (c) form and use a steering committee to guide their work in the school and to assist them in working through the SBPM. The expectation that the model was a requirement of the job was clear to many of the PWs, as the following quotation by Julia demonstrates:

I guess my understanding is that we're supposed to use it [the model] - that it is part of your contract kind of thing. You are getting the money and you are in the position and this is an expectation of the position.

There were, however, some discrepancies between the Central Office expectations to use the model and the expectations of some area managers. For example, some PWs were told by, or got the impression
from, their area managers that the model was not a strict requirement and that as long as they were generally following some community development model they would be fine, as Paul’s comments demonstrate:

Well, my belief inside my head, is that no - its [the model] not a job requirement and no, it won't be any big deal if this model isn't actually implemented...So no, I don't feel that there are a lot of requirements [to use the model]. In fact, I believe that I got a hand out at our last regional meeting that was another community development framework, or another health promotion framework... So the message there I guess is that it would seem to me that there is some implications that it is no longer necessary to be doing the model per se, just as long as you are using some community development model.

Some area managers were clearly committed to the model and to ensuring that the PWs in their regions were using it. Others, however, did not have that same commitment and were willing to “let it go” if the use of the model was not supported by the schools. The result of this discrepancy was that there was not a uniform set of expectations across the province within ADS and this lack of clarity made it difficult for PWs to know what they should be doing and what they should be telling the schools about the job expectations. There were several reasons for this lack of clarity and discrepancy in program expectations. First, in many situations there was a lack of groundwork by ADS in preparation for SBPP adoption. This problem was discussed earlier in relation to program opposition. Second, the expectations of ADS Central Office shifted over time. Third, the multilevel nature of the SBPP organizational framework created communication problems. And finally, there were different understandings about prevention at various levels in the system.

Shifting ADS expectations. In many ways, the expectations of ADS were a moving target. Although ADS had outlined their expectations in the SBPP contract, these expectations changed over the course of the project, in part because of feedback from the field, either directly from PWs or through the IHPR process evaluation reports. The original Schedule A of the contract was fairly open-ended and thus subject to differing interpretations, particularly in relation to the community development part of the job. Furthermore, Schedule A was changed at least twice after the original and the SBPM was revised twice from the original Precede-Proceed model. This made it difficult for the PWs to know, at any given point in time,
what the current expectations were, particularly because barriers to communication precluded mutual understanding of the expectations among the multiple levels of the system.

**Communication Problems.** Thus, communication problems also contributed to the lack of clarity and discrepancy in the expectations. Several PWs have described the difficulties they had in getting information through the system because of information bottlenecks between organizations within a system or between systems. The IHPR evaluation team also experienced the negative consequences of these bottlenecks in their data collection efforts. A prevention worker described her frustration with the communication problems in the system:

> So what we've had to do now in regards to ironing stuff out is, of course, regional [ADS] sends information to the board office, and that's where it sits. And it never comes down to the school level. So that sort of once again is a lack of communication and a lack of understanding things. So that tends to make a little bit of frustration stuff (Marlene, PW).

Communication problems emerged, in part, because the SBPP was initiated rather quickly after funding was allocated, and there was little planning time before the request for proposals was sent out. The ADS system is vast and decentralized with a large proportion of services being provided through contracted agencies. The education system is similarly decentralized, perhaps even more so than ADS. Communicating the complexities of this program to people at all levels of the ADS and education systems in such a short time was not possible. The lack of clarity within ADS itself, as well as among the funded agencies, schools, and school districts is therefore not surprising.

**Understanding of prevention.** There were different understandings of prevention in all levels of the ADS and school systems which contributed to the lack of clarity and to the discrepancy in expectations. Within the ADS system, the recent change in ADS prevention policy was an important factor. The initiation of the SBPP came about as a result of a shift in emphasis from treatment to prevention within ADP. Although this shift had come about through the hard work of many of the ADS staff at both the central and regional levels, the emphasis on prevention was resisted by some. For many people working within the system, their primary *raison d'être* was to provide addictions counselling and treatment services. Thus, for some ADS staff, there was not a strong philosophical commitment to or a real understanding of prevention.
As a result, mixed messages were transmitted to agencies and PWs by people at various levels within ADS, contributing to much confusion about the program and what PWs should be doing in the schools.

Many of the middle and senior ADS managers, at least at the regional level, had come up through the ranks of direct service in alcohol and drug addictions counselling. Despite the organizational shift to prevention, some of these people continued to manage their prevention programs in much the same way they managed the treatment programs they supervised. This did not go unnoticed by the PWs, as John’s comments indicate:

At our last regional meeting we were asked to provide report information to our area manager on a bimonthly basis and he’s only asking for a few pieces of information but one of them is, “How many clients are you seeing? How many assessments are you doing? Where are you referring them to?” On a very small report format, the secondary intervention part took the main focus, and I couldn’t help but think that I was getting a mixed message there, because I have been told, you know, this isn’t a treatment program, this is a prevention program. But at the same time, then why are you asking me for treatment stats?

Agency supervisors were in a similar position as the area managers mentioned above. For years, the majority of the services provided by most Alcohol and Drug-funded community agencies were treatment oriented. It was not until 2 years after the SBPP began that ADS changed their prevention policy to specify that, in order to receive continued funding, all ADS-funded agencies must spend 25% of their budget on prevention. Prior to that time, the SBPP might have been the only prevention service offered by some agencies. Several PWs found that their agencies tended to interpret the prevention focus of the SBPP contract in terms with which they were familiar, as the following quotation by Melinda shows:

And I guess what they [the agency] see as what I'm supposed to be doing up here is different than what I am supposed to be doing - the question is, “How many students are you seeing each day?” Those types of questions, like they feel that maybe I'm still basically a counsellor but that's not the job here. So it's taken a while to make it clear to them, but I'm still not sure that they understand.

A survey of SBPP Agency supervisors (School-Based Prevention Project Evaluation Team, 1994h), conducted by the IHPR evaluation team, identified several agency concerns that suggested that some agencies

35 There was a regional monitoring system in place for ADS funded programs at the inception of the SBPP but ADS quickly realized this system did not fit with the nature of the SBPP and thus a uniform reporting and monitoring system that suited the unique features of the SBPP was not in place until the last year of the pilot phase.
did not fully support the goals and mandate of the SBPP. Some agency supervisors stated that it was hard to justify the emphasis on prevention when there were so many young people with problems that need help. They also identified that conflicting expectations among the various parties were a problem for the PW and for the SBPP agency supervisors.

Many schools did not think in terms of prevention and some schools saw the SBPP as a way of solving their “drug problem.” These schools did not have a clear understanding of what prevention meant and expected that the PW would come into the school and “get rid of the drug problem.” This issue is discussed in more detail in the section under Creating a role, because it was an important factor in the evolution of the PW role in the school.

Confronted with these multiple, discrepant, and often conflicting expectations, PWs had to reconcile them in terms of what they were going to do in the school. To establish the legitimacy of the program in the school, the PW needed to attend to the expectations of the school. If, however, the school’s expectations were out of line with the contract, which reflected the expectations of the funder, they were caught in a dilemma.

**Strategies.** Some of the strategies used by PWs to overcome opposition also helped them to manage expectations. In particular, *negotiating boundaries and protocols* and *clarifying misconceptions* were important. Two additional strategies used by PWs to clarify these discrepant and conflicting expectations were *feeling my way* and *seeking guidance*. For many PWs, however, clarity was not immediately forthcoming and so they coped with the uncertainty by *tolerating ambiguity*.

Given the multiple and conflicting expectations with the consequent uncertainty and frustration experienced by the majority of PWs, it was surprising to find that there appeared to be no real attempt on the part of prevention workers to seek a consensus on the expectations. This may have been because the mechanism did not exist to do this. Some PWs hoped that this consensus might be achieved at the SBPP training as Christine shared in the quotation below:

*I guess my expectation was, wow, I'm going to find out what I'm really supposed to be doing because there was so many questions and no concrete answers. I think that was my*
expectation. To kind of draw everybody together to figure out what we're all working towards. You know, what's the goal here and I think that's what I expected to get out of it.

This did not happen because the training was not concerned with coming to a consensus among the stakeholders on the program expectations. Rather, the training reflected the ADS agenda to communicate their expectations to the PWs, agency, and school personnel. In not seeking to arrive at a consensus about the expectations, the ambiguity of the situation presented PWs with some limited power to create their own role, once they had established personal credibility in the school. If the expectations were clear among all parties, the scope for defining a role for the PW would have been limited. Given the otherwise powerless position of many PWs at this stage of implementation, this was an appealing opportunity for some of them. Some PWs commented that their ability to define a role and "create it from scratch" was one of the most satisfying aspects of the job.

Establishing Personal Credibility

It took me, I would say, 5 months before I was able to create an environment that I could work in. Just getting people to know who I was and having to do things to build up some credibility (Karen, PW).

Establishing personal credibility is about the PW achieving the level of trust and acceptance in the school necessary to begin trying to accomplish the goals of the SBPP. PWs who were able to enter the school with the program's legitimacy already established, or who were able to establish that legitimacy fairly quickly, were also able to establish personal credibility more quickly and easily than those who had to struggle to overcome opposition or to manage conflicting expectations. These PWs were able to focus more on learning the ropes than on establishing credibility. If, however, the PW had struggled to establish program legitimacy, there was also a good chance that she or he would also have to work harder to establish personal credibility.

The PW had to establish credibility on three levels in the school: with the administration, with teachers and counsellors, and with the students. Establishing credibility with parents was an added benefit to the PW, but was not critical to gaining entry. The challenge for PWs was to build simultaneously their credibility with all three groups because the things that make one credible to one group are not always what
makes one credible to the others. Some PWs were particularly effective at building credibility with all parties whereas others found they had more credibility with one group or the other for various reasons.

There were some parameters within which credibility could be established. For a PW to be seen as credible, teachers and administrators need to have trust that the PW is competent and knows what he or she is talking about, particularly in the area of alcohol and drug issues and working with youth. To be credible, the PW must not invade teachers' privacy or overstep the boundaries that have been negotiated. The PW cannot make the school, the teachers or the administration look bad nor could they be seen to be doing anything that would likely harm students or staff. PWs were credible when they fit into the school, did not violate sacred norms and ways of doing things, and understood the unwritten rules of conduct. A PW would be accepted when she or he was perceived as offering something to the school that it could not do for itself. When the PW wanted to do something in the school it could not interfere with the faculty and their own work or place too many demands on them, at least in the beginning. Credibility was enhanced when teachers and counsellors saw that the PW could help them with their own work.

A PW was also credible to the adults in the school when he or she was trusted, respected, and had credibility with the youth. But if the PW only had credibility with students and did not simultaneously do what was necessary to establish credibility with the administration and teachers, the PW would have difficulty achieving peerage. Although credibility with youth was an important factor in establishing credibility with teachers and administration, the PW could not be seen as "selling out" the faculty in favour of the students. Advocacy for students could only go so far in establishing personal credibility.

Students saw the PW as credible when she or he was open, honest, and treated the information given to them with respect and confidentiality. The PW created a safe haven for students. A credible PW accepted young people for whom they were, on their own terms. The PW was not judgmental, and treated students fairly and as equals, not as children. The credible PW followed through on their commitments and did not "nag" them as their parents or a teacher would do. A credible PW was seen as different than the teachers and administration even though the PW may get along very well with them. Credibility with the adults in the
school did not necessarily diminish the PW in the eyes of the youth as long as the PW did not violate confidentiality or “rat them out” to the faculty.

In order to establish credibility, the PW is out there in the school being known, being seen, being accessible, and being different. To demonstrate competence and ability the PW began by doing things, starting with doing what we know then moving onto doing for others and doing everything that came along as an opportunity. To prove oneself, the PW must do well at those first things she or he takes on in the school. Finally, to build trust PWs must keep secrets that are entrusted to them and keep safe the faculty, in the sense that the PW does not invade their privacy or force them to confront issues they prefer not to address. Administrators and teachers must be kept informed on what the PW is doing and those things must be within the boundaries that were either explicitly negotiated or implicitly understood (or presumed to be understood). Thus, the PW is keeping the bargain.

Being Seen

To be able to initiate any prevention activity with young people in the school, the PW must become known by students and by teachers. To become known, however, PWs must put themselves in places where they can be seen so that people will learn who they are and that they are approachable and accessible, thus encouraging people to get to know them. Being seen, therefore, is an important first step to being known.

Rita’s strategy for making herself visible to students was typical:

I spent the first 4 or 5 months that I was here, I spent out in the hallways, sitting out in the foyer where the kids hang out. Kids got to know me, I got to know what they wanted, this type of thing. And I usually do that just about every September. I try to spend as much time as I can in the foyer so students get to know who I am and what I do.

To be visible to the students PWs spent a lot of time just “hanging out” in places where the students were, always looking for opportunities to be seen and to engage in conversation and get to know the students. They arranged to be introduced in assemblies and sometimes went around to classrooms to introduce themselves.
Being Known

The PW must find opportunities to talk to and engage with students and teachers so that they are able to get to know each other. One way that PWs got to know and became known by students was by participating in students’ activities or by initiating activities that piqued the students’ interest and got them involved. The nature of the activity was not important. The intent at this stage was not necessarily to engage in effective alcohol and drug prevention strategies, but just to become known and accepted in the school. Thus, the PW becomes known by doing such things as those described by Shawn below:

So that gives me more profile. And that meant me participating in all kinds of activities. Whether it was the school dance, or just being out there during the smoke pit. Plan activities, not only to create awareness of drug and alcohol issues but to get to know them a little better.

Being known to the students in the school could be a challenge for the PW, particularly in large schools where teachers and students are sequestered in classrooms a good part of the day. PWs are more visible in smaller schools and therefore more available to students and teachers. The strategies of “hanging out” with students or mingling with them can present a rather unusual situation in schools in which there are clear divisions between adults and youth in out-of-classroom time. For example, in one high school, one of the most popular teachers with the youth was one who was on the margins of teacher social networks. He did not spend time in the staff room but was often seen out in the smoking pit with students and he encouraged students to seek him out in his work area. It seems that the willingness to spend time with young people and go to them on their own “turf” can break down a lot of barriers. The teacher who does this, however, can be isolated from his or her peers because this violates the social norms that dictate the nature of affiliations in schools.

The situation was somewhat different for PWs. Spending time with students enhanced the PWs' credibility with youth which, in turn, enhanced credibility with most teachers as Caroline discovered:

Because I found the teachers weren’t really willing to share things yet. So once the kids got to know me and started talking about me, then the teachers came after that.
It was easier for the PW to spend time with youth on their own turf than it was for a teacher, because there was an expectation that the PW would form connections with the youth. In fact, some schools strategically situated the PW in the school to encourage the formation of those types of relationships. This was the situation in George’s school, as he describes below:

When they hired me, they kind of said, “We have spent some energy on you not being really closely attached to the administration.” My office isn’t near here; I’m at the other end of the school and we’ve spent some energy not being real attached to what is going on out in the front office.

At the same time as the PW establishes connections with young people, she or he must also seek associations with the adults in the school in order to develop and maintain credibility and trust. If the PW did not cultivate relationships with the staff, there was a danger that the PW would become isolated from the teachers and counsellors and would be unable to generate much enthusiasm or participation from them, as Carson discovered:

Being down at the other end of the school, I don’t deal a lot with our school counsellors, which is a weakness, as far as support or involvement, that has been pretty limited by teachers. And I think that’s one thing that needs to change. That’s one thing that -- my real focus was to get involved on the kid level, and I haven’t spent a lot of time doing PR work with the teachers. In regards to the counsellors, I need to be more involved with them.

Carson’s experience highlights the importance of establishing credibility with the staff as well as the students. Without these types of relationships, the PW will never achieve peerage.

**Being Accessible**

**Being accessible** to staff and students helped to break down barriers and to build credibility for the PW. An important aspect of accessibility was the location of the PW in the school. Those PWs, such as Carson, who were located away from the main office or the counselling area were very accessible to students, on the one hand, and as a result, students would spend a lot of time in the area with these PWs as the following quotation by Sandra demonstrates:

I guess I’ve seen so many kids, and my office has become this little safe harbor for a lot of kids. And has increased over the year, too. And not just the drug and alcohol using kids come in here. I have kids from, like the whole gamut from A to Z. They come wandering through and hi, how are you, and all that kind of thing...Like my office is downstairs in what we call the drug corridor, and I tend to stay here quite a lot. And on break I'll be here so the
kids have access to this office, and at lunchtime I'll be here. So for a while I wasn't upstairs participating in the staff coffee break or the lunchtime, just because the kids are all in here.

On the other hand, having an office away from the mainstream of teacher activity meant that the PW was not very accessible to teachers and administration. This could create the problem identified by Carson above where the focus on building relationships with students meant that he did not spend as much time developing relationships with teachers or counsellors. The result was limited participation and interest in the program by teachers and counsellors. One PW noticed a dramatic difference in her connections with teachers when her office was moved from a back corridor into the counselling area:

Well, when I first came, the first year I was here, my office was way down, I'll show you where it was. And it was kind of cool because it was really private. This is not private. It's not private. But you work with--, I think it's more of an advantage to be in this area than it is to be down in our little attic area...It sends a different kind of message -- if you're sort of part of the mainstream as opposed to way out. I mean nobody ever came to see me, teachers, down there, no way.

In some schools, the PW did not have stable office space and this made it difficult for students to access the PW. The location of the office also said something to students about the status and position of the PW in the school. Some PWs did not have private office space; some PWs even had their offices located in such locations as a book storage closet.

In some situations, PW accessibility was hampered by the protocols and boundaries that were established to overcome opposition to the program. Because the PW had established clear boundaries around counselling and secondary prevention, students did not always have a reason to visit the PW. On the other hand, for part-time PWs, clear boundaries restricting their accessibility makes it easier for them to manage requests for their services, given that they were only available in the school 2 days a week. A SBPP in which the PW works only 2 days a week, of necessity, looks very different than one in which the PW works full time, primarily because of the accessibility of the PW.

This issue of PW accessibility, however, raises a dilemma. On the one hand, the PW must be seen as accessible to be credible and trusted. On the other hand, the more accessible the PW is, the more she or he is inundated with requests for one-on-one counselling services. By increasing their accessibility, the PW
increases the demand for those types of activities that are supposed to represent only 25% of their practice. Accessibility, therefore, makes it much more difficult for them to balance their contractual obligations. For some PWs, this was a real dilemma with which they struggled. This is discussed in more detail in Creating a role.

There is more to being accessible, however, than just being in a location that people can find. It also means being approachable and creating an atmosphere or an environment that invites people to access you and your resources. The importance of PW approachability was also important for teachers as this school counsellor describes:

I think it's because of the kind of person she is too. She hasn't... there's no pretentiousness about her. There isn't this - I know all there is to know about drugs and alcohol and I'm here to tell you - she's never been like that so I don't think that they would ever pick up that they feel like they don't know anything. I think just the opposite that they've always felt like if they needed to have her in the classroom they could easily ask her.

Thus, the PWs established credibility by being accessible and approachable, not only to students but to staff.

Being Different

Finally, being different was a very important aspect of developing credibility, particularly with the young people in the school, but also with faculty and staff. The PW was seen as different than a teacher or a counsellor and it was this differentness that was noticed by everyone and that attracted students to the PW. It is this position of being in the school but not of the school that appears to equalize the power differential between the PW and the students. The PW is not in a position of power over the students. This creates a space in which young people can connect in meaningful ways to a significant adult in their lives, who is not a parent. Teachers and counsellors were also sensitive to the power issue and its importance in the development of the relationship between the PW and the student. A counsellor describes the PW's differentness as follows:

So it didn't take long, I'd say within a month it was pretty obvious that there was someone within the school doing something different than what we'd ever had before... So the kids knew that she was not a teacher, she's not judging us or grading us or attached to anything else, she's just here. And she really became a safe person to talk to, because she's not connected, she's not going to go to administration. We're still teachers and we're connected to the system and she's not connected to the system and the kids figured that out instantly. So she was less of a threat.
Teachers and counsellors therefore came to recognize the value of the PWs differentness, as did the students. Sarah, a student, describes the importance of this differentness to her in the following quotation:

You can like talk to her about things you can't talk to teachers or even counsellors about. She is just different than the teachers. You can trust her and tell her things that you know she won't tell anyone else. Sometimes we just drop in to chat and she always makes us feel at home. Sometimes we can even come in when she's not here and sit in the couch till she gets back.

There were also some other characteristics of the PW that helped him or her establish trusting relationships with students. Being approachable and open, treating students as a person not a child, and being accepting of who they are sets up a relationship between the PW and student that is unusual in the school context. The PWs themselves were aware that the students saw them as a safe and nonthreatening person who did not have control over their lives and that this made them more approachable than teachers or counsellors might be. This awareness is reflected in the quotation by Carson below:

I can be seen as the good guy in this whole thing because the other counsellors have to do course planning and they have got to say no and got to do this and do that, whereas I don't have any of those responsibilities. When a kid comes here it's like oh, Carson doesn't say no, he doesn't tell me I can't take Math 11, he's just there to help me. So I'm different to them.

Another aspect of this differentness is that the relationship became reciprocal. Because the PW was "different" and not in a position of power, the students could reciprocate and go out on a limb for the PWs in much the same way they perceived the PW doing for them, as Caroline shared:

The kids-- they stick their neck out for me in a lot of ways. Because I'm attached to the school but I'm not attached to the school. It's a nice position to be in.

In summary, to become credible to students and staff, PWs had to make themselves visible and become known. They needed to cultivate relationships with both students and teachers in the school. To do this they needed to be accessible to everyone. This was facilitated by a strategic location in the school, although accessibility for students often meant the PW was less accessible to teachers. The PW was seen by both teachers and students as different and this gave the PW access to the students and enhanced their credibility with both adults and young people in the school.
Doing What We Know

"Doing" was a critical strategy for building credibility and trust because it is through doing that the PW can demonstrate that she or he is competent and has expertise. Several PWs talked about one of the important norms that underlies the organization of schools, and that is teacher as expert. If one is not an educator by training, it is very difficult to get credibility in the school. Demonstrating expertise in an area in which teachers do not have expertise but which makes their job easier, helps to overcome this powerful norm.

PWs began by doing what we know before moving onto what it is they were supposed to be doing in terms of the SBPP contract. As Karen demonstrates in the quotation below, this could be a very effective strategy:

When I went into the job I thought if people are really going to buy into this, they want to see immediate impact. And that's what my experience was-- in early intervention. So I went in and put a referral process together for both schools. Wrote their P & P [policies and procedures], put a whole system together and it's now working in both schools. Then people were saying they could see the results. This is helping. We've got a counsellor coming into the school, I mean, it's working really well. And I think that's when they really bought into me. And now we're moving onto prevention.

As part of doing what we know, PWs also made themselves indispensable to teachers and administrators by helping out in crisis situations, often in relation to students who were using drugs. Many PWs had backgrounds in addictions counselling and crisis intervention so they could offer their expertise in managing drug related crises that came up from time to time in the school. Caroline describes how this helped in her school:

Support from administration is just starting to pick up now because of some of the serious drug issues that have been happening in the school and they've had to rely on me. So I've sort of proven myself in that regard.

Thus, by doing things in which the PW had specific expertise, credibility was developed and the PWs proved themselves as providing a valuable service.
Doing For

Many of the PWs find themselves *doing for* teachers and others in the school because they knew that if they did not do it themselves, it would not get done. *Doing for* can be a general style of working for some PWs as the following quotation by Janet demonstrates:

"So I set up the whole presentation series for the month of April... Yeah, and actually organizing it for them. Either they don't have the time or they're too busy. And they're more willing to go along with stuff if that's sort of taken care of for them."

For other PWs, some of the things they *do for* others are viewed as preliminary activities done to gain trust and credibility in the hope that those they are doing it for will be able to do it for themselves in the future. Kathleen summarized this approach:

"And so the first part of it was just going in there and kind of doing it myself. But now giving them the tools to be able to do it themselves. And to see where that goes."

Even in schools where there was teacher support for the program and the PW, that support was often contingent on the PW’s actions not imposing a burden on them and so there is strong pressure in schools for the PW to be *doing for*, as the following quotation by a teacher demonstrated:

"There's only so much that we can do. So having that outside person doing some of those things I think is important. And organizing stuff... You need that coordinated effort outside of the classroom. As a classroom teacher you've got enough on your plate to deal with. Adding one more thing once again you'll get the grumbling and things just won't get done."

Doing Everything

Early in the gaining entry stage, many PWs found themselves *doing everything*, either because they were trying hard to establish themselves in the school or because there was no one else to do it. Susan’s quotation below was typical of this experience:

"I was, yeah, even after the second workshop, I kind of got lost in that I thought everything was the greatest idea. And so I was so busy doing so many things, I had my fingers in so many different areas because the need was so great and because the teachers were so into having learning. Um, so I was involved in so many things, so I had a hard time saying no because everything was so good."

By doing whatever people wanted them to do, PWs were building relationships and getting their foot in the door. They were also building up good will that they might be able to trade on sometime in the future.
In part, doing everything appears to occur as a result of a norm in schools, that influences much of the action and the way of doing things. That norm has been called “immediacy” by educational researchers (e.g., Hargreaves, 1989). PWs, teachers and administrators all talked about how things happen quickly in schools. Planning is done on-the-spot; crises occur and are dealt with; people live in the moment and react to what comes at them as the following quotation by a school principal suggests:

We don’t have time, often, to think ahead. It has to happen now. And she [the PW] adjusted quickly to that way of doing things. You need to be responsive here to the crises that come up on a daily basis that need to be taken care of now. You can’t sit around navel gazing.

Many PWs also commented on the reactive nature of schools. Schools demand that something be done “now.” The PWs were expected to produce action immediately, whether they were prepared to go ahead or not. If PWs responded as expected, their credibility was enhanced, as Karen described:

Yeah. People want to see immediate results. They wanted to see immediate impact in my position, and they saw it. Therefore, they’re willing to buy more into the position.

It is this norm of immediacy that encourages a responsiveness by the PW to organizational demands and, in the beginning at least, PWs found themselves doing everything that was asked of them even if the request did not seem reasonable at the time or the PW knew that the activity was not effective in terms of prevention. In the quotations below, Marlene describes the need to respond to seemingly unreasonable requests, while George discusses the benefits of being responsive to demands for activities that might not be effective in terms of prevention:

I might get some direction from the administration and its like, “Please organize six sessions with five groups of grade eights.” Well, I need that stuff now...Because I never, it’s not like they give you notice to do that, okay. And, I don’t think no is an option (Marlene, PW).

Foremost was my advocating for programming that was highly responsive to organizational demand, regardless of the efficacy of those styles of intervention. For example, I suggested that “Just Say No” styles of educational intervention may be appropriate if the aim was to advance one’s position in the organization (i.e., if that’s what the school believed you should do) even though we know that, as prevention strategies per se, these interventions are at best ineffectual. Note the shift in program objective here. It is no longer about drug prevention (for the time being at least), rather it is about creating that “operational domain” that I mentioned earlier (George, PW).
In being responsive to organizational demand, the PW builds trust and credibility. *Doing everything* provides them with an opportunity to demonstrate their abilities and competence. It demonstrates their willingness to be responsive, accessible, and available. It gives credence to the program’s claim, and the dictate of the model, that they are “starting where the community is at.” Of course, this intensity cannot be continued over time, and as PWs seek to establish and consolidate a role, their work becomes more focussed and they do not respond to all demands. They begin to put some boundaries and conditions on their response to such demands. This is discussed further in creating a role.

**Doing Well**

The final aspect of doing is *doing well*. Whatever the PW does, in order to establish their personal credibility, she or he needs to do it well. In a sense, all eyes are on the PW and the first thing a PW takes on in the school needs to be done well because it is being scrutinized, as Caroline points out:

> I’ve heard so many times if you’re going to do something, make sure the first thing that you do, you do very well... Well, you’re setting so many things up with your first presentation or being in your first classroom because they go, hey, that new person so and so is a real dip, or super, or whatever.

Overall, the "*doing*" strategies, like "*being*" help the PW to establish personal credibility. As the PWs Entered the Field, they were confronted with a lack of clarity and a great deal of uncertainty about what they should be doing. In the face of this uncertainty, what better way to begin than by starting to do what you already know best, particularly if it fits with what the school might be wanting you to do?Beyond *doing what we know*, *doing things for* people that they might not do for themselves, or doing whatever they ask tended to generate trust and good will. On top of that, if what the PWs did initially was done very well, then they were on their way to being seen as a credible person in the school.

In most schools, the PW functions quite independently, as do teachers and other professionals working in this environment. PWs may or may not have a direct supervisor in the school and since much of their work is away from the eyes of teachers and administrators, they are quite autonomous. For this independence and autonomy to be developed and accepted in the school, the PW must have the trust of
teachers and administrators. Much of the "doing" discussed above facilitates the development of trust as well as credibility. There are some strategies, however, that are specific to the establishment of trust for the PW by students, staff, and administration.

**Keeping Administrators Informed**

The first of the keeping strategies is *keeping administrators informed*, which has to do with the PW being accountable and responsible, primarily to school administrators. Thus, *keeping administrators informed* was about the PW keeping others informed about what she or his was doing, not about the PW keeping themselves informed. In schools in which there had been opposition to the position in the beginning, being accountable and responsible was particularly important in establishing credibility. Most of the administrators wanted to know what the PWs were up to, some of them because they were interested in how the program was progressing, others because they wanted to ensure that the PW did not do anything that could put them in a difficult situation. They were concerned about their public image, as this administrator's comments suggest:

> I want to know, because when that phone rings I better have the answer and that answer better be - it better be to what we had agreed. Because if you've left me high and dry, then I'm after you.

When asked about the ideal person for the PW job, several administrators identified *keeping them informed* as a characteristic they were looking for in a PW. In other words, they wanted a PW who would keep them informed about what was going on in the school and what the PW was doing. There were some situations, however, in which the administrators did not seem too worried about the PW keeping them informed about what was going on in the school. This occurred in situations where there was environmental turbulence in the school or when the lines of accountability and responsibility were not well defined and the supervision for the PW was not clearly established. In one school, there was a turnover of more than half the teaching staff in a single year, and administrative turnover as well. The level of confusion and turbulence can be quite distressing as the following quotation by Julia suggests:

> How that works is initially with this program it was the vice-principal of the one school who oversaw the whole thing for both the schools. And the counsellor in the one school was the
supervisor. And in the other school I didn't really have supervision from anybody unless I chose to. So I responded and interacted directly with the principal. But that was basically just within the school. For the project as a whole, it was the vice-principal at the other school. Is that nice and confusing?..But now it gets even better because the vice-principal of that school is gone now. He is no longer in the school, he has gone elsewhere, and they have yet to determine who is my supervisor. The counsellor who I had the contact with before has now become the vice-principal at that school, half-time vice-principal and half-time counsellor, and doesn't know what time it is anymore because he is so busy. So his being able to provide me with supervision is not going to be a reality.

In situations like this, it is not surprising that a school administrator would not be concerned about what the PW was doing. The expectation for PWs to keep the administration informed also did not always occur in schools where there was weak administrative support for the SBPP or the PW. In one school, for example, a new principal was brought in on a temporary basis and this person did not have the strong commitment to the SBPP that the former principal did. This new principal had no interest in the PWs activities. Clearly, in many cases, administrators had things other than the SBPP on their minds so were not concerned about the PW keeping them informed about prevention activity in the schools.

For the most part, administrative expectations for the PW to keep them informed diminished as their trust in the PW increased. They needed to see that the PW did not have a hidden agenda. Once the administration was satisfied that the PW could make autonomous decisions with which they agreed, the amount of contact was reduced and the PW was allowed to function quite independently as the following quotation by Kathleen demonstrates:

And then when I had something to show him, when I handed in my first months end report and it gave us a point of reference to talk and work from, he was really impressed. So we went from that point on. And the point it's at today, he doesn't even question anything I'm doing. I just let him know what I'm going to do. And I'll go to check things out with him and stuff, but he's really, as I said, he's my biggest support here.

Thus, if PWs established trust and credibility by keeping school administrators informed about their actions, administrators were more likely to permit greater autonomy and independence and were also more likely to be supportive of the PW.
Keeping Secrets

The second strategy for building trust was *keeping secrets*, which was about maintaining confidentiality and anonymity. This was particularly important from the students' perspective, but also important for teachers and administrators. Counsellors and teachers noted that whatever students shared with the PW, it remained anonymous and this observation enhanced not only the students' trust in the PW, but the teachers' as well. Some teachers even went to the PW for their own personal or family concerns related to alcohol and drug misuse and trusted that their secrets were safe with the PW. For students, however, trust in the PW was absolutely essential for establishing credibility. A student shares her experience of a PW keeping secrets in the following quotation:

> Like, my mom has no idea about how much I was into drugs. Like if she knew she'd just shit. She'd keep me from, like, going out at all. She doesn't know I'm seeing a counsellor or Susan and trying to get my act together and like - I'm not about to tell her. I know Susan and Mrs. [counsellor] won't rat me out. I trust them.

In *keeping secrets*, however, PWs had to strike a delicate balance between maintaining student confidentiality and keeping administrators or staff informed about things that they might need or want to know, as one school administrator pointed out:

> Well, again, it's very, very tricky. Because the person in that role would have access to other kids and particularly in this position where Tracy has built up a lot of trust with students - they are prepared to share information with her. So I think it's a very delicate kind of position for the prevention worker to be in.

There was not always an appreciation for the delicacy of the PW's situation. Sometimes school administrators felt that the PW should be sharing information with them about a particular student that the PW felt ethically bound to keep confidential, as one counsellor observed:

> I don't think the principal was ready for it when he asked her [the PW] about a student during the Student Services Meeting and she said “Sorry, that's confidential.” He was shocked, so they needed to work their way around that one.

The confidentiality issue was a difficult one for many PWs. In fact, because the issue was problematic for so many PWs, ADS developed a policy on confidentiality to provide guidance to PWs in situations where there
might be some question about whether or not the PW should be compelled to share information with school staff.

**Keeping Teachers Safe**

Another type of keeping is *keeping teachers safe*. Some teachers wanted to be safe from having anyone invade their privacy or challenge them about their personal decisions in relation to alcohol and drug use. Earlier, I discussed the opposition to the program that emerged from this fear. Having a PW come into the school to address substance misuse by students raised the possibility in some teachers’ minds that the PW might challenge them on their own alcohol and drug use or otherwise invade their privacy. Teachers who were concerned about such things were unlikely to get involved in anything organized by the PW in the school nor are they likely to invite the PW into their classrooms. To maintain support and to establish credibility, the PW had to reassure staff that she or he would not be focussing on personal issues. Sheila described it this way:

> I think the big thing is the whole thing around addictions you know. Most people address it in a moral, legal way like it's bad. And then there's teachers that smoke and drink, I mean everyone has their issues right? And so they say “Oh no, now they've got the drug lady in here”, and so they are really concerned about how I'm going to approach them about their own use. So, I've just let them know that I'm really looking at addictions on a health promotion level and just I'm not getting into the bad, wrong, legal/illegal... those are issues that we will address, but it's not the focus. So I think that within that they feel safer.

In one situation, a PW was perceived as crossing the line in relation to keeping safe, and there was a reaction from some members of the staff. At that point, however, the PW was already well established in the school. Had she been at an earlier point in the *gaining entry* phase she might have lost some support.

Thus, to establish personal credibility in the school, the PW had to avoid raising issues that might be perceived as invading teachers’ privacy. If the PW was able to establish a level of trust with teachers and school administrators that they were not going to overstep these bounds, then the PW was more likely to achieve peerage eventually.
Keeping the Bargain

This is the final strategy used by the PW to build trust and credibility. In relation to teachers and administrators, *keeping the bargain* is about following the protocols and staying within the boundaries negotiated earlier. To overcome opposition, PWs developed protocols, negotiated boundaries, and made tradeoffs. To be seen as credible and trustworthy, the PW must stay within those boundaries. In other words, the PW must keep the bargain that was explicitly or implicitly established upon the PW’s entry to the school.

The following quotation from a principal illustrates the importance of keeping the bargain:

> I had the feeling that person [the previous PW] wanted to do something that was different to what I had agreed to do or what [agency supervisor] had agreed to do. And that was not in the cards when we started out. For what reason I don't know but there are certain parameters... like for example, if you and I agree on something then that basic agreement has to stand in place... When you are working on something, I like to have it on the table because then I can either agree or disagree and if it's so disagreeable I'll bail out, thank you very much, because I don't need that. But if I don't know what I'm dealing with and I'm going around putting out fires and we don't do the original thing that we had agreed on doing.

It appeared necessary for PWs to *keep the bargain* early in the gaining entry stage or at least until they had achieved peerage. Later on, for many PWs, these boundaries and protocols were relaxed, especially as the PW demonstrated his or her expertise in early intervention and the school increased its demand for such services. There was also an aspect of *keeping the bargain* in relation to students. To establish credibility and develop trust with the students, PWs must not only follow through on their commitments to students, but must also be willing to address issues that students have identified, as Darlene’s comments suggest:

> And all of a sudden that need gets identified, well then you have to -- you've got to move on it...I really believe it's important for kids to know that you are willing to do something, not just what you say, but you're actually going to do something to address a need.

In the situation illustrated in the quotation above, the PW was prepared to act on the needs identified by the students, even if it was not something that was part of the PWs “plan” for that school year. In being responsive to students’ concerns, PWs established their credibility as people who were willing to listen to and take action on issues of importance to students.

In summary, the PW established personal credibility by maintaining a high profile in the school, being accessible to teachers and students, getting to know them on a personal level, doing things that
responded to demands and concerns raised by various members of the school community, and demonstrating expertise in areas deemed important by school members. In addition, the PW did not engage in activities that were controversial or made people feel personally uncomfortable. Being accountable and responsible while maintaining confidentiality helped PWs establish their credibility. At the same time that PWs were busy establishing personal credibility with people in the school, they were also immersing themselves in the host culture and learning the ropes. In fact, the more quickly they learned the ropes, the faster they would achieve peerage.

Learning the Ropes

Learning the ropes was a process that took place simultaneously with the other processes in gaining entry. As PWs were establishing legitimacy and credibility, they were also learning a great deal about the values, norms and "ways of being" in the school community. They were observing, listening, and doing as they became immersed in the school culture. They were learning the language, the rituals, how things were done, who had power and influence, and the climate of the workplace. As one PW suggested, much of the process of learning the ropes is something that happened unconsciously and intuitively. If the PW was to foster change in the school system to accommodate implementation of the SBPP, the PW had to learn two things, the power dynamics in the school and the limits to change. Thus, the two processes within learning the ropes are: understanding the system and finding the limits.

Understanding the System

PWs understood that before they could figure out where they fit in the school they had to learn about the system. Part of learning the ropes was understanding the formal and informal power structures in the school. To Priscilla, it was important to learn who had influence and to align oneself with those people:

One of the smartest things that I did when I came in was, I spent about a month feeling my way around people and personalities, looking at the formal and informal power structure of the school and pretty well had a good idea who I had to work with and I went to her and said I really want to work with you on prevention and I was in from then on.

In doing this, PWs were trying to become accepted and perhaps even to gain some influence for themselves. At the very least, by aligning oneself with those who had power, they could circumvent opposition. PWs
recognized that it would be impossible, in the beginning, to implement anything without the tacit approval of particular people.

Most PWs had not had any experience working in schools and, in fact, had worked in very different settings. Entering the school system, for many of them, was an overwhelming experience that can only be described as culture shock. PWs were often surprised at how things were done in schools because it was so different from their experience in other settings. Karen describes how culture shock created feelings of confusion, isolation and not knowing were to go or what to do:

And it was really strange for me. Always having worked in a medical culture, going into a school culture was really an eye opener. It was totally different. There wasn't the same amount of professionalism that I was used to, and I also found that teachers are really good educators, but they're really poor communicators. This stuff sort of really blew me away. So I felt like a fish out of water. I felt really lost.

Thus, PWs often felt overwhelmed in their first few weeks in the school. There were two things that helped them to make the adjustment as they learned their way around the system: finding a mentor and finding support.

Finding a mentor. PWs who were fortunate enough to find someone in the school who could act in a mentoring role were able to learn the ropes quickly. Sometimes this mentor was the person who functioned as the PW's supervisor or contact person in the school, like an administrator or a counsellor. Sometimes it was a teacher colleague. This helped the PW to avoid doing the "wrong" thing or stepping on people's toes, thus navigating the system. In the following quotation, Susan describes how her school supervisor advised her on the power relations within the school:

I've found that [the vice principal] has been very good, cause he was saying that "Now you really need to be careful of this person because their concern is not the kid, their concern is this, or their concern is doing something to get this position of the hierarchy". And that helped me figure out who I needed to be dealing with and who to avoid.

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36 Culture shock is defined as "a condition of confusion or anxiety affecting a person suddenly exposed to an alien culture or milieu" (Microsoft Encarta, 1996).
This advice helped Susan get to know who she should include in her network of contacts as she started to take action in the school. In the next quotation, Melanie describes how her school supervisor advised her so she could go through the “proper” channels in her planning and avoid stepping on toes when she made a decision:

And also the counsellor who, I don’t know that he supervises me, he’s my support worker or whatever. He’s very helpful and very supportive of anything that I want to do. And very helpful that I take the right steps to do it, that I don’t step on anyone in administration’s toes by making decisions or planning things.

As these quotations demonstrate, a mentor helped to ensure that the PW did the “right” thing and made contact with the “right” people. A mentor was also important in reassuring the PWs that they were on the right track. In situations in which the PW was feeling overwhelmed by all the possibilities in the school, having someone to provide this reassurance was much appreciated, as Susan describes:

And [the vice principal] was really good with that because he was really clear on – “Just get comfortable, and have lunch with the teachers and that kind of stuff, know what our program is about, and find out what we already have in terms of family life, and that kind of stuff.” He wasn’t pushing me to get going and this really reassured me.

Learning the ropes was thus greatly facilitated for PWs by finding a mentor in the school who could provide advice on what to do, teach them about power relations in the school, help them to identify fruitful alliances and provide reassurance in a new and overwhelming situation.

Finding Support. The second thing that helped PWs learn the ropes and make the adjustment to the school setting was finding support from someone outside the school, either their PW colleagues or an agency supervisor. Many PWs did not have a mentor in the school to help them make the transition into the school during those first few weeks. Not finding a mentor was more likely to occur in schools that were not supportive of the program or schools in which there was some opposition to the SBPP. For many PWs, therefore, their contacts with peers helped them figure out what they should be doing in the school and provided moral support when they were feeling overwhelmed.

Several PWs had the advantage of being in close proximity to other PWs to connect with on a regular basis, either in person or by telephone. PWs in rural areas, however, were disadvantaged in that they could not meet regularly with their peers for support, advice, and to share their experiences. Those PWs who did
meet regularly with peers were able to provide each other with a great deal of moral as well as technical
support. Caroline describes the importance of regular consultation with her PW colleagues:

I find that once a week with consultations and just the resource sharing, and sharing what's
going on in our schools has been incredibly helpful for me to keep me on track, number one,
and to keep me motivated. When your week doesn't go well and you just want to hide and
say you're really busy, it really keeps you on track, those meetings.

In addition to peer support, having the support of an agency supervisor was helpful to PWs in
dealing with their feelings of being overwhelmed as they attempted to learn the ropes. This appeared to be
especially important for PWs who did not have a mentor in the school and who did not have access to a group
of peers they could turn to for support. PWs who did not have regular contact with their peers were more
likely to talk about the importance to them of their agency supervisor's support because an agency supervisor
could help the PW to focus on what she or he should be doing, which helped them deal with the feeling of
being overwhelmed. A supervisor's confidence in the PWs abilities also was reassuring given the uncertainty
of working in a new cultural milieu where the PW had not yet learned the ropes and was still struggling to
overcome opposition or establish credibility. Karen describes the importance to her of this type of support
from a supervisor:

Usually what's happened is I go along fine for a while, and then I'll suddenly get
overwhelmed. And then I'll seek her [agency supervisor] out. She's put a tremendous amount
of trust in my abilities. And she knows the school system and the key players so it helps to
get her perspective on things.

This suggests that the agency supervisor, if he or she knew the community well, was often in a position to
provide advice about who held the power and who the PW might go to for support. If the PW had no one in
the school who could provide this guidance, the agency supervisor's experience in dealing with people in the
school system was sometimes a good substitute. Recall the earlier discussion about the agency's ability, in
some instances, to pull rank. Thus, the agency supervisor was not without some power and influence that
could be used to help the PW become established in the school and learn the ropes.

Those PWs who worked directly for the school district did not have the advantage of an agency
supervisor they could turn to for advice or support. Not only that, PWs who worked for the school district did
not have the same opportunity as PWs with agency contracts to learn the ADS ropes. Several PWs with school district contracts commented on their feelings of being isolated from their peers and from the ADS system. As Priscilla describes below, she felt that she was missing out on some important learning experiences related to alcohol and drug issues and she was missing the support and collegiality to which PWs with agency contracts had access:

One thing I find is that I don't have a lot of contacts with people who are working on alcohol and drug issues. My ADP area manager-- I've only seen him once other than the meeting that we have every once in a while. So a lot of times I forget that I'm even connected to ADP. And I noticed when I went to _____ for that meeting and with all of them [the PWs in that region] there, that it was a really, it felt really nice. Like I really felt like I was part of the group. And I don't get that with the school board type people. And because you, when you're working in this kind of job, you're not really in the school system, you're quite unique. And you're not a teacher, you're not a counsellor, you're not really just a school person. You have this other connection, so I really miss that.

In summary, learning the ropes was greatly facilitated by having a mentor in the school to provide advice and guidance. PWs who did not have access to this support relied on peers and agency supervisors to provide moral support and guidance in understanding the system. In learning about the system, PWs also had to discover the limits to what the system would allow them to do.

Finding the Limits

The second major challenge for PWs as they learned the ropes was finding the limits of what the school would allow them to do. Finding the limits meant identifying the boundaries beyond which one could not go because it violated unwritten codes of behaviour in the school. Finding the limits is about learning the politics of the system and coming up against the limits to the PWs ability to influence change, as Christine discovered:

I've really seen the political side of things, like certain things I may want to do just wouldn’t, politically, be the right thing to do. Like asking them to support certain things, or -- asking them to do certain things -- they'd rather just stay out of.

A big part of this is about avoiding controversy. School administrators are concerned about their public image. Their job is a difficult one because they have so many constituencies to satisfy. They have to keep school board members, parents, staff and students satisfied, although some administrators seemed less
worried about keeping students happy. Each of these groups has a vested interest in what goes on in the school and sometimes these interests conflict. The principal needs to balance these interests and concerns. No principal wants a “loose cannon” who is going to do things that will generate controversy and stir up opposition in the community or among the teaching staff.

Not only do school administrators want to avoid controversy, but they also want to avoid disruption of the day-to-day activities in the school. In the following quotation, one principal describes the types of things he sees as important for the PW to learn as she or he enters the school. He believes that it is important for the PW to work closely with administration to avoid these kinds of problems:

At the beginning, there were some rough spots because she had to familiarize herself with the way the school operates and the kinds of things you can do and can't do. But she did that well. She had to learn there are certain activities you can't do because they just aren't suited to school environment or parents wouldn't accept those activities. There were organizational things she didn't understand that had to be learned and by staying in touch with us and working directly with the administration, we worked them out.

Therefore, the PW had to find the limits of tolerance in their schools. This presented a challenge for the PWs, who had been told that their role in the school was to be “a change agent”. Change is not something that comes easily, however, and if PWs wanted to influence change in some small way, they had to become accepted members of the school community. To be accepted, they had to learn what those limits were and make efforts to keep within them. Early in the entry phase, PWs usually did not have enough influence to push those limits. In the quotation below, Patricia described her experience in trying to push the limits to make change:

Because people aren’t—I guess I want to push the systems faster than they are willing to go, and then—things don’t work out the way I want and I have to pull back and say, okay, I can’t push the system. It’s going to go at its own speed. I want to push the system to catch up with others. And I got into a few discussions about that with people and I didn’t get anywhere. I did that a few times, and now I’ve just— you can’t change it. You just have to back off for awhile.

After making the effort to change some things, PWs recognized that they were unable to influence some things and simply had to back off, at least for the time being. This was a common experience among PWs.
Until they had achieved peerage, PWs had insufficient influence to make the changes they wanted to make to accommodate the SBPP in the school. At the same time, achieving peerage presented its own dilemmas.

Achieving Peerage and Achieving Acceptance

Achieving peerage and achieving acceptance were instrumental goals toward which PWs had been working throughout the process of gaining entry. Achieving peerage is a term coined by a PW and is used to describe the state of having achieved a level of acceptance in the school, such that the PW’s status was at least equal to that of teachers and counsellors, and the PW was viewed as being a full member of the school community. The PW was seen as having achieved peerage by adult members of the school community. Thus, although the PW was now the peer of a teacher, the PW was viewed in this way by administrators, faculty, and other school personnel. This means that when I write about the PW having achieved peerage with administrators, it does not mean the PW was the peer of an administrator, but was viewed by the administrator as being a peer of teachers and counsellors in the school. Thus, the PW was accepted by administrators, teachers and other staff as having reached a particular status in the school. Achieving acceptance is the state of having achieved the trust, respect, and confidence of the student population in the school.

When most PWs entered the school, achieving peerage and acceptance were not automatically guaranteed, even when the school had made an official commitment to the project. For many PWs, there was a great deal of opposition, and for everyone, there was a lack of clarity about and much discrepancy in the program expectations. To achieve peerage in the eyes of the adults and acceptance in the eyes of students, PWs had to establish their personal credibility with each group. PWs had to learn the ropes so they knew where they fit in the school and so they did not step on anyone’s toes or overstep the limits they had identified.

Achieving acceptance by the students was not nearly the challenge for PWs that achieving peerage appeared to be. Virtually all PWs, even some who tended to operate in “top down” ways with students, achieved acceptance with students before they achieved peerage with the adults in the school. Once the
students recognized that the PW was different than teachers and counsellors, was interested in and available to them, could be trusted, and often had lots of interesting activities going on, students flocked to many of the PWs. Student demand on the PW's time was an early indicator that the PW had achieved acceptance, as was the visible and steady stream of young people going in and out of the PWs office or hanging around in areas where the PW spent her or his time. The difficulty for PWs, therefore, was not to achieve acceptance with the youth, but to achieve peerage with the adults.

To achieve peerage, the PW engaged in a variety of strategies to establish the legitimacy of the program, establish personal credibility, and learn the ropes. These strategies helped the PW to be seen as a valued member of the community, one who fit into the school, understood its norms and values, and was willing to comply with these. Those PWs who had achieved peerage, knew when they had done so. There were clear indicators that this had occurred. For some PWs, an increase in their autonomy and independence was an indication that they had achieved peerage. Previously, these PWs had to check everything out with an administrator or the counselling department before initiating strategies whereas they were now able to do much more on their own.

Another indicator that many PWs reported as being important to them was the allocation of dedicated office space. Having an office took on symbolic meaning among PWs. Even school people expressed surprise at how important it was to their PW to obtain an office of his or her own. Karen describes how getting her own office was an indication to her that she had achieved peerage:

And I guess what really hit it last week is that in one of the schools I didn't really have an office, I had a classroom that I sort of had to share. And when I came to work last week, that particular school had cleaned out space in their counselling department without even talking to me and has made all these changes to include me. So now I really know I'm accepted. So that was major movement.

Receiving favours from people who might not have done this previously also indicated to PWs that their status had changed in the school. In one school, for example, the PW said the secretaries started doing favours for her, like typing and providing clerical assistance. In the past, they had refused her requests and now were offering unsolicited help because they perceived a change in the PW's status as well. In another
school, the PW found that she was now able to get her issues on the staff meeting agenda whereas before, she had to beg for a spot on the agenda. Not only did she get on the agenda, but she got a choice spot on the agenda, near the beginning of the meeting. Previously, she was always placed last and people often left before she had the opportunity to make her presentation. This shift was seen as an important indicator to her that her status had changed.

*Being included* in the life of the school was also an indication to PWs that they had achieved peerage. This meant attending staff meetings, sitting on important committees, being put on the list of people who received the minutes of meetings, being taken into the confidence of others, and being part of a team effort. Some PWs said that being invited into a classroom to do a presentation and receiving an increase in student referrals or requests for information was an indication that they were accepted and had a valued role in the school. Finally, *being missed* when one was gone and *being included* in social events and activities were sure signs that the PW was now considered a full member of the school community. Mary Ellen described it this way:

One day after being away for awhile, I happened to wander in [to the staffroom] and it's like, “Mary Ellen”, where have you been, we've really missed you!” And it's like, boy, I guess I really am part of the school, you know. And having them ask me to participate in all kinds of their staff activities like the squash ladder or tennis or staff parties or things like that. It's like, gee, I guess I'm not an outsider, I really am on the inside track.

Thus, achieving peerage meant not being an outsider any longer. Once peerage was achieved, PWs felt that they really belonged in the school and now felt comfortable with the culture of the school.

Achieving peerage took a long time in many schools and many PWs talked about the frustration they experienced and the patience it required. PWs who had not yet achieved peerage knew that they had not yet “arrived,” even though they acknowledged they were starting to get there. Melinda described it this way:

I guess I get impatient. Sometimes things happen and I always have to say, “O.K. slow down, it's a very kind of closed system and I'm still trying to break in”. I'm not fully accepted yet, but I did notice a difference from when I started that February to the next September. Like, in September I felt like they were starting to talk to me and beginning to involve me in different staff functions.
Thus, achieving peerage was a long-term process that took a lot of effort and required patience on the part of the PW. It was not something that occurred suddenly; rather, the PW could chart his or her progress along the way.

Prior to achieving peerage, the PW had limited ability to influence decision making in the school. As a result of achieving peerage, the PW was now in a position to influence some decisions in the school and to promote some changes to accommodate the SBPP. People also were more willing to participate with the PW, in part, because the PW had developed relationships with people during the gaining entry process. There was, however, a limit to this influence. Later, under the discussion of creating a role, the PW comes up against the limits of his or her influence.

The PW in this study who coined the term achieving peerage summed up the process by which the PW achieves peerage in the school in the following quotation, in which he draws a parallel between the PW’s gaining entry process and the cultural immersion of an anthropologist studying a new culture:

The first, most fundamental is the issue of achieving peerage within the culture in which we work. Peerage is about achieving a particular level of acceptance such that the PW is in a position to influence opinion, values etc. When we talked about it yesterday, I talked about it in the context of anthropological field studies. The methodology is similar in many ways; at the most foundational level, at least, it involves that immersion in the host culture in every aspect (including roles, rites, customs, and language). Early in the implementation process, the PW has insufficient prestige, power, peerage, etc. to create knowledge from which contingencies arise. Once peerage is achieved, the PW’s influence increases.

For most PWs, once the peerage had been achieved it was now time to turn their attention to creating a role, or if that was already done, to enhancing the school’s readiness to start implementing the model and developing prevention strategies. Carson summed it up this way:

And so I had some success with that [getting accepted], and at that point thought, “Now I think I am entering the zone that I need to be working in. Now I need to get this model thing happening and get this steering committee going”.

Thus, Carson was ready to move on to enhancing the school’s readiness to engage in planning and implementing effective prevention activities. Others still had some work to do in terms of establishing the PW role in the school. Having achieved peerage, the PW was now in a position to create a role for themselves in the school.
CHAPTER SEVEN
CREATING A ROLE AS A PART OF ENTERING THE FIELD

In the first phase of the SBPM, as outlined in the SBPM handbook (Alcohol and Drug Programs, 1994, pp. 30-31), it states that it is very important that the PW "know the role" before entering the school community. This assumes that there is a consensus or understanding about that role. This was not the case in the beginning, as demonstrated above under clarifying expectations. The handbook assumes that the PW role is clear and agreeable to all stakeholders beforehand and that it is straightforward for PWs to know that role and to communicate it to others. The PWs experience of this was quite different. The process appears to be more about creating a role than it is about simply knowing, communicating, and doing that role.

To create a viable role in the school, the PW and the school needed to move beyond the ambiguity created by conflicting and unclear expectations about the position to sort out and define the PW role for themselves, irrespective of what it looked like on paper. Many PWs, however, embraced the ambiguity they could only tolerate before because it provided them with an opportunity to create a role in a way that they saw fit. The initial lack of clarity on the nature of the program and the PW expectations had led to an open-ended situation in which the PW role was not written in stone. Once created, the role continued to evolve.

Thus, it was possible to create a role for the PW that was either consistent with the SBPP vision, or that subverted the original program intent. The realization of the first possibility, although less common, was dependent upon the receptivity and vision of the school and the skill and creativity of the PW. The realization of the second, more common possibility, came about because both the school and the PW were constrained by several factors. These are discussed later under the contextual conditions that influenced the establishment of the PW role in the school and how the PW dealt with various dilemmas in attempting to create a role.

Creating a role was the process by which the PW and the school determined what the role was, what it was not, and what it could become. A role for the PW was created rather than given and this creation occurred in the everyday actions and interaction of the PW within the school. Two processes appeared to characterize creating a role. These are finding the focus and striking a balance. Finding the focus is about
PWs redefining their roles as distinct from other roles in the school, divesting themselves of some things taken on in their earlier doing for and doing everything, and struggling with simultaneous demands to remain narrowly focused on alcohol and drug use versus taking a broader health promotion focus. These subprocesses have been labelled finding what it is and is not, narrowing the field, and taking a narrow versus a broad focus, respectively.

**Striking a balance** involves the PWs' attempts to deal with the dilemmas arising from conflicting demands within the school setting or between the school and the agency/ADS. There were two major dilemmas: first, balancing the school's demand for intervention and counselling services with the primary focus of the program on prevention, and second, attempting to carry out a systematic planning process while frequently being drawn into dealing with crises or problems that need immediate attention.

**Finding The Focus**

Part of **finding the focus** for the PW role involved finding what it is and is not and how it was distinguished from other roles. It was in working out the PW role in relation to the role of others, in the school that the PW role became established. This process was influenced by a variety of factors as discussed in the previous section, but there was a tension between the perceived needs and demands of the school and ADS' original intent for a PW role. This is discussed in more detail later in this section. The point to be made here is that creating a role was an evolutionary process that occurred over a considerable period of time, in most cases, at least a year, and often longer. **Finding the focus** is a part of that process of creating a role. **Finding the focus** is distinguished from the earlier process of clarifying expectations in its specificity and its timing. Earlier, PWs went through a process of clarifying expectations by negotiating boundaries and protocols, thus limiting their actions to practices not being carried out by teachers and counsellors. Despite these actions at that time, there remained much ambiguity in the PW role delineation. Over time, however, as the opposition was overcome and the PW began doing in the school and establishing their personal credibility, there was relaxation of these boundaries and rules. In fact, the demand for the PW to take on
previously proscribed practices increased. Thus, in finding the focus, the PW is now confirming what the role involves and what it does not involve.

**What it Is and Is Not**

Sorting out *what the PW role is not* was probably more straightforward than defining *what it is*, because the roles assumed by PWs were extensive and varied. PWs talked about themselves as health educators, facilitators, motivators, change agents, energizers, curriculum consultants, role models, resource persons, leaders, organizers, ambassadors, specialists, classroom presenters, and doers. There was consensus, however, on one role identified as clearly not being within the PW’s domain, and that was the role of *enforcement officer*.

Although some schools did not expect this type of service from the PW, in several schools there was pressure for the PW to take this on. Several PWs identified that their school administrators expected them to be patrolling and policing smoking and drug use in the schools, and that the schools perceived the PWs’ responsibility to include “stamping out badness” or “ridding the school of all drugs”. The following quotations from a PW and his principal demonstrate these expectations:

> I guess, I think the perception initially in the school is that what this individual [the PW] will do - we have a substance misuse problem in the school, the way to get rid of it, is to have someone come in as truant officer and stamp out the badness. And of course it's way off, way out of line (George, PW).

> We've had an ongoing battle with smoking in our school and in our community. George doesn't do very much to actually be out in areas where the kids smoke, on the periphery of the school grounds and property. He will go for walks but he won't actually say anything to students, that I'm aware of, like, "Do you know you're not supposed to be smoking here"... George, in my opinion, could be doing more around prevention of smoking by helping us to enforce our policy (Principal).

There was clearly a tension between PWs and their administrators on this issue. Despite the pressure, however, PWs were very clear that they would not be drawn into a policing or enforcement role. Given that the PW was perceived in the vast majority of schools as *being different* because they did not judge students and because they were *in the school but not of the school*, the PW could hardly take on such a role without losing credibility with students. PWs refused to take on this role, arguing that it was not within their mandate
as a prevention worker. As demonstrated by Rita in the following quotation, PWs saw this as a teacher or administrator responsibility and refused to jeopardize their credibility with the students:

I think that the only way they are going to be able to do anything is if there is a teacher that walks up there and they see some students throw something on the ground right away, or acting very suspicious, tell their teacher before they go back to class so the teacher can look for signs. I think that’s the only way of doing it, unless you...But I’m not going to do that. It’s not in my mandate, and besides, I would lose the credibility from the students.

This reluctance by PWs to get involved in policing drug use or smoking in the school was, for the most part, accepted by the schools. Perhaps they too recognized that what they might gain in person power to patrol and enforce policy they would lose in damaged relationships between the PW and students. In this study, I identified only one school in which this pressure from administrators was sustained over time. In that school, however, a considerable power struggle was going on between the PW and the school administration.

Another role that was almost universally acknowledged to be outside the domain of the PW’s mandate was that of a therapist who would be involved in treatment for addictions. The ADS contract specified that the PW could be involved in brief intervention with students for up to three sessions, which would include the time spent in assessment and screening. Beyond that, the PW was expected to refer the student out of the school for appropriate treatment. The PW was not to get involved in longer term counselling with students. All PWs knew that treatment for addiction problems was not within the purview of the PW’s role in the school, although some did not agree with the ADS stance on this.

Just because it was acknowledged as outside the PW role did not mean that some PWs did not engage in providing addictions therapy. A number of PWs reported that they knew of colleagues who were doing a lot more therapy and long term counselling than they would admit to doing. The PWs reporting this type of activity were concerned for two reasons. First, their colleague might lose their job and second, it was not appropriate for them to be doing that kind of work because it was not prevention or early intervention. Sheila, for example, shared the following:

And I know one PW who does more than three sessions of counselling with lots of kids. Sometimes up to six or seven, maybe more, but she doesn’t tell anyone, and in fact she denies it. I have talked to her about this and told her she will get into trouble if anyone finds
out, but she just says she’s a counsellor so why shouldn’t she do counselling? She’ll just deny it.

Other PWs, like Sheila’s colleague, acknowledged doing therapy although they recognized that it was beyond the PW’s mandate. One PW, for example, admitted to me that she was doing group therapy with a small group of addicted girls. She expressed concern that this would not be considered appropriate by her colleagues or by ADS but she believed it should be part of the PW role. Other PWs were running groups but these did not usually involve students with serious addiction problems. For PWs who were counsellors by training, this expectation that they limit themselves to three sessions with a student was seen as unreasonable or unrealistic, as the following quotation by a PW demonstrates:

I mean what’s one of the frustrations that I have is that we’re not supposed to be counsellors and yet I am a counsellor. I mean, that’s what my professional background is. And I see counselling to be a very integral part of this job. You know, we’re supposed to see kids only one to three times for a quick referral or assessment and referral and I don’t feel that that’s realistic at all.

Whatever the program developers and funders said about what the PW job entailed, these PWs believed that counselling for addictions was an essential element of the SBPP and that it could not be realistically avoided in their work.

The other role that ADS identified in the SBPM handbook as not being part of the PW role is that of a teacher. “In most cases, Prevention Worker expertise is not in teaching students, and thus recognizing and respecting the expertise of the teaching staff is important. Even if qualified to teach, the PW is not in the school for that purpose” (Alcohol and Drug Programs, 1994, p. 30). Rather than spending much of their time teaching, PWs were expected to provide professional development for teaching staff so that they could enhance their alcohol and drug prevention knowledge for use in their own classrooms. Guest presentations by PWs were permitted, but the teacher was to remain in the classroom at all times. ADS viewed it as preferable, however, for PWs to work with the school around implementation of the Learning for Living (and later Career and Personal Planning) curriculum, particularly in the area of substance misuse prevention.

Some PWs did this. In two of the site visit schools, the extent of staff development by the PW was considerable, in terms of providing learning opportunities and resources for teachers, but also modelling the
types of active learning strategies that might be most effective for alcohol and drug prevention education.

There were, however, some PWs who took on a role of providing the entire alcohol and drug component of various courses in the curriculum. They did not work with the teachers to develop the teachers' own knowledge and expertise in the area of drug and alcohol prevention but assumed the responsibility for providing all of those classes to the school. Some PWs were still doing for and had not let go of this responsibility in favour of the teachers doing it for themselves.

On the one hand, these PWs took the initiative to identify appropriate places for an alcohol and drug component in the curriculum, as Rita describes:

What I do usually in the first 2 weeks of July, I spend in the library here and I go through curriculums. And see what each student, which subject offers what. So if I know that the grade 8s sometime during November will be going through chapter 4 in their science book and I know its all on drugs and alcohol. If I can do something in the gym with the gym teachers to promote healthy living and stuff like that. So I pretty well know which area that I can actually get in.

This was a first step in building the capacity of the school to integrate alcohol and drug misuse education into the curriculum. On the other hand, this created a situation in which the substance misuse education was dependent on the PW doing it. Some PWs did not have a problem with this and, in fact, saw this as one of their major responsibilities in the school. PWs, however, who wanted to build the capacity of the school to do this on their own found themselves in somewhat of a dilemma; if the PW did not do it, it was not going to get done. Rachel expressed this concern:

One of the people that I talked to last year, I said, "If I wasn't here in this school and didn't come in and do anything around the Grade 8 Science curriculum, what would you have done around drug and alcohol?", and he was quite honest and said, "I probably wouldn't have done it at all." So I'm faced with that dilemma, if I don't go in then nothing's going to happen, so I go in but I make the steps of trying collaborate.

The above situation was exacerbated when the PW only worked part-time. This made it very difficult to get into a lot of developmental work with teachers, particularly when there were so many other demands on the PW's time. Some PWs were also actively involved in developing drug education curricula for school-wide implementation. Although this was more in keeping with a capacity building approach to substance misuse prevention, the question must be asked about how well prepared these individuals were to be doing this type
of work. Although a few PWs might have had some training in health education pedagogy, most did not and ADS did not provide this type of training in their annual conferences or in their continuing education offerings.

There were a few schools in which the PW was a bona fide\textsuperscript{37} teacher. Even though, technically, the PW was not supposed to be hired as a teacher, the fact that the contract with ADS was held by the school district meant that the person hired into the position was governed by the collective agreement with the district teacher’s union. Thus, the PW position was shaped by the expectations of both the union and the school that the PW role be defined as a teaching role. In one such school, teachers and administrators believed that it was the PW’s responsibility to provide all the drug education classes to the grade eight and nine students in the school. This is reflected in the following comment from the union representative in that school:

There are two facets to the prevention service of this school. One is the individual counselling support network and the other is general education for the whole student body.

In this situation, the PW and those in his school believed that the role was really about what ADS said it was not.

There were two potential consequences of the school and the PW not being able to identify what the job was or was not about. The first consequence was identified above. That is, although the school might now have considerably more classroom time devoted to alcohol and drug prevention, there was no one else in the school learning it and only the PW was doing it. In other words, there was no one helping to build the school’s capacity to take on its own alcohol and drug prevention in the context of the comprehensive school health curriculum. In fact, the contract in that particular school was not renewed at the end of the pilot phase. Because the PW had assumed full responsibility for the alcohol and drug education, there was no legacy in the way of an infrastructure for providing that education in the future.

\footnote{Note, this term is italicized because it is a foreign word, not because it is a code in the theoretical framework for this grounded theory.}
The second consequence was that the focus of the PWs work was narrowed considerably and the portion of the position related to community development was curtailed by the demands of classroom teaching. The union representative cited above did not acknowledge the community development aspect of the position even though, at the time of the interview, it constituted 45% of the PW’s time according to the contract. This too had implications for limiting capacity building in the school by not making the kinds of community linkages that could support the school in their implementation of alcohol and drug prevention initiatives. The fact that this PW was unable to spend time doing this because of the demands of classroom teaching is reflected in the quotation below:

See, I’m already spending a fair amount of time teaching and all of that. But by the time you’ve done all that, you have no time for your community interaction...If you pull back from that, well, you know. But, I mean, it’s a challenge and there is a lot of pressure to be in the school.

Not only did the demands of classroom teaching limit this PW’s community interaction, but his time was also being usurped by additional teaching responsibilities. For example, he was assigned a teaching assistance class in which he was functioning, not as a PW, but as a teacher. As reflected in the following quotation by a school counsellor, this concern was identified as a danger by staff in other schools that did not have a teacher as the PW:

I think as soon as you put a teacher in there, you will lose the heart of the program because the teacher will have a whole pile of other demands laid on them. They will not get to do the job the way it should be done. I mean, she [our non teacher PW] just has that job. Right? She obviously has other responsibilities but she has that job. That’s her job. A teacher doesn’t have that job.

Thus, it appears that situations in which the PW role was filled by a teacher, the role tended to be defined in terms of teaching responsibilities. Unfortunately, I do not have sufficient data to saturate this category because, at the time of this study, I had access to only one teacher hired as a PW. Therefore, any discussion of the differences between PWs who are teachers and other PWs is limited. Nonetheless, because the same process occurred with counsellors, it seems likely that what happened with one teacher could be expected to occur in similar situations. PWs who were counsellors by training also interpreted and created the PW role with a bias toward counselling responsibilities. It appears that PWs were creating the job to mirror their own
skills, abilities, and professional orientations. As the director of ADS Prevention Services was fond of saying, “If you are a hammer, everything looks like a nail.”

In summary, to create a role, PWs needed to find the focus for what they were doing in the school. In doing this, there was more of a struggle for PWs around what the role was not supposed to be about, than about what it could become. Some PWs were pressured to take on the role of enforcement officer and had to stand firm in their refusal not to be drawn into this role. No PW was drawn into this role unwillingly. Some PWs also were inclined toward taking on the roles of therapist and teacher, despite the clear message from ADS that this was not appropriate. As noted in the previous paragraph, the PWs background was instrumental in whether PWs took on these proscribed roles. The danger in creating a role that involved these proscribed activities was that this reduced the potential for engaging in community development and capacity building to enhance the school’s ability to resolve the issue of alcohol and drug misuse in the school for itself.

Narrowing the Field

In the process of establishing credibility, the PW uses a variety of doing strategies, including doing what we know, doing everything and doing for. The consequence of all this doing, was an overworked and overwhelmed PW who was beginning to feel burnt out. It was time for the PW to begin narrowing the field. Narrowing the field meant finding ways to narrow the focus of what they were doing in the school to maintain a manageable workload. As Rita said:

I had to really sit down and take a long look at what I was doing, and saying I shouldn't be doing all this at one time because I know I'm going to get burnt out. Because you know, that's not, maybe, you just think in the back of your head this is what they want and you know I really like this job, I want to keep my job so you keep pushing yourself to do better.

Although there was pressure on PWs in the beginning to prove themselves, they were now at the point where they could afford to begin divesting themselves of some of the responsibilities they had taken on in the school. Part of the problem for many PWs was that their success was generating a lot more work for them and they could no longer cope with the volume. Tracy’s experience was typical:

In the beginning, I sent memos to staff outlining what I can do in the school and what I could do for them, what they could for me. And just really trying to get into their classrooms to get started and now, I'm saying no, because I could be in classrooms all the time.
For part-time PWs, this was a particularly difficult issue because of the limited amount of time they had available to spend in each school. They came to the realization that they only had so much time and energy and so they had to make some decisions about where they would invest that energy, as the following quotation by Karen demonstrates:

"It's just that, you know, I can't do everything. I am in each school now two days each a week because I had a tremendous amount of overtime so I've been pulled back into the [agency] as a day for prep and phone calls. So that's, when I look that, that's only eight days a month [in the school]. So I'm going to have to start compartmentalizing and organizing myself differently, sort of focussing on one area at a time. Because I'm just, I'm doing everything.

Like Karen, most PWs, after going "all out" for a period of time, were starting to question what all of this doing had to do with their primary purpose for being in the school. They found themselves having to focus on their ultimate goals and recognized the need to shift toward longer term prevention strategies rather than short-term "quick fixes." Those who had achieved some degree of peerage in the school felt more confident about saying no to ideas and requests, as Melanie described:

"I'm being very careful now that the things that I'm doing in the school are not just quick fixes for the kids at the time. Which has been kind of frustrating for a couple of teachers because they come to me with these ideas, and I can't just say okay, great, I'm going to go do that. Because it's just not, I think I would be spending all my time running around doing these little ideas all over the place. And then in the end not have accomplished anything substantial."

PWs had now got to the point in their doing where they realized that they could no longer continue to be doing for and doing everything without imposing some limits or restrictions on what people were asking them to do.

PWs also needed to get past what was comfortable and familiar for them and start getting involved in those activities that were less a response to organizational demand and more in keeping with their contractual agreement; in other words, doing what they were supposed to be doing. The challenge for PWs, however, was to divest themselves of some of the work while at the same time, shifting responsibility and ownership to others. At the same time, however, PWs had to move carefully because their earlier doing everything and doing for had created a sense of dependency. Sometimes, the shift toward encouraging more ownership and responsibility was rejected by staff because it was too much to ask. In some schools, and for some teachers,
the issue of alcohol and drug misuse prevention was only going to remain on the agenda if the PW continued to do the work, as Melinda’s comments suggest:

But I'm still having a problem getting them to take ownership. What I did last year with a co-worker was to design a sheet that asked for the type of presentation, the objectives, what they wanted to put across, where it fit in the curriculum, what was going to be their follow up. And as soon as that was handed to a teacher where they had to be specific, they wouldn't access me. If they had to go to that much work they weren't going to do it.

In summary, PWs were now divesting themselves of responsibilities they had taken on to establish credibility. Having achieved peerage, they felt more comfortable in narrowing the field. Nonetheless, the struggle to encourage members of the school to take ownership continued.

Taking a Narrow versus a Broader Focus

An important issue for PWs in finding the focus was whether to take a narrow alcohol and drug specific focus or to take a broader focus on a range of related issues. What makes this an issue, however, is that there was pressure from at least some ADP area managers for PWs to ensure that their strategies were obviously related to alcohol and drug use behaviour. Karen described it this way:

...I don't know what others’ experience has been with ADP around that issue. I know that some people feel that there's a lot more flexibility [from ADP] than other people. Some people feel that they have to stay very rigidly focussed on alcohol and drug - other people feel quite comfortable and that there's sort of some flexibility in their job description that allows them to look at alcohol and drug within a larger context and how it relates to other kinds of behaviours, health in general, healthy emotions, healthy schools.

The majority of PWs tended not to restrict their actions to a narrow focus on alcohol and drug use per se. The issue emerges, in part, as a result of organizational demand, particularly since people in schools and in the community tended not to think in terms of the “stovepipe” funding channels of government programs. Alcohol and drug use is viewed as part of a larger constellation of issues in the school and the community. Separate actions targeted to alcohol and drug use behaviour did not always generate the support and “buy-in” that PWs were hoping to develop in the school, as Sheila’s comments indicate:

I was just saying that what I'm doing with this project is, I don't always focus directly on alcohol and drug. I'll back up to anything that is going to create a healthy school environment as a way of turning that whole system around. So I'm looking at all sorts of options like abuse and all sorts of things. I don't always go in with an agenda strictly of drug and alcohol. So I do think, because I think the only way people are going to buy into is if
you have it broader. If it's strictly drug and alcohol, people are going to say, well they don't know enough about it, they're more concerned about other things, and I don't know, I think you lose people. But if you do a healthy school initiative approach, you get more people in.

In the context of the school setting, PWs found it difficult to stay focussed on alcohol and drug use issues when the factors influencing those issues are broad and tied to so many other issues. Furthermore, in the process of establishing credibility, PWs developed a reputation for being accessible. Having established what they considered trusting relationships with young people in the school, PWs were in a position in which they could not turn youth away if they sought help for issues other than alcohol and drug use. Whatever ADP people might say about needing to remain focussed on alcohol and drugs, the students did not perceive the PW as someone who must restrict everything they did to an alcohol and drug focus and continually sought them out. Susan's experience was typical:

And you know, when you're kids, I mean, you have tons of Dear Abby issues that are so critical. And because I'm around and because I have an open door policy, kids are around. So it makes it really hard to separate alcohol and drug from other issues. Especially when you are talking in terms of prevention, you know, we're talking about substance abuse prevention, but there is also suicide prevention, and all that kind of stuff. Prevention is so large when you are talking about alcohol and drug.

Similarly, PWs felt they had built up credibility with the school administration and teachers by being responsive to school needs. Schools simply did not want PWs to focus solely on alcohol and other drugs. For example, many schools were struggling with the implementation of Learning for Living (and then CAPP) during the pilot phase of the SBPP. Many PWs had some expertise in health areas other than alcohol and drugs and were therefore a valuable resource to the school. For the PW to say, “Sorry, I can’t participate in this because it isn’t focussed explicitly on alcohol and drugs” would not have made sense to people in the schools because it did not fit with the way things were done. Even teachers who have specialities often have to teach courses they do not want to teach. If the PW wanted to be fully integrated into the school, the same expectations applied. It became virtually impossible, in the day-to-day life of the school, for the PW to maintain a strict focus on alcohol and drug use. If the PW was to go strictly “by the book” in opposition to the school’s perceived needs, then the credibility of the PW and the legitimacy of the program would be lost.
The issue of taking a narrow versus a broad focus is also related to the PWs' understanding of the issues and their own "theories" about what constitutes effective prevention. Often, this was influenced by the PWs' background and their prior experience, as Patricia described in the following quotation:

...I think that I came in with my own personal expectations and --my vision was that I would be designing, planning and implementing a School District and Alcohol and Drug Program that promoted healthy lifestyles and that it didn't just include drugs and alcohol but it was an all encompassing so that I could tap on the areas of self esteem and problem solving and anger management which was one of my specialties that I used to work with teenagers with in communications, negotiations and refusal skills and all of those other skills that are equally essential to the prevention of drug and alcohol.

Strategies that seemed unrelated to alcohol and drug issues provided the vehicle for developing relationships with youth and this was a critical factor in the PW's credibility in the school. In fact, the majority of PWs believed that effective prevention was about developing relationships with young people, as Michael's comments demonstrate:

So I think if you can get people to connect with people, then maybe you can do some work around that. So that's what I spend a lot of time doing. I'd like to see the stuff on stronger relationships between kids and teachers and some positive things come out of that. And I think that's starting to happen. I mean that's a pretty lofty goal. That's what we're working for.

It was in developing these relationships with youth that the PW could then approach specific issues, such as alcohol and drug use, with more credibility. This also gave the PW more access to those issues and to the youth experiencing them. Getting involved with projects that may not appear to be directly related to alcohol and drug use per se can provide the PW with an entry point for addressing those issues directly. By restricting PWs from being involved with projects like building a race car or producing a rock video because it does not have "alcohol and drug use" in the title is a rather narrow view of prevention. Not only that, it is also inconsistent with statements made by ADS in the SBPM handbook. ADS states that more recent approaches to substance misuse prevention are based on health promotion, which takes a broader perspective in understanding human behaviour. This broader understanding includes a focus on the social and environmental determinants of health.

Prevention programming offers a strategic approach with less emphasis on the individual, and much more emphasis on the environmental and social factors that contribute to problem
development, hinder and prevent the adoption of healthy lifestyles, or work against problem resolution (Alcohol and Drug Programs, 1994, p. 9).

Prevention workers who are approaching the problem from a health promotion perspective were unlikely to focus specifically on substance misuse behaviour, as Melanie's comments indicate:

What we have found at our school, a lot of what we're doing is not focussed specifically on substance misuse. Like the problems there run so deep into the community and things like that. But because we're looking at all of these different areas, I think that's given us, we've been able to go from just focussing on substance misuse where everything has to revolve around that, to looking at some more environmental things. Some more things with the family and the community.

At first, I had some difficulty understanding what this issue was all about. It seemed obvious to me that if someone was designing a prevention strategy according to the SBPM, and that it addressed the predisposing, reinforcing, and enabling factors for drug use or non-use among youth, then there was a vast range of potential strategies. If one subscribed to a particular theory of drug use, like Problem Behaviour Theory (Jessor, 1984), for example, which suggests there are multiple common determinants of different behaviours, then a strategy that is linked to other behaviours would also be relevant for drug use prevention. Because the model suggests targeting the determinants of the behaviour, including social and environmental determinants, rather than the behaviour itself, a strategy might not have an obvious link to alcohol and drug use. It should be a simple matter of the PW demonstrating to the area manager the theoretical links between the strategy and the expected change in drug use behaviour. What I did not recognize at the time was that many of the ADP area managers still did not understand the model and therefore had difficulty supporting the PW in doing anything that did not seem directly related to working with young people on changing their attitudes, beliefs, and behaviours around alcohol and drug use, even if they claimed to be using the model.

The schools' demands for PW involvement in a range of broadly focussed actions notwithstanding, many PWs own "theories of the problem" and "theories of the program" required actions that were not narrowly restricted to an emphasis on drug use behaviour. When a PW personally believed that a broader focus was important and the school supported or even demanded this broader focus, being confronted with an area manager who said "no" and a PW handbook that appeared to say "yes," their confusion is
understandable. The SBPM handbook (Alcohol and Drug Programs, 1994) makes the following statements in relation to this issue:

Above all else, the Prevention Worker is attempting, with the assistance of as many stakeholders as possible, to develop a healthier community. The solutions may be developed because of a triggering incident involving alcohol or drugs. However, if they are designed from within a prevention framework, it is likely that the community's overall vulnerability to the broad range of lifestyle related maladies will be reduced. This should be the ultimate goal. (p. 32)

The importance of community and the health professional input will vary in each phase, but the school community's own aspirations and ambitions should be paramount. (p. 17)

Fundamental to a community-based prevention approach is the ideal that the Prevention Worker, as a change agent, must understand the community's point of view and accept the aspirations and problem definitions as a valid starting place for activities. (p 34)

On one hand, PWs see that taking a broader focus is consistent with the model that they are supposed to be using. On the other hand, the very people who are insisting they use the model are also insisting that they act in contradiction to the model. These types of inconsistencies, which PWs referred to as not modelling the model contributed to many PWs' initial resistance to using the model as a guiding framework for action in the school. In the face of such seeming contradiction, the strategy many PWs used to manage the dilemma was to proceed as they, and the school, saw fit and simply not report any activity that the area manager might think questionable.

In summary, finding the focus was a process in which PWs defined their role vis a vis the roles of the others in the school to confirm what they should be doing, but particularly what they should not be doing. As a result of earlier strategies used by PWs to establish their personal credibility, PWs found themselves in a situation where the school was placing excessive and unreasonable demands on their time. PWs needed to narrow the focus of their activity to manageable proportions. Finally, PWs had to determine the focus of their activity in the school in terms of taking a prevention versus a health promotion perspective. They felt increasing pressure from ADS to focus strictly on strategies that were obviously related to dealing with alcohol and drug use behaviour. At the same time, they were expected to use a model that prescribed taking action on a broad range of the determinants of that behaviour. In many cases, PWs resolved this dilemma by
doing exactly what they felt they should be doing and telling the ADS area managers what they wanted to hear.

Striking the Balance

As the PW attempted to find the focus for his or her role in the school, a number of dilemmas arise that the PW must struggle to manage. These dilemmas involved striking a balance between competing demands, each of which seemed compelling. The first of these was the struggle to maintain a focus on prevention when there was an overwhelming demand in the school for intervention services. I have named this the dilemma of prevention versus intervention. The second struggle had to do with the tendency of most schools to focus on crisis management to the exclusion of pro-active planning. The dilemma arose for PWs when the model they were expected to use as a guide for their practice was a systematic planning process that did not fit with the way the schools did business. This has been labelled the dilemma of crisis management versus pro-active planning.

Prevention versus Intervention

The original Schedule A of the contract between Alcohol and Drug Programs and the contracting agency (Appendix D) defined the focus of the PWs work in the school in terms of primary prevention, secondary prevention, and community development. This is the contract that was in place for most of the pilot phase of the SBPP, and thus the time frame covered by this study. PWs were expected to spend 30% of their time in primary prevention. Secondary prevention (also referred to as early intervention) was allocated 25% of the PW’s time. The types of activities specified under primary prevention were targeted at the whole population or large groups of students. Secondary prevention activities were primarily focussed on individuals.

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38 Primary prevention aims to prevent the use and/or misuse of alcohol and other drugs among those who have never used them or to delay the age at which onset of use occurs” (Alcohol and Drug Programs, 1994, p. 131).

39 Secondary prevention involves identifying adolescents who have just started to use alcohol and/or other drugs and to help them quit, cut down or use in moderation, or to protect them from the consequences of misuse while seeking a more permanent solution” (p. 132).
Community development was allocated 45% of the PW’s time and included activities that involved networking with and mobilizing the community, developing policy, and developing in-service training for school personnel. These activities were intended to build the capacity of the community to address its own issues and concerns related to alcohol and drug use and thus are also population-focussed. Thus, 75% of the job description involves community or population-focussed activities rather than individually-focussed actions. For the purposes of this discussion, I use the terms prevention and intervention to mean primary and secondary prevention respectively.

The demand for intervention arose from a number of factors related to the PWs’ prior actions and from conditions in the school context. In other words, the PWs’ prior emphasis on doing, being, and keeping, and the success of those strategies, led to an increasing demand for intervention services. The demand for intervention was fuelled by the perceived needs of the schools, the value they placed on intervention over prevention, and the school’s understanding of the meaning of prevention. Each of these are aspects of school readiness.

As a result of this demand, the PW engaged in a number of strategies to manage this dilemma, including (Re)defining prevention, resisting intervention, and subverting the intent. How and whether the PW used these particular strategies was influenced by the PWs’ own understanding of prevention and beliefs about what was needed and necessary in the school. This understanding and these beliefs were determined by the PWs background and experience. The consequence of this struggle is that the PW ended up either hanging in with prevention or giving in to intervention. Another contextual factor related to this outcome was the PW’s employment status. Part time workers may be less able or willing to resist intervention because of the intense pressure to use their limited time for intervention.

The demand for intervention. In the earlier phase of establishing credibility, PWs began by doing, being, and keeping. The result of many of these strategies was the same, that is, an increased demand for intervention. For the purposes of this discussion, therefore, I have chosen one doing strategy to illustrate how this influenced the demand for intervention. In the beginning, PWs began by doing what we know. This
meant, for many of them, doing early intervention types of activities such as screening, assessment, and referral. The impact of this could be seen immediately and this impressed school administrators and counsellors, in particular. PWs were also handling crises and intervening in difficult situations, which established their credibility and made them indispensable to the school administration. The success of these early strategies led to a demand for more of the same, as Karen described:

That's basically how I got into [the school]. That [screening protocol] was probably the best thing I ever did and I just did it because that was my background and what am I going to do now? ...And so the screening's just taken off in the school. There is a tremendous substance abuse problem going on in the school so the administration is really pushing. I mean, I'm screening tons of kids.

The point to be made here is that PWs' actions to create the conditions within which prevention could take place had the paradoxical result of increasing the demand for intervention rather than, or in addition to, prevention. This process is described in the following quotation by John:

I think part of what you do when you create an awareness, is you create awareness of the magnitude of the problem and once you create an idea about the magnitude of the problem, then people's immediate reaction is that they want to ameliorate the problem. Do you know what I mean? And prevention may be there also but I think that in that process of community awareness you're increasing the demand for treatment style services at the same time as you may be creating a demand for prevention. And in terms of priorities in most people's heads, I think treatment is it.

John's statement also points out that people are likely to choose intervention over prevention when given the choice. That intervention is what people believed would best address the problem is completely counter to the basic premises of the SBPP. Yet, over and over, schools indicated that intervention was what they needed. What they valued most about the PW and the SBPP was the success the PW was having in the early intervention area, as this counsellor saw it:

It seems to me that the main focus of the project was intended to be prevention. I can buy into that and I do buy into that notion of prevention. But on the other hand, we are aware that the number of kids who are using drugs or abusing alcohol, we know it's increasing. ...And so, I'm not real sure that prevention as the main focus is necessarily where the focus should be. I'm most pleased with what I've seen our worker able to do for the kids who are having problems...It seems to me that for every kid we can identify and refer to [the PW] who can then curb drug use, curb alcohol use, stop completely or whatever - that's where the pluses are.
Not only did administrators, counsellors, and teachers value intervention over prevention, but they did not always understand the distinction between the two. Several PWs pointed out that people made a lot of assumptions about the level of understanding about prevention in schools. Different people used the same term to mean very different things. Even those schools that appeared initially to have a clear understanding of prevention and supported it wholeheartedly, did not, when it came down to taking action in the school, opt for prevention over intervention. This was Martha’s experience in one of her schools, as she describes in the quotation below:

I was worried that since the person at one school wasn’t buying into the prevention totally that it would just be another very difficult process, whereas the other school - everyone was like 100% - it was almost too good to be true. And it was in fact! When I got in there, and what I’m finding now is still - even though people talk about prevention - it’s so elusive, sounds good but no one can get their hands on it. Like there is no immediate results that they are wanting - intervention credibility. Like it doesn’t matter - even though they said the right thing, when I got here they wanted intervention too.

A factor contributing to this valuing of intervention over prevention was that many people in the community, even some PWs, did not “buy in” to the notion of prevention in secondary schools. In their minds, prevention was needed much earlier when it could be “true” prevention, that is, focussed on those who have not yet initiated any substance use. This view is apparent in Melanie’s comments below:

I think the need of, I think the program should be shifted from high school into elementary where you can really do true prevention. I think that more important than having it in 11-12, would have having it in Grades 5, 6, and 7.

During the pilot phase of the project, ADS took a lot of criticism over locating the SBPP in secondary schools. PWs and ADS staff were constantly having to defend the rationale behind this decision. The SBPM Handbook (Alcohol and Drug Programs, 1994) had a section entitled “Awkward Issues” which provided PWs with a response to this challenge:

If resources were limitless there would, indeed, be an argument for including the School-Based Prevention Project in elementary as well as secondary schools. In this time of limited resources, priorities must be set and the most at risk population served. Statistics indicate that alcohol and other drug use accelerates during the adolescent years, a situation that puts most youth “at-risk” for alcohol and other drug use and/or misuse. In light if this, it seems important to focus prevention activities on this age group (p. 10).
For many PWs, it was difficult to defend the secondary school focus for alcohol and drug misuse prevention because they, like Melanie above, questioned its relevance for high school students.

Thus, it appears that prevention was not a valued goal for many people working in school settings, including some PWs. Even when prevention was understood and supported in the school, there was still an inexorable pull on everyone toward dealing with the problems and crises confronting them in the moment. As one school counsellor pointed out:

It seems that the things that get eliminated are all those things that seem to be prevention-type things because we end up just dealing with what comes through the door, what's on the phones, what we have to do, so there isn't any energy left over to do prevention.

What is the PW to do when confronted with an overwhelming demand or need for intervention services? It is almost impossible for a practitioner to put aside these demands when she or he is face-to-face with a troubled individual. In making a choice between the young person who is suffering in the moment and the many who may be prevented from suffering in the future, both the PW and the school were likely to choose the one who was in their office every time.

(Re)defining prevention. As PWs struggle to manage these competing demands, they engage in particular strategies to help them deal with the dilemma. One strategy was (re)defining prevention. This meant defining or redefining what they were doing in terms that would fit with the prevention mandate of the project. This was not a deliberate attempt to 'cover up' and many of these redefinitions made good sense. If they were not preventing initial use of drugs, they were preventing intensification of involvement or progression to use of other drugs. This seemed to help them justify what they were doing in the school in relation to the project's intent. The comments from two PWs summarize this:

I have a hard time drawing divisions between the two anyway because it is very easy for me to see treatment as a prevention initiative just in terms of changing frequency inside of a population will have an effect on a population (Peter, PW).

Well the example I used was talking about a particular group of kids who were at very high risk of, well they were involved with drugs. They weren't at high risk, they were involved in drug use. But they were also at very high risk of dropping out of school and getting more involved in drug use than they already were... This is probably, although it's not totally
prevention, it's prevention from further involvement. Because these kids were already involved (Kathleen, PW).

One PW defined prevention in terms of whether or not the youth had used drugs at that particular point in time. In other words, the PW's actions did not change, but she defined them as intervention if the students had already experimented with or were using drugs and redefined the actions as prevention if the students had not yet used drugs. Thus, intervention and prevention were not defined by the actions themselves, but by the drug use status of the student. This is illustrated in the following quotation by Rita:

But for me to go down to the alternate school and do my programs, for 8 of those 10 students, I am doing intervention cause they are already using. And then there is 2 in the class that is actually getting prevention cause they haven't used it yet. So that's the way I look at it. I can go into a grade 8 class, there is 20 students, 10 I'm doing intervention with because they have already started smoking, 10 I'm doing prevention.

Resisting intervention. PWs often found themselves in a position where they had to struggle to resist intervention because the demand was coming from the young people themselves. It became very difficult to turn someone away without shutting them down. PWs had to approach this very tactfully if they were to resist the demand yet encourage the person to seek help with a counsellor. This challenge is described by Susan in the following quotation:

I think that I would have to say that that is a real difficult part of the job because... I end up having to sort of cut kids off quite often and say, you know, I think you need to talk to your school counsellor about that. So there is quite a bit of that kind of stuff.

In effect, Susan was "triaging" students as a way of resisting intervention. Although some PWs resisted intervention, they sometimes found it extremely difficult to do in the face of the challenges being experienced by their colleagues in the school. Cutbacks in counselling positions meant that the counsellors were overworked and PWs found themselves being drawn into the fray. They had to get support for this difficult struggle from their peers and from agency supervisors. Rachel describes the situation in which she found herself:

So it felt at times, that I was the rudder in this department. And I kept saying, I can't keep this position, I can't be used in that way. Not only did I get all the kids with drug and alcohol problems, I got all the kids needing emotional support. I knew every kid, every week on the whole list of student services because the other counsellors were not being able to cope with those kinds of needs. We were really floating. Just barely floating last year. And,
I was talking to my liaison people and to [agency supervisor], a lot about how it's an unfortunate situation that the school's in there but it would also be inappropriate for me to start taking on those kinds of cases. It's my job to bring it to their attention not to do the work. And the school was having a hard time hearing that. So-- we had some really rough, rough moments last year.

Thus, in some schools, PWs were being used increasingly to fill the gap in services created by funding cutbacks and resource allocation problems in the education system. This is exactly what the unions were concerned about in their initial objections to the SBPP. The outcomes of this struggle were either hanging on to prevention despite the struggle, or giving in to intervention.

**Hanging on to Prevention.** The foregoing discussion suggests reasons it might be difficult to hang on to prevention in the face of so many factors encouraging them to engage in intervention. Having the support of school colleagues who understood the need for prevention made it easier to hang onto prevention, as the following quotation by a school counsellor implies:

But I was glad to see that she hung onto the model because you could very quickly fall into becoming a counsellor, which wasn't what we needed, we needed the prevention. And she made it very clear over and over again if people would say can you see this kid, can you see that kid. Well, I will, but it will be for referral. I'm here as a prevention worker and I have a bigger picture to look at and a bigger thing to follow so she kept that as her guiding force, which I think was what helped to make it a success.

The PW's background and experience seemed to be a critical factor in whether the PW was able to hang on to prevention. For the most part, the PWs who were most successful at doing this were not educated as counsellors or were not working within an addiction framework for their practice. Their experience had been working with a broad range of youth in community settings rather than just with high risk or very troubled young people. These PWs tended to view the entire population of young people as their “client” so, in general, they did much less one-to-one work with individuals who were experiencing problems.

One agency supervisor recognized the potential pitfalls of hiring someone for the PW position who had a background in counselling. As reflected in her comments below, this supervisor believed that someone with a counselling background would have difficulty with the philosophy and intent of the SBPP:

And we wanted someone who was not interested in a counselling position. That was an essential. And I think that was something that really came across to me very clearly during the initial orientation to the school-based concept was that if I made the mistake of hiring
someone who was primarily a counsellor in terms of their background experience, they would find the position extremely frustrating and might, in a sense, skew the job description in having difficulty letting go of cases that conceivably might be short-term. Because there is lots of rewards in the counselling end of things you know. So again, we were very fortunate in finding Susan who had prior experience in youth work but working with kids around personal empowerment and getting them mobilized and enthused.

**Giving in to Intervention.** Most PWs, however, seemed unable or unwilling to resist the pull to intervention entirely. It is probably not surprising, since many of the PWs were educated as counsellors, and had worked with very high risk young people or people experiencing addictions. The background experiences of PWs who found themselves giving in to intervention, were more likely to involve doing therapy with young people who were experiencing problems. Those who were able to hang onto prevention had more experience working with the general population of young people in community settings.

One of the PWs who had a background in addictions counselling talked about her own struggle in making the shift from focussing on people experiencing serious problems to working with students in the general population of the school who might be experimenting with substances but who had not yet experienced difficulties. Even though she felt that she had been able to make that shift, she was still most concerned with early intervention:

So, I've almost had a biased viewpoint, working with families with kids that have been on the addicted end of the scale knowing what happens at the end and working in prevention has been a real struggle for me because I was coming really heavily from over here and being quite reactive and I've learned to relax a whole lot and work on the premise that if I can prevent some adverse consequences, that kids are cutting down, that's ok. That whole notion -- took a long time for me to accept that - to even work with that in my own head. From my own personal [experience]-- I think I have a much healthier perspective now, because when you are so focussed on the devastation of addiction - that's all you've been working on for a number of years - you have to move out to a population where there is a continuum [of drug use] and you have that small percentage out here that are addicted, but now we're looking at a larger picture where that isn't the case. So that's quite an evolution for me.

Several of the PWs who had counselling backgrounds acknowledged that they and some of their colleagues were not adequately prepared by their training to take on the prevention aspect of the job. Caroline commented on her need to know more about prevention strategies because she did not have much experience in prevention:
Prevention side of things, I would have liked to have more of an idea on prevention and some other strategies. So I didn't feel like I knew enough about prevention, although when I was working in the outpatient clinic, prevention was a small portion of my job. Whereas here, it's the majority of the position. So I would have liked more training in the area of prevention.

Not only did many PWs have limited experience in doing prevention and thus were unsure about what prevention strategies would be appropriate, they also commented that they did not have a theoretical understanding of what constituted effective prevention and how to apply that understanding to practice, as Peter pointed out:

And we need to know what is effective prevention, or at least as best they know, and how can you use that in what you are doing.

The ability of the PW to resist intervention, however, was not solely dependent on her or his background and experience. The PW who seemed to be most successful in doing this had a remarkably supportive context within which to work. The school understood and supported the concept of prevention. The groundwork for the program had been adequately laid so there was support from teachers, counsellors and the unions. The administrators made it clear to everyone in the school that they valued her work and her opinions. They demonstrated this by frequently seeking her out for advice on a variety of very difficult issues in the school. The school climate was nurturing and supportive and the teachers found it to be a stimulating and caring work environment. Students, even those considered to be “high risk,” had excellent relationships with administration and were actively involved in a variety of school governance initiatives. The agency supervisor was equally supportive and had a clear understanding of prevention. The PW herself was knowledgeable about prevention and had worked in the area before. She had an obvious community health orientation and did not have a counselling background. Thus, although she felt the pull to intervention and experienced it as a challenge, she did not feel it as strongly as those who were addictions counsellors by training.

Subverting the intent. Finally, there were some PWs who appeared to decide to do just what they thought they should do, even if it meant deliberately subverting the intent of the program, taking the position that they knew what was best. For them, there did not appear to be as much of a struggle as there was for
others. They simply did what they felt they needed to do because their priority was the individual client, not the school. Shauna summarized it this way:

My second rule is, individual students come first. Now, if I have 10 meetings scheduled for that week, and whether that be with my counterattack students, whether that's a classroom presentation, whether that's anything. If there is a student that's in crisis on Monday morning and it takes me till Friday evening to actually help this person, everything else gets cancelled. And there may be some hurt feelings, you know...I mean it might take them the first ten minutes in front of the class that they are upset, but they will get over it. I mean, they don’t really have any other choice.

PWs who were subverting the intent included those PWs mentioned above in the discussion of what the PW role is and is not who took on longer term counselling and therapy with addicted students and kept it hidden from their ADS area managers. For the most part, these people believed in what they were doing and did not have a big investment in what ADS was trying to accomplish through the SBPP. This PWs comments are typical of subverting the intent:

What I care about is working with the kids and making a difference in their lives. I don’t feel connected with Alcohol and Drug and I really couldn’t care less. You know, I’m a big girl and I don’t have any investment in Alcohol and Drug. If they won’t pay me to do this, I’ll find someone who will. And so it doesn’t worry me if they go off on this little tack about not doing treatment. I guess I would worry if I felt totally threatened that it was my lifetime career. But I just do what I think I need to do.

Fortunately for those PWs, there was much less pressure from ADS area managers for PWs to be focussing on prevention than there was for them to be focussing narrowly on alcohol and other drug issues. In fact, in doing intervention, PWs were staying focussed on alcohol and drug use behaviour in a very direct way. It appears to me that many area managers themselves remained more committed to intervention than to prevention. Recall the earlier quotation (see p. 121) about the area manager who was interested only in obtaining treatment statistics when monitoring the work of the PWs in his jurisdiction, despite the proclamation that the SBPP was a prevention project.

Pro active Planning versus Crisis Management

The second balancing act that PWs had to sort out for themselves was the dilemma of pro-active planning versus crisis management. On one hand, the approach to prevention advocated by ADS, which is inherent in the SBPM, requires that PWs engage in a systematic planning process. The prevention strategies
that ultimately get implemented are expected to emerge from a process in which information is gathered and used to set priorities about what is to be done. Furthermore, the PW is expected to engage the school community in this process. On the other hand, most schools do not tend to manage their day-to-day activity in this way. The nature of schools is such that they are continually dealing with crises, small and large. For the most part, schools live in the moment, react to issues as they emerge, and solve problems when they present themselves. The PWs’ experience was that the notion of pro active planning, either to avert such crises or even to address chronic problems, simply did not occur. Caroline described it this way:

Also I would say there is no bridge between prevention and education, that’s a large gap there. I thought some of the work would have been done [before I came in] to help them see what was the difference between pro active and reactive. Their educational system, at least in this area, was more about, if a problem comes up, we have to resolve it, build a committee around it and so on and so forth. It’s more like patrolling and punishing than it is pro active or starting something preventive before it happens.

It was not only PWs who made these observations. Others who come into the school from outside to provide services in the school also experienced this crisis orientation. A public health nurse described her observations:

I know them all and they are all wonderful people who care, who care a lot about kids, who want to make the school better for them and yet they are constantly having to deal with really huge crises. I see them not being able to get beyond the crises to deal with positive things. They try and plan things but, it’s hard to plan anything. You don't have money to implement anything and you have-- it takes such an enormous amount of energy to get staff behind a prevention thing. But it seems like the fires keep coming and you’re doing that all the time so that there wasn’t any energy left to put the organizing time into that [a health promotion network].

In part, this orientation emerged from the nature of the work, from the social organization of schools, and from the developmental issues of young people. Even those PWs who have made serious attempts to use the SBPM in a systematic way to plan their prevention strategies acknowledge the difficulty of doing this when working with youth. Schools are obviously confronted with this on a daily basis so they often do not have a propensity for systematic planning.

It seems that the aversion to planning is not restricted to crises but extends to other more routine issues. During the time I spent in the schools, I observed countless incidents of PWs responding to on-the-
spot requests and engaging in 30 second “planning” sessions in the hall in response to teachers approaching them with immediate “needs.” PWs struggled in their work to get people to take a step back, to plan, and to organize before jumping in to solve the problem. It required vigilance and patience to be going always against the norm. Kathleen describes her experience in trying to “pull back the reins”:

And I’ve told a lot of the counsellors that want to jump on this immediately and start strategizing. And I said it’s not time yet. You’ve got to plan it, you’ve got to have the kids’ input, or we’re just spinning our wheels. We’re not getting anywhere. There is that tendency for people to identify a problem and to want to jump in with all these strategies. And it’s really hard to pull them back.

Many PWs found themselves being drawn into a reactive stance, often because of the pressures on them to respond to the issue at hand. Earlier, I discussed the norm of immediacy that governs actions in schools and creates an organizational demand to which PWs respond by doing. It is difficult for PWs not to respond in a reactive way to issues that emerge because that is simply the way the school does business. To refuse to become involved in such matters would jeopardize the relationships the PW had worked hard to develop. Melinda expressed the difficulty she had in such an environment:

Yeah, and I find too that I’ve become very reactive, but it seems you can’t plan you know because it just seems that people need me now or tomorrow and that’s how they have been using my service. As far as teachers go.

In exploring the types of crisis situations in which PWs got involved, one can see that it would not take too many crises before a great deal of the PWs time is devoted to dealing with issues that might not be considered within the realm of the PW role. For many PWs, planning for prevention ultimately took second place to those kinds of issues. For PWs who work part-time, this demand to deal with crises can be particularly challenging because the limited time in the school makes it difficult to engage in pro-active planning. This was the experience of the following PW who admitted to not yet having been able to use the model yet at that point in time.

And by the time I get back next week—that there’s so much to do that I can’t plan ahead for anything new. So in terms of work load it’s just really heavy. Since I am only here two days a week, when I come back the next week there is always some crisis to deal with. So I never get time to plan.
For some PWs, the school's lack of attention to planning was consistent with their own style of working. In this case, PWs had to struggle even harder to introduce a planning process into the school. It was very easy to fall into the school's way of doing business in this circumstance. Julia expressed it this way:

It is difficult for me because I would prefer [strong emphasis] someone else did the planning and I'll do the doing. I have to take a step back and develop a little bit of patience through the initial planning of it and getting the committee together and down on paper what we are doing and why we are doing it and how we came to decide to do that. I always have to take a step back to do that. It is difficult for me in that I'm a let's get out there and do it [kind of person] - we don't need to talk about it, so this creates the dialogue that I need.

The factors that influenced how the PWs managed this process were similar to those that influenced how the PW balanced intervention and prevention. In particular, the PWs own background and experience and the school norm of immediacy seemed to be the most salient factors in this. PWs who had come from a counselling background, for example, were accustomed to helping people deal with problems and manage crises when they presented. In fact, that is the raison d'etre for counselling, so some PWs fell quite easily into this way of being in schools. Others, however, recognized the importance of dealing with issues in a pro active way and tried to work with teachers and counsellors to address this concern.

The issue of pro-active planning versus crisis management is intricately bound up with the issue of whether the PW was able to implement the model in the school. The school's propensity for crisis management versus pro-active planning is obviously a barrier to the PWs introduction and application of the SBPM. This will be discussed in more detail later under Confronting the Model.

PW role. Based on the analysis discussed above in creating a role, it appears that the roles created by PWs in the schools can be located on a continuum represented at either end by two ideal types: a capacity-building role and a service provision role. Some PWs fit clearly into one or the other of these types of roles. Others have characteristics of both but their practice tends more toward one or the other. Table 4 presents the basic characteristics of each of these types.
<table>
<thead>
<tr>
<th>Service Provision Role</th>
<th>Capacity-Building Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>• individual approach</td>
<td>• population approach</td>
</tr>
<tr>
<td>• views individual students as clients</td>
<td>• views school and/or community as client</td>
</tr>
<tr>
<td>• emphasis on early intervention, i.e., screening, referrals and counselling of individual students</td>
<td>• limited early intervention and counselling, focus of intervention work is on groups, especially peer counselling</td>
</tr>
<tr>
<td>• limited school-wide activities and whole school focus</td>
<td>• a whole school focus, school-wide activities</td>
</tr>
<tr>
<td>• acts as resource to teachers for individual students</td>
<td>• acts as resource to teachers for curriculum development, implementation of CSH or staff development</td>
</tr>
<tr>
<td>• acts as resource to counsellors for individual student problems</td>
<td>• acts as resource to counsellors on general alcohol and drug issues to enhance capacity of counsellors to assist the larger population of students</td>
</tr>
<tr>
<td>• classroom presentations that depend on PW doing the teaching, either as guest lecturer or teacher of entire prevention curriculum</td>
<td>• health education in school is not dependent on PW doing the teaching. When doing guest presentations, encourages co-facilitation</td>
</tr>
<tr>
<td>• deals primarily with high-risk substance using population of students</td>
<td>• deals with general population of students in the school, including low and high risk groups</td>
</tr>
<tr>
<td>• strict focus on alcohol and drug use issues</td>
<td>• integrates work with other health promotion activities in the school and does not restrict focus to alcohol and drug use behaviour. Targets determinants of behaviour, including social determinants.</td>
</tr>
<tr>
<td>• school versus a community focus. Tendency not to make strong linkages with the community</td>
<td>• emphasis on community-linkages and connecting school with community resources to aid in the problem of alcohol and drug prevention</td>
</tr>
<tr>
<td>• target of change is individual students</td>
<td>• multiple targets for change including school policies and environment, larger community, staff and students</td>
</tr>
<tr>
<td>• PW as expert</td>
<td>• PW as facilitator</td>
</tr>
<tr>
<td>• reactive</td>
<td>• pro-active</td>
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</tbody>
</table>
PWs who adopted a capacity-building role tended to take more of a population-focussed perspective in which the entire school became their client, rather than individual students. They were less likely to focus on early intervention services with individual students, preferring instead to work with groups of students and on activities that focused on the school as a whole. These PWs were more likely to attempt to make changes in the school environment rather than focussing narrowly on changing the behaviour of individual students. A capacity-building focus meant that the PW worked toward developing the ability of the school and its personnel to implement its own alcohol and drug prevention and intervention strategies rather than relying on the services of the PW. PWs who took this focus worked with students in ways that allowed students to make decisions and develop skills to solve their own issues. In adopting this type of a role, the PW was more likely to take a pro-active stance and to form strong connections with the community.

PWs who adopted a service-provision role tended to do just that, provide services. The emphasis was on early intervention versus prevention and health promotion and the focus was on providing services to individual students who were experiencing substance misuse problems. There was less likely to be a focus on building the capacity of the school community, including youth, to develop the knowledge and skills to solve their own problems. PWs with a service-provision orientation were more likely to take on a role of the expert rather than a role of facilitator. The emphasis was primarily on services provided in the school rather than making linkages with the community to develop partnerships for addressing alcohol and drug use issues.

Few PWs demonstrated all of the characteristics of either of these ideal types. Unfortunately, I do not have enough data on the majority of PWs to be able to classify them with any certainty. In the six site visit schools, however, one PW clearly demonstrated a capacity-building perspective in the creation of her role in the school. One other PW could be characterized unequivocally as having created a service provision role. The other four were somewhere in between these pure types, but two tended more toward capacity-building, while the other two tended more toward service provision.

In summary, PWs had some flexibility to create their own roles in the school. At the same time, strong pressures in schools influenced how the PW role eventually evolved in any given school.
role, PWs had to find the focus of the role, particularly in determining what they were and were not supposed to be doing, and in taking a narrow focus on alcohol and drug use versus a broader health promotion perspective. In finding the focus, PWs also had to divest themselves of some responsibilities taken on earlier, to focus the role on what they were supposed to be doing to meet their contractual obligations. PWs also had to strike a balance between providing intervention services or remaining focused on prevention. Many PWs felt a strong pull toward intervention, and few PWs could resist that pull. Finally, PWs had to strike a balance between being drawn into the crisis management orientation of schools or doing pro-active planning. Once again, the demands of the school pulled many PWs toward the crisis management orientation of schools. In the end, two role tendencies emerged from this process, a capacity-building role and a service provision role with PWs distributed between these polar types or role tendencies. Now, having gained entry, and created a role in the school, the PW was ready to move on to enhancing school readiness.
CHAPTER EIGHT
ENHANCING SCHOOL READINESS AS A PART OF ENTERING THE FIELD

Before the PW and the school can make any progress in developing and implementing collaborative and school-owned prevention strategies, the school must be ready and willing to engage in such action. Without this readiness, the PW is engaging in "prevention gestures" defined by one prevention worker as "acts that have meaning within the accountability structure, and little or no other meaning." The extent to which schools were "ready" varied considerably across the sample of schools involved in this study. I was able to identify only two schools, possibly three, as having all or most of the properties of readiness as described earlier. More ready schools may have existed, but I do not have the data to make that assessment. Only one of the six site visit schools demonstrated all or most of the properties of school readiness. Overall, the majority of schools began the project "unready" to engage in collaborative, consensus-based action to prevent alcohol and drug misuse among adolescents in their schools.

Many of these school readiness factors have been identified earlier as important influences of various PW actions in gaining entry and creating a role. As the PWs worked toward gaining entry and creating a role, however, their actions may have had some effect on these conditions of school readiness. Thus, the PW was not necessarily establishing school readiness, but enhancing it.

In enhancing school readiness to engage in collaborative and consensus-based actions, PWs faced several challenges. These included: selling the issue, selling the model, facilitating participation, and steering the steering committee. The instrumental goal of enhancing readiness was achieving ownership of the issue and the solution by the school community.

40 To recap, a "ready" school was one in which: (a) the school adopted the program because they believed the program would help them address an acknowledged problem in the school; (b) there was a clear understanding of the funder's expectations for the SBPP, and school administrators and teachers supported those expectations; (c) there was a fit between the school's philosophy/vision/goals and the underlying philosophy of the SBPP; (d) the school understood the meaning of prevention and valued it; (e) the schools' commitment to implement the SBPP was reflected in the provision of the necessary resources to the PW (e.g., office space, a telephone, a small budget for programming); (f) there was support from administration and teachers for the PW role and the SBPM; and (g) the school was supportive of a comprehensive approach to school health and saw a role for the PW in facilitating implementation of the Learning for Living program in the school.
Selling the Issue

Although the SBPM handbook states that it is not the PW's job "to sell a particular idea of what concerns are most important or of how serious a particular situation is" (Alcohol and Drug Programs, 1994, p. 31), PWs often found themselves having to do just that, as Melinda described:

"You know, I'm trying to sell this stuff. That's what I feel like I'm doing. I'm a salesperson trying to sell it."

In fact, the entire phase II of the model is about gathering data on the issue to help the PW make a case for the issue in question. "In phase II, health issues are assessed by looking at critical indicators that point to the extent and seriousness of the concern, and determining which groups are most involved" (Alcohol and Drug Programs, 1994, p. 62). The handbook goes on to state that it is important to have the close involvement of the key players and the steering committee because they need to understand and accept the data and conclusions if the program is to be a success. Clearly, the aim is to sell the idea that alcohol and drug use by adolescents is a problem that needs to be addressed. To move forward in accomplishing the SBPP goals, most PWs believed that they needed to get the school community to acknowledge that there was a problem with alcohol and drug use by adolescents in the school, as this quotation by Marlene demonstrates:

"So for me to do some things in this job means I have to get staff people to a point where they can admit they have a problem, and not very many teachers are real comfortable doing that kind of stuff."

"In many schools, it appeared that both administrators and teachers were unwilling to admit to having an alcohol and drug problem in the school, although their reasons differed slightly. As the following counsellor points out, teachers were reluctant to admit they had a problem in the school because then they might have to deal with that problem:

Sometimes I think we slightly have our heads in the sand about drug and alcohol issues. I'm not sure why. I think that partly that might be that if we find out about it and we recognize it then, because we're teachers, we have a sense that we must initially do something about it real quick. If you find out that—and so I wouldn't say a reluctance, like but I sometimes feel that we just would rather not come right up front and say, we've got a problem here and we have to do something about it."
Some PWs believed that teachers do not know how to deal with the issue so it is easier for them just to ignore the problem or deny that it exists. Administrators are reluctant to acknowledge the issue for the same reasons as teachers. But, they are also more concerned about public relations, the image of the school in the community, and perhaps their own careers. Some PWs found that they tried very hard to get the issue of alcohol and drug use problems onto the table for discussion, but the administration would ignore the issue, refuse to deal with it, or as one PW put it "sweep it under the carpet".

This observation was confirmed by a school principal who explained why school administrators were concerned about letting people in the community know about the problems they are dealing with in the school. He suggests that it is not a matter of denying there is a problem, just that administrators might go about it in a different way:

And in the school administration, you also don't go around advertising all the problems that we all know we have, it just isn't good PR to focus on these things too much because in the school scene perception is everything. So we wanted to do exactly the kinds of things she [the PW] wants to do and we have the same goals, it's just that sometimes our way of going about it is different.

In general, PWs recognized that it was a long-term commitment to getting people to acknowledge the issue. It was not something that could be done overnight. Several PWs used the metaphor of planting seeds to describe the more subtle ways they felt they had to sell the issue to get people to acknowledge and then act on it. Many PWs, however, were unsuccessful in ever getting the school to acknowledge the issue fully and in such a way that there was ownership and a commitment from the school, as a whole, to address the issue. The issue just was not that important to people. As Karen points out, some counsellors and teachers did not think it was a serious enough issue to devote their time and energy to when they had so many of their own concerns:

I've found some counsellors and teachers really sort of have the attitude, well drug and alcohol isn't that big a deal, and they can't take it too seriously. This is what has been said to me. I mean, they're glad that I'm there so they can send kids, but they don't think it's a big deal. This really concerns me.

The major strategy for selling the issue was gathering data on the problem to provide the school with information that would demonstrate the scope and magnitude of the problem. In fact, this is probably
the one part of the SBPM that almost everyone applied. The SBPM handbook outlines a number of data gathering strategies, and all PWs used at least some of these. Twenty schools had access to data gathered for the purposes of the SBPP evaluation by the IHPR evaluation team but almost half of the PWs administered their own surveys. Several PWs reported, however, that their schools were not particularly interested in the results and in some cases, administrators denied that the results were accurate. One principal, for example, suggested that the survey results were inflated:

I think we have maintained a reasonable level of abstinence in the school. There are not as many of them out there using drugs as some people would like us to believe or as some of these surveys suggest, and so on.

In three of the six schools I visited, the school administrators had not even looked at the findings of the student survey nor had they encouraged the PW to share those findings in the school. In some schools where the PW had shared results, the findings had little impact on activities by teachers in the school. In one situation where two teachers were working with a group of students on smoking issues and were applying for funding, they did not make use of the survey results in their own school to bolster their case. When I asked the PW about this, he expressed frustration about the response to his own efforts to communicate the findings from the IHPR student survey to the school. This frustration was very common among PWs. They often felt like they were banging their heads against the wall or engaging in a fruitless exercise.

Another strategy used by PWs was to attempt educational in-services with teachers to increase their levels of awareness about the issue and to convince them of its importance. Many PWs, however, did not find teachers particularly receptive to their offers of doing such an in-service, as Tracy found:

In my school, this is my third year and I have not once been requested to do a drug and alcohol awareness for the staff’s information. I’ve offered it, I’ve proposed it, I’ve given them outlines. I’ve talked about the need. But it will not be – it’s just not on anyone’s agenda.

All in all, selling the issue of alcohol and drug use was a big challenge for PWs, one which absorbed a lot of their time and energy. If the issue was not a concern in the school at the outset of the project, few PWs were successful in getting alcohol and drug use to be a priority on the school’s agenda. The few instances of success required perseverance on the part of the PW and a willingness to put themselves at risk.
because they really had to push the administration to have the issue acknowledged. In the quotation below, Laurene describes the challenge and her ultimate success:

In the first year there was a real reluctance to deal directly with alcohol and drug issues, but that's changed because of my irritant characteristic that I have, but being in this position, I am privy to so many of the problems that they never hear about. And well, fundamentally too, change takes a long time. And when I look at the list of barriers, I think the school found me irritating and it took them some time when I was irritating them to deal with how they felt about it and then it took them some time to separate me from the issue and then to deal with the issue. But this year, I am saying the same things, and they are dealing with it.

This PW described herself as an “irritant.” She kept pushing the issue, putting the problem on the table at every opportunity and challenged the school to respond. Many PWs would not have been in a position to do this. To be successful in challenging the school, PWs had to have achieved peerage, be well respected for their abilities and expertise and have the support of staff, parents, and influential members of the outside community. They also had to be self-assured, confident, committed to the issue, and willing to put their jobs on the line for what they believed was important. Without these personal characteristics or the right environmental conditions, most PWs had insufficient influence within the organization to challenge the status quo.

Even when school administrators acknowledged that there was a problem with alcohol and drug use in the school, they defined it as a student problem. In other words, the alcohol and drug use problem belonged to the students. It is the students who are doing something “wrong” or engaging in behaviour that puts them at risk for adverse consequences. The solution, therefore, was to change the student. An acceptable way of doing this was for PWs and counsellors to assess the problem and either help the student directly or refer them to someone outside the school to solve the problem. This is consistent with the finding that most schools value intervention over prevention.

My own observations during the site visits led me to hypothesize that PWs, in schools not characterized by the properties of school readiness, would be supported when the problem was defined as one that belonged to individual students and perhaps their families. As soon as the PW, however, proposed that there was a school problem that needed to be addressed by some action or change in the school itself,
administrators were likely to balk. For example, in one school the custodians had been finding a lot of empty beer bottles in the washrooms and had repeatedly reported this to administration. There had been no follow-up and the behaviour was continuing. The administrators did not involve the PW in this but the custodians finally went to the PW with the problem because they were concerned by the lack of action on the part of administration. The PW, however, was unsuccessful in even getting this issue on the table for discussion with the school administration despite repeated attempts to do so. Soon after, the school decided it did not need a prevention program in the school and the SBPP was withdrawn.

In another school, blatant drug dealing and bootlegging were going on in the school parking lot and the PW could not bring it to the attention of the school administrators because they refused to meet with her about it. Ultimately, she had to pull rank and involve her community agency supervisor to arrange a meeting to get the issue on the table. Another example involved a PW who was concerned about his school’s punitive policies on alcohol and drug use by students because he believed the policies were out of line with the recent literature and were putting students at greater risk of dropping out of school and escalating their drug use. Furthermore, the policies were not solving the problem. Because the policies were excessively punitive, few teachers were willing to report infractions. The PW proposed pulling together a group comprising students, parents, teachers, a school administrator, a school district representative, and himself to develop a new policy and propose it to the school board. The PW was stonewalled at every turn even though the school administration verbally supported the idea.

What these stories suggest is that the PW can “sell” the notion that students have problems with drug use that interferes with school work and their personal lives. They can also sell the solution that students need support services, counselling, assessment and referral. Strategies that help students build self esteem, develop assertiveness and refusal skills, and change their personal behaviour are also popular and acceptable solutions. What PWs cannot sell very easily is the notion that the roots of some problems lie outside the control of students, particularly in the way schools are organized or managed, or in the power relations between adults and students. Even more difficult for PWs to sell is the notion that changes in school policies...
and school organization might be part of the solution. The source of the problem and the focus of the solution must remain with the student for the PW to sell the issue successfully to most schools.

**Selling the Model**

The SBPM presents an approach to problem solving that does not always mesh with the school’s way of doing business (i.e., lack of *program fit*). The PW was expected, not only to use this model to plan and implement prevention activities in the school, but to “sell” this model to the school. According to ADP, “understanding and promoting the prevention model and approach is fundamental” (Alcohol and Drug Programs, 1994, p. 32). The extent to which the PW was able to do this was dependent, in part, on the support of the school for this type of process. Many PWs, however, were uncomfortable with the notion of *selling the model* to a school that simply was not interested. These PWs believed that ADP should have established an agreement with the school about using the model in advance of the PWs entry to the school.

Shawn describes the challenge that selling the model in his school presented:

> Yeah, I think that if it was, well our head school counsellor would not have been familiar with it to start with, so it would be a good idea in those initial stages, actually before the worker is brought in that it is agreed that they're going to adhere to this model. Because now it's really up to us to sell it, and that’s pretty hard if they don't want to do it, and that's the way schools are. So I'm trying to convince them of something that they don't really understand at all and that they don't even really want to talk about.

For the most part, however, *school administrators and teachers were not interested* in and did not pay attention to the model, even if they knew about it. It was incidental, in their minds, to the development of the program in the school. They also rejected or ignored the model for reasons other than a mere lack of interest. Many administrators and teachers simply did not think highly of the model. It was not something that they could see using to guide program development in their schools. Tracy describes her supervisor’s view of the model:

> My supervisor knows it exists and doesn’t think much about it. If I mention it, you would catch her rolling her eyes. So we don’t even talk about it.

That PW’s supervisor, a vice-principal, also implied that it was difficult to take the model too seriously when ADS kept changing it, as the following quotation demonstrates:
I think in terms of the various models that have come along with the position - that was a bit confusing, perhaps if they [ADS] knew what they really wanted to do it would help. It keeps shifting in midstream so I'm not too worried about whether she uses it or not. I'm more concerned with results.

Overall, the SBPM had little perceived relevance as a planning framework for most members of the school community. As a result, most PWs refrained from even discussing the model with their schools. If the PWs did use the model themselves, they attempted to use it as a framework to guide their own practice without selling it to the school. Some PWs were also able to work through the model with their steering committees, but this was rare and generally happened in schools that were highly supportive of the SBPP and demonstrated high levels of school readiness.

Some of the other issues related to selling and using the model in the school are discussed in the sections on Confronting and "Doing" the Model. For the most part, PWs did not go out of their way to sell and promote the model if they found a clear lack of interest on the part of school personnel. In those few instances where there was support for the model, it occurred in schools that had a good program fit, a problem-solving orientation, and a good understanding of and value placed on prevention.

Facilitating Participation

According to the SBPM handbook, "Community participation is a fundamental concept of prevention and health promotion. It does not mean simply getting people to attend a program. Rather, community participation requires the active involvement of community members in the planning and implementation of programs and activities" (Alcohol and Drug Programs, 1994, p. 26).

Facilitating participation by administrators and teachers was one of the biggest challenges faced by PWs as they attempted to establish the SBPP in their schools. Participation was a virtual impossibility if the PW had not established program legitimacy, established personal credibility, and learned the ropes. Thus, achieving peerage was fundamental to obtaining meaningful participation in the project. For most PWs, their experience was that they were the ones who had to do the work, carry the ball, and get things going in the school. A few teachers might have participated directly in planning and implementing but, as Carson found, it was usually the PW on his or her own:
And I think with, I mean anything that goes on here I kind of have to take the ball and run with it. There aren't a lot of teachers, I mean everybody's busy, right? And there aren't a lot of people really jumping in to say hey, can I help, can I run this for you, or can I help you with that, or whatever. So anything that does get done is kind of carried on the shoulders of a few rather than spread out.

PWs experienced a similar situation with school administrators. Many PWs said their school administrators were supportive of what they did in the school as long as the PW just went ahead and did it. Administrators were busy people and did not want to get involved in the day-to-day activities of the PW. They just wanted the PW to get on with the job and leave them out of it.

Even in schools in which teachers and administrators showed considerable support, in principle, for the SBPP, the majority of people were unwilling to commit the time and energy to participate with the PW in planning and implementing prevention strategies in the school. As Julia experienced, people were supportive of the program and the PW but they did not want to have to do any of the work because they wanted to avoid an add-on to their already heavy work loads:

In terms of teachers, they support the program being here and that the Prevention Worker will do the work. Their big concern is that they would have to do the work so they support the position and the program, they just don't necessarily support that they're going to help out. School counsellors I think pretty much the same thing. They support the position, they just don't want to have to be given any - their work load increased.

Many PWs said that in their schools it was the younger teachers who were more willing to get involved and to work with them. In terms of the curriculum, younger teachers were not invested in something they had been doing for a long time, they were more favourably disposed toward the notion of comprehensive school health, and they were more open to new ideas.

Overall, facilitating participation was a challenge for most PWs and a big frustration for many of them. There was, however, another side to the story. One of these “older” teachers, also a school counsellor, described it this way:

You know, I can see the frustration for her at not getting participation. I can see PWs discouraged at that and thinking, these people don't want to do anything, but I know what it feels like to be on the other side where you feel so swamped and you've decided to set limits for yourself and you try very hard to keep control and balance in your own life. You have things outside, you have things here and you've decided to do what you can do and I'm not going to keep stretching myself. I've stretched myself like that for too many years. I'm
talking about me now. You can't sit down and explain that to everybody. You just have to say no. I can see how they might get discouraged because there are a lot of people in my position.

PWs were often so caught up in their own frustration in trying to get some participation that they did not see this other side of the story.

There were, however, two or three PWs who reported high levels of participation by teachers in activities and events even though the school did not demonstrate too many characteristics of school readiness. This happened because the PW was charismatic. In one site visit school, it was obvious that a lot of people would bend over backwards to get involved in anything the PW was doing. Some PWs had the type of personality that drew people in because the person was fun to be around and they organized the types of events and activities that got people involved.

Those schools in which true teacher and administrator participation occurred were those schools that entered the project with at least some of the characteristics of school readiness already developed, but again, such schools were few. Schools that adopted the program for opportunistic reasons (i.e., unrelated to concern for benefitting the school) or that had the program imposed on them were unlikely to have many of their members willing to participate. Without a clear fit between the program goals and the vision of the school then again, participation was less likely. Administrative support for the PW and a willingness on the part of the administration to seek advice from and get involved with the PW in planning sent a signal to the other members of the school community. The administrators' support of, attention to, and active involvement with the PW gave the PW a higher status in the school than she or he might otherwise have had. In fact, it was only in the two schools identified as "ready" that such high PW status was observed. This status gave the PW certain advantages and encouraged others to participate with her or him in various activities and projects, as Susan described:

Like I'm more sought out by the administrators and I have meetings with them about different students and stuff like that, and I can do things that teachers can't do. So it sort of puts me in a unique position that way. So my status is higher in the school. My feeling is that it's higher. And I think it's because I'm not constrained by the pressures that the teachers have and I have more flexibility around hours and the administrators really value that. And people are more willing to participate because of it, I think.
Although few schools demonstrated such high levels of administrator involvement with and support for the PW, it is clear that teacher participation was likely to be higher in schools where there was obvious administrator support. Once the PW had achieved peerage, the amount of participation usually increased somewhat, but in the majority of schools, getting participation was an ongoing challenge and was never at a level PWs would have liked.

In contrast to the struggle to facilitate participation by teachers and administrators, obtaining student participation in a wide variety of activities was not a problem for a skilled and outgoing PW, particularly if the person was credible, respected, and trusted by the students. Those PWs who engaged in more school-wide activities tended to have higher rates of participation from a wide variety of student subgroups in the population.

Not all PWs were charismatic, but some PWs were better at facilitating participation than others. PWs who concentrated more of their time on early intervention and teaching activities were generally not as involved with groups of students in planning and implementing youth-initiated, youth-directed, and school-wide activities. If a PW had a capacity-building orientation then the PW was more likely to generate active and meaningful youth participation in a broad range of student-centred activities. PWs who focussed on building the capacity of the young people would encourage them to take charge of their own issues and to do something about them. At the same time, she or he would support them in their efforts and help them to develop the necessary skills. The key element was that the students themselves were active participants in deciding what needed to be done and how they would do it. The following quotations describe a student’s and an agency supervisor’s experiences with a PW who clearly demonstrated a capacity-building orientation in her interactions with youth:

Susan comes to us and goes, “OK, what do you guys want to do about it?” And then we cover our chalkboard full of stuff we want to do. And then we decide what ones we really want to do and then we just put our minds to it and decide what we need for this and who’s going to help us do it (Grade 9 Student).

So what I appreciate is that Susan has kind of heard the needs the kids are voicing and then really challenged them to do something about it. So she's saying okay this is what you want, and then she says “Do something, go for it”. So they're really taking ownership of some of
these things. So it's those kinds of things that I truly appreciate in terms of her working style. As opposed to her taking them under her wing and kind of doing this care taking, what she's doing is really encouraging them to take some ownership of what they are capable of (Agency supervisor).

PWs who had more of a service provision orientation tended to do things for the students and to take charge of the activities in which students were involved. These PWs made the decisions about what would be done, although they might ask for student input. They had less emphasis on building the capacity of the students to decide, develop and manage their own projects. It also seemed that students were less likely to get involved in skill-building types of activities. When asked about how youth participate in what she does in the school, one PW described her own directive style:

Ok, before the students leave in June, like the [Counterattack] group, I will ask them, “What would you like to see next year.” And they will give me a whole list of ideas and they may not get anything that’s on the list, but at least I know what they want. Then in the summer I pretty much decide what I’m going to do the next year. And with the alternate school, I’ll plan the first four months of classes in the summer then I might ask them what they want to see for the last four months. And if it fits with my curriculum, then I might get a guest speaker on the topic or something.

It is clear that this PW decided what would and what would not be done. If the students’ ideas coincided with her own about what needed to happen then they might have been considered. The type of participation she is talking about is very different from the participation described above by the PW with a capacity-building orientation.

Getting parent participation was another major challenge for PWs, just as it is for most of their secondary school colleagues. Almost everyone I talked to said that parent participation really drops off at the secondary school level and that it is very difficult to get parents involved in anything. The experience of many PWs was that they would organize some type of parent function and then get very limited participation. John’s experience was typical:

The other thing that we have been struggling with this year has been parent participation. I’ve had three times in ______ and two times in ______ to stage a parent event, information sharing, talking and discussion, forum or whatever you want to call it. And I got eventually two parents to show up at one place and zero at the other. I haven’t been able to get any parents to get engaged and in fact the parents that I had on the steering committee in _____ are no longer on the steering committee. They disappeared. So my parent support has evaporated.
Certain types of activities seemed to attract parents’ participation. Parents appeared more likely to get involved in something that directly affected their own child such as Dry Grad, or that was a “fun” activity or special event in which their own child was involved or was attending. Overall, however, parent participation was an ongoing challenge for the PW. Many PWs did not turn their attention to developing parent participation until they were well established in the school. Sometimes, however, PWs who initially experienced opposition in the school found allies and support among the parents and began to work with them right away.

Because most PWs had difficulty getting widespread participation across the school, most PWs identified a small cadre of committed individuals and worked closely with them to plan and implement activities in the school. For some PWs it was one or two teachers, perhaps a counsellor, and a core group of committed students. The students were usually those already connected with a group in the school, such as the peer counsellors and in several schools it was the Counterattack group.

I was able to identify few strategies in the data that PWs used to facilitate participation. Beyond the participation that was generated by a charismatic prevention worker, some participation emerged quite naturally, and without conscious intervention, from the relationships and friendships built by the PW, or from the school-wide commitment to the project in ready schools. But, few PWs identified or described effective strategies. Many of the things people tried were not, in fact, successful.

A few PWs, however, described one strategy they attempted to use with some success. I have named this strategy *finessing*. The term means “skillful, subtle handling of a situation; tactful, diplomatic manoeuvring” (Microsoft Encarta, 1996). What this means is that some PWs found that they had more success getting an idea accepted and getting people to participate if they believed the idea was their own. The strategy, therefore, was figuring out how to get the idea across in such a way that people believed it was their own. One PW describes her experience with *finessing*:

> In this school, I don't know if it's the same in all of them, but in this school, it's important that the administration believe that it's their idea. So the other egos have to be capable of giving over that. What's that called? Letting go? My ego doesn't need to be 'rah rahed' every time I make a suggestion so I've learned that. I need some kind of positive feedback at
some time but I don't need to get all the credit and they do. So you have to learn how to give them information where they can put it out and believe that it's their idea. Then everyone will get behind it and get involved.

A part of finessing seems to be about giving the credit to others for things that the PW does. It builds on that human need to be recognized and appreciated. Karen's experience, as reflected in the quotation below, was that people were more willing to participate with her or to get involved when she acknowledged them for doing this:

And I found that the way that I've got people on my side is really just to give away all the credit. And that's what people buy into. Any projects that I do with people, I give them all the credit. And that's what you have to do in this job to get them to participate.

The observation that there were few successful strategies to influence participation beyond the subtle and somewhat devious finessing described above raises questions about the whole notion of introducing ideas or projects from the “outside” into a particular setting with the objective of achieving ownership of the idea or the project by the people in that setting.

ADS believed that the steering committee was a fundamental mechanism that would help PWs to foster ownership of the issue because the committee was to participate in the process by which the issues were identified, prioritized, and acted upon. Some PWs also thought the steering committee might help them in getting the school community to take ownership of the issue and the project, but as the next section demonstrates, establishing a steering committee was another significant challenge in enhancing school readiness.

**Steering The Steering Committee**

One of the requirements of the SBPP, as outlined in the contract, was that the PW would form a steering committee to guide the development and implementation of prevention strategies in the school. The steering committee was expected to be the basic consultation mechanism for the SBPP. Not only was the steering committee to advise the PW in planning and implementing the program, but the PW was also expected to guide the committee in working through the SBPM. In other words, the steering committee was expected to be a working committee. This expectation raises questions about whether the steering committee
is steering the PW or the PW is steering the steering committee. Most PWs, however, had to work very hard to initiate and maintain a steering committee. To make it work, they had to play a very directive role in this process.

In the diagram of the SBPM (see Appendix B), the statement “Set Up The Steering Committee” is highlighted and listed first in the tasks of Phase 1 (Getting Ready). The implication is that this is the most important aspect of that phase in the model. Nowhere in the SBPM Handbook was there any discussion of the challenges in setting up and maintaining a functional steering committee in the school. In the PW training sessions, ADS also made the assumption that putting a steering committee together was a straightforward task that would not present major barriers to the PW. The focus of the presentation in the training was on the rationale for a steering committee and on basic “how to” type of information. Since I was the person who conducted the sessions on the Steering Committee in the first two training sessions, I know that our assumptions were very naive. In fact, the majority of PWs experienced some difficulty establishing and maintaining a steering committee and some PWs experienced serious problems. The processes involved in steering the steering committee were: getting started, working with the committee, and finding alternatives.

Getting Started

Although the steering committee was introduced to the first wave of PWs at the initial training session, many of this group of PWs did not get a steering committee established in the first year. For many of these PWs, there were more pressing matters at hand, like getting into the school, overcoming opposition, getting an office, a phone or a home base from which to work. In other words, the PWs needed to gain entry before they could begin to do anything about setting up a steering committee. For others, they simply did not feel the pressure to begin the steering committee, as Susan’s comments indicate:

See, I didn't implement the steering committee until a year later. There was just so much going on and so much to do. So what I did with the model was I worked with the administrators, and some of the school counsellors and some of the teachers that were working with groups of kids, like student government, and stuff like that. So they weren't... so I had sort of formed an informal kind of steering committee and went through the model with them. Really quickly.
The pressure from ADS for PWs to get a committee established was stepped up in the second year of the project. At the second training session, it became clear to many PWs, and their agency and school supervisors, that the steering committee was a job requirement and it was something they could no longer postpone. At that time, the steering committee was introduced as an integral part of the first stage of the SBPM and thus, its importance was reinforced. PWs, like Melinda, who attended the training talked about the pressure they felt:

See I was a bit worried-- that's what was given to me at the training. We had that open discussion where people explained about their experience of setting up the committee and because I thought that-- well I was feeling a bit under pressure that I had to have this committee up and going.

School counsellors and administrators also attended the training session. One counsellor who was at the session also described feeling the pressure to get a steering committee going as the following comments indicate:

It's one component [i.e., the steering committee] that is a 'supposed to be' and as a coordinator in this department I feel obligated and obliged to help ensure that it occurs. Just so that the 'supposed to be' is done.

As is apparent from Melinda’s lament above, this pressure did cause some concern among PWs. Several PWs, however, thought that there was too much unnecessary emphasis on the steering committee because the absence of a steering committee did not mean the absence of community input or direction for the SBPP. As the following comments by Marlene suggest, a steering committee was not seen as the only way to go:

Once again, I think there's too much emphasis put on that one [the steering committee], and people panic if they think they don't have a structured one where they meet all the time and they do all those kind of things. But people use that same kind of framework all the time when they're dealing with parents, or if they're doing any kind of parent committee work. Well basically, that's what's happening.

Another concern people had about the pressure to get the steering committee established was that it sent people into a panic with the result that some PWs moved too quickly to invite people to participate. The result was that the purpose for the committee was not clear to participants and therefore it was not an effective group. Marlene’s comments suggest some of the difficulties created by this situation:
And everybody goes into panic, and then they run around and ask people to come and sit on
this committee and then they have one meeting and then they wonder why it's not working.
And they're not real clear themselves on what that committee should be doing. And that kind
of stuff... And my personal experience with advisory committees is that until you've got a
very clear term of reference for what their function is and you can provide that to those
people, then you're defeating your purpose.

Some PWs found that resistance to the idea of a steering committee from their school administration
or school supervisors. In one school, the resistance to the steering committee, combined with a lack of
support for the PW and prevention in general, led to the program being removed by the agency from that
school and placed in another school. The reluctance at the administrative level to establish a steering
committee seems to be about two issues. The first is a concern that certain individuals or groups will have
undue influence on the committee, thus resulting in a program that does not serve the interests of the school,
as perceived by the administrators. The "solution" here was for administration to take control of the steering
committee, as this counsellor described:

If we can get our steering committee off the ground, not if, when - when we get steering
committee off the ground it will have an administrator in some form or other. One of the
first things that is going to have to happen, and I'm sure that it's the role of the administrator,
is to make sure that it's really clear on what the committee role is and what its limitations are.
So we've got so many things that are going on in this school that are good things and I
wouldn't want to see those jeopardized cause some, this pocket of people in the steering
committee wants to push it over in this direction or something.

The second concern about the steering committee was a public relations concern. Having community
members from outside the school participate in a steering committee meant that those participants would
learn about problems the school was facing in relation to alcohol and drug use in the school. Some school
administrators were reluctant to have that information available to members of the public.

In one school, the administrators appeared to have a real fear about anyone, including staff, teachers,
and parents, knowing anything about the school that might be construed as negative before they knew about it
themselves. They wanted the opportunity to decide whether others also should know about it. Because the
PW in this particular school was always getting this type of information, the principal worried that a steering
committee consisting of teachers, parents, and students could very well get negative information about the
school without the administrators being able to screen that information.
In my own discussions with these administrators, I found them reluctant to discuss anything about student alcohol and drug use that might put the school in a bad light. For example, when I was in the school for the site visit, I offered to do a presentation at the staff meeting on the results of the student survey for their school as I had done in other schools. They did not want me to do this until I could meet with them ahead of time to go over the presentation with them first, in case I had information they did not want shared with everyone. In speaking about this with me, the vice-principal said:

I think that’s something you should run past [the principal]. First of all, I think it would be useful for you to sit down with, probably the administration or possibly the student services group and share, not only some of the data, but your perceptions. That should be done either prior to—well, I would suggest, prior to any kind of public group thing.

School administrators were not the only people who balked at the idea of a steering committee. Some PWs also questioned the idea for a variety of reasons. For the most part, the PWs who had reservations about starting a steering committee, did so because of their concern about the burden it might place on teachers or other volunteers. Others recognized the enormous amount of work a steering committee would take and wondered why it was necessary when things were going well in the school without a steering committee. Mary Ellen summed it up this way:

You know, that whole model that we are to establish a healthy school community committee [steering committee]. And that hasn't happened yet. And I don't know if it will, or if that's something that I want to do. There are so many people already operating and running or helping kids do all these other little projects, that I don't know, I think that's the one thing that I've really had, I don't think it's resistance, but I'm not really sure where it fits just yet, establishing that steering committee. Because, I don't know, it's like the committees get like, it's like the same people go to the same old meetings time and time again and they get worn down. And other people don't want to join, because they feel it's a cliquey thing. So I'd like to just support them in their efforts the way they're going for now.

A few PWs were reluctant to pursue the idea of a steering committee because they had concerns that a steering committee might not support something they wanted to do. In the example cited below, the PW’s perspective was that the steering committee did not have the legitimacy to direct her program in the same way that the school’s administration did. She also viewed the work involved in getting the steering committee established as frustrating and troublesome, as her comments indicate:
If I have to go into the community and pull 7 or 8 people in that doesn't know too much about my program and I've been here for two years, and I have to start all over again, it will be very, very frustrating for me, to actually say ok, and then I have to go through enough red tape as it is, to get things going, so if I had to go through those 7 or 8 people and say, this is what I would like to do, lets see if we can do this, and you know, maybe there will be 5 on the committee that doesn't want to do it. And, I'm going to do it anyway. That's the way I would feel. It's my program, I'm going to do it. If it came through the administration said no you're not going to do that, well then I know I can't do it.

Although it appears that this PW did not espouse the collaborative values laid out in the SBPM handbook, the fact is that some PWs had to work with steering committees that were unwilling to support activities proposed by the PW that were consistent with the SBPM. In fact, some steering committees did not even want to do what was agreed to in the contract. This situation clearly posed a dilemma for the PW that did not seem to be anticipated by ADS. On the one hand, the PW was required to form a steering committee to direct the development of the program; on the other hand, the PW was expected by ADS to do things that the steering committee did not support. The challenge for the PW therefore, was how to steer the steering committee in the direction required by the contract. This situation created a double bind for the PW, as Shawn described:

And then I'm talking to people who have been in the school for 20 years, and I'm saying this is what we are required to do, and follow and they're saying, “Well, we do things this way in our school and this is why we've got the committee set up to make the school's objectives, and we'll proceed at our own pace, and come up with different goals and objectives as we go along”...Well I am [in an awkward position] because I've got this advisory committee together for them too- and we were told that in terms of setting up an advisory committee that I shouldn't, as a worker be the head of it, we should basically appoint someone else, and the purpose of the advisory committee was to give me direction, because you're getting it from, you know you're getting input from all the different sources, whether its administrators, teachers, or counsellors, and this is the feedback that I've received regarding the model and also with the ADP representation. So why should I, the worker, go against all of that?

This also raises some troubling questions about the ethics of imposing an outside agenda on the school. Despite the resistance in several schools, most schools and most PWs were not opposed to the idea of a steering committee. In fact, the majority of PWs supported the concept and worked hard to set up the steering committee. The problem for PWs was that even though most schools did not actively resist the idea of a steering committee, it was still very difficult to get participation from members of the school community.
People were willing to help out from time to time, but it was not easy to get people to commit to being a member. The following quotation by Melanie typifies PWs' experiences in trying to obtain commitment for steering committee participation:

And what I found is nearly everybody will give you a little bit. Like whether it's just a little idea or a little bit of time or something like that. Very few people are willing to commit to being part of a steering committee, being part of a club or an organization or something like that.

A major concern of PWs about the steering committee was that it duplicated the work of other committees that already existed in the school. The same people tend to be involved on various committees and so the establishment of yet another committee did not appear to make much sense to people. Marlene described it this way:

And plus in lots of schools, that whole thing in some ways already exists. I mean you already have parent advisory committees and all these kind of things, so all you're going to do is trade another committee, overload people, to have them come to another meeting. And they're going to talk about the same things that they talked about at the last meeting they were just at kind of thing, you know? And then it gets a little crazy here.

The concern of ADS, however, is that an existing committee might not have exactly the same focus, which could make it difficult for the PW to meet his or her contractual obligations.

In summary, the initiation of a steering committee was far more challenging than ADS had anticipated. At the beginning of the third year of the pilot phase of the project almost half of the PWs had not yet formed a steering committee. The major barrier to establishing a committee was the difficulty in obtaining a commitment for participation. Some schools resisted the idea of a steering committee from school administrators and some PWs were resistant themselves.

Maintaining and Working with the Committee

The difficulties with the steering committee did not end, however, when a sufficient number of volunteers were found to sit on the committee. Getting the committee to meet regularly was also a real challenge for most PWs. The following comments by Kathleen describe this predicament:

Yeah, because what I found is when we first started out, we had pretty structured meetings and stuff. But as the year went on and people got really busy, it was almost impossible. And accessing them on a regular basis was difficult. I mean as a group. That part of it was
probably the most difficult thing I came up against. Trying to facilitate a time when everybody can be together.

Maintaining a steering committee was a particularly difficult challenge for part-time prevention workers. Given the amount of time and effort that goes into establishing and maintaining the committee, those PWs who worked in two schools were hard pressed to find the time to initiate, develop, and nurture two steering committees. One was challenge enough!

The difficulty in maintaining a steering committee was complicated further by what skills the PWs brought with them. Several PWs suggested that their own skills needed to be developed in order for them to manage the steering committee effectively. These PWs were particularly concerned that they did not have the skills to organize and run a committee or to facilitate the group process.

It was not only the PWs’ skills that were important to the functioning of the steering committee, but the members’ skills and abilities. Several PWs identified the importance of members’ skills in making the steering committee work. They also acknowledged that this put the PW in the position of having to do some educational or developmental work with the committee so that they could contribute fully. This was particularly true if the PW was trying to work through the SBPM with his or her steering committee.

The issue of whether the PW conceptualized the steering committee as an advisory group or as a working group was an important factor in successful maintenance of the group. For the most part, steering committees were not interested in doing the work. Members wanted to provide input and direction but did not want to take on additional responsibilities. Some PWs therefore made a distinction between the steering committee and other committees or groups in the school that actually worked with the PW to implement specific strategies or prevention activities. Marlene describes the situation in which she found herself:

You can’t make them do the work, because then they won’t continue to come back. An advisory committee from my point of view is those people who oversee the whole thing. And so their terms of reference are very different from the parent committee, for example, that you happen to be working with in the school in regards to how to make this school a better place kind of thing based on the whole idea of community prevention.

Given the work involved in nurturing the steering committee along, many PWs felt that it was easier to do a lot of the planning work themselves, particularly in terms of working through the model, and then to
use the committee solely for advising or approving. Others acknowledged that it was not realistic to expect volunteers to do work that the PW was getting paid to do. Christine described her struggle with this:

So I think I would have preferred to go ahead and do a lot of stuff myself and get really familiar with what, you know, I thought was out there and because I found that my Steering Committee--I think that they kind of expected a little bit that I do most of the work... I think there was a little bit too much of a push and I guess the impression given that the Steering Committee had to help me with everything when that's not going to happen because basically they feel it's your job.

Thus, the major challenges in maintaining the steering committee were getting all the committee members together to meet and encouraging them to assist with the “work” of directing the SBPP, particularly in terms of “doing” the model. For the committee to provide appropriate direction, the PW sometimes had to do some developmental work with the committee because they did not always have the skills they needed to work through the model. Some PWs also felt they needed to develop their own skills to facilitate the committee effectively.

Finding Alternatives

In the forgoing sections, it was clear that establishing a dedicated steering committee was a real challenge for many PWs. Often, it was not possible to meet the ideal laid out by ADS in the SBPM handbook. PWs had to look for other ways of getting community input and direction. These included doing individual consultations, working with small task groups on specific projects, using an informal committee on an ad hoc basis, and conducting focus groups. Most PWs used one or more of these strategies. John, who had considerable difficulty establishing a steering committee in his community, describes the alternative ways he was able to obtain advising and direction:

Like I say, I had a loose network of individuals that I would consult with on a one-on-one basis, or I would go to the task force and I would just ask them a question, but I would also go to the principal of the school or the teachers or this person who might need to be a part of that program. And I'd ask, what do I need to be doing to make this happen? So it was looser, so at the same time, I always backed myself up with a lot of stuff, if I wanted to do something and wanted to know more about how the community felt about it, I'd do a focus group with a bunch of kids saying well what do you think of this. Where should we go with this, what would you like to see happen? Or, I'd get the parents together.
One of the most common strategies was to use existing committees or to combine committees. This made a lot of sense if the PW believed that a narrow alcohol and drug focus was not as productive as addressing the multiple common determinants of a range of youth health issues. Kathleen’s comments are typical of those PWs who used this approach:

So what we’ve done is combined committees now. So it’s like a health committee. And it’s like stay in school, health committee. And addresses all of the stuff that we’re working with. So we’re having our first meeting coming up as a combined group. And I think that will be a much more successful way of dealing with it next year than trying to form all those separate committees.

For some ADS area managers, however, the lack of a specific alcohol and drug focus on the steering committee was seen as problematic and they continued to press their PWs to develop a dedicated SBPP steering committee. In one community where a PW was having difficulty getting a steering committee started, the area manager pulled the PW from the school and would not allow her to go back to the school until she had a steering committee established. Of course, this made it even more difficult for the PW because she did not have access to the network of people to negotiate participation in a steering committee.

Perhaps the most damning critique of the ADS requirement for a formal steering committee comes from the experience of one PW in a small rural community. In this situation, the potential for a ‘good idea’ to have negative consequences is demonstrated in John’s story of his attempt to meet the ADS requirement to form a steering committee. His attempt to establish and maintain a functioning steering committee in the face of competing community interests had adverse consequences that the PW considered as quite serious. The result was that this PW ended up steering the steering committee rather than the other way around. The PW believes this was a disempowering experience for the community. The following quotation is a powerful illustration of this. It is a long passage but I could not do justice to the story if I tried to paraphrase John’s words:

For the first 2 years that I worked this program, I did not have a group of individuals who came together and called themselves the School-Based Prevention Program Steering Committee. Instead, I had a network of specific individuals who were in different places who gave me advisement. It was identifiable for me but they never sat together as an organization. And that involved people, kids, some parents, teachers and people from the community as well. That worked as far as I was concerned. And the steering committees
seem to symbolize something around community ownership and I think that their [ADP] thinking is too black and white and that community ownership can happen in a lot of different ways. And that a program can be responsive to community values without necessarily having to have an entity called a steering committee. In fact, I think that sometimes having a steering committee prevents people from looking beyond that steering committee, to what the real values are.

...I had been under a lot of pressure to get a formal steering committee. And the pressure is coming down the entire line of the hierarchical management of the organization of Alcohol and Drug Programs and so my pressure came from [agency supervisor] and his pressure came, of course, from his contract manager and so on up the line. And it seems to me that ADP has really latched on to this idea of the steering committee. It has some kind of symbolic value about how accomplished you are in the model or it symbolizes some level of implementation. Which I believe even now is nonsense. But I was in the position where my job performance evaluation was being affected by the fact that I didn't have a steering committee so it was going to start having consequences for my personnel file. I don't think I would have lost my job over it, but I was getting pressure to do it. So I immediately set out and began doing that.

So it made a lot of sense that what I would do was just integrate the people who had been in my loose network and try and bring them together to try and accomplish that. And I wasn't particularly successful. A lot of those people who I had been talking to also sat on the drug and alcohol task force in [insert], so in the end, I asked the [insert] Drug and Alcohol task force to take on this function for my program to become the steering committee for the School-Based program in addition to being its own entity and that I would add some membership among the adolescents, which was a tiny group anyway, so it looked like it was going to work out just fine.

So, well! That didn't exactly work very well. At this point my steering committee disintegrated to the point where I had two people at my last meeting so I need to go out and recreate something, somehow. The sad part was, that something that happened inside of that winding from the task force to what I was doing, creating some kind of unity in that, among what was once two distinct organizations, two distinct programs, the task force disintegrated also. So where once before, at least we had their entity and I had my style of community advisement, now we had nothing basically in terms of a citizen's association that was built around drug and alcohol prevention. In a way, part of that was when we joined, was that reliance on me with the technology, you know with that blooming model, you know and the fancy health promotion books and the population statistics and now the nice little laptop computer. A reliance on me, or a change in the way that they saw me or saw our relationship where I became an important consultant/leader and it was like giving up the power for them. It seemed like at that point in time they were no longer able to see themselves as a solid group of citizens and do this stuff that used to be really important to them. I don't think that was the only factor, I mean some of them were probably getting burnt out and tired here. But there was some connection here, this is not a coincidence. And you know, this joining happened and then the disintegration. Now, iatrogenic effects. Yeah, there is something disempowering in that, I believe. And I have no way of backing that up, but ...so you know, I feel bad about that. And I feel like if I were to take the next step that I would like to take, I would like to do some work on trying to reinvigorate the drug and alcohol task force, screw the steering committee for the time being, go back to my old advisement structure for the school, do a lot of good solid community based research and screw the thing about the
steering committee. I can still have community advisement, I can still have community partnerships that are, in fact, even richer than those that I would get from an entity called a steering committee which is in no way going to be representational of the community anyway.

In summary, it appears that the steering committee was problematic for the majority of PWs. Few PWs were able to get a functional steering committee established in the school that was organized and operated in the way ADS expected. Few people were willing to commit the time and energy necessary to make such a committee work effectively. Even when a steering committee was established it was a challenge to maintain it overtime because members were simply too busy. Most PWs and their steering committees rejected the ADS idea that the steering committee should be a working committee that helped the PW to go through the SBPM. Those committees that PWs were able to sustain functioned primarily in an advisory capacity.

Many PWs felt that ADS put too much emphasis on the steering committee. The time and effort it took to nurture the steering committee took time away from other things the PW could be doing in the school. Several PWs found alternative ways of getting advisement from their communities without having a steering committee. PWs were also caught in a bind in that their committees wanted to do some things that were counter to the requirements of the PW contract. At least one PW raised questions about the ethics of ADS' rigid requirement for a steering committee and provided an eloquent example of the potential for harm in this rigidity.

Summary of Entering the Field

Entering the Field was a lengthy process for PWs as they struggled to gain entry, create a role and enhance school readiness to engage in collaborative and consensus-based actions to plan and implement a prevention program in the school. When PWs Entered the Field, their first challenge was gaining entry to the school. To do this, the PW needed to establish the legitimacy of the program in the school, establish personal credibility and learn the ropes. In establishing the legitimacy of the program, the PW had to overcome opposition to the program from teachers and school counsellors who worried that the PW might be taking over their roles and responsibilities. In addition to encountering opposition, the PW entered a field in which
there was much confusion and a lack of clarity about the program and the PW role in the school. To create a new role in the school, the PW had to clarify expectations, which were often conflicting.

Not only did PWs have to establish the legitimacy of the program in the school, but they also had to establish their own credibility in an environment where outsiders, particularly non teachers, are not accepted readily. Many PWs had never worked in schools and thus had to learn the ropes through their immersion in the host culture in order to be accepted in the school. Once the PW had established the legitimacy of the SBPP, their own credibility and learned enough about the school culture to function as a member of the school community, the PW had achieved peerage. This gave them enough influence to create the PW role in the school and to initiate some changes to enhance the school's readiness to engage in prevention.

In creating a role, the PW had to confront several dilemmas. The first of these emerged in the process of finding a focus for their role in terms of staying narrowly focussed on alcohol and drug use issues versus taking a broader health promotion perspective. The other dilemmas emerged in the PWs' efforts to strike a balance between focussing their practice on prevention versus intervention and between the crisis management and pro-active planning. It became clear in confronting these dilemmas that the demands of the school context were in conflict with the goals, values and philosophy of the SBPP. In the end two very different types of roles were created. PWs embraced either a capacity-building role or a service-provision role in the schools.

In enhancing school readiness to engage in collaborative and consensus-based actions to prevent alcohol and drug misuse among students, the PW had to address several challenges. These included: selling the issue of alcohol and drug misuse to the school community, selling the SBPM as an approach to addressing the problem, facilitating participation by busy and unwilling people, and steering the steering committee. The hope of PWs was that in the process of enhancing readiness that the schools and members of the school community would take ownership of the issue and the solution. This was more likely to occur in situations in which the school understood and was committed to the concept of prevention. The intent of the SBPP was that PWs would engage in a collaborative process with the school community, using the SBPM as a
framework to develop a comprehensive plan to address the issue of adolescent alcohol and drug misuse among students. As the PW worked through the stages in Entering the Field, the ADS hope was that the PW would implement the model as the approach used by the school to achieve the goals of the SBPP. In the next chapter, the experience of the PWs with the SBPM is explored in the process of Confronting the Model.
CHAPTER NINE
CONFRONTING THE MODEL

To confront means, (a) to bring or come face to face with, especially with hostility, or (b) to meet or encounter (Microsoft Encarta, 1997). Both meanings of the term are relevant in this category. For some PWs, coming face to face with the model for the first time invoked a hostile reaction, not necessarily because of the model itself, but because of the context within which the model was introduced. Other PWs, however, met or encountered the model with interest or indifference, but not hostility.

Confronting the Model consists of three processes: reacting, learning and contemplating. PWs first confronted the model in the annual SBPP training session. Whether this occurred before or after they entered the field was dependent on the timing of their training relative to the start date of their position. Some PWs had been working in their schools for up to 6 months prior to attending the training session and thus had already Entered the Field. Others were hired immediately before the training and thus Confronted the Model before they Entered the Field. For those PWs who Entered the Field before Confronting the Model, their early experiences in the field greatly influenced how they reacted to the model and its presentation. The nature of this reaction influenced how well the PW learned the model, what they understood about it, their intentions for using it, and ultimately, whether and how well they used the model.

The process of Confronting the Model was seen by PWs as somehow separate from the process of Entering the Field. The training session at which PWs confronted the model took place outside the school setting; it had no direct connection to the Ministry of Education or the school districts, and it did not take into account the PWs’ experiences in their schools. It was as though there were two disconnected and parallel processes going on for the PWs. It was only as the PWs progressed through learning and contemplating the model while attempting to integrate their experiences from the field into their understanding, that the two processes converged and began to overlap.
Reacting as a Part of Confronting the Model

When confronted with the model in their first SBPP training session, PWs reacted to both the model and to its presentation. The nature of this reaction and its consequences were influenced by several factors. PWs came to the training session with a set of perceived learning needs and training expectations which were, in turn, influenced by the PWs' backgrounds and whether they had already entered the field prior to training (i.e., timing). The nature of these expectations, in combination with a lack of PW participation in planning the training, an imposed agenda by ADS and the way the model was presented to PWs, created a context for the training experience, in which PWs reacted positively, negatively or neutrally.

PW reactions had two consequences. First, the PWs' learning and understanding of the model was compromised. This affected the ultimate application of the model by PWs. Second, the model became a symbol of the negative relationship that was established between ADS and PWs at the first training session and this animosity was carried forward to the next generation of PWs through the symbolic meaning attached to the model.

Perceived Learning Needs and Training Expectations

The PWs' perceived learning needs were closely related to the expectations they had for the training session. For those who had already entered the Field, their learning needs and training expectations were strongly influenced by their experiences in the schools prior to commencing training. Many of them had been overcoming opposition and clarifying conflicting expectations. They hoped that the training session would help them to solve their problems and obtain clarity.

PWs who had not been in the schools prior to coming to the training had few expectations for the training compared to those who had been on the job for a while. Because the new PWs did not really know what to expect and had not yet encountered any difficulties, they were quite open to whatever the training would offer. John's experience was typical of PWs who had not yet been in the school to form expectations:

I don't recall having had any expectations, because I don't think that I really had a clear enough vision about the whole project to form any expectations. I would have next time though. I think.
For the most part, PWs who had been in their schools for a period of time had more expectations than those who had just begun. These expectations were more specific to the kinds of difficulties or issues the PWs had encountered to date in their schools. Those who had been in the school for some time had already been overcoming opposition, or had been working to establish personal credibility, and to learn the ropes. Some of them may have begun to create a role. Many of them had been experiencing difficulties and frustrations, in part because the groundwork for the SBPP had not always been well laid. The PWs were not always clear about what they should be doing, not having been provided with a job description. There were often conflicting expectations among the various parties about what the project was about and what the PW's role should be. It was only after being in the school for a time that they realized how much they did not know. Many of the PWs who had already entered the Field hoped the training would provide an opportunity for them to get some clarity on the job expectations, particularly if they had not had the opportunity to learn about the expectations of one of the important stakeholders, as Kathleen's comments demonstrate:

I guess the expectations I had were to get the ADP part of it. Because I had already connected with the school board part of it, but I had not had any connection with the ADP part of it. And just to sort of get some idea of what their expectations were. Because I hadn't had any contact with the program, I didn't know about the model or anything.

In addition to gaining some clarity on the job expectations, many PWs also wanted to know how they were doing relative to their peers and how their colleagues were managing some of the same difficulties they had been experiencing in the school, as indicated by Peter in the following quotation:

I was, I guess, really checking myself according to other people. I really wanted to know if what I was doing was what other people were doing. I really wanted to meet the people and have a sense that I wasn't doing it all by myself. I wanted check some of my frustrations and concerns with theirs, like getting along with administration, fitting into the school.

Others expected that the training would provide them with information they could take back to their schools to help clarify what they needed to be doing and to give them some ideas about what was possible for them to be doing in the school. They wanted some help in focusing their actions on what was most important and in setting priorities so they knew where they should be starting. And finally, there were those who were experiencing some challenges in the school and were feeling overwhelmed. They looked to the
training to find limits on what they should be doing and, as Karen describes, they wanted some solace or comfort, to make them feel better and that they were capable of doing the job:

    I felt like a fish out of water. I felt really lost. So I was hoping when I went to that training to feel more comfortable. But I don't think anyone can tell you. I think you just have to, it just takes time. And I think a lot of us were looking for something that would make us feel better.

In summary, for those PWs who had already spent some time in schools, there was an expectation that the training would help to bring some clarity to the job and provide guidance about what the PW was supposed to be doing or could be doing in the school. PWs were looking for help in setting priorities about what should be done first because they felt overwhelmed by all the possibilities. They wanted to know whether what they were doing made sense and measured up to what their colleagues were doing. They wanted some clarity on what was expected of them and they wanted to know how they could help others to understand what the project was all about and what was possible. They wanted to problem-solve some of their difficulties and frustrations. Perhaps more than anything, they wanted to feel that they were not all alone in this.

PW Background

Learning needs and training expectations were also influenced by the PW’s background. Because PWs did not come to the training with a common baseline of knowledge, they all expected very different things from the training, given their varied needs. Most PWs had some training in alcohol and drug related issues, many of them as addictions counsellors, but in other areas as well. Those who had no background in alcohol and drug issues perceived themselves as needing to learn something in this area and were hoping to be enlightened at the training. Those who had no experience with prevention hoped to learn about prevention. Because most PWs had not had much experience in working in schools they wanted information that would help them understand the school better. In particular, they were concerned about establishing their credibility or maintaining what credibility they had since, as Caroline describes, there was an expectation that the PW would have some expertise:
Not being a teacher and not knowing the way the school boards are set up and the districts, and some of the school policies. So I wanted to learn some more school-specific things, knowing that I’m going into a school and you’re supposed to be the expert.

It was important to PWs that they be perceived as knowledgeable and credible in order to overcome the belief, held by many in the schools, that only those who are educated as teachers really understand what goes on in the school system and what it means to teach.

Lack of PW Participation

Lack of participation by PWs in planning the training sessions was another factor that influenced their training experience, thus setting them up for a negative reaction to the model. The agenda for the first PW training conference was to introduce PWs, agency and school personnel to the SBPP, its goals, purposes, and model. In addition to a one day workshop on the Model, the agenda included a session on how the SBPP could be integrated with Learning for Living, a session on setting up the steering committee, and a session on how to meet the monitoring requirements of ADS. It was clearly ADS’s agenda. No SBPP PWs were involved in the planning. Furthermore, no assessment of their learning needs was carried out. The lack of input was felt keenly by PWs, and had long-term consequences for ADS in terms of the relationship it had with PWs and being able to achieve “buy-in” to the model by PWs. Karen’s feelings, described in the quotation below, were common:

Well, there is one thing that's really bothered me. I've already voiced it before at the regional meeting. It's that we all come to this job with different experiences and different qualifications and different needs. And I have never been asked, for these workshops or for the training, I've never been given a choice or asked what I need to further my own knowledge. And I'm finding the stuff that's sort of recycled through is really redundant for me.

Not being consulted on their learning needs meant that many PWs did not learn what they felt they needed to learn, whereas others experienced the content as redundant. The second training conference tried to remedy some of the mistakes of the first conference, but again, there was limited input from the PWs in planning. The PWs' response to both training sessions was an indication that not having PW participation in planning the conference was an error in judgment on the part of ADS. Of course, it was more than a lack of
PW participation that created the problems with the training experience, but some of the problems might have been circumvented with PW input.

**Model Presentation**

A lack of warning about the requirement to use the model set the stage for a negative reaction to the model when it was introduced to PWs in the training session. Almost none of the first-year and only a few of the second-year PWs had heard of the Precede-Proceed model prior to the conference. If they had, they were not informed that it was the model they would be required to use for program development in their schools. When asked, the majority of PWs said they never heard of the model before the training session. Some, like Christine, knew the model, but were not informed that they would be required to use it. Not only that, the people hiring her did not know about the model either, as Christine's comments suggest:

> I knew about it [Precede] from school [i.e., university]. But when I got hired, there was no mention of the model. They asked me what model I would use and that was the only one I knew, but I got the feeling that they didn't hear of it before.

When the second generation of PWs were hired, a few of them did hear about the model from their PW colleagues prior to the training. It appears, however, that the model's reputation preceded its introduction at the training, again setting up the PWs for a negative reaction to the model. As reflected in the comments by Darlene, several of the PWs were either intimidated or fearful of the model because of what they had heard from their colleagues:

> Well, I was hearing from everyone else that it really sounded very intimidating... I was very scared of it because of one meeting we had with the first years, and there were so many problems.

In the first training workshop on the model, the majority of PWs had entered the field before attending the training. At this point, the original Precede-Proceed model was being used. The session began with a presentation by the ADS Director of Prevention Services about the model and why it was important to have a standard model across the program. PWs were informed in this session that the model was a job requirement and that they had no choice about using the model. They were told that ADP believed that using the model would result in a more effective and better planned program.
What happened in this workshop was just short of rebellion. Many PWs had very pressing issues related to how they were implementing the SBPP in their schools and the ADP agenda did not provide them with an opportunity to address their concerns. Instead they were presented with a model they perceived as academic, which they did not choose and which they did not perceive as addressing the types of problems they were experiencing. What they wanted was something that would help them gain entry and establish a role in the school. As shown in the following quotation, PWs like Sheila had expected the training to help them with that and when they got the model instead, they were angry and frustrated:

But there wasn’t any of the stuff we needed in the workshop. There was too much focus on the model which was, at that point, irrelevant because in some ways the community development hadn’t been done in our communities to get the program established. It was real contradictory. I was real frustrated and disappointed.

Not only did PWs feel that the training session did not meet their needs, but they reacted to the context of the presentation in which ADS did not attend to their need to deal with issues in their day-to-day practice. Rather than dealing with the practical aspects of their work in the schools, the model was presented in a way that required them to make a shift in their thinking that they were not prepared to make. This is illustrated in the following quotation by Peter:

But I don’t understand it and I mean, you’ve given me all this stuff. Look at all this academic, this arrow stuff. I mean, I can read this academic literature as well but you know, I’m not in that space right now. You’ve asked me to make a shift here and I don’t want to make that shift nor do I understand it so my not wanting to understand or listen to it had less to do with what the model meant than with the whole context of the presentation and what it meant to me as a practitioner on a daily basis.

In addition to reacting to the imposition of the model and the perceived lack of concern for their learning needs, some PWs were also sensitive to the implication that the way they had been working in the school up to now was somehow wrong or inferior because they had not been using the model. As Julia says, PWs were feeling that what they had been doing wrong was emphasized rather than what they had been doing right:

Some of the activities that we went through, I didn't feel were processed in such a way that people got anything, were getting positives from them. I thought that we needed to do more processing of them because a lot of the negative was pointed out in terms of the way we
think and that we need to alter the way we think a lot of times, but it was never pointed out that a lot of the people were already doing that and that a lot of good things are being done.

Thus, PWs were hurt by and reacted defensively to what they perceived as criticism when they believed they deserved some credit for getting as far as they had, sometimes under difficult circumstances. There were also school administrators and agency personnel at the training session and they too questioned the relevance and benefits of using the model in the school setting. One school principal during the session said: "This is never going to fly in schools!"

The reaction to the model presentation at the second training conference was essentially a repeat of the first. The Director of Prevention Services took an even harder line on the model as a job requirement when he introduced the model. One PW was so offended by the presentation she got up and left. As a participant-observer, I wrote in my field notes the following quotation by the Director: "Frankly, you don't have a choice about using the model. You have to do it". In retrospect, PWs also remembered this statement although they recall the exact wording somewhat differently than I recorded it. One PW remembered it in this way:

I sat back in my chair. I think it was more because of his language. He said, "We're going to shove it down your throats", I believe, were his words.

The impact of this statement was profound. My field notes record my feelings of shock and dismay. Several PWs talked about the lack of respect they felt was accorded to them in this presentation. This statement influenced the course of the entire day and the remaining three days of the conference, indeed, it influenced the relationship between ADS and the PWs for the next 2 years. As with the first training session, it appeared that anarchy reigned. The session was intensely uncomfortable. It is difficult to describe the atmosphere but there was a pervasive sense of pessimism and anger that seemed to have been brought to the conference by many of the first year PWs. The negative legacy from the first training session was still being felt a year later by the new PWs. Greg, a second-year PW, describes his experience of that day:

I'm not saying it was the fault of the first years, but it seems that was where it originated. In the conversations I had with people that had been doing the job for a year, there seemed to be quite a lot of animosity between them and ADP, a lot of frustration with how things were going in the school system, maybe feeling the lack of support or something, I can't really put
my finger on it, but it hung in the air, it was pervasive. All I remember is that there was so much pessimism and frustration. It even crept into our room with the second years when we were working on the model. I don't think people reacted very well to being told what they had to do.

There were, however, PWs there who did not respond negatively to the model. For the most part, PWs who reacted positively came to the conference having made good progress in gaining entry to their schools, establishing credibility, and learning the ropes. They came from schools where there was little opposition to the program. Their main expectations from the workshop were to gain some clarity on what they could be doing in the school and what the ADP expectations were of them. For these PWs, the training answered their questions about what was expected of them and the model offered them a way to set priorities and to get started in the school. In fact, some of them did not appreciate their colleagues’ negative reaction to the model and to the training but did not let that adversely affect their own positive experience of the training session. Susan’s response to this was typical of those who did not respond negatively to the model:

I had a reaction to people saying stuff like that [i.e., negative things about the model and training]. I didn't have a reaction to that [the way the model was presented] because this is what I've been hired to do. I feel really fortunate that there is so much clarity and that there is so much flexibility within the structure to create a program that is specifically for the school and I think the model allows that. I thoroughly enjoyed the training workshop.

The overriding theme of the first and second training conferences was the negative reaction to the model, because this reaction overwhelmed and dominated both week-long experiences even though not all PWs experienced it as negative. Although there were concerns about the way the model was presented, the response to the model presentation was really part of a larger issue related to the imposition of ADP’s agenda on PWs and PWs’ perceptions that ADP was not hearing what PWs were saying about their training needs.

Many PWs agreed that the model was an important and useful component of the SBPP that would allow some standardization and allow the program to be evaluated. What they objected to was the apparent contradiction between what they perceived as the philosophy underlying the model and the way ADP was interacting with them. Many of them recognized that, although they were being taught about this "collaborative" approach to health promotion, they were being "forced" to use it without having any input into the process. The way that ADP had introduced the model was contrary to the basic premises of the model.
itself. Many PWs complained that ADP was not modelling the model as the following quotation by Peter implies:

I mean they might, the people timing it probably considered that it met our needs or in knowing better, in a parental way, this was for our own good, but when do they begin to shift from the parental to the supportive? When do they begin to use the model themselves? When do they treat us the way they expect us to operate?

This perception by PWs that ADS staff were not modelling the model resulted in a credibility problem for ADS. Many times, I heard PWs speak about not trusting ADS staff. Over the next two years, ADS staff, particularly in central office, tried hard to overcome this legacy. For the duration of the pilot phase, however, the model became the symbol of all the difficulties in the SBPP. This legacy influenced, at least indirectly, many PWs’ choices to use or not use the model in their schools. When confronted with barriers in the school to using the model, there was limited good will on the part of many PWs to “keep on trying”.

The other result of the PWs’ training experience was that many of them did not learn much about the model they were required to use to guide program development in their schools. Carson’s observation reflects what many other PWs were feeling when they returned to their schools:

The model is a tough thing to grasp, so at the end of that first seminar, I was more confused than anything regarding the model. They didn't give me any real concrete stuff. You know, at 8:00 in the morning when you show up to work, these are the types of things you could or should be doing. There was no structure like that.

For the most part, PWs left the SBPP training sessions feeling that they had not learned the model well enough to apply it in their school settings in the way that was expected of them. They were going to have to learn it on their own.

**Learning as a Part of the Category Confronting the Model**

Learning the model was not a separate stage in the process of Confronting the Model. Like the other subcategories in this process, it takes place over time and in relationship to the other subcategories. PWs learned some things about the model in the training session, then learned new things when they were back on the job and explored the print materials. They learned about the model when they interacted with their
colleagues and when they tried to use the model in some ways. Learning the model was an interactive process that involved taking in new information, reflecting on it, acting on it, and reflecting again all the while integrating new information in the process. In general, however, there were four major factors that influenced PWs' learning about the model: inadequacies of the training, lack of knowledgeable facilitators and support people, the demands of the work environment, and lack of access to good learning materials.

Inadequacies of Training

At the first two SBPP training sessions, many PWs did not get the opportunity to learn the model well enough to apply it in their school settings. The negative reaction to the model and its presentation did not help to create an effective learning environment. PWs did not get the time they needed to comprehend the model fully or to practice its application. They had limited opportunities to work through the model with concrete, real examples that were relevant to the PWs' experiences in their schools. Joanne comments on what was needed by PWs to learn the model:

People sharing, talking, giving concrete, real examples that are close to what we are doing and allowing us to digest it and talk about it and then distill the necessary skill sets from that, identify them and provide support in those areas for people who want or need it. That’s what we need to learn this model.

If these are the things that PWs believed was necessary for them to learn the model effectively, then it is not surprising that so many of them put the model aside when they went back to the school, because ADS did not provide this help for PWs to learn the model during the first 2 years of the pilot project, either through the training or technical assistance.

Lack of Knowledgeable Facilitators and Support People

Another factor influencing the PWs learning was that the people who taught the SBPM did not have a clear experiential grasp of the model. Although they understood it in a theoretical way, none of them had ever used it to plan a program in a community or school setting. At the second annual training session, one of the ADS facilitators had just been hired by ADS and was learning the model herself. This quickly became obvious to the PWs. As Sheila said, “It was like learning French from someone who couldn’t speak the language.”
One factor that made it difficult for the PWs to learn the model and apply it in their work settings was the fact that local agency supervisors and regional ADS staff could not provide technical assistance to the PWs in learning and applying the model because they did not understand it themselves. George describes the challenges of learning the model when no one knew anything about it:

If the people supervising me only understood the model for example, the direction of the program, in a way that they were able to be really conversant with it, and really comfortable with it, I think that they would then be able to provide the tools and the motivation so I could learn and use the model. But the system has not given them any tools to supervise.

The only place PWs had to turn was to their peers. Those PWs who had access to a peer network turned to their PW colleagues for support and mutual assistance to work through the model and this group was probably most successful in getting to a point where they believed they could apply the model comfortably. Earlier, in the discussion of learning the ropes, the importance of peer support in helping PWs to learn their way around schools was described. PWs also accessed peer support in learning about the model. The problem with peer learning is that any errors in interpretation by one member could be perpetuated through the group. When I spoke to PWs who were helping their peers to learn the model, it was clear to me that there were very different understandings of the model among various groups of PWs and I had questions about how some of them were interpreting and applying the model.

Not only were the PWs trying to learn the model themselves, but they were expected to teach people in their steering committees about the model. Ironically, many PWs were also teaching the model to their agency supervisors, the very people who were supposed to be monitoring implementation of the model by PWs. Ultimately, ADS did provide training for agency personnel and regional ADS staff but this did not occur until later in the pilot phase of SBPP implementation. As Carson’s quotation suggests, many of the PWs found it laughable indeed that they should be teaching the model to others when they did not know it themselves:

That was tough too once I did get an advisory committee going, exactly how to, you know, these people on the advisory committee meeting didn’t know anything about this model. Most of them had never heard about it, so for me in my confusion trying to explain to them exactly what we’re trying to accomplish in using this model was kind of a comical event.
Others PWs did not find humour in the situation. They feared being put in the position of having to teach the model and facilitate its use with the steering committee because they did not know it well enough to teach it to others. They worried that this would jeopardize their credibility in the school.

Demands of the Work Environment

After PWs had returned to their work settings, most put the model aside for the time being in light of the challenges they were experiencing in gaining entry and creating a role. Following the October training session there was a whirlwind of activity for all PWs created by Drug Awareness Week. Given all the demands on their time, learning and using the model were not a priority for them, particularly because many of them did not perceive it as helpful to them in doing their jobs at this early point in entering the field.

Caroline’s experience, as reflected in the quotation below, was typical.

There were so many good things going on here at school just with my day-to-day stuff that it really wasn’t a major priority with me, and especially since, in regards to the model, I found it a little cumbersome to work with.

For many PWs, it came down to making a choice between “doing” the model and doing the job and the challenge of trying to balance these two choices extended over a long period of time, sometimes up to a year or longer. Christine describes this dilemma in the following quotation:

But I guess what I’m finding is that you do come up against some barriers and it’s a really long process. For me what’s hard is that you are expected to do things and get on with your job. To actually do things to build awareness and look like you are doing prevention but at the same time, you are supposed to do this model with your steering committee. And its like you just can’t do them both. It’s like you have to choose between doing the model or doing your job.

This clear separation between the model and the work PWs were doing in the school was a common experience. At this point, most PWs did not see the model as something that could be integrated into their work. Those PWs who made an attempt to learn and do the model found that it detracted from their ability to do other important things in the school, as Priscilla describes:

I think often for me, I’ve been caught up so much in the model, and I’ve sacrificed the people around, the people involved, for the sake of learning and doing the model. And I’ve had to back right off it and go away from the model and say, “Gee, there’s ball hockey tonight, are you going?”
Like Carson, quoted earlier in this section, many PWs found the model challenging to work with and this made it that much easier to keep the model on the “back burner.” They had a great deal to keep them busy without having to think too much about the model, although for many PWs, it hovered there on the verge of their consciousness and they kept intending to get to it “when they had some time.” Some PWs, however, dreaded the thought of getting into the model and they kept putting it off. One agency supervisor said that in her discussions with the PWs in her region, they revealed these feelings:

For a lot of them in that first year there was this, “Oh God, somehow I’m going to have to get into this. It doesn’t make sense or it’s hard to grasp the concepts and how are we going to sell this to the school population and the community.” So there were some real struggles the first year with that. Most of us them just didn’t bother.

Thus, most PWs put the model aside for a period of time when they returned to their schools following the training. In the face of demands from their work environment, PWs did not have time to grapple with the model. Many of them put the model “on the back burner” until they could find the time to learn it.

**Lack of Access to Learning Resources**

After things settled down on the job, however, many PWs, even those who had reacted negatively in the beginning, were now prepared to try learning and using the model. When they got out their print materials, however, many of them, like Peter, had difficulty making sense of it:

When I got out the binder, it was hard for me because it was not really accessible for me and I didn’t really understand it on a practical level. So if you can imagine the frustration of having the thing, having to work with it, and having to keep putting it aside because you haven’t got the time or energy to understand it let alone use it.

PWs experiences in trying to learn the model, for many of those who did make the attempt, were not encouraging. The print materials provided at the first session were described as fragmented, superficial, and not readily accessible to someone unfamiliar with the model. Even the few PWs who were familiar with the model had difficulty learning enough from these print materials to be comfortable with it. They talked about the model “not being the same in real life as in the book.” PWs were simply not able to make the model real for themselves in their own practice with the limited learning resources available to them and this was frustrating for them given the pressure on them to begin using the model.
A simplified handbook on the model was presented to PWs at the second training conference and this was assessed by many PWs as very helpful because it provided concrete examples, but many PWs still had unanswered questions about the model after reading the handbook. During this period of time, I received many phone calls from PWs asking questions about the model. Only two PWs reported to me that they went back to writings by the authors of the model to learn more about it. One of these PWs had an excellent understanding of the model, although the other PW found the writings difficult to understand.

In summary, many PWs did not learn the model sufficiently well at the training session to feel confident in applying it. The types of learning strategies necessary to learn the model were not provided and the people who taught the model did not have experience actually using it. Peer support was perceived as valuable to many PWs in their efforts to learn the model, but this did not guarantee that the PW would learn the model well enough to use it effectively. Furthermore, there was no technical assistance provided to PWs when they got back to the job and tried to learn the model. The print materials provided by ADS at the first training session were not detailed enough to provide practical guidance in the model's application.

Overall, the PWs had inadequate support during the first 2 years of the pilot phase to learn the model in a way that gave them the confidence and the skill to use it as it in the school setting. Thus, in the first several months to a year following training, many PWs had not yet begun to use the model in their schools. They were contemplating it, trying to understand it, and deciding how they might ultimately use it.

**Contemplating the Model as a Part of the Category Confronting the Model**

Most PWs spent time thinking about the model before they actually tried to use it. After their initial exposure to the model in the SBPP training session, they went away, reviewed the materials, talked to their colleagues and thought about the model. They began by sizing it up. What was it really all about? What were its essential characteristics? What were its strengths and weaknesses? In sizing it up, they were getting ready to try it on to assess its fit as a process they could use for themselves and their schools.

PWs then made some tentative forays into using it, or using parts of it. They were trying it on to see if it fit well enough with what they were doing that they could actually use it in the way that ADS intended.
them to use it. How well did the model fit with their own style of working, their own philosophies of practice? For implementation, perhaps the question was how well did the model fit with the school system in general and with the way of working in their schools in particular? What were some of the challenges in trying to fit it in with their own way of working and with the school's way of doing business? Was this model something they could fit into what they were already doing in the school? Then, they made a decision, either consciously or by default, that they would buy-in to the model or reject it. They would either make it their own and use it in some way, or they would not use it at all.

Of course, there were PWs who did not spend much time in this contemplation process because they did not ever intend to use it, or at least not all of it. All PWs, however, had to contemplate the model to some extent because even those who did not use it had to at least appear to ADS to be using it. In order to report their use of the model on the monitoring reports, they had to understand the stages of the model well enough that they could fit their actions into those stages for accountability purposes. This notion of retrofitting the model for accountability purposes is discussed in more detail under "Doing" the Model. One PW managed somehow to get away without ever submitting a monitoring report until, of course, the contract came up for renewal at which time the project was discontinued in that school.

Contemplating the model was not necessarily a conscious, staged process. Sizing it up occurred over a long period of time, during which time PWS were also trying on some aspect of the model and then assessing its fit with their own style of practice and the school's philosophy and way of doing things. In assessing fit, PWs were reevaluating their understanding of the model. PWs who did not buy-in to the model early in the process sometimes did buy-in later and some PWs who made serious attempts to understand and use the model ultimately rejected it as guide for their own practice. Thus, it was not a linear, sequential process of sizing it up, trying it on, assessing the fit, and buying into it. The process is organized in this way primarily to facilitate discussion of the different ways that PW grappled with and contemplated the model.
Sizing up the Model

Several PWs admitted to responding defensively to the model during the training session. For some, the idea of having the model imposed on them angered them and they resisted it for a period of time. At some point, however, most PWs did give the model some serious thought and considered its potential for helping them in their own work. Even those PWs who reacted negatively to the model had some positive things to say about it when they had taken the time to size it up. There were only two PWs I spoke to who were unable to name any strengths of the model at all. Neither of these two PWs even made a pretense of using the model in their work, other than for gathering information early in the process.

An examination of the perceived strengths suggests that PWs view the model in very different ways. When people talk about the model, clearly they are not all understanding the same thing by the term. How people understand the model and the potential they see in it influences whether and how PWs ultimately used the model. In fact, exploring the PWs’ perceptions of the strengths and weaknesses of the model tells us a great deal about how they understood it, and whether and how they might eventually use it. At this point, few PWs had progressed to the point of actually using the model in any way. For most PWs these evaluative judgments of strengths and weaknesses were not based on much experience in actually using the model.

Strengths

There were five general groupings of positive model attributes identified by PWs. These were: (a) the model as what you want it to be, (b) the model as a way of thinking, (c) the model as a concrete, problem-solving approach, (d) the model as a touchstone, and (e) the model as principles of community development. The quotations that describe each of these types are composites drawn from statements made by two or more PWs who expressed that particular view of the model.

The Model as You Want it to Be. Some PWs viewed the model as something that was very flexible with lots of room to move within the process. They described it as workable, useable, and readily adaptable to any circumstance. It was seen as fluid, dynamic, and nonlinear. It was not static. The model could be simple or complex; it could be anything you wanted it to be. There was a tendency for PWs with
this view of the model to see it as easy to use with young people because it could be readily simplified for them.

I think it is very useable, very workable. It just depends on how you see it. If you see it as a lot of work, that’s what it is. If you can keep it as simple as possible, then that is what it can be. It certainly is flexible with lots of room to move in it. Young people can use it because you can make it simple for them. You can start at base 3 and move back to base 1. I like the fluidness, its not static and linear. The action is dynamic and I really like that.

The Model as a Way of Thinking. Several PWs described the model as a general way of thinking about a problem or the situation at hand. It was a way of thinking that provided a new way of looking at things and understanding an issue. Some PWs described it as giving people a way of talking to each other about an issue irrespective of whether they might ever use it in the school for planning. It just became a part of their way of being in the world. It was seen as a general way of approaching problems that was at once comprehensive yet not explicit. For PWs who described the model in this way, it was difficult for them to find the right words to articulate what they meant. There was an almost ineffable quality about it.

It's really a way of thinking about the issue in a different way. It provides a new way of looking at a situation, kind of turning it on its ear. And it was more of a new found language that helped us think about things and talk to each other, as opposed to being a tool that I would be using in my school. It puts things in perspective. It's like it just becomes part of who you are and how you think. It's hard to describe what I mean.

The Model as a Concrete, Problem-Solving Approach. In contrast to the PWs who saw the model as a general way of thinking, these PWs saw the model as a concrete, step-by-step problem-solving approach that could help them to set priorities, keep focussed, and set their direction. They saw it as an outcome-oriented approach that was solildly based on data. It provided a good method of defining the scope and extent of the problem, setting objectives, and planning strategies that were clearly linked to the objectives. They believed that if the model was used in this way, it was possible to make a good assessment of the community, define the issues and gather the relevant data necessary for planning effective strategies.

It’s a good step-by-step problem-solving process. I mean, it’s the steps that you would have to take to be able to implement any program. I think the outcome-oriented focus is very valuable. It is consistent with what I believe is state-of-the art prevention theory. It's an essential approach to preventing alcohol and drug use because it targets the full range of determinants. The delineation of steps is very useful. It's linear and sequential and I respect that. It requires me to consider all possible sources of evaluation and data as well as the
various stakeholders. It's very comprehensive. If you can cover all the phases, it will give you a very good picture of your community.

The Model as a Touchstone. In many ways, people who saw the model as a touchstone also saw its benefits as a comprehensive planning approach, but they were less likely than the PWs who saw it as a concrete, problem-solving approach to follow the steps in a linear, sequential way. They were, in some ways, like the PWs who saw it as a general way of thinking. What distinguished them from that group was that they saw the model as providing an important standard that needed to be reviewed from time to time, or checked back on just to make sure one was not off track. They saw the model as thorough and comprehensive and one that would provide a good foundation for any prevention program. It was not something, however, that needed to be adhered to rigidly in its steps. As a guiding framework, it provided a touchstone for judging the comprehensiveness of one's own strategies.

And I think that is useful to have something to guide you when you start a job like this where everything is so vague. When you wonder “how do I know I'm doing the right thing?” it helps. It's useful to have something to come back to and just kind of look at and get an idea of where you are going and where you have been.

The Model as Principles of Community Development. PWs who saw the model as fostering community development tended to see it as a set of community organizing principles rather than as a step-by-step process to guide planning. It was more a way of working with the community that involved them in the decisions and encouraged ownership of the issues and participation in the solutions. It meant not pushing your own agenda on the school; rather, it involved starting with what the community identified as their primary concerns.

In the drug and alcohol field, it's always been kind of top down, this is what we are going to do and then doing it. This model, what really struck me was the idea of starting from the bottom up and involving the community in the process. And so modelling the model for me is about demonstrating to the school that I am involving everyone in the decisions and that the young people are part of the solutions. And more than that, the basic strength of the model is having a consensus on what one or two problems we are going to work on and having the school as a whole identify barriers and commit to solving the problems together. To me, the model is about a way of working with young people so that they drive the process.
It is clear from the above statements that PWs viewed the model in very different ways. Given this diversity in PWs' impressions of the model, it is understandable that there was also considerable variability in the actual application of the model.

**Weaknesses**

PWs also identified some weaknesses or disadvantages of the model. Overall, there were fewer weaknesses than strengths. These weaknesses fell into four general types of problems: complexity, redundancy, time consuming and academic.

**Complexity.** Since it was first introduced, the complexity of the model has been criticised by PWs as well as by agency and regional ADP staff. When asked about the challenges of using the model, its complexity is a commonly cited concern by PWs. Other adjectives used by PWs to describe the model include, complicated, confusing and not user-friendly. It is the complexity of the model that tends to make PWs afraid of the model and to panic that they are not going to be able to learn and apply it in their school settings.

It was really confusing when we were working through it with the steering committee...how complex it is and how it is not user-friendly. It isn't something you could just pick up from a book. It needs a lot of explanation. It was really confusing and just too complicated. You need to work with it for quite awhile before you really understand it. And I was really nervous when I first saw it because I thought what if I can't do it and how am I going to get the school to do it?

**Redundancy.** Some people said they found some of the stages in the model repetitive in that there seemed to be some overlap, particularly in the epidemiological and behavioural/environmental assessments. As a result, it was difficult to figure out what went into each stage of the model. Others found it somewhat monotonous to work through because of this. Related to this was the sense that it was a cumbersome process. When the model was revised and published in the SBPM handbook, some stages in the original model were combined. Many PWs who had previously rejected the model for its complexity now found the model something with which they could work. The model had been simplified in a way that made sense to them and that they could understand. The original model, however, was described by PWs in this way:
In regards to the model, I found that a little cumbersome to work with. I just found it a little repetitive and clumsy at times. I think a couple of stages can be presented kind of together, like you are looking at risk factors then there is a whole new phase on behavioural and environmental - so they could be combined. And each little step, it almost seems monotonous at times and so I just don't feel motivated to get all the way through.

**Time Consuming.** This was a big concern in relation to using the model with others in the school, particularly the steering committee and student groups. Some PWs felt that it took too long to get to action and for this reason volunteers would lose interest or would be unwilling to participate in the first place.

I really believe that expecting a group of people from a community, who are volunteering their time, to follow the process and spend that much time planning before actually getting to action, is quite an expectation I think. The length of time it takes is going to keep some of those people from coming, I mean their schedules are really busy.

**Academic.** A few PWs viewed the model as a case of academia imposing its views on people in the “real” world without them having any sense of what is going on out there in that world. These PWs believed that people in academia, who developed such models, were not in touch with what is going on "in the trenches". For these PWs, the model did not reflect the day-to-day experiences of people working in the field. The model disconnected people; it kept the PW aloof and distant from the people and the community. As the quotation below indicates, the model was also seen by these PWs as paternalistic and self-serving. Part of this was related to the complexity and time consuming nature of the model as identified above. This complexity made the model too abstract to use with community groups for grassroots organizing or with youth to plan and organize programs.

I had worked with the model before and didn’t have a good feeling about it, because I thought it was too abstract for grassroots. To use it with the community, you would have to take it and simplify it. The model was too academic, and we in the field, working in the field hands-on, we’re in trench warfare out there. You know when you load up on the academic jargon or the theoretical model and present that to the community, you almost remain aloof from what’s happening. And it becomes almost self-serving because you are laying all this stuff on. It’s way too paternalistic I think.

In summary, PWs identified considerably more strengths of the model than weaknesses, at least in terms of numbers. It is clear, however, that PWs tended to see the model in very different ways and these different views had important implications for how and whether PWs used the model. In general, however, PWs who saw the model as a concrete, problem-solving approach tended to make the most efforts to try to
use the model in their school settings. They were able to describe how they had used the model or if they had not yet used the model, said they were very committed to using it. This does not necessarily mean that they applied it “accurately” but this issue will be discussed further under "Doing" the Model below. Similarly, those who saw the model as a touchstone were able to describe how they had used it. Conversely, PWs who talked about the model as a way of thinking or who saw it as whatever one wanted it to be were, for the most part, were unable to describe in a concrete way how they had applied the model in their school settings. PWs who saw the model as a set of community organizing principles talked about how they tried to use those principles when asked how they had applied the model. Now that PWs had sized up the model, identified for themselves what they saw as its strengths and weaknesses, most PWs decided to try it on for size. They began by trying to initiate the process proposed in their print materials.

Trying it On

When asked how they intended to use the model, or had begun to use it, most PWs said they would begin, or had begun, by starting to gather information about the issue and/or starting to put together a steering committee. Despite the varied understandings of the model presented above in the discussion of sizing up the model, most PWs engaged in data gathering strategies within the first few months of being in the school and thus, had started to use the model. Data from the PW, administrator and teacher surveys conducted by the IHPR, suggested that there was a high level of data gathering activity by PWs in all the schools.

The challenge emerged when the data were gathered and decisions had to be made about how to use that data. The SBPM handbook suggests that intent of the steering committee was to foster ownership of the results of these data gathering efforts. In many schools, however, there was no steering committee established yet. As discussed in the section on selling the issue, many schools were not interested in using the data for any particular purpose and some schools ignored or suppressed the information. In some cases, PWs were able to use the data to sell the issue but, as discussed earlier, many reported having difficulties in doing this. Administrators in schools that were supportive of the SBPP were much more likely to be interested in
using the data for planning purposes. In one of the most supportive schools, for example, administrators were using the data to help them prepare for the Ministry of Education accreditation process. In these schools, the PWs felt encouraged to move onto the next steps in the model.

Even in schools with a high level of support, however, there was still some defensiveness about the data. In one site visit school, which had the highest level of school readiness, the administrators and PW asked me to do a presentation on the results of the student survey that had been done in their school. In presenting the findings on school climate and student-teacher relationships, teachers got defensive, challenged the findings and argued that the data should not be used for planning in the school. Given that this school had one of the most positive ratings from students for school climate and teacher-student relationships, this was surprising. What it suggests, however, is that PWs in schools with lower levels of support could be expected to experience even more resistance from teachers. In fact, this was the case for many PWs. For some PWs, like Rachel, this arrested their attempts to work through the model.

The administrators there didn't even want to talk about the survey. They didn't want to know that drug use was high and that there were real problems in the school. No one wanted to hear about it and no one was particularly interested in doing anything about it either. I'm stuck and I don't know where to go with the model now. The handbook doesn't help me figure this one out.

If PWs' early attempts at trying to use the model in the way that ADS proposed were met with this kind of resistance, they became frustrated and disillusioned with the approach proposed in the SBPM handbook.

The other way that PWs began to use the model was to attempt to establish a steering committee to participate in and guide them through the process. As discussed previously under steering the steering committee, this process also presented many challenges. Thus, many PWs' early experiences in trying on the model were not encouraging. As a result, they (re)turned their attention, for the time being, to achieving peerage and/or enhancing school readiness rather than investing a lot of time and energy in struggling to implement an approach that did not seem to be going anywhere. When they did find the time to return to the

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41 The student survey referred to here was conducted by the Institute of Health Promotion Research as part of the overall SBPP evaluation. A description of the methodology and data collected for the overall SBPP evaluation is included in Appendix A.
model they tried to make sense of it in light of their experiences in the field and were now assessing its fit as a framework they could use for themselves and their schools.

Assessing the Fit

In assessing the fit, PWs were evaluating the fit between their own style of working and the process laid out by the model. For the most part, PWs said that there was a good fit between the model and their own way of working. This appears to be because PWs tend to understand the model in terms that are consistent with their own beliefs and styles of practice. There were some instances, however, in which PWs said the model required quite a different approach than one with which they were comfortable. Some examples of this were discussed in the section above on selling the model.

There was one area of their work in the school, however, that several PWs identified as not fitting with the model. This was early intervention and counselling. Several PWs said that, no matter how hard they tried, they just could not see the application of the model to their work in early intervention and counselling students with drug misuse problems. This was described well by Patricia in the following quotation:

A lot of the things I have been doing fit right in there. But also it's about accepting the fact that a lot of other things that I do aren't part of that model at all. And they can't be. I think when you're talking about intervention. When you do community development and building from the positive part, and when you're doing prevention and going from the positive backwards or however you want to phrase it, yeah, you can fit that in. And it will work. When you're looking at intervention and when you're doing straight counselling, it just doesn't fit in there.

The provincial SBPP Coordinator also spoke about the model not being relevant to the early intervention part of the PW job. She had been a school counsellor herself and said she really had difficulty fitting the model to that aspect of the PW's work. Because many of the PWs were spending a lot of their time doing early intervention and brief counselling, it is not surprising that many PWs found it difficult to see a fit between the model and their own way of working. It seems that PWs who could not see the fit between the model and early intervention were those who were starting the process with the strategy or intervention in mind, rather than coming to the strategy as a result of working through the model. In fact, other PWs who did
work through the model, or an approximation of the model, did come up with some early intervention strategies as part of their comprehensive plan. Thus, for some PWs there was no problem seeing a fit.

The second question for PWs in assessing the fit was about the fit between the model and the school’s way of doing things. When PWs were struggling to begin using the model in their schools, many of them thought that the problems they experienced occurred because they were doing something wrong; they did not understand the model well enough, or they did not have the skills they needed to do the job. For many of them, the fact that they were still struggling to start a steering committee and work their way through the model one to two years into the project, did cause them to question themselves and their abilities. This was reflected in the following comment by Greg:

I’m still not sure exactly how to apply it on a personal level in my context, being in the school that I’m in with the people I’m working with, I’m not exactly sure how to use it. And I really don’t know what’s wrong. I mean, if I can’t do it now at this point two years after my initial contact with the school, and just now setting up an advisory group, how am I ever going to do it.

For PWs like Greg, the feeling that there was something wrong with the way they were doing things was frustrating and demoralizing. At this point, however, some PWs were starting to realize that there simply was not a good fit between the goals and values of the SBPP and the goals and values of the school. The challenges they had experienced in creating a role and enhancing school readiness, particularly in terms of striking a balance between prevention and intervention, and selling the model had caused some of them to realize that this lack of convergence was the problem, not their own shortcomings.

In the section on selling the model, I wrote about how many schools rejected the model as a useful planning framework for program development. The strategy used by some PWs to manage this problem was to keep the model to themselves and just to go about their own work. At that point, PWs did not seem to have fully realized that the schools were not just rejecting the schematic of the model as outlined in the handbook. They were fundamentally rejecting the entire approach and philosophy inherent in the SBPM and it did not matter that the PW did not name the approach she or he was using as “the model.”
This realization crystalized for many of PWs during the third annual SBPP training conference in which one PW presented his analysis of the problems in implementing the SBPM. The essence of his presentation was that "the implementation problem was not so much a problem with the model, per se, as it was a problem that emerged within the relationship between the model and the implementation context" (John, PW). In other words, low implementation was explained by the minimal convergence between the objectives of the program and the needs of the school, as defined by the school. To solve this problem, he argued that the PW needed to establish an "operational domain" in which the model could be implemented. PW could do this using a variety of strategies, including selling the model and coopting resources for the program. Fundamental to this was that the PW must first establish peerage in the school to gain sufficient power and status to effect an overlap between the needs of the school and the program objectives. This overlap was the operational domain within which the PW could implement the model. As this PW himself noted, his theory was immediately seized upon by many PWs as the "right" explanation because it fit with their own experiences:

For a while this was a popular idea, and I got many opportunities as a result of it (including the writing project). People who had endured three of four trainings on the model but were still having difficulty implementing it were immediately attracted—the problem was not that they couldn't understand the model, the problem was that they were trying to implement in environments which provided no context for implementation.

This idea was also very attractive to some ADS staff because it also helped them to understand what was going on in the schools where PWs seemed to be having difficulties. In fact, the writing project John mentioned in the above quotation, was a contract with the regional ADS office to write up his analysis of implementation so that it could be used for the benefit of other PWs.

By now, some PWs had come to the conclusion that the only way to implement the model was to change, at a fundamental level, the way the school was organized and managed. The probability of someone from outside the school coming in to facilitate that change seemed highly unlikely to them, given what they knew about organizational change, and given their stories of implementation to date. They felt that without that change in the schools, the model as it was intended to be used, could never be implemented. A few PWs,
like John, rejected the model as a guide to practice on the basis of a clear and reasoned analysis. For them, it was an ethical decision. Imposing a model and an approach to prevention on a school that was not ready or was unwilling to engage in such a process, was not ethical in their view.

Those PWs who did not come to this realization continued to work away on gaining entry, creating a role, and enhancing school readiness. Many of them had “bought into” the model, or to the ideals of the model, and believed that, over time, they might overcome the barriers and be able to implement the model in some way. Meanwhile, they believed in what they were doing in the school, irrespective of their commitment to the model or their use of the model.

In concluding this discussion of Confronting the Model, it is clear that many barriers obstructed PWs in implementing the SBPM. PWs reacted negatively to the model and its presentation within the context of an imposed agenda by ADS, and lack of participation by PWs in planning their own training. This reaction did not leave PWs highly motivated to comply with the requirements of ADS to use the model. The learning experience through the training sessions was not effective in providing PWs with the skills and competence to apply the model in their school settings, and there was no ongoing support and assistance to help them do this. The demands of the school context, and the lack of fit between the goals and values of the school and the model, made it difficult for PWs to find the time or the support they needed to implement the model. Given these barriers, it would be surprising if the PWs implemented the model at all. In fact, if one looks at the model as it is laid out in the SBPM handbook, very few PWs actually followed that process. This does not mean that they did not implement some aspects of the model, or that they did not implement the model as they understood it. This takes us to a discussion of what it meant for PWs to be "Doing" the Model.
"Doing" the Model is an ideal that was not realized by many PWs involved in this study. The intent of the SBPP was that PWs would "do" the model in order to take action that would be effective in preventing alcohol and drug misuse by adolescents. The category of "Doing" the Model describes how PWs appeared to be using the model and how they perceived themselves as using the model. "Doing" the Model is a term that I heard PWs use frequently to describe their application of the model, as they understood it. They also used terms like working the model, implementing the model and using the model. "Doing" the Model, however, was the most descriptive and so I have chosen this term to name the process. There were two properties of "Doing" the Model: planning and applying.

Before discussing how PWs actually did use the model, it may be helpful to outline the essential features of the SBPM so the reader can understand the basis on which I am interpreting and drawing conclusions about PWs' application of the model. Based on the program documentation and my reading of the original authors' writings on Precede-Proceed, there are two essential features of this model on which the SBPM is based. These features distinguish it from other community-based, program planning models.

The first distinguishing feature is that the process works backward from the ultimate goal through a linked series of successively more focussed stages, each of which culminates in a set of specific objectives. Thus, every strategy that is planned and implemented has a logical connection back to the ultimate goal. Although the model itself does not specify the theoretical connections between one stage and the next, because these are specific to the issue at hand, the implementor is expected to draw from existing theory to ensure that those theoretical connections are strong. The model has been accused of being atheoretical (McLeroy et al., 1993) but if it is used as the authors intended, then there is nothing atheoretical about it (Green et al., 1994).

The second feature that distinguishes this model from others, is its focus on factors that predispose, reinforce, and enable behaviours and environmental conditions conducive to health and quality of life. In fact,
this feature is the heart of the Precede-Proceed model. The model is based on the premise that, in order to make an impact on the behaviour in question or the environment in which it occurs, one must direct strategies at the comprehensive range of factors that influence that behaviour or create the environment. Strategies that target each of these sets of influences are quite different and might include classroom curricula, policy initiatives, regulatory changes, peer and parental support, and capacity-building or skill development strategies for organizations or groups of people, like youth. In other words, a program resulting from this process will be comprehensive in its approach and will include interventions that target factors at multiple levels of influence.

The intent of the SBPP, as I read the program materials, is that the PW would use the SBPM to develop a comprehensive program aimed at changing the predisposing, reinforcing, and enabling factors for drug and alcohol use/misuse by adolescents. The PW was expected to use the model in the way it is laid out in the SBPM handbook. That is, the PW would proceed through each of the stages to develop objectives and ultimately to plan, implement, and evaluate effective prevention strategies. In addition to proceeding through the specific stages of the model, the PW was expected to base his or her actions on certain principles, but most important, on the principle of participation. Thus, PWs were expected to implement the model in collaboration with the school community, through the active engagement of students, teachers, administrators, parents, and other members of that school. In the SBPM version of the model, a required mechanism for participation of the school community was a steering committee.

Planning

PWs who made attempts to use the model took one of two general planning approaches to using the model: planning on a project-by-project basis or comprehensive planning. Within either of these approaches, PWs who used the model did so either alone as a solitary planning activity or as a collaborative planning strategy.
"Doing" the Model as Project-by-Project Planning versus Comprehensive Planning

The comprehensive perspective is a "macro" approach that involves using the model as a global planning process to develop a comprehensive plan involving multiple strategies at multiple levels of intervention, which would be implemented over an extended time frame. PWs who used the model on a project-by-project basis engaged in planning a single strategy at a time. PWs who reported using the model this way worked through it in a relatively short period of time, often a single day. This quotation from one PW distinguishes between these two approaches:

One of my colleagues sort of conceives of this as sort of an afternoon thing, that you run through the whole model and you do a project and then you come back and run through it again. I have a different conception of it than that, except I think my conception of the model is more comprehensive. I don't mean to sound like I have any judgments about how he is doing it, but my own vision is that I would like to get a lot of information and have a really comprehensive strategy together rather than just planning activity by activity. I guess our focus is different and our goal is different. I'm trying to come up with a comprehensive youth health strategy for these communities. He's trying to come up with activities and events.

This PW also made the observation that the SBPP training did not help the PWs in making distinctions between these two approaches. This created some confusion for PWs because they were not really sure how they should be using the model. Although ADS might not have made it clear in the training, the SBPM handbook implies that the model should be used in a comprehensive way, but there is nothing in the handbook that would suggest to PWs that they could not use the model on a project-by-project basis.

Some PWs understood that there were two general approaches to using the model and they were comfortable with the way they were using both approaches. Sheila's statement illustrates this:

I guess how I have applied it, for me, I keep it in my mind and I'm always trying to fit what I do into that. So it's a target that I shoot for. Then, I use some of the framework when I'm developing something specific- I'll try to work it through the model on a micro level to develop specific strategies and then I'll try to use it on a macro level as a general frame of reference to guide my entire project.

Like Sheila, other PWs believed it could be used on both a macro and a micro level but were constrained by the school context in using it as a comprehensive planning approach in collaboration with their school communities. For them, the only way they thought they could use the model was to plan individual
activities and events until such time as they could get the school community on board with the model. This perspective is reflected in the following comment by Tracy:

I've gone through the process with the different events that I've held. And they've been they're very good, you know I find that it really works well. But just as for the general school, like I said, I haven't been able to go through the whole thing in that way because they are not ready.

Several other PWs said remarkably similar things about this macro-micro distinction. The comprehensive approach was an ideal they were striving for but the barriers in the school environment precluded them from fully implementing the model as a comprehensive approach to planning an integrated prevention program for the school.

"Doing" the Model as a Solo or Collaborative Activity

The second dimension of this general approach to using the model was using it as a personal guide to practice or using it in collaboration with others. For PWs who used it on their own, the model served as a guide for their own actions but they did not work through it with others, usually because people in the school were not interested in using the model or rejected it outright. Some of these PWs, however, found themselves steering the steering committee or other colleagues in a particular direction on the basis of the model, but did not share this with the steering committee. Caroline describes her use of this particular approach to using the model:

And the other thing is that I'm starting to use it [the model] with administration. Very sneakily. But we can't call it an actual model, because they don't like to be hemmed into that. I'm just trying to guide them in the way it works. So the model is not necessarily something that you have to lay out for other people. You're kind of steering them in that direction without sort of laying it out as a given or a requirement.

Some PWs were reluctant to push the model to their school colleagues, even in a "sneaky" way, although they were using it themselves to guide their own practice. Their reluctance came from a concern about imposing something on others that they were not interested in using. The approach of these PW was to introduce the model to people in the school and leave it up to them whether they wanted to become involved or not. Meanwhile, PWs like Kathleen continued to use the model on their own as a framework to develop prevention strategies in the school, as reflected in her following statement:
Well, I've shared it [the model] with the head counsellor. And then my feeling is if she wants to share it with her department, that's her business-- it wouldn't work for me to push it on them. It would be almost arrogant for me to go to the whole counselling department and say look, here's a model we should use. It's more up to them. So I have shared it with her and she, I mean, she is very supportive of me using it but that's as far as its gone. So I just continue to do it on my own.

Several PWs did try to work through the model with their steering committees, although very few of them found that to be a useful or satisfactory process. These PWs wondered about the point of using the model in this way because they believed that the information that came out of the process was already known to them or to members of their committees. When committee members balked at using the model for this reason, the PWs were unable to provide the committee with good reasons to continue because they did not understand the model well enough to make a strong case for using it. They could not demonstrate to the satisfaction of committee members, or themselves, that using the model might make a difference. Carson, for example, describes his reactions to the process of working through the model with his committee:

So what we did in the steering committee was we ended up writing the model out on about three pieces of paper that were about 40 feet long each, and I just stuck them up on the wall and we went through it, step A, B, A through H or whatever it is. And at the end of it I thought, wow, we just wasted a lot of people's time. I didn't walk away with anything concrete that would help me know what to do.

PWs who tried to work through the model collaboratively with their committees tended to use it more on a project-by-project basis because in this way, they could get through it quickly without investing a lot of time "Doing" the Model. PWs who used it in a comprehensive way, were more likely to do it as a solo activity.

Applying the Model

The above discussion describes the way PWs used the model in a general way. They either use it as a comprehensive approach to planning or as a way to plan specific activities and events. Either of these approaches could be carried out by PWs acting alone or in collaboration with their steering committees. At the time of the individual PW interviews, however, there were still several PWs who had not used the model in either of these general ways either because of barriers in the school, or because they were personally resistant to the idea of using the model. It simply did not fit with their way of doing things.
When PWs were asked to describe how they had used the model, they identified several different types of application. Some of these types were more likely to be used within one or the other of the general approaches but all of these types potentially could be used within either of the general approaches. These five main types of application included: (a) using the model by the book, (b) making approximations of the model, (c) reinventing the model, (d) retrofitting the model, and (e) using the model as a mental map. In the section on sizing up the model, several different views of the model were presented. There is clearly some overlap between the way PWs viewed the model soon after being introduced to it, and how they actually applied the model in practice.

"Doing" the Model by The Book

Using the model by the book is defined as using the model as it is described in the SBPM handbook. The intent was outlined in the introduction to the category of "Doing" the Model. Unfortunately, I have insufficient data to saturate this code. At the time of the PW interviews, no one had worked their way through the model in a comprehensive way, by the book, at least not in a way that they could describe to me. There were some PWs who had made progress toward this goal. Most PWs, however, had just begun to use the model in some way, either by using parts of it, or they had just begun phase 2.

In the site visits, I identified only one PW as having used the model by the book. At the time of the site visit, he had made a decision to reject the model as a framework to guide his practice. Thus, the discussion focussed more on that issue than on how he had used the model by the book. He had used the model by the book to develop his program plan for the previous year and submitted this plan to ADS. He was unable, however, to fully implement the plan because of the demand in the school for intervention services. My observation is that he was one of the few PWs who understood the model thoroughly early in the pilot phase. He had read extensively in the literature on the model, including the book by the original developers and in the first interview, was committed to working through it. Subsequent conversations with him at various times throughout the project confirmed that he was progressing through the model as it was
intended, until the final year of the project, when he began to question the ethics of prevention and ultimately, to reject the model. There were 7 PWs out of 39 who reported, in the final PW survey conducted by the IHPR evaluation team, that they used the model by the book. More PWs may have used the model in this way but I do not have the data to describe this type of use.

**Doing Approximations of the Model**

Several PWs said they were using the model in a way that was consistent with the SBPM handbook. When I asked them to describe their use of the model, there were clearly some features of their application that fit with some aspects of the model as outlined in the handbook. For example, they were working through a series of phases and developing objectives at each phase; they talked about working backward from the final desired goal; or, they talked about developing a comprehensive range of strategies that target predisposing, reinforcing, and enabling factors (or motivating, rewarding, and facilitating in the SBPM).

There were, however, some elements of their process that were not consistent with the intent as outlined in the handbook. Thus, they were approximating the model rather than applying it exactly as it had been laid out in the book. This is the case in the following example, in which Julia describes the process of using the model with a group of young people to plan for a Dry Grad:

What we did was that they wanted to look whether they should do a Dry Grad and so we just took the model and started off with why were they deciding to do it and how could they get the information that they needed to know if they wanted to do it or not and so the students did their own survey. The grade twelve class came up with a quick one page survey. It was just a few basic simple questions and they ended up deciding that yes they were going to do it based on safety factors and a number of other factors. So they basically listed out for themselves all the different motivating and rewarding factors and from that we developed an action plan and that simply took - once they got their survey back and we decided to go

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42 This PW's concern was that outside agencies, like ADS, often come into a community with a specific agenda that does not fit with the community's assessment of its own needs. The job of the practitioner, therefore, is to influence the community to adopt the health professional's view of the priorities for action. This raised an ethical dilemma for him because he began to question whether he had any right to apply a particular "technology" (i.e., the model) to influence community decisions about needs. In making the case for preventing alcohol and other drug use, he believed that other valued community goals might be superceded by the ADS goal. The pressure from ADS to focus on alcohol and drug use behaviour, even when his community determined it was not a priority, made him question his own actions. The most troubling thing for this PW was his concern that a community might become dependent on the health professional and her or his technology, and that this could be a disempowering experience for the community. At the time the study ended, this PW had not come to any resolution of this dilemma but was trying to work it out.
ahead with it and went through all the reasons and worked everything out. Maybe we spent a
day doing it in total and then we just went with it and so I see that it could be used even with
students.

In this example, the group began with the strategy and worked forward in the model to identify the
motivating and rewarding factors for that particular strategy. The SBPM, on the other hand, proposes
working back from a goal, to identify the motivating, rewarding, and facilitating factors and then to develop a
strategy or strategies that will address all of these factors. There is certainly nothing wrong with making a
decision to hold a dry grad celebration and then developing a plan to put it into action. In fact, this may have
been an empowering experience for these young people, but going through the process in this way is not
exactly the intent of the model. "Doing" the Model this way appeared to be a common experience.

Other PWs were able to provide detailed descriptions of how they worked through the various phases
of the model including the specific objectives they developed. In the following comment, Kathleen provides
an example of one phase in her process of working through the model:

So phase 1 which is identifying who is at risk and how we do that by absences and low
grades. And not only that, but we get into a subculture. People know who the users are sort
of thing. So phase 2 was the health assessment, identifying the groups at risk. And the
health risks that we wanted to prevent were continued alcohol and drug misuse, self esteem,
health risk of having really low self esteem, at risk for pregnancy, and a real lack of
assertiveness skills, not being able to say no and not being able to stay away from it. So the
objectives for health outcome that we came up with, or that I came up with, were that we
needed to give some empowerment to the kids. And that would include things like teaching
decision making, teaching assertiveness, helping kids to feel good about themselves. Giving
them a positive experience in a school setting. Breaking down their isolation, that they're not
the only ones dealing with certain issues. And as far as to stay in school, which was the
other objective, to try and bring about getting higher grades and a sense of belonging to the
school. Establishing friendships in the school and getting support from their peers. So then
phase 3....

In this account of the planning phases, the objectives at each stage are not stated in terms of changing
behaviours or health status outcomes, but rather as strategies. She is also mixing up health issues and risk
factors for those health issues. The SBPM does not propose developing specific strategies at each phase of
the model as Kathleen is doing. Thus, although she is working through the phases in a systematic way, she
is not exactly following the model. She is approximating it. Does this mean that the strategies she is
proposing are not good strategies? Does it mean that they are not likely to be effective in doing what she
intends just because she did not follow the exact procedures of the model? I cannot answer these questions with any certainty, but in terms of whether she is following the process specified in the SBPM handbook, clearly she is not.

This particular PW was viewed by ADS as being very proficient in the model so they recruited her assistance to help train new PWs (third generation PWs) and asked her to do presentations at the annual training conference. Although she is not "doing" the model by the book, her energy, enthusiasm, and confidence in her ability to do the model was infectious. I spoke to three new PWs after they saw her presentation and they were extremely impressed with the model and anxious to start using it. This contrasts sharply with the experience of PWs at the first and second training conferences in which ADS trainers presented the model. The question about how much one can approximate the model without losing its essence and effectiveness is unknown but might be an important question for further research.

Reinventing the Model

Reinventing the model refers to making deliberate, recognizable, and sometimes fairly extensive changes to the model. PWs reinvented the model for a variety of reasons. Sometimes it was done because of administrative pressure or the demands of the organizational context. Other times, PWs reinvented the model to suit the needs of the situation and sometimes they did it for purposes of accountability. In other words, if they could report on doing selected aspects of the model, even if they were not intending to do the whole thing, they might satisfy their agency supervisors or area managers. In the quotation below, Susan describes the pressure from administrators as a factor in her "reinvention" as follows:

Because there was some urgency from the administrators to sort of tackle this problem and I think there is probably a lot of political stuff mixed in with that. And they wanted to see how it would work with that problem. So, I sort of watered it down because they are very, very busy and I know the model sort of took a long time to really get into—the meat of things—so I watered it down and I used it as best I could so I could give them some idea of what was going to happen and give them some input. So I had them on my side sort of thing.

In this situation, the reinvention was a watering down of the model. Later in the interview the PW said that watering down meant leaving out some steps, combining others, and not coming up with a
comprehensive range of strategies. Thus, reinventing the model was done to accommodate the needs of the administrators and get them on-side.

Other types of reinvention involved using parts of the model as the PW saw fit and saw the need. In the PW survey, half of the PWs said they used only parts of the model. For example, one PW said she only used the parts of the model she understood. Those she had trouble figuring out, she ignored. Another PW, said that she would use the quality of life assessment (phase 1 of the original Precede model) with several different groups to stimulate discussion. In other instances she would use the data gathering strategies to help sell the model. But she did not use these in any particular order or as part of a larger planning process. Earlier, I mentioned that most PWs used the data gathering phases of the model to help them define the scope and extent of the problem in the school.

There were also 12 PWs out of 39 who identified themselves on the survey as using the model “in some other way”. Perhaps the instance described by Melinda in the following quotation is an example of "doing" the model “in some other way”:

Well, for me, I see it as a guideline and if, along the way, I find new things, if the model’s not working, I’ll implement something that is not the model that will get me to the same point.

What this quotation suggests is that, despite the requirements to use the model, many people perceive a flexibility in the model that they can make changes to the process and add new things, particularly if the result is the same.

Retrofitting the Model

The definition of retrofitting is retrospective fitting of one’s actions to the received version of the model. Originally, I conceived of retrofitting as any post-hoc, after the fact fitting of action to the model. I have since come to distinguish between two types of this behaviour. The first is done for meeting accountability requirements. That is, PWs do not use or even think about the model when planning or implementing prevention strategies, but when it comes time to justify their actions or to write their annual reports for accountability purposes, then actions are retrospectively fit, thus retrofitting, to the model.
According to many PWs, this can be done quite readily. Marlene describes an example of retrofitting in the quotation below:

And I haven’t at this point in time sat down and attempted to fit everything that I’ve done into parts of the model, but I’m sure I could do that. Or I could have someone else do that for me. And I will do that when I do my report.

The second type of retrofitting I have named reframing. It is similar to retrofitting in that it involves retrospective fitting of action to the model. What distinguishes it from retrofitting is the intention behind it. In retrofitting, the intent is to lead ADS area managers to believe the PW is actually meeting his or her contractual obligation to use the model as a guide to practice. In reframing, PWs talk about the model providing a general guide to their practice and from time to time, they check back with the model to make sure they are on track. In the following quotation, Tracy describes this type of reframing and how helpful it is to her:

Its been quite helpful knowing there is this framework that I can go back to to make sure that as I am implementing and planning things that I am covering those aspects.

Earlier, in the section on PWs’ perceived strengths of the model, I identified one view of the model identified by some PWs, which I named the model as a touchstone. In reframing, this is exactly how the model is being used. Reframing can also be a way of evaluating the comprehensiveness of one’s program, even if one has not used the model in its purest form to develop it. John, for example, advocated for this type of reframing (although he called it retrofitting in response to my use of the term):

I advocated other strategies as well [for creating an operational domain in which to implement the model]. For example, I suggested the project initiative could originate with the PW early in the program....I also advocated for what you called retrofitting (good term) for the purposes of program audit. In other words, I suggested that even if the work was emerging from organizational demand, as opposed to community-based research, the work could be reconceptualized in the terminology of the model in order to review the comprehensiveness of the program. To my own credit, I did not suggest that this was in any way the same as implementing the model. Rather, it was a means of evaluating the spectrum of the program.

According to many of the PWs with whom I spoke at various times during the final year of the pilot project, retrofitting was a very common occurrence, as was reframing.
There was also a variation on retrofitting and it was more of a prospective fitting to the model of actions that the PW wanted or intended to do. In other words, a PW might want to implement a specific project or carry out a certain activity. Some PWs, looked ahead to determine how they could fit what they wanted to do into the phases of the model so that they could justify that action. An agency supervisor describes below how she assisted the PW in her employment to do this:

So in the beginning Susan and I had a lot of meetings in terms of, okay, how much of this [the model] do we actually have to abide by and which can we skirt. Then what are some of the projects and activities we want to do and how can we fit them in somewhere. And I think by doing this we still managed to maintain that creativity and spontaneity that was squelched by parachuting the model.

Clearly, it was not just the PWs themselves who were retrofitting for accountability purposes, but PWs were often supported by their agency supervisors in doing this because their supervisors were not supportive of the model themselves.

The Model as a Mental Map

Using the model as a mental map involved using it as a general set of guidelines to follow in their work. One PW said, "It's sort of like sign posts on the road" (Karen, PW). It is difficult to describe this type of use because those PWs who said they used the model this in this way were unable to provide concrete examples of how they might do this. For these PWs, it was an internal, informal process that did not adhere to a particular set of steps. For example, Marlene said, "I use the model every day, it's just not formalized."

Using the model as a mental map appears to incorporate the notion of the model as a way of thinking described earlier in the section on strengths of the model. One PW described it as putting a theory to her actions. Others described it as a way of organizing ones thoughts and actions, as described by Michael in the quotation below:

Yeah. I think that the way to do it, and I mean this is just my opinion, is that the prevention worker can use it as a tool for organizing their own thoughts and their own activities and so on, but it's not something that becomes a working framework to use in conjunction with communities.

Obviously, PWs who use the model in this way were doing it as a solo activity. It was not something they did as a collaborative process in conjunction with members of the school community or with the steering
committee. In that sense, these PWs were not implementing the model as intended. Because PWs who used the model as a mental map or as a way of thinking could not describe, in concrete terms, how they used the model, it is difficult to know whether this does constitute "Doing" the Model or whether this is a "fiction."

In summary, it appears that few, if any, PWs used the SBPM by the book as a step-by-step planning approach to develop a comprehensive plan for preventing alcohol and other drug misuse by adolescents. Several PWs did try to use the model in this way, but became discouraged by what they perceived as barriers to implementation in the school setting. Most PWs used parts of the model, reinventing it in some way to fit the context in which they were working. Several PWs rejected the model as a framework to guide their practice and used it solely as a guide to fit their actions to the model for the purposes of accountability. For many PWs, the model provided a general set of guidelines for working with the community, but it did not represent an approach they could use in the way that ADS intended it to be used.

This is not to say that some PWs did not develop a comprehensive approach to the problem of alcohol and drug misuse in their schools. In fact, some PWs did implement a broad range of strategies that addressed predisposing, reinforcing, and enabling factors for substance misuse. Those few PWs who used approximations of the model were more likely to develop a comprehensive plan than those who used it in other ways. Other PWs, however, did not use the SBPM as a guide for developing a comprehensive plan yet managed to do so. Two PWs, for example, used the comprehensive school health framework as a guide for developing a comprehensive and theoretically sound plan consisting of a broad range of potentially effective strategies. For these PWs, it is possible to reframe what they were doing in terms of the model but they did not, in fact, use the model for their planning. A few who did not follow the model explicitly, seemed to have developed their plans based on their own understanding of adolescent substance misuse as a guide. Perhaps the principle of comprehensiveness inherent in the model influenced them in some way but they do not attribute their approach to a use of the model.

Those PWs who did develop a comprehensive plan, irrespective of how they used the model, were more likely to have adopted a capacity-building role in the school. They were also more likely to be working
within a supportive school context. Thus, it appears that the PWs’ own philosophies of practice were more important in the development of a comprehensive plan than their use of the SBPM. Overall, however, a small percentage of the total number of PWs used the model in a way that could be recognized as approximating the intent of ADS. Although there were not a large number of PWs who had developed and implemented a comprehensive plan by the end of the pilot phase, the model was not a necessary prerequisite to this development.

**Summary of Confronting and "Doing" the Model**

Confronting the model is composed of three processes: reacting to the model, learning the model and contemplating the model. In Confronting the Model, PWs came face-to-face with the model for the first time at either the first or the second annual PW training conference. The PWs’ experiences in the field, or lack of experience, in combination with a number of factors in the ADS context influenced the PWs reaction to the model and its presentation. Many PWs reacted in a hostile manner to the introduction of the model while others responded in a positive or neutral fashion. Whatever the reaction, this created the context within which PWs would learn and contemplate the model for many months following the training.

There were many barriers to PWs learning the model. The training session did not provide them with the type of learning opportunities they needed to understand, learn, and practice the model. There was no one back on the job to provide them with needed technical assistance and the print materials available in the first two years of the project were inadequate. The demands of the school context kept them from attempting to learn and practice the model. They often perceived that they had to make a choice between doing the job and doing the model. Once they had the opportunity to contemplate the model, they sized it up by noting its strengths and weaknesses. Having made an initial judgment about the model, they tried it on, and assessed its fit with their own style and philosophy of practice, and determined whether it fit with the way the school did business. For the most part, PWs concluded that there was a good personal fit with the model because they tended to interpret the model in a way that fit with their own values and patterns of practice. On the other
hand, PWs assessed the model as having a poor fit with school context. The culmination of the process was a decision to buy into the model or to reject it as a guide for their own practice.

"Doing" the Model represents the culmination of both Entering the Field and Confronting the Model. Based on the data gathered in this study, very few PWs used the model as it was laid out in the SBPM handbook. In other words, they did not use the model as it was intended. There were two general planning approaches to using the model within which there were five more specific types of application. PWs used the model as either a guide for planning on a project-by-project basis over a short period of time, or they used it to plan a comprehensive set of strategies that would be implemented over a considerable period of time. In doing this they did it either as a solo planning exercise, or in collaboration with others in the school community. In terms of the specific ways that PWs applied the model, these included: doing the model by the book, making approximations of the model, retrofitting and reframing the model, reinventing the model, and using the model as a mental map.

As a process of Reconciling Concept and Context, there are three meanings of the term reconciliation that are relevant in this situation: (a) to settle or resolve, (b) to bring (oneself) to accept, and (c) to make compatible or consistent, as in reconciling opposing views (Microsoft Encarta, 1996). Although the major emphasis in this study was on the last meaning, there are aspects of this process that reflect the first two meanings as well. To implement the SBPP in the school setting, PWs had to settle or resolve several dilemmas that resulted from the lack of fit between the context from which the concept emerged (ADS in the Ministry of Health), and the context into which it was introduced (the local school). To implement the concept, some PWs had to bring themselves to accept ideas that may have been incompatible with their own personal and professional philosophies and their ways of interacting with others. Finally, to implement the SBPP successfully, the PWs had to reconcile the opposing views, values and practices of various groups and organizations that had a stake in the outcome of the project.

Inherent in the notion of reconciliation are three possible outcomes: (a) both concept and context are adapted or modified to become compatible, (b) the concept is modified considerably to accommodate the
demands of the context while the context remains virtually unchanged, and (c) the context changes sufficiently to accommodate the concept which retains its original or intended form. In this study of Reconciling Concept and Context, most PWs in this study modified the concept considerably to fit the context. In a very few instances, there was mutual adaptation and in no instance was there significant modification of the context to accommodate the concept in its original form. The concept, for the most part, was coopted by the status quo.
CHAPTER ELEVEN

IMPLICATIONS

The purpose of this chapter is threefold: (a) to revisit and discuss the limitations and strengths of the study, (b) to compare the findings of this study to the research in related areas, and (c) to discuss the implications of these findings for policy, practice, and future research in the area of health promotion. For the second purpose, my intent is to compare and contrast the substantive grounded theory of Reconciling Concept and Context with research in the areas of implementation and school change. This begins with a discussion of the key findings of this study in relation to prior research in similar areas. Then, I compare the theoretical perspectives on implementation identified in Chapter Three, with the theory of implementation that emerged from this study. This is followed by an exploration of how this study is an emergent fit (Glaser, 1978) with Ottoson and Green’s (1987) prior work entitled “Reconciling Concept and Context: Theory of Implementation.” The implications of the findings of this study for practice, policy, and future research in health promotion are then discussed.

Limitations and Strengths of the Study

This study focussed on the challenges of implementing the SBPP in secondary schools in the province of British Columbia, particularly in implementing the PW role, and putting the SBPM into practice. The study does not address the question of the relationship of implementation to program outcomes. My own criticisms of most theoretical perspectives on implementation in the literature has always been that implementation has been viewed as an end in itself, irrespective of outcomes for the intended beneficiaries of the program. From a health promotion perspective, which is concerned with both process and outcome, this presents a problem. Research that explores the relationship between implementation and outcomes in health promotion programs is therefore important.

It would have been helpful to include a few more schools in the sample to get a better sense of the diverse ways the model was being implemented at the end of the three-year pilot phase. The study gathered good data on how the model was being used in the first two years of the program, but did not get a broad
range of data on the extent and type of application at the end of the three years. Although the purpose of this type of qualitative research is not to generalize the findings to the larger population of PWs, greater saturation of the category of "Doing" the Model might have been achieved.

The multiple roles of the researcher in this study and in the overall evaluation might pose a limitation. Because this was a qualitative study embedded within a larger quantitative evaluation, the issue must be raised about the implications of integrating two studies with different underlying assumptions. The overall evaluation utilized a conceptual framework that guided the development of instruments for survey data collection. Grounded theory assumes an atheoretical stance at the outset of the research. This does not mean that the researcher has not been sensitized to existing theoretical concepts. It does mean that a specific \textit{a priori} theory does not guide and determine data collection and analysis. The concern exists, however, about whether the conceptual framework guiding the quantitative study might have influenced the data collection for the qualitative study (Swanson & Chapman, 1994).

The danger may be further enhanced when the researcher is intimately involved in both components of the research, as I was in this project. To avoid this possibility, Swanson and Chapman (1994) suggest that it is preferable for different researchers to be responsible for the different components, but they acknowledge that this is not always possible because of unforeseen contingencies. Unfortunately, having different researchers for different components was not possible in this project for several reasons, including financial reasons and unforeseen challenges arising from the field.

At the time the IHPR team wrote the SBPP evaluation proposal for the Ministry of Health, we were all unfamiliar with qualitative methods and did not intend to use grounded theory for the qualitative component of the study. Later, as we learned more about qualitative methodologies, grounded theory became the method of choice for the research questions of interest. The original intent in the SBPP evaluation was that the Project Coordinator and other research assistants would be responsible for the quantitative component of the study, and I would be responsible for the qualitative component. Although I had been part of the original team that designed the study and wrote the proposal, I would have been removed from the day-
to-day implementation of the quantitative part of research. Unforseen contingences, however, expanded the volume of work considerably over the first two years and necessitated my involvement in quantitative instrument design and data analysis to meet our contractual obligations. In the final year, it was necessary for me to assume responsibility for project coordination and I was therefore even more involved with all aspects of the project.

For these reasons, it was important for me to be constantly vigilant that the conceptual framework and findings from the survey component of the evaluation did not drive and preconceive the qualitative data collection and analysis. It was not possible, however, to ignore or forget these data so it was important to incorporate into the study ways of handling this problem. Fortunately, the solution to this problem is built into the method in several ways. The researcher enters the field with a store of "sensitizing concepts" derived from the theoretical and substantive literature, and from the researcher's experience. These sensitizing concepts provide some initial direction, but grounded theory requires that all concepts earn their way into the theory and must be continually checked out against the data. Concepts that are indicated by the quantitative survey data are no different than sensitizing concepts from the literature. It is how they are handled in the data collection and analysis that is important, and the constant comparative method of grounded theory provides a mechanism by which the researcher can ensure the emergence of theory from the data. Other techniques for ensuring rigour were discussed in the methodology chapter. It is up to the reader to determine whether an acceptable degree of rigour was achieved in the face of these limitations.

Another question that might be raised about the credibility of the study relates to how PWs' knowledge about being part of an evaluation might have influenced them to respond in a particular way to questions or, more importantly, might have influenced the course of implementation. For example, ADS required PWs to implement the model. The fact that PWs were being evaluated might have influenced them to try harder than they might otherwise have done to implement the model as intended, or they might have said they were using the model when they were not.
Most PWs acknowledged that one of the important aspects of using the SBPM was that it provided a standard for the purposes of evaluation. Thus, they were aware that they were being evaluated and many PWs did try harder to implement the model because of this. However, when PWs were asked to give an example of how they had applied the model, it became readily apparent whether they had used it. This issue is more of a concern in a situation in which there is a high degree of implementation. With successful implementation, interpretation of the findings might be difficult because it would be possible that the evaluation influenced implementation. In this situation, however, it was clear that many PWs ignored ADS directives, despite the evaluation. They were open about their feelings and experiences with the model, about doing counselling and treatment, and about retrofitting the model for accountability purposes. PWs were not reluctant to discuss freely the challenges to implementation. In many instances, they revealed information that could place them at risk for losing their positions. This suggests that the influence of the evaluation on implementation was not significant.

In my view, the biggest limitation of this study was the limited qualitative data I was able to obtain from students in the site visit schools. The ethics review process at UBC required active parental consent for students to be interviewed or participate in focus groups. Many of the students who had developed a relationship with the PW wanted to talk to me about their relationship and work with the PW but not if it meant informing their parents. Given that the Infant Act of BC allows young people under the age of 19 to consent to medical care without parental permission, it seems unreasonable that students could not consent on their own behalf to discuss their relationship and work with the PW. Ethics Review Committees at other universities in British Columbia will allow young people to consent on their own behalf in similar circumstances.

There was much more going on in the relationship between PWs and students than this study revealed. Despite the implementation challenges that emerged for PWs in gaining entry and creating a role, there appeared to be no such challenges in working with students. I believe that quite a different story of implementation in relation to the work PWs did with students might have emerged had I been able to gather
more data from young people in this study. The pessimistic tone of the data and the conclusions as discussed above may have been tempered by observations of success stories with students. It appears that some PWs were able to accomplish much with students even when they had not achieved peerage with the adults in the school.

Despite the drawbacks cited above, this study had strengths as well. Without the qualitative interview and case study data, we would never have understood the challenges of implementing the PW role and the model in the school context. The ability to follow the implementation process prospectively over time allowed a comprehensive understanding of the evolving nature of implementation, particularly in relation to its interaction with the school context. This study also uncovered a number of assumptions held by program developers, school personnel, the researcher, and PWs that did not hold up under scrutiny. By challenging existing assumptions, the groundwork is laid for improved policy and practice.

The theoretical understanding of the implementation process that emerged from this study may allow the development of more sensitive evaluation instruments to assess implementation. The questionnaire data obtained from PWs, teachers, and school administrators, although useful, did not capture the nuances and challenges of the implementation process in the way that this study did. Our improved qualitative understanding of the influences on implementation provides a solid basis for instrument development in future studies of school-based health promotion initiatives.

This study explained how PWs manage the many dilemmas they experienced in trying to reconcile a concept, the SBPP, which reflects the values of one organization, with a context that operates on the basis of a different set of values. By uncovering these dilemmas, this grounded theory has implications for how those dilemmas can be avoided or overcome to maintain quality practice in the school setting. It also identifies the organizational supports that are necessary to support this type of innovative program, and the adaptations of the innovative program that would make it work better in the existing organizational circumstances. Some combination of these two is the reconciling process that must accompany any policy or centrally conceived
program that must be implemented locally in many different settings by people with varied predispositions, skills, resources, rewards, and constraints.

Implications for the Literature on Implementation and School Change

In discussing the influences on the implementation process of Reconciling Concept and Context, I return to the notion of the conditional matrix (Strauss & Corbin, 1990). The conditional matrix is graphically represented as a set of concentric circles with action/interaction at the heart of the analysis. Each circle in this matrix represents a different level of influence on action/interaction. In this study, action/interaction is the reconciliation process which occurred as PWs engaged in the dual processes of Entering the Field and Confronting the Model. This action/interaction occurred primarily within the school context. The concept itself emerged from another level of the conditional matrix, the ADS environment, and was transmitted to the school context. Factors that influenced the reconciliation process were therefore located mainly in the levels of the school and ADS contexts, but there were other factors that emerged from the levels of the school district and the Ministry of Education. These were more distal to the process and are not discussed here.

Conceptualising the factors influencing implementation within a conditional matrix is consistent with Ottoson and Green's (1987) original discussion of Reconciling Concept and Context in which they identify factors influencing implementation as being related to the policy (the concept), the implementing organization (the context), the political milieu and the environment. Many of the same factors they identify were found to be related to the implementation process in this study. In the discussion that follows, factors related to the school context are presented first, followed by factors related to the concept, and ending with a presentation of factors in the ADS environment that influenced the reconciliation process. Ottoson and Green's (1987) discussion of the political milieu encompasses the notions of power and control at the intraorganizational level. These factors are implicit in the discussion of factors related to the school context and the ADS

43 This was discussed earlier in the manuscript on pp. 66-67.
environment. Thus, in contrast to Ottoson and Green, this study did not identify a separate category related to the political milieu.

Context

This study identified several factors in the school context that influenced the implementation process including: (a) the school adoption process, (b) school readiness, (c) school culture, and (d) school support, including that of administrators, teachers, counsellors, and the unions.

School Adoption Process

The process by which the schools came to be involved in the SBPP affected the ease with which PWs Entered the Field. Schools in which administrators participated in the adoption decision were more likely to be supportive of the PWs as they tried to gain entry, and more supportive of the PW role. This occurred even if teachers were not involved in the decision to adopt the SBPP. If teachers were involved in the adoption decision, then the support for the PW and her or his role was even stronger. In contrast, schools in which the decision to adopt the SBPP was imposed on them from the school district, were more likely to oppose the program in the school and made the PWs Entry to the Field very rocky. Unions also were more likely to oppose the position. Thus, the school adoption process influenced the PWs entry into the school and delayed their ability to initiate and implement prevention strategies in the school. A non-collaborative adoption decision, although creating opposition, did not necessarily determine the ultimate outcome of the implementation process. A rocky start sometimes turned into a success story and vice versa.

The literature also suggests that there is not a direct relationship between adoption and implementation. Fullan (1991), for example, says this relationship is “loosely coupled and interactive” (p. 64). Although the adoption process can generate meaning or confusion, alienation or commitment, a poor beginning can be turned into success depending on what happens during implementation. Two of the major studies of educational innovation widely cited in the literature also reported similar findings. These were the Rand Change Agent Study (Berman & MacLaughlin, 1975) and the Dissemination Efforts Supporting School Improvements Study (DESSI) (Crandall & Associates, 1982; Huberman and Miles, 1984). The RAND study
examined a sample of 293 local projects stimulated under four federal funding programs aimed at supportive innovative practice in local schools. The DESSI study involved survey data collection in 146 schools, and multi-site qualitative case studies in 12 schools chosen from these 146 sites.

**School Readiness**

Fullan (1991) identifies "readiness" as a factor influencing the initiation of a program. He defines readiness as a combination of need and capacity; that is, perceived need for the innovation by members of the school, and the capacity of the school to engage in the proposed change. Readiness involves the school’s practical and conceptual capacity to initiate, develop, or adopt a given innovation, and may occur at the organizational or the individual level. A main component of readiness at the organizational level is whether the change is compatible with the culture of the school. This issue is discussed in more detail in the next section. Huberman and Miles (1984) discuss the concept of "preparedness" in relation to its influence on implementation. Their concept of preparedness appears to encompass some elements of the SBPP study’s concept of readiness. Components of preparedness included commitment to the innovation, understanding of the innovation, resources and materials, skills and training, ongoing assistance, and building-level support.

*School readiness* influenced the *school adoption process* in this study, as well as the implementation process, particularly in relation to creating a role and enhancing school readiness. School readiness is a complex contextual factor, made up of several components. These include: (a) school orientation, (b) clarity of program expectations, (c) program fit, (d) the school’s understanding of and value placed on prevention, (e) the school’s commitment to the program as reflected in provision of resources, and (f) support for the concept of comprehensive school health. Thus, the notion of *school readiness* in this study is much more specific to the issues of the innovation than it was in other studies. The first four of these are discussed below.

**School Orientation.** This refers to the orientation of the school toward adopting or developing new programs in the school. Schools in this study demonstrated either a problem-solving or an opportunistic orientation toward the adoption of the SBPP. A problem-solving orientation was demonstrated when the
school adopted or initiated the SBPP because the administrators it would help the school to deal with the problem of alcohol and drug use among adolescents. A school with an opportunistic orientation adopted the SBPP because it served a purpose other than that for which it was designed. In this study, opportunistic reasons included adopting the program to advance an administrator’s career goals, to enhance the school’s public image, and to bring extra resources into the school. According to PWs, few schools adopted the SBPP for problem-solving reasons. Note that adoption is not the same as implementation, and some schools that adopted the program for opportunistic reasons came to see the potential for the SBPP to address alcohol and drug problems in the school.

It may be important to distinguish between two types of opportunistic reasons. Adopting the SBPP because it would enhance an administrator’s career goal is not the same as adopting the program because it would bring extra resources into the school. A principal that is trying to better her or his school by bringing in extra resources, even if he or she is not committed to the concept, may ultimately be more supportive of the SBPP and the PW than someone who implements to advance his or her personal goals. More data would be required to explore this hypothesis.

The RAND Change Agent Study (Berman & McLaughlin, 1975) was the first school study to identify school orientation as an important factor in program adoption. They identified two types of orientation, bureaucratic and problem-solving, with bureaucratic being defined in the same way this study defined opportunistic. The DESSI study confirmed these two orientations and found a surprisingly low salience of problem-solving motives for program adoption. Only two of 86 respondents reported that the reason for adoption was to solve a particular problem. Fullan, in 1991, suggested that this finding was “time bound” in that studies that identified the predominance of an opportunistic orientation were done in the 1970s when failure and confusion were widespread. It appears, however, that neither time (1977 to 1995) nor distance (United States to British Columbia) has eliminated this as a factor in school adoption decisions.

Clarity of Program Expectations. In this study, a “ready” school was not only clear about its own expectations for the SBPP, but there was no discrepancy between what the school expected from the program,
what the agency expected, what the PW expected, and the intent of the program as outlined by ADS. Unfortunately, this degree of clarity was rare. For the most part, the lack of clarity about program expectations was pervasive among SBPP schools. This lack of clarity was related to the lack of adequate groundwork by ADS in advance of program adoption and to the multi-level, multi-system structure for the SBPP. In having to answer to many "masters", it is understandable that multiple expectations might be conveyed to the PW.

Fullan (1991) points out that this factor has been identified as an influence on implementation by virtually every study of educational change since the 1970s. Huberman & Miles (1984) found that lack of clarity was more likely to occur when the adoption decision was made at the district level. This was also the case in the SBPP study. Gross, Giaquinta, and Bernstein (1971) found that teachers were unable to identify the key elements of the innovations they were implementing. McLaughlin and Marsh (1977), in the Rand Study, found that conceptual clarity about what the innovation involved was critical to successful implementation. In the SBPP study, neither PWS, agency supervisors, nor school administrators knew what the program was all about in the beginning. In all of these studies, including the present study, lack of clarity was salient only in the early implementation process. Clarity emerged over time and as implementation proceeded.

Program Fit. This is defined as the extent to which there is an acknowledged or implicit fit between the goals and philosophy of the SBPP and the goals and vision of the school and the people within it. In other words, implementation is less likely when there is not a good program fit. A lack of program fit was demonstrated when there was not a clearly articulated or clearly understood relationship between what the school envisioned for its future and the goals of the SBPP. If the school had not gone through this visioning process, or had not identified the need to address alcohol and drug use issues, then there was less likely to be a fit between the goals of the project and the goals of the school. In the SBPP, it appears that very few schools had given consideration to how the SBPP might fit with their own vision for the school's future. Those that had were able to identify how the SBPP and the Learning for Living fit with their own vision.
The lack of program fit explains many of the difficulties experienced by PWs as they attempted to gain entry, create a role, enhance readiness, and "Do" the Model. The result of this lack of fit was inadequate support for the PW to get the program off the ground, lack of clarity on the program expectations, opposition to the program from teachers and counsellors, and a lack of understanding about and valuing of prevention. It seems obvious that a good program fit would make the early SBPP implementation much smoother. It was the lack of fit between the concept and the concept, however, that made it necessary for the PW to engage in a process to Reconcile the Concept and the Context. Both had to be modified in some way for mutual adaptation to occur.

The concept of goal consensus as a factor in implementation is a common finding in the implementation literature (Ottoson and Green, 1987). Van Meter and Van Horn (1975) found that the extent to which there is goal consensus was one of the most influential factors in implementation success. In turn, goal consensus is affected by the extent of participation in decision making by subordinates. Firestone and Corbett (1988) found that when existing goals and priorities in the school conflict with new projects, implementation is affected. In relation to the school change literature, studies identify concepts like "goodness of fit" (Huberman and Miles, 1984) and "relevance" (Crandall, Eisemann, & Lewis, 1986) as being important influences on implementation. Thus, this study confirms the findings of previous studies in relation to the importance of program fit as well as clarity of goals and expectations.

School Understanding of and Value on Prevention. If administrators and teachers in an SBPP school understood the meaning of primary prevention and valued preventive action in the school, there was a higher level of support for the SBPP and there was more likely to be program fit with the goals and vision of the school. Unfortunately, very few schools had a clear understanding of what prevention meant. They tended to think of prevention in terms of individual problems; that is, meeting with students on an individual basis and educating them about alcohol and other drug use. More often, they equated secondary prevention with the term prevention. In addition to misunderstanding the meaning of prevention implicit in the SBPP, most schools valued intervention over prevention. They were most concerned with having the PW work with
individual students who were having problems with alcohol and other drug use in order to solve those problems. In one school in which there was a clear understanding of the meaning of primary prevention, which was widely shared, even the school administrators commented on how difficult it was to “pull people out of a crisis orientation”.

Sarson (1990, 1993) is one of the few educational researchers I was able to locate who has written about this issue. Sarason (1993) argues that taking a “preventive stance” is critical to solve many of the problems now plaguing the education system. He says that the repair of existing problems, however necessary and morally justified, can no longer be at the expense of primary prevention. The track record for “repair” is dismal in schools so we must turn our attention to prevention. Despite this clear need for prevention, however, schools appear unable to adopt a preventive stance. Sarason (1990) asks the questions “What is there about the school system that prevents them from recognizing a problem before it is epidemic? and What prevents schools from taking a preventive stance?” The answer, he claims, is that in terms of organization, ideology, and knowledge, school personnel deal with the problems of individuals.

It is difficult, he says, for school personnel to adopt a preventive stance because their phenomenology is so shaped by their socialization and embeddedness in a problem-creating, problem-focussed system (Sarason, 1990). The only way to confront prevention and take it seriously, argues Sarason (1993), is for a radical restructuring of teacher preparation programs. It is not enough to tinker with marginal changes in a system intractable to change; we must go to the source of the problem. Current teacher preparation programs, not being based on a primary prevention model, contribute to the manufacture of problems. As long as efforts at educational change focus on the repair of existing problems and ignore prevention, the need for repair will continue to increase. If Sarason’s observations are accurate, and the data from this study support these observations, then it is makes sense that PWs feel drawn into taking a service-provision versus a capacity-building role in the school.
School Culture

Each school involved in the SBPP had its own distinctive culture, yet shared elements of that culture with other schools. Rossman, Corbett, and Firestone (1988) cite Wilson's (1971) definition of culture as: "Culture is socially shared and transmitted knowledge of what is, and what ought to be, symbolized in act and artifact" (p. 5). Rossman and colleagues' qualitative study of school culture found that culture has both descriptive and normative components. Culture describes the way things are by giving meaning to events, behaviours, and symbols but it also prescribes how people should act in given circumstances (Rossman et al., 1988). The culture becomes defined as people in the school react to, interpret, shape, and reinterpret the organization, its structure, processes, and events.

School Norms. In the SBPP study, certain norms that dictate the way things should be done in schools emerged as influences on the implementation process. In the present study, the cultural norm of immediacy led PWs to respond in the moment to the demands placed on them. Much has been written about the culture of teaching and the norms that lead to the importance of doing. Huberman (1988) talks about "classroom press" in which characteristics such as immediacy and concreteness dominate. He says that schools are arenas of action, not reflection, because the structure and organization of schools do not permit time for reflection. Crandall (1990) suggests that the doing orientation in schools reflects their pragmatic orientation. Their concern is with causing some action to occur and only secondarily is it with knowing. He points out that the way of doing things differs considerably in schools from the way of doing things in a research environment or in a higher education environment. Among those operating in a research environment, the dominant mode of operation is "look-learn-do"; in higher education it is more like "learn-look-do" whereas in schools it is "do-look-learn".

It is not only teachers whose actions are governed by the norm of immediacy in schools. Martin and Willower (1981) found that principals were continuously engaged in simultaneous, brief, and fragmented interactions. For the most part, they tended "to engage themselves in the most current and pressing situation. 
They invested little of their time in reflective planning” (p. 80). Much of the principal’s time is spent on “maintaining order” (Sarason, 1982).

The above discussion helps us to understand why PWs found that doing strategies were so effective in establishing credibility and building trust among their colleagues in schools. It also provides some background for understanding the dilemmas PWs experienced in trying to implement the PW role in the school. One of these was the dilemma of striking a balance between crisis management and proactive planning. This dilemma emerged from the nature of the work in schools in which responding to crises is a dominant mode of action. Hargreaves (1988) says that teachers are present oriented and individualistic and tend to avoid long-term planning. House and Lapin (1978) also found that crisis management is a predominant theme for principals:

Another facet of trying to please everyone and to avoid any trouble that might reach central office is to deal with any problem that arises. The principal has no set of priorities except to keep small problems from becoming big ones. His is a continuous task of crisis management. He responds to emergencies daily. He is always on call. All problems are seen as important (p. 145).

**Systematic Planning.** Given this focus on the immediate in school settings, it is not surprising that prevention and systematic planning are concepts that do not always fit with the school culture. Systematic or sequential planning models are based on the assumption "that orderly collection of data and deliberation about what the data say should help discipline decision making and thereby enhance the quality of plans" (Corbett, Dawson, & Firestone, 1984, p.44). This is consistent with the assumptions of the SBPM. Research in schools, however, has suggested that systematic planning often contravenes the way things are done in schools leading some researchers to question whether sequential planning can work in schools and to propose that schools abandon the notion of establishing and planning for school-wide goals (Clark, 1981). In a study that examined what makes urban high schools effective, Louis and Miles (1990, 1991) found that formal data collection and feedback did not play the significant role that planning theories suggest is necessary for effective implementation.
Corbett and colleagues (1984), in a qualitative multi-site case study, examined the implementation and effectiveness of sequential planning in schools. On the basis of their findings, they suggested that the assumptions underlying most approaches to sequential planning did not reflect the reality of educational organizations. They found that, often, the time and resources to allow teachers and others to participate in the process were not available. If there was an incompatibility between school and project priorities, then teachers were less willing to devote time and resources to planning. In making decisions about what changes were needed, participants tended to use “common sense, everyday knowledge” based on their experiences in everyday practice, rather than using knowledge derived from the planning process.

**Participation.** During the process of enhancing school readiness, one of the major challenges experienced by PWs was that of securing the participation of teachers and counsellors in the overall planning for the SBPP, as well as sitting on the steering committee or taking part in specific events in the school. The notion of school culture may help us to understand the challenges PWs faced in obtaining participation. Given their individualistic and present orientation, Hargreaves (1989) has found that teachers resist involvement in whole-school activities in favour of gaining marginal increases in time and resources related to their own classroom activities. He argues that it is the existing structure of the school system that facilitates the development and reproduction of this culture. It is a vicious cycle. Teacher isolation in the classroom leads to a preoccupation with classroom activities that take up most of their time and energy. In turn, this discourages involvement in school-wide activities or collaborative planning (e.g., participation on the SBPP steering committee). If and when teachers do get involved outside the classroom, they often feel inexperienced and unfamiliar with the issues, which hastens a retreat to the classroom. The culture, Hargreaves argues, is therefore reproductive and self-generating.

In relation to the notion of participation, the SBPP intention to obtain the participation of school community members is based on the health promotion principle (Green & Kreuter, 1991) that participation is a critical factor in obtaining local commitment, achieving ownership, and building capacity. In fact, the Rand study confirmed the importance of teacher participation for those very reasons (Berman & McLaughlin,
1975). Corbett, Dawson, and Firestone (1988), however, found that in some cases, the costs of participation by teachers could hamper success. If participation diverted teachers' time and energy from regular activities, and if demands were high, the payoff not immediate or easily visible, or regular responsibilities suffered, then local capacity, commitment, and implementation did not occur. Overall, they concluded that participation by teachers may not be a realistic expectation in most schools, at least not given the existing organizational structure.

In the original conceptualisation of the SBPP, ADS believed that if prevention strategies were to be initiated in schools, then someone from outside the school would have to do this. They acknowledged that teachers would have neither the time nor the inclination for this work and thus, a PW was placed in the school to facilitate the process and, ultimately, do the bulk of the work. Many teachers were, in fact, supportive of the SBPP, once it had achieved legitimacy in the school, but did not want to be involved in the work. They were happy to have the PW do all the planning, organizing, and implementing.

In a study of the influence of school context on school change processes, Corbett et al. (1988) also found that teachers took every opportunity to shift responsibilities onto the field agent who had been assigned to the school to facilitate implementation. Although teachers were committed to the changes, they were unwilling to devote their time to formal planning. These responsibilities were therefore picked up by field agents, thus making it unlikely that teachers would ever become active participants. This parallels the finding of the present study that PWs found themselves in the position of having to "do for" if something was going to be done at all. The danger is that, if participation does not occur, the expected benefits of participation (i.e., school ownership of the problems and the solutions) cannot occur.

Thus, the results of this study confirmed the findings of other studies that teacher participation is very difficult to obtain, but that it is more likely to occur when there is a direct benefit to them. The present study did find that PWs were usually able to find a core group of interested and willing participants, but that they had to carry most of the responsibility for implementation. Other studies have found that when the innovation was central to the school's purpose and goals, participation increased over time (Huberman &
Miles, 1984). The SBPP was not seen by many teachers, or school administrators as central to the school's purpose and so participation was not extensive. The PW, in the end, was the program.

**School Support**

School level support for the SBPP influenced the early implementation experiences of the PWs. If there was *school support* at the time the SBPP was initiated then PWs did not have to go through the lengthy, frustrating, and demoralizing experience of having to *overcome opposition* in order to establish the *legitimacy* of the program. *School support* included the support of administrators, teachers, and counsellors.

**Administrator Support.** Conventional wisdom, and much research evidence, point to the importance of principal support for the implementation of innovations (Berman & McLaughlin, 1975, 1976; Fullan, 1991; Lortie, 1987; Mortimer, Sammons, Stoll, Lewis, & Ecob, 1988). In the SBPP, principal support for the concept of prevention, for the PW role, and for the PW as a person emerged as relevant factors in the PWs attempts to *gain entry* and *create a role*. If the support for the PW was visible, as demonstrated through active, involved engagement of the administrators with the PW, particularly in planning for prevention in the school, then members of the faculty were more likely to be supportive of, and get involved with, the PWs and their activities in the schools. Principal dismissal of the model influenced PWs attempts to use the model as a collaborative process in the school. McLaughlin and Marsh (1977) reported that administrative support sent a clear signal to teachers about the importance of the innovation and that this influenced participation and commitment.

Absence of active principal support, however, did not mean it was impossible for the PW to establish the PW role in the school or to plan and implement prevention activities. In many schools in which the PW did not have the active support of, or regular contact with the principal, many activities and events continued to take place. PWs became members of the school community, made presentations in classrooms, worked with individual students and implemented school-wide activities. Other studies of educational innovation (e.g., Huberman & Miles, 1984) have found that although administrator support is very helpful, successful
implementation can be achieved without it. In this study, however, without active involvement and engagement of the principal, I was unable to find any instances of PWs acting in a capacity-building role.

In this study, the PW was unlikely to obtain any administrative support for anything that might appear to be controversial. Often, PWs could not even raise controversial issues for discussion. In some instances, principals were unwilling to admit that there might be problems related to alcohol and drug use in the school and did not want that information shared outside the school. This conservative tendency in school principals also has been reported in the education literature. Fullan (1991) says that principals are under incredible pressures to maintain stability in the schools, rather than to work toward change. Both Sarason (1982) and Lortie (1987) claim that the principalship is inherently conservative for historical reasons. Sarason says this is due to the narrow educational and experiential preparation of administrators. In a large study of principals in Chicago, Lortie (1987) confirmed Sarason’s claim. Not only did principals have limited exposure to a range of educational ideas and practices, but they were also unprepared to promote innovation among teachers because they did not have the technical knowledge to convince teachers of the benefits of the change. Lortie concludes that, in part, the organizational and structural arrangements of schools interfered with any inclination to innovate. Principals, caught between teachers, parents and district superintendents, must keep all groups satisfied. This is particularly difficult since what satisfies each group may be very different things (Fullan 1991).

**Teacher, Counsellor, and Union Support.** Another barrier to the SBPP getting off the ground was teacher and counsellor opposition to the program at the local school level, and at the provincial union level. Once opposition was overcome, PWs had to work hard to gain support from teachers. PWs perceived that teachers were supportive when they invited the PW into their classrooms, or referred students to them. Teachers were also considered supportive if they participated in activities and events planned by PWs. For the reasons identified above in the discussion on participation, teachers were not willing to do much more than provide moral support for the SBPP and the PW. They appreciated that the PW was available to deal with alcohol and drug issues, but most were reluctant to get involved beyond that. The implementation
literature on teacher support for this type of innovation is sketchy because these types of programs are rare in the literature. Most studies place teachers in the central role of implementor. Some studies, however, identified teacher commitment to the innovation as a key factor in successful implementation (Berman & McLaughlin, 1977; Huberman & Miles, 1984; Corbett, Dawson, & Firestone, 1988).

The Concept

A number of implementation studies have identified several characteristics of an innovation that influence its implementation. These include the complexity and scope of the innovation (Berman & McLaughlin, 1975, 1976; Huberman & Miles, 1984), the degree of change involved, the centrality of the innovation to the organization, and the "radicalness" of the change (Ottoson & Green, 1987). As discussed above in relation to the context, there was not a good fit between the values, goals, and strategies implicit in the SBPM and the school context. The SBPP was not central to the goals of most schools. Given the educational mandate of schools, the SBPP, although viewed as important by many schools, was not central to their raison d'etre. From the perspective of a health professional, the SBPM and the PW role do not appear to be radical changes. From the school's perspective, however, the SBPM and the capacity-building aim of the PW role represented, for many schools, a very different way of approaching an issue. In some ways, the approach to prevention represented by the SBPP did not fit with the existing school culture, as discussed earlier. Cuban (1990) suggests that any change involving new roles in schools represents a profound change that is actively resisted.

The SBPM

The SBPM was a key component of the SBPP. It is a systematic health promotion planning process, based on the Precede-Proceed model (Green & Kreuter, 1991), that is intended to facilitate the development of comprehensive and effective programs in the school setting. This model provides a framework to assist the PW in gathering relevant information to define the issue, set specific and measurable objectives, determine priorities, and develop a comprehensive range of prevention strategies.
In the present study, PWs reported remarkably different understandings of the model ranging from a view of the model as a concrete, step-by-step problem solving approach to the model as “anything you want it to be”. This parallels the findings of Ottoson (1997) in a study that explored how the model was applied in practice after a continuing education workshop in which participants learned about the model. For example, Ottoson says that respondents had nearly polar opposite understandings of the innovation. Some of her respondents thought the model was “just common sense”, “adaptable” and “flexible”, while others noted that this was not the type of model one could learn from a book.

As noted above, other studies have found that the complexity of the innovation influences implementation (Berman & McLaughlin, 1975; Huberman & Miles, 1984; Ottoson & Green, 1987). In this study, many PWs reported that the model was complex, not-user-friendly, and difficult to understand. For these PWs, the perceived complexity of the model was a disincentive to use it. PWs handled their difficulty with the complexity of the model by adapting, reinventing, using parts of the model or even abandoning it.

In the actual application of the model, there were also striking similarities between the PWs and participants in Ottoson’s study. For example, Ottoson (1993) describes the experience of one participant who put the model on “the back burner” after returning to the work setting because of the demands of the job. This was exactly the experience of many PWs when they returned to the school after their training experience. Ottoson (1997) also describes people using parts of the model, or translating it into other forms. This type of application seems to parallel what I have called “reinvention”. Some of Ottoson’s participants reported using the model to support what they were already doing. This appears to be like some applications of “reframing” in the current study. Finally, she describes some of her participants as using it “to see things differently”, carrying the idea of the model “in my head” and integrating thinking about the model into their work. These all appear to match the use I have named using the model as a mental map, or as a way of thinking. Ottoson (1993, 1997) does not provide examples of retrofitting because her participants were not required to be accountable for their use of the model as PWs were in this study.
Thus, it appears that people in very different circumstances than the PWs, who were learning the model primarily out of interest rather than being required to learn and use it, had similar reactions to the model. Ottoson's study, like the present study, did not explore the relationship of application to outcomes.

PW Role. A PW role was entirely new to the school system in BC. I have found very little in the literature about the introduction of such a role into the school setting, particularly since the role involved the creation of a new position to be filled by someone from outside the school. Much of the educational literature dealing with the introduction of new roles involves changes in existing roles where teachers or other existing staff in the school take on new responsibilities or their role becomes redefined. Thus, the PW role, in many schools, represented a significant change from current practice. This created much controversy and opposition, primarily because of fears that it would encroach on the boundaries of existing staff roles.

The evolution of the PW role in the school was determined by a number of factors in the school context, such as school norms and culture, program fit, school understanding of prevention and the school's definition of the problem. The PWs' own background and experiences also influenced the evolution of the PW role in that school. These factors have been discussed in more detail above under the section on the school context. If the school understood prevention as meaning secondary prevention, or if they defined the problem as belonging to students, then there was pressure on the PW to create a service provision role in the school in which a great deal of the PWs time was spent dealing with the problems of individual students at the expense of whole school activities, and planning for prevention. If the PWs' own backgrounds and experiences led them to believe that intervention services were an important element of the SBPP then they were more likely to be comfortable with the service-provision role. The capacity-building role was the ideal reflected in the ADS intentions, as outlined in the SBPM handbook, but the creation of such a role in the school appeared not to be common.

ADS Environment

In this study, several factors in the ADS environment were found to influence implementation of the PW role and the SBPM in the school setting. The following factors are discussed here: (a) the PW's
background and work experience, (c) PW training, (d) PW participation, (e) the ADS agenda, and (f) ADS and agency support for PW.

The Prevention Worker Background

The PW was a central element of the innovation. For the most part, PWs were employees of the alcohol and drug agency in the community in which their school was located and many had previously worked for alcohol and drug agencies, and thus had been socialized to the ADS system. For this reason, the influence of the PW background on the implementation process is discussed here under the ADS Environment. In a few instances, the PW was an employee of the school district, but this did not appear to change the effect of their own background and experiences on the implementation process.

In the present study, the PWs’ educational background and their work experiences, and thus their beliefs, values, and philosophies of practice, emerged as an influence on the PWs use and understanding of the model, and on how they were able to implement the PW role in the school. Ottoson and Green (1987) have identified the disposition of implementors and their professional socialization as having a significant influence on the implementation process. Others have confirmed this finding (Berman & McLaughlin, 1976; Huberman & Miles, 1984; McLaughlin & Marsh, 1977; Rossman, Firestone, & Corbett, 1987; Sarason, 1990). Disciplinary socialization influences how members of different professions will define issues, approach problem-solving and it will affect the strategies chosen (Kelleher, 1996).

In this study, PWs came from a range of backgrounds, but the majority had some type of counselling background and had worked primarily with youth experiencing alcohol and drug misuse problems or other types of problems. Sarason (1993) argues that the phenomenology of teachers is embedded in an individually-focussed, problem-focussed system. They have been educated and socialized to deal with the problems of individuals. So too with counsellors. This tendency made it difficult for many PWs to buy into and sell the concept of primary prevention in the schools. PWs who did not have a counselling background or who had experience working with a wider range of young people (not just those experiencing serious
problems) had less difficulty making the shift to prevention and were more likely to establish a capacity-building role.

Ottoson (1997) found that participants' perceptions of the model were shaped by their concerns, circumstances and self-perception. This too, was a finding of the SBPP study. PWs who had been in the field prior to training had quite different experiences of the training than those who had not yet been in the schools. Thus, their work experiences shaped their reaction to the model. PWs also tended to interpret the model in light of their own background and experiences. PWs who described themselves as "doers" had more difficulty with the complexity of the model than PWs who had an academic leaning. This was a finding of Ottoson's study as well. Thus, despite the differences in the sample populations between Ottoson's study and this one, and the different reasons participants had for attending the workshops, very similar perceptions of the model were discovered.

**PW Training**

The training of PWs by ADS was the major strategy at the ADS level for shaping the SBPP implementation process in the schools. The intent of the training was to introduce PWs to the SBPM and teach them how to apply it in the school setting to develop a comprehensive alcohol and drug misuse prevention program. The PWs' experiences at the annual training conference influenced their willingness to try the model and ultimately, the way in which they used the model. The format, content, and organization of the training session violated what is known about principles of adult learning (Knowles, 1980). For most PWs, the training session imposed an agenda on them that was not congruent with the learning needs that had emerged from their early experiences in the field. Kemerer (1991) suggests that "the key to the application of learning resides in the learner's perception of how important the new learning is to his or her ability to work effectively in the setting where the application must take place" (p. 67). For those PWs who had already been working in the school setting, they were most concerned with learning about how they could integrate into the school setting, how they could overcome opposition and become accepted in the school, and how they could make decisions about what they needed to be doing. The introduction of the model did not appear to PWs to
meet their learning needs at the time, and the way the model was presented did not provide them with the
opportunity to learn it in a way that they could apply it back on the job. As Kemerer (1991) points out, there
is a large body of research that points to “readiness” to learn as a key variable in the learning process. If the
learner does not perceive a need to learn something new there is no motivation to change. Thus, introducing
new expectations must be timed carefully.

Perhaps one of the most salient aspects of the training that stood out for many PWs was the assertion
that ADS was “not modelling the model”. This salience is suggested by the repetition of this phrase, over and
over, by many PWs. PWs did not perceive that the way the model had been introduced to them, nor indeed
how the SBPP itself had been introduced to the communities, reflected the principle of participation that is
implicit in the model. PWs were not asked to participate by identifying their own learning needs or providing
input into the content and focus of the training.

ADS Agenda

ADS had their own agenda for the PW training and the SBPP, irrespective of the PWs’ needs, and
the needs and concerns of the school setting. This agenda was reflected in a number of assumptions made by
ADS about implementation. These assumptions influenced how they carried out the training as well as the
types of support that were (or were not) put into place to assist PWs with implementation. Ottoson and Green
(1987) suggest that the assumptions supporting any policy (or program) need to be examined to ensure that
the policy is not overly optimistic.

The assumptions made by SBPP developers were implicit as well as explicitly stated in the SBPP
documentation, including the SBPM handbook (Alcohol and Drug Programs, 1994). Examples of inaccurate
assumptions included: (a) PWs and schools would be supportive of the model because it is an established
planning model with plenty of empirical evidence to support its effectiveness, (b) the model would be
straightforward to implement by PWs, and they could begin to implement it immediately in their schools, (c)
because the model was mandated by ADS, it would be implemented as intended, (d) adoption of the SBPP by
schools meant that schools were supportive of the goals of the SBPP, and committed to its implementation,
and (e) everyone involved with the SBPP understood the meaning of the term “prevention”. I suspect that because ADS made such optimistic assumptions, they neither anticipated the need for, nor provided the support and technical assistance needed by PWs to facilitate implementation, particularly of the SBPM. Had ADS held a less optimistic set of assumptions, they might have been able to anticipate and provide the necessary support.

The ADS agenda was also reflected in the requirement that PWs use the SBPM, not just as a tool to guide their own actions, but as an approach to use in collaboration with the school to develop a prevention program. In this study, it was not only the nature of the concept that affected implementation but its imposition on PWs and, in turn, the PWs attempts to impose it on their steering committees and schools that created problems. Not only did this imposition lead many PWs to react negatively to the model, but it created a false dichotomy between the model and their jobs. Rather than allowing the model to be viewed as simply one of many tools that PWs could use in their community organizing efforts, the imposition led PWs to perceive that they had to choose the model or choose their jobs. The imposition of the model and the subsequent negative reaction by PWs also led to the model taking on a symbolic meaning. The model came to represent everything that was negative about the PWs interactions with ADS, their agencies and their schools. This symbolic meaning was transmitted to the next generation of PWs, thus perpetuating this false dichotomy among the next generation of PWs as well.

A large body of implementation research related to the notion of mutual adaptation (Berman & McLaughlin, 1975; Berman, 1978; Hasenfeld & Brock, 1991; Majone & Wildavsky, 1979; McLaughlin, 1978, 1990; Ottoson & Green, 1987; Palumbo & Oliverio, 1989) suggests that implementation will not be successful if there are rigid requirements for fidelity. Successful implementation means that implementors must have the flexibility to adapt an innovation to local circumstances. By hemming PWs into a rigid application of what was originally conceived as a flexible model, ADS gave many PWs little choice but to find ways to circumvent ADS directives. Many of them did this by “retrofitting” their actions to the model for accountability purposes and some rejected the model entirely.
**ADS and Agency Support**

In this study, few PWs described instances in which they received support from ADS, either in the way of moral support, or in the way of technical assistance for implementation and problem-solving. I am sure that there were such instances, but they did not get identified as salient factors in the PWs' implementation experiences. Agency support, on the other hand, was mentioned many times as a critical factor by PWs in their ability to deal with the frustrations they experienced in the schools. This was often in the form of moral support and encouragement, but agencies also stood behind PWs as they *negotiated boundaries and protocols* and attempted to *establish legitimacy and credibility* in the school. There was one thing, however, that neither the agencies nor ADS were able to provide to PWs during the first two years of the project, and that was technical assistance to learn, understand, and implement the model.

Much of the literature on educational innovation, at least in recent years, identifies the importance of technical assistance in helping practitioners to achieve clarity on the meaning of the innovation, and to develop the skills required to implement it (Gingiss, 1992; Huberman & Miles, 1984; Loucks-Horsley & Mundry, 1991; McLaughlin & Marsh, 1977). Huberman and Miles found that ongoing assistance was more important than early training in assisting teachers to grasp the complexity and develop the necessary skills for implementation. The PWs in this study, for the most part, suffered from a lack of technical support and assistance as they attempted to implement a challenging and complex process in non-receptive environments. In fact, the lack of technical assistance to PWs in relation to the model represented a lost opportunity for ADS to influence the response to and application of the model by PWs. The lack of technical assistance exacerbated PWs experience with the imposition of the model. Technical assistance in relation to application of the model in the school setting might have helped to overcome the negative symbolic meaning that had become attached to the model as a result of its imposition.

**Reconciling Concept and Context**

In *Theoretical Sensitivity*, Glaser (1978) talks about "emergent fit" as a property of a grounded theory in which a category or categories are drawn from the literature because the fit between these extant
categories or theory and the data emerges in the process of conducting grounded theory analysis. In this study, after the analysis was underway and the categories in the emerging conceptual framework began to be elaborated and developed, it became apparent to me that the emergent theory might be an empirical example of "Reconciling Concept and Context: Theory of Implementation" (Ottoson & Green, 1987).

Ottoson and Green's work was based, in part, on the first author's doctoral dissertation and on both authors' experiences in the U.S. federal office of Disease Prevention and Health Promotion. Their paper presented an integrative review of the diverse bodies of literature on implementation theory and put forth the proposition that practitioners confront a central dilemma in trying to translate policies into practice. The heart of the implementor's dilemma is that both the concept and the context must change for implementation to occur. If one changes without the other, implementation has not taken place. Total fidelity to the concept means it will have limited value in the field. Total fidelity to the context means there is nothing to implement. The main task of implementation is finding a feasible middle ground between the intent of the concept and the realities of the context. Feasibility is achieved through a series of tradeoffs among various personal, organizational, and interpersonal factors. What complicates the process is that the rules for achieving acceptable tradeoffs cannot be formulated in advance of implementation. The rules emerge in practice.

The data presented in this dissertation suggest that Reconciling Concept and Context was indeed the central dilemma faced by PWs as they attempted to implement the PW role and the SBPM in the school setting. This study set out to explore the process by which PWs use the SBPM to develop and implement prevention programs in schools. I wanted to understand how PWs understood the model and how they put it into practice in the school setting. I discovered that for PWs to be able to implement the model, they first had to implement the PW role. This took over the process and became the primary focus of their actions in the first two years of the project. Thus, the story of the SBPP implementation was not solely about implementing the model. It was also about implementing a role.

As PWs entered the school, they came to understand that to implement the concept, they would have to facilitate changes in the context. To make changes in the context, however, PWS needed to establish
program legitimacy, establish personal credibility and learn the ropes. In doing this, they achieved peerage with the adult population in the school. Achieving peerage brought them some ability to influence attitudes and opinions, to garner support, and to create a role. Their next step was to enhance school readiness to engage in the collaborative process laid out in the model, and it was in this stage of the process that PWs stepped up their attempts to influence changes in the context to allow integration of the approach implied in the model. The influence they had developed during the gaining entry process, however, was not always sufficient to allow them to promote the kinds of changes in the context that were necessary to facilitate integration of the concept in a way that maintained its integrity. The school culture was conservative and resisted challenges to the status quo. To make progress, PWs now had to modify the concept to accommodate the conservative bias of the school context. There was considerable variability in the ways in which PWs modified the concept and this was influenced by a number of factors, including the PWs own background and experiences as well as their beliefs, values, and philosophies of practice. Modifications in the concept were also influenced by the values, norms, beliefs, and goals of those in the context.

This modification of the concept was not always a conscious or a deliberate act by PWs but the stage was set very early in the process of gaining entry, in the tradeoffs made by PWs to become accepted and gain credibility in the school. As PWs worked to create a role in the school, the inexorable pull of the school culture on PWs meant that their efforts to strike a balance between the perceived needs/demands of the school (e.g., intervention and crisis management) and the goals of the SBPP (prevention and proactive planning) were often, but not always, resolved in favour of school demands. This meant that the instrumental goal of the SBPP to create a capacity-building role for the PW in the school was often coopted into a more traditional service-provider role that supported and maintained the status quo.

When PW moved on from creating a role to enhance school readiness to engage in collaborative actions to prevent alcohol and other drug misuse by students, they were again foiled by the context. However, the role taken by PWs influenced their actions in enhancing readiness. Those who adopted a capacity-building role seemed better able to make the adjustments to both concept and context than PWs who engaged
in providing services at the expense of building capacity.

The basic mechanism by which PWs were expected to develop a prevention program in the school was the SBPM, which included the formation of a steering committee to guide PW decisions and to assist the PW in working through the model. The challenges of obtaining participation and maintaining a steering committee were so great that, for many PWs, the concept was once again coopted by the context. In the challenge of selling the model to the school, the PW's own confrontation with the model influenced their willingness or ability to fulfil this objective. The actions of ADS greatly influenced the PWs confrontation with the model and affected their acceptance of, and willingness to use the model. As the PWs tried to apply the model in practice, once again, conservative tendencies in the school, and the overpowering cultural norms, values, and ways of doing business in the school led to yet another coopting of the concept.

Implications for Theory

In Chapter Three of this dissertation, I summarized five more or less distinct theoretical perspectives on implementation that have been put forward in the literature of various disciplines. These perspectives were presented in Table 2, beginning on p. 47. These include the technological, bureaucratic adaptation, organizational development, political, and cultural perspectives. Each perspective embodies a set of assumptions, defines the implementation problem, as well as implementation success and failure. In comparing the findings of this study to those five perspectives, it becomes clear immediately than no single perspective can explain or be applied to the totality of the SBPP implementation experience. Assumptions and propositions from each of the five perspectives can be seen in the emergent theory of Reconciling Concept and Context. This is consistent with Ottoson and Green's (1987) original theory of Reconciling Concept and Context, in which they identify multiple influences on the implementation process, many of which are reflected in the various theoretical perspectives.

Technological Perspective

ADS was in the paradoxical position of implicitly espousing two distinct perspectives on implementation to PWs. On the one hand, it appears that ADS approached the issue of implementation from
a technological perspective in which managers assume that implementation is a rational process, that directives from the top will be followed by those in subordinate positions, and that the goals of those at senior levels of the organization are the most important. This was evident in the discussion above of ADS assumptions. It was also evident in the accusations of some PWs that ADS was being paternalistic by deciding what it was PWs needed to learn in the training session, and what they should be doing. The training agenda reflected the concerns of ADS in relation to the model, but not the concerns of PWs in relation to their experiences in the field. A technological perspective on implementation also assumes that a systematic planning process will facilitate implementation, and that the technology or the innovation itself is the most important factor in implementation. In other words, if the PWs just planned carefully using the model, they would be able to develop an effective program. A technological perspective on implementation does not give much credence to the importance of contextual factors as barriers to the process. In fact, it assumes that the barriers can be anticipated with good planning.

From the technological perspective, the emphasis is on fidelity of implementation and the tools of hierarchical management (e.g., evaluation, monitoring, performance review) are used to structure the process and ensure compliance. The PWs’ monitoring reports to ADS identified those PWs who had not established steering committees, and were not doing the model. Pressure was brought to bear on these PWs to carry out these requirements. Thus, the assumptions of the technological perspective appear to fit very well with the assumptions being made by ADS.

Organizational Development Perspective

On the other hand, the content of the SBPM handbook suggests that ADS expected the PWs to approach implementation in the school from a perspective that fits the assumptions of the organizational development perspective outlined in Table 2. This perspective assumes the importance of collaboration, open communication, and participation in decision making. It assumes that the program, which evolves at the local level, must be responsive to community needs and concerns, and that it must fit with the goals of the school. In other words, PWs were to involve teachers and school members in the planning process on the assumption
that participation would result in school ownership of the issue and the program. In the organizational
development perspective, the emphasis is on building capacity rather than on enforcing compliance. The
language of capacity-building fills the pages of the SBPM handbook and is inherent in the principles on
which the SBPM is based. Thus, ADS was enforcing compliance on the PWs yet was cautioning PWs not to
do this in their interactions with the school.

Successful implementation from an organizational development perspective is judged by the extent to
which participants are involved in the process and to the extent that capacity is built. ADS expected PWs to
involve the school community in planning and implementing the SBPP in order to build the school’s capacity
for substance misuse prevention. ADS did not, in the beginning at least, involve the PWs in the process of
implementing PW training or technical assistance nor did they take a capacity-building approach to their
relationship with the PWs. This mixed message was not lost on PWs as evidenced by their frequent claims
that ADS was not modelling the model.

**Bureaucratic Adaptation Perspective**

In the bureaucratic adaptation perspective, front-line workers are assumed to have a great deal of
discretion in implementing. This was obviously the case with the SBPP because PWs did not have much
supervision either in the school or by their agency supervisors. They worked independently, and in many
cases autonomously. In the bureaucratic adaptation perspective, front line workers respond to pressures in
the job by accommodating to the demands put on them. Thus, the slippage between intentions and delivery
can be explained by the PW’s response to the pressures of the job. This was evident in the PW’s response to
organizational demands, by *doing for* and *doing everything*. The school demand for early intervention
created the situation in which PWs gave in to intervention because of this pressure, thus creating a slippage
between intentions and delivery. Implementation failure in the bureaucratic adaptation perspective is
explained, in part, by the observation that policy makers or managers do not understand or take into account
the conditions faced by front line workers. In the case of this study, this explanation does fit the data.
Political Perspective

The political perspective assumes that implementation is not a rational process because of divergent interests. There were clearly divergent interests in this situation. ADS had its own set of interests, as did community agencies, school districts, and schools. Each of them saw the SBPP as a means for meeting certain objectives that were discrepant and sometimes mutually exclusive. In this perspective, program adoption is assumed to occur for bureaucratic or opportunistic reasons that may have nothing to do with the goals of the program. In the case of SBPP adoption, this was clearly the case. Most schools adopted the program for a variety of opportunistic reasons. In the political perspective, decision making involves bargaining and negotiation. The early implementation phase for the SBPP was fraught with conflict in many schools particularly related to union opposition to the program. To overcome the opposition, PWs had to negotiate boundaries and protocols in order to be accepted in the school. Sometimes the tradeoffs left PWs with a limited ability to influence change in the school.

Another assumption of the political perspective is that power is distributed unevenly in the organization and is not always held by those in formal positions of authority. In this study, PWs had to analyze the power dynamics of the school and align themselves with people who were in a position to help them get established and to navigate their way through the maze of school politics. According to the political perspective, if one is unable to reconcile divergent interests, implementation cannot occur. Once the PWs had established program legitimacy, established personal credibility, and learned the ropes, the PW achieved peerage among the adults in the school and thus were able to influence opinions and to implement some types of strategies and programs. PWs did not have sufficient influence, in many instances, to encourage a redefinition of the problem of alcohol and drug use away from the notion that it was a problem that belonged to individual students toward an acceptance that the problem belonged to the entire school.

The political perspective on implementation suggests that the implementation problem lies in addressing power relations inherent in the process. Power relations in this study were both subtle and overt, acknowledged and unacknowledged. Overall, the political perspective takes a pessimistic view of change.
because it assumes that change cannot be facilitated by external assistance, primarily because of the power
dynamics in the situation. External facilitators do not have the power within the system to facilitate anything
more than marginal changes that are congruent with, and support the status quo. This uncomfortable
conclusion is certainly one that the reader might well reach as a result of the data presented in this
dissertation.

Cultural Perspective

The cultural perspective assumes that the acceptance of innovations or change depends in profound
ways on the existing culture of the organization (Rossman, Corbett, & Firestone, 1988). This perspective
further assumes that divergent interests among the various parties are the result of differences in the values
and beliefs of those involved in influencing change. In particular, there is a divergence between those in and
outside of schools that relates to different cultural assumptions (Firestone & Corbett, 1988). Thus, externally
initiated change efforts are only successful when they are consistent with the values and norms of the culture
in which they are being implemented. The problem in implementation from the cultural perspective is to
come to a shared understanding of the meaning of the innovation and implementation. To the extent that
meanings are shared, implementation can occur (Yanow, 1990).

In the present study, the organizational culture of the school was identified as a significant barrier to
implementation. The innovation emerged from one organization with a fundamentally different set of values,
beliefs, and norms than the organization into which it was being implemented. The planning process
reflected in the SBPM did not fit with the way schools usually did things. The explicit goal of the SBPP to
prevent alcohol and drug misuse by building the capacity of the school to address the determinants of this
problem did not fit with the implicit goal of most schools that the alcohol and drug problems of individuals be
solved through the provision of services. School norms of immediacy, practicality, and teacher-as-expert
interfered with the ability of PWs to shed the expert model of practice and to plan in a proactive way to
prevent these problems from emerging. The emphasis on the school as a community and on the whole
population of students did not fit with the value on individualism inherent in the structure and organization of schools.

Implications for Health Promotion Practice

In this study, PWs confronted several dilemmas in their practice. Others have written on these dilemmas, particularly in relation to the challenges of participation and of shifting from an expert model of practice to one that facilitates the development of community capacity to address their own problems and concerns (Hartrick, 1997; Labonte, 1994b; Minkler, 1990).

Community Participation

The pursuit of community participation is a central tenet of health promotion (World Health Organization, 1986). The principal of participation (Bracht, 1989; Green & Kreuter, 1991) has emerged as a basic principle of practice guiding the work of many practitioners in the area of community health promotion practice. This study has demonstrated that the challenge of facilitating participation is all too real in situations where external change agents enter a setting with an agenda that does not fit with the goals, values, and priorities of the setting. If people do not identify and name an issue as their own, then the possibility of garnering support and participation is compromised. The strategy of health professionals has been to educate people in the setting about the importance of the issue such that the people can make an informed choice about taking action on that issue. This approach makes sense on the face of it, and many of us have been doing just this in our own practice. But this strategy raises a troubling question. Whose interests are being served by this approach?

Presumably, if we follow the process we advocate, such as the one laid out in the SBPM, then we are able to generate data to support our position and to demonstrate to those in the setting that the issue is one that is worthy of their time, effort, and resources. But to what extent can we realistically expect participation by the community in this process? Other researchers (e.g., Goodman, Steckler, Hoover, & Schwartz, 1993) have found that community participation in a health promotion program run by health professionals was a major challenge. Green and Kreuter (1993), in commenting on the study by Goodman and colleagues, point
out that organizing and planning prevention programs is complex, tedious, and sometimes redundant. Expecting participation of the community may be inefficient, inappropriate, and not ethically necessary. In fact, they suggest that asking community members to take on the responsibilities of paid staff may be unethical. Certainly, in the present study, PWs found that school staff believed that the responsibility for planning and organizing the SBPP belonged to the PW, who was being paid for the job.

The implications for practitioners that emerge from this analysis are that we need to be realistic about what we can expect of others when we enter a situation with our own agenda. We need to put the issues on the table and we need to be scrupulously honest, with ourselves and others, about what we are trying to achieve. If participation is such an enormous challenge then we either must recognize it is a long-term struggle, or we must acknowledge that participation may be an unrealistic objective when the issue we are trying to address is not a priority of the community.

The dilemma of trying to find a balance between addressing community concerns and achieving program goals is a fundamental challenge in health promotion practice. I would wager that this dilemma emerges in almost every situation in which health professionals are involved in community-based health promotion. In the dictate to “start where the community is at” we are challenged to put aside our own notions of what is needed and necessary, and listen to the community. At the same time, the power dynamics that are endemic to community interaction may not permit the least powerful community members to be involved in defining the issues named by the community.

There are usually several competing issues in any community. The choice of which issue to tackle first is often based on the inclination and expertise of the health professional rather than on the “real” needs of the community (Hunt, 1990). For the practitioner, this may well be an effective way to begin because it increases the probability that an initial success will be achieved. In the case of the PWs, beginning with what they knew helped them to gain some credibility in the school, and become established in their role as PWs. The challenge was in making the shift to prevention in the face of increasing dependence on the strategies the PW had begun to use. The danger in this, as the data suggest, was that sometimes PWs interpreted the
problem in relation to their own capacity to solve it. This resulted in the development of a program in the school that supported the status quo and did not address the goals of the program.

The implications for practice of this observation is that practitioners must become what Schön (1983) described as "reflective practitioners". Practitioners must be sensitive to these power dynamics, and be critically reflective about how their own issues and agenda may influence how the community defines and tackles the issue. Developing critically reflective habits of mind and putting one's cards on the table may be the practitioner's only strategy in the face of such dilemmas. Practitioners must ask themselves whose interests are being served by the approach they are taking. At the same time, it is unreasonable to expect that practitioners should enter these situations alone and unsupported. In the face of the inexorable pull toward the status quo, employing organizations must put supports in place to assist practitioners in meeting these challenges. Opportunities to engage in this type of reflection must be supported and provided by agencies and practitioners must seek these out for themselves.

In the final analysis, there is no easy answer to the dilemma of competing interests between program goals and community concerns, but perhaps our expectations of the community's involvement in this process has been unrealistic. Green and Kreuter (1993) suggest that part of the problem is that we have not yet found a way to combine effectively two very different approaches; one, a linear, epidemiological, problem-solving approach reflected in the Precede-Proceed model and the SBPM, and the other, a community-development approach reflecting the principles and philosophies of community self-determination and decentralization. These authors point out that these two approaches arise from different assumptions and different bodies of research. The community development approach begins with the community's definition of the issue, but is subject to the vested interests of community members and the romanticization of the notion of community (Labonte, 1989). The SBPM begins with the definition of the issue held by the Ministry of Health, community agencies, and practitioners so it risks being irrelevant to the needs and concerns of the community.
Perhaps in the SBPP, a community development approach might have made more sense in those schools in which there was not a readiness in engage in collaborative and consensus-based actions to develop a prevention program. If and when such a readiness was achieved, the SBPM could be used as a tool for community organization, rather than trying to impose a process and set of expectations on a school that was clearly not ready to engage in such a process. Alternatively, it might have been most ethical and effective, to initiate the SBPP only in those schools in which a readiness had been demonstrated.

In a recent rendition of the Precede-Proceed model, a front-end analysis has been added called “Situation Analysis”, which involves an assessment of the capacity of the community to engage in the process laid out in the model (Gold, Green, & Kreuter, 1997). Had such an analysis been applied to the schools in which the SBPP was being implemented, a more realistic set of expectations about what PWs might accomplish could have been entertained.

The process laid out in the SBPM should permit an analysis of the tradeoffs that will be made in choosing to tackle the issue of alcohol and drug misuse prevention rather than some other issue. The problem is that the SBPP was funded by Alcohol and Drug Services and thus, there was a vested interest in defining the school’s primary issue as being “alcohol and drug misuse among adolescents”. In the face of this dilemma, what is the responsibility of practitioners? The first step is for practitioners to be clear with others about their own agenda and to put it on the table for discussion and challenge.

Models of Practice: From Service Provision to Building Community Capacity

Health promotion challenges the view that professionals are the experts and therefore should be in control of the process to define problems and generate solutions. McKnight (1977, 1989) and others (e.g., Hartrick, 1997) have challenged us to move beyond a service provision model of practice to a model in which we are focussed on building the capacity of the community to address its own issues and concerns. In the SBPP, PWs tended to create one of two types of roles in the school: a service provision role and a capacity-building role. The capacity-building role, in which PWs functioned as facilitators not experts, involved the use of strategies that would enhance the capacity of the school to address the issue of alcohol and drug misuse
prevention rather than relying on expertise from outside the school. This role was envisioned as the ideal in the conceptualisation of the SBPP by ADS. The challenge for the PWs was that the school was most interested in having the PW provide services to individual students related to alcohol and drug use problems. The service provision model of practice was the one that was most congruent with the school’s own vision of the problem and the solution. Although this study suggested that a capacity-building role by the PW had greater potential than a service provision role to achieve the objectives of the SBPP, the data also demonstrated that creating such a role in the school was an enormous challenge.

Although the background of the PW was influential in determining what type of role evolved in the school, it was not purely a matter of professional socialization and education. The data from this study suggest that anyone, however committed to the concepts of health promotion, can be coopted by the conservative culture of the organizations in which they work. The first step to avoiding co-optation, however, is an acknowledgement that it is a possibility. This study demonstrates the powerful influence of context and culture in shaping and constraining our actions. As discussed above, this potential for co-optation requires that we continually reflect on our actions and that we continue to question our role in whatever change process we are trying to facilitate. This is not something that can be done alone or in isolation. Seeking out the support and assistance of others, by forging linkages and partnerships with other community agencies and individuals is essential to ensuring that we do not unconsciously become coopted.

In my discussion of the implications for practice, it may appear that my comments are critical of those PWs who were engaged in the struggle of reconciling concept and context. This is not my intention. I acknowledge the tremendous difficulties and challenges all of them faced in their daily practice. I believe that other readers will also recognize having been caught in similar dilemmas in their own experiences of working in community.

Achieving Peerage Versus Challenging the Status Quo

Achieving peerage was a short-term aim for PWs in their attempts to gain entry to the school. One of the PWs, however, raised the concern that achieving peerage created a paradox for PWs. On the one hand,
PWs were now accepted as full members of the school community. They were valued for their contributions, seen as having expertise in a particular area, and invited to join in the life of the school. As someone with acknowledged expertise and credibility, the PW could now implement some strategies and do some things that were heretofore unavailable to them. The paradox is that the very strategies they used to achieve peerage may have put them in a position in which they were unable to challenge the status quo to make the kinds of radical changes that might be necessary to address the issue of alcohol and drug misuse.

All of the strategies used by the PWs to establish credibility were aimed at helping the PW to “fit in”. Once “in,” however, it was difficult to turn around and challenge the organization and people who were conferring that acceptance. For example, in keeping teachers safe, the PW had to assure the staff that she or he would not invade their privacy or raise questions about personal decisions in relation to drug use. There is evidence in the literature that the role modelling of adults is a very important factor in youth behaviour, particularly related to substance misuse. Thus, achieving peerage might put some types of strategies out of the reach of PWs. In keeping the bargain, PWs had to assure school administrators that they would not do anything that created controversy. Controversy, however, is inherent in many social problems, including alcohol and drug misuse among adolescents. The need to avoid controversy in order to maintain a credible position in the school might make it difficult for PWs to take on those types of issues in the school.

When PWs were learning the ropes, many of them found mentors to help them become immersed in the school culture. This involved developing a close relationship with that mentor. Once the PW achieved peerage, it became extremely difficult to challenge the practices of those who had been most supportive of the PW’s entry into the school and who helped them to overcome significant barriers. The social norm of reciprocity might make it difficult for PWs to go against the wishes of those who have done them favours. Thus, PWs needed to be accepted in the school to make change but, in being accepted, the types of change they could make may have been limited.

This speculation is based on observations made by a single PW after the study had concluded and therefore, this observation could not be used to stimulate theoretical sampling to explore the issue further.
with other PWs. My own observations and experiences in the schools I visited convince me that this PWs analysis makes sense, but additional data collection would be necessary to elaborate on how and whether this dilemma was experienced by other PWs. If this interpretation fits for others, however, then it raises questions about the potential effectiveness of practitioners moving into new settings with a specific change agenda in mind. More research is necessary to understand this process and its implications for practice.

**Implications for Policy**

When the SBPP was implemented, there was little time between the allocation of funding and the disbursement of those funds. This led to insufficient preparation by ADS of school districts and schools for SBPP adoption and implementation. Consequently, there were many problems in the early implementation phase of the SBPP that might have been circumvented with more preparation on the part of ADS. Hindsight, of course, is 20/20. ADS did come to this realization after the program was initiated and implemented new policy guidelines for the selection and adoption of subsequent SBPP projects in various school districts. Unfortunately, these new projects were not part of the SBPP study so we do not know the impact that this change in policy had on implementation in those schools. This would be an important area for further research. Thus, lessons were learned and applied within ADS on the basis of this experience. There are, however, some other lessons to be learned from this experience for future policy and program development in other areas within the Ministry of Health, and perhaps other ministries as well.

For the most part, government bureaucracies do not operate on the kind of time frames I am suggesting is necessary to ensure adequate groundwork for program adoption and implementation. The experience of having to move quickly to spend allocated funds is all too common with government-funded programs. Government bureaucrats, however, do have some influence on the politicians who make the policies. Ministers rely on the advice of people in the bureaucracy. Lessons from the SBPP experience might encourage policy analysts in government to provide strongly worded advice on the inadvisability of pushing ahead to implement new policies and programs without an adequate infrastructure in place to support them. Often, too, government bureaucrats propose new programs and policies that are merely rubber stamped by
the politicians. In these instances, this study provides ample evidence to support the need for ensuring that there is adequate groundwork carried out in advance of implementation. The lessons from this study also reinforce the notion that longer term time frames are required to see results from projects such as the SBPP. Governments and funding agencies want to see outcomes in the short term yet this is a highly unrealistic goal.

Another consequence of inadequate preparation of ADS regional and agency staff was that PWs were often hired from the ranks of addictions counsellors and others professionals with a counselling background. The observation that many ADS and agency people had little preparation in the area of prevention and were not clear themselves on the distinctions between primary and secondary prevention meant that agencies hired the types of people they would normally hire to work in their programs. The result was that many of these people did not have any educational preparation or experience in prevention.

One of the major dilemmas encountered by PWs in this study was that of being drawn into early intervention activities at the expense of the time necessary to devote to primary prevention. This might have been largely avoided or at least reduced by having PWs in the position who had a strong theoretical understanding of and experience with prevention programs. Those PWs who were best able to resist the strong pull to intervention encountered in the school environment were not counsellors by training and did not have a strong conviction that counselling and early intervention should be part of the PW role. Standard selection criteria for hiring a PW (with some flexibility for local discretion), and better preparation of regional ADS staff and local agencies might have helped to alleviate this problem.

If the Ministry of Children and Families continues to support the policy that 25% of funded alcohol and drug services must be in the area of prevention, then it may be prudent to develop hiring criteria to ensure that new staff understand and have experience in prevention. In addition, an adequate infrastructure to support the continuing education and development of ADS staff in the area of prevention is necessary. A start has been made on this with the existing ADS regional prevention training currently being offered. At one point, ADS was negotiating with a university faculty for the development of a distance education program that would allow existing staff working in the ADS system to obtain certification. Part of this was
to include education in prevention theory and practice. Budget cutbacks meant this did project did not get 
funded, however, some mechanism like this may be necessary to ensure that new and existing staff are 
adequately prepared in the area of prevention.

Another policy implication that emerges from this analysis is that government bureaucrats, program 
directors, and community-agency personnel must be careful not to impose rigid policy and program 
requirements, and protocols on local implementors. If the practitioner does not have some flexibility to adapt 
the policy, program, or innovation to the local context then the likelihood of successful implementation is 
reduced. Requiring PWs to promote the model as an approach to problem-solving in the school setting was 
neither useful nor appropriate. In expecting PWs to work through the model with the steering committee, 
ADS inadvertently contributed to a situation in which the model was not implemented by most PWs in the 
way ADS hoped it would be. Not only that, it set up a long-term adversarial relationship between PWs and 
ADS that was counterproductive.

At the same time, the notion of adaptation raises concerns about the potential effectiveness of 
innovations and may create an unintentional paradox. The root of this implementation paradox lies in the 
recognition that the problems facing young people and schools are so complex that they defy simple 
solutions. For schools to adopt and successfully implement a health promotion program (or process) it must 
be simple, not complex, fit with existing goals and values, not challenge the status quo, and involve changes 
that are not too far removed from current practice. To ensure implementation, both the concept and context 
must be modified but not so much that neither is recognizable. The paradox is that such a program may not 
be potent enough to be effective. If the only programs we can implement successfully are those that involve 
Marginal changes, that fear is that the problem will become intractable. This leaves us with the terribly 
uncomfortable and pessimistic question, "Is it worth the time, money, and effort?"

The question this study and other school health education studies raise is the issue of continuing to 
fund problem-specific versus comprehensive prevention programs in the school. Schools are clearly not 
interested in dealing with specific issues in isolation from other problems experienced by youth. In the past,
the "stovepipe" funding channels within government meant that different Ministry branches were concerned with alcohol and drug prevention, AIDS and STD prevention, child abuse prevention, pregnancy prevention, and so on. The new Ministry of Children and Families, which brings all services related to children and youth under the umbrella of a single Ministry may provide the opportunity to explore the development and integration of a comprehensive approach to preventing a variety of health and social concerns. This study provides some support for the need for health, education, and social service disciplines to work together on common problems.

There are also policy implications arising from this study relevant to the Ministry of Education. Given the emerging consensus on the importance of comprehensive school health, as described in the literature review for this dissertation, it appears that schools and teachers have not been prepared to engage in and support prevention programs of any sort in the school system. This may be changing, but societal expectations of schools have shifted in recent years and the current school system has not kept up with these expectations. At the same time, schools obviously cannot tackle this problem alone. However, there seems to be little willingness in some schools to engage in school-community collaborations that will help schools to share this burden with the community. Other writers in the education literature have also commented on this issue (Sarason, 1990, 1993). Closer collaboration between the Ministries of Health and Education, and the university programs that prepare teachers might begin to address this complex issue.

Implications for Further Research

What this study found was that PWs established themselves in either a capacity-building or a service-provision role in the school. It also found that, for the most part, PWs did not implement the model as it was intended, although many of them tried to do this. The challenges of the school context made it difficult for them to carry out this intent. In relation to implementation, the study raises the following questions, but does not answer them: (a) Does a capacity-building role result in more effective prevention strategies and better drug use outcomes among students? (b) How do the adaptations and reinventions of the model found in this study relate to the ultimate prevention goals the project hoped to achieve?
Final follow-up interviews with all first- and second-year PWs at the end of the pilot phase would have helped to establish the extent of various types of model application found in this study. In particular, it would have been useful to explore the type of model use with those PWs in schools in which the student survey was conducted, so that the relationship between use of the model and program outcomes could be established. Unfortunately, this was not part of the original design and funds were not available to carry out this study. It also would have been interesting to classify these PWs on the basis of whether they had implemented a capacity-building or a service-provision role in the schools and to explore the relationship of this with student outcomes. Follow-up studies to explore these questions would help to answer the question about the relationship between implementation and program outcomes.

This study included only PWs who were hired in the first and second year of the project. There was a much smaller third and fourth wave of PWs. It would be very interesting to explore the implementation experiences of these PWs because ADS had implemented new school selection guidelines by the time these PWs were hired. Furthermore, the union issues had been resolved. Thus, these PWs were more likely to have entered supportive schools and would certainly not have experienced the same degree of opposition to the program. In addition, there appeared to be considerably less resistance to the model on the part of the new PWs, as assessed in the PW surveys during the last year of the pilot phase. Given the importance of the first- and second-year PWs' reactions to the model in influencing subsequent commitment to, and use of the model, it would have been helpful to explore the experiences of PWs who did not seem to attach the same symbolic meaning to the model as earlier PWs had done. Although there were a few supportive schools in the first and second wave of SBPP projects, exploring the implementation experiences of the third and fourth wave PWs might have provided a more comprehensive theory of implementation under more ideal conditions.

Finally, longer term follow-up of the implementation outcomes with the same PWs and schools that participated in this study would help us to understand whether significant changes had occurred in the school environments of many of these seemingly resistant schools. Despite the difficulties that many PWs experienced, they continued to work hard at developing and implementing prevention strategies in their
schools and in further developing the readiness of their schools to engage in collaborative and consensus-based action. Understanding the longer term implementation outcomes of these efforts would be helpful in developing our understanding of how health promotion processes evolve in school settings. My hunch is that there were more positive outcomes in many of these schools that this study could not document because of its limited time frame and lack of access to data from students.

There are also implications for further research that go beyond this particular study. The findings of this study suggest research implications in relation to context and concept. The health promotion literature would benefit from continued exploration of the contextual factors on implementation of health promotion programs in settings other than schools, such as worksites, institutions, the community-at-large, and community-based agencies. With respect to concept, it would be valuable to explore the implementation experiences of health promotion practitioners who have more or less discretion in implementing the innovation, and more or less training in health promotion in general and for implementing the specific innovation. Participation was a challenge in this study so it did not provide much information on how more or less community participation might influence the implementation process. This would be a useful avenue to explore. Finally, health promotion theory and practice would benefit from an exploration of the implementation process with innovations having more or less technical content than the innovation in this study.
Postscript

Since the fieldwork and data analysis for this study was completed, several new references on implementation have been published in the education literature that may extend the understanding of implementation gained in this study. This dissertation, therefore, reflects the state of knowledge about implementation up to the early 1990s. Some of the more recent literature supports what has been reported and discussed in this study. For example, the work of Fullan (1993) suggests that the challenge in today’s schools is implementing the capacity to change, rather than implementing programs. Capacity building, at both the individual and organizational level is critical in fostering innovation in schools. What is crucial in this capacity-building is the relationship with outside organizations. In this study, PWs who adopted a capacity-building role in schools were able to establish a network of supportive relationships outside the school. They also focussed on the whole school rather than on individuals. This is what Fullan (1993) says is critical in schools today.

Hargreaves (1994) continues to write about the importance of school culture in understanding implementation but he puts more emphasis on the importance of a multi-vocal perspective on change. To be successful, change must occur at both the individual and the organization level. It is not an either-or situation. This is consistent with the socio-ecological perspective in health promotion that provided the foundation for this study on implementing school-based health promotion. Hargreaves also argues for the importance of evolutionary planning, in which vision and strategic planning can come after action, not only before. This also fits with the findings of this study and with earlier findings in the literature.
References


Green, L.W., Glanz, K., Hochbaum, G.M., Kok, G., Kreuter, M.W., Lewis, F.M., Lorig, K., Morisky, D., Rimer, B.K., & Rosenstock, I. (1994). Can we build on or must we replace the theories and models in health education? Health Education Research, 9(3), 397-404.


The SBPP Evaluation

An evaluation was contracted to the Institute of Health Promotion Research at the University of British Columbia with Lawrence W. Green, Dr.PH. as the principal investigator. Co-investigators were Terri Buller Taylor, MA, PhD candidate in Psychology and myself. Brenda Canitz was the Project Coordinator for the first two years of the project and then I assumed that responsibility during the last year.

Study Design

Outcome Evaluation

The SBPP Evaluation, as originally proposed, involved a quasi-experimental pre-test, post-test, control group design. The intent was to sample eight schools from among those with new prevention workers and to match one of each pair of experimental schools with one comparison school. When it became impossible to recruit four comparison schools, the design was modified slightly to include nine experimental schools and three comparison schools. Thus, one of the pairs of experimental schools was left without a matched comparison. The survey was to be administered in each of these schools (experimental and comparison) at baseline, and again at the end of the three year pilot period.

Instrument Development. The primary focus in the first year of the evaluation was to develop the instruments and refine the evaluation protocols. Since the student survey was the primary means of measuring the outcome objectives, a great deal of time and effort went into its development. The student survey was developed collaboratively by the evaluation team at UBC, with input from ADP, Prevention Workers, and academic consultants. Where possible, standardized scales of known reliability and validity were utilized.

Questions were derived from the conceptual framework for the evaluation (Appendix 5), which was adapted from the Precede-Proceed model (Green & Kreuter, 1991). Questions were included to assess the behavioural outcomes (student substance use measures) and factors hypothesized to predispose, reinforce and enable those behaviours as outlined in the evaluation's conceptual framework. The student substance use measures were adapted from the ADP 1987 and 1990 Student Substance Use Surveys to provide trend data.

Early drafts of the questionnaire were circulated to academic consultants, ADP central office staff, and selected SBPP personnel in the participating communities. The initial survey was pilot tested at one SBPP school in April, 1993. The survey was administered in four classes, one from each grade, 9 through 12. Students were told that this was a pilot test. They were asked to complete the questionnaire and to note any comments or concerns about the questions in the margins. After the survey was completed, a few students were chosen from each grade to participate in a focus group to discuss the format, clarity and composition of the survey. Comments and recommendations were incorporated in subsequent drafts of the questionnaire.

The survey was originally scheduled to be distributed in the spring of 1993. Administration of the survey had to be postponed until the fall of that year due to labour negotiations in several school districts and the threat of an impending strike. Despite the delay, five schools chose to conduct the survey in May of 1993 for their own purposes. The results of that survey were presented in the report
entitled, *School Based Prevention Project Evaluation: Student Survey, Spring, 1993.* This spring survey was reconceptualized as a pilot test of the instrument. On the basis of the analyses conducted on these data, the student questionnaire was revised again and finalized prior to administering it in the fall of 1993.

**School Selection**

The evaluation team selected the survey schools using a stratified sampling procedure by region and school size. Comparison schools were selected by reviewing school lists from each School District to identify schools comparable to any of the experimental schools on the following criteria:

- similar student population size;
- similar geographical location (same community);
- similar socioeconomic status (based on Statistics Canada Census tract data).

Ultimately, the matching proved unsuccessful because the schools chosen for comparison turned out to be quite different than their matched experimental pair. Similar size, geography and SES was not a sufficient basis for determining comparability. Approval for participation in the SBPP Evaluation was received from the PW, school administration, and the district superintendent. In many cases this involved extensive consultation and negotiations.

**Participant Selection.** Student participant selection was conducted by the PW in each school. PWs, in consultation with their school's administration, selected a subject area in which all or most of the student population was enrolled. Classes in this subject area were chosen randomly to participate in the survey.

**Student Survey Administration.** The survey was administered in late 1993 in eight experimental schools, three comparison schools and three voluntary schools. The ninth experimental school administered the survey in January of 1994. Survey administration was orchestrated by the PW according to a protocol developed by the evaluation team. Inadequate information was obtained from some schools to calculate a composite response rate but is estimated to be well over 80% on the basis of those schools and classrooms that did return response data. Data were analyzed for individual schools and a separate confidential report was prepared and submitted to each school. An aggregate report was prepared and submitted to the Ministry of Health.

**Follow-Up Student Survey.** The final survey was administered in May of 1995 to 19 of the 20 schools that were surveyed in 1993; nine experimental schools, three comparison schools, three volunteer schools and four of the five schools that took part in the Spring 1993 survey. One school declined to participate. The same protocol was followed as with the 1993 survey. The overall response rate was 87%. Because of the delay in the baseline survey, only 18 months elapsed between the first and the follow-up surveys rather than the 30 month time frame originally envisioned. The 1995 student questionnaire contained minor revisions based on the analyses of the 1993 Fall Student Survey data.

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1 For a complete list of the technical reports on the SBPP evaluation, refer to the reference list under School-Based Prevention Project Evaluation Team.

2 The voluntary schools were those who were interested in conducting the survey for their own assessment purposes and who paid for the cost of administering the survey themselves.
b. Process Evaluation

Process evaluation was conducted by means of cross-sectional surveys of teachers, school administrators and agency representatives. Surveys were administered to teachers and administrators in 1993 and 1995 at the same time that student surveys were administered. Minor changes were made on the 1995 surveys on the basis of the analysis of the 1993 data. Agency representatives were surveyed only once, in early 1994. Surveys were administered to Prevention Workers in each year of the evaluation.

Teacher, administrator and agency surveys were intended to gather data on prevention activity implementation and on factors hypothesized to predispose, reinforce and enable PWs and schools to implement successfully the School-Based Prevention Project. These factors include demographic characteristics of teachers, administrators, and agency representatives, attitudes and beliefs about substance use, the SBPP, the SBPM, school health education and health services, levels of involvement in and commitment to the SBPP, and school and organizational climate.

The agency response rate was 73% in 1994. Unfortunately teacher and administrator response rates were exceedingly low (30% and 44% respectively). Thus, in 1995, schools were offered an incentive to encourage greater participation by teachers and administrators. Schools that had 75% or more of their teachers respond to the survey had the school name entered into a draw for a $1000 prize. Seven of the 19 schools had response rates over 75%. The overall response rate for teachers was 55% while the response rate for administrators was 65%.

The PW survey was intended to gather information on the implementation of prevention activities and on factors hypothesized to predispose, reinforce and enable PWs to implement the School-Based Prevention Project successfully. These factors include such things as attitudes and beliefs about the School-Based Prevention Model (SBPM), self-efficacy, presence of barriers and facilitators for program implementation, satisfaction with level of information and technical support, job expectations and job satisfaction, level of involvement in and commitment to the SBPP by the school community, and general school climate. In 1994 the response rate was 82% and in 1995 it was 91%.

Qualitative data collection was also included in the overall study design as part of the process evaluation. This involved the following:

- a series of one hour telephone interviews with PWs to follow up on their experience of the training session and to explore the early implementation process following training. Twenty-eight PWs were interviewed (24 of these were tape recorded and 20 transcribed).

- a series of focus groups in each of the five regions of the province; one focus group with the PWs of the region, and another with regional ADS staff responsible for the program and the community agency representatives. The purpose of the focus groups was to explore participants' experiences with SBPP implementation, to identify success experiences as well as barriers and challenges. All of these were tape recorded and 6 of the 10 have been transcribed.

- the original design called for exploratory case studies in 4 schools for the purposes of describing the innovation and exploring the implementation process. Data were collected in an additional two schools, one to pilot the case study approach and the other on the basis of theoretical sampling.
More detail is provided on the qualitative data collection in relation to my dissertation research, in Chapter 4. Table 1 lists the data collection timetable for the SBPP evaluation.

To date, a series of 12 technical reports have been produced. These are listed in the reference list under the authorship of the School Based Prevention Project Evaluation Team. The evaluation contract with the IHPR concluded in August of 1995 although data collection for the purposes of my dissertation research continued sporadically in 1996 and 1997. A final report to the Ministry of Health on the findings of my grounded theory study will be submitted on completion of the analysis.

<table>
<thead>
<tr>
<th>Date</th>
<th>Data Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 1992</td>
<td>PW Pre- and Post-Training Questionnaires</td>
</tr>
<tr>
<td>March 1993</td>
<td>Pilot test of student questionnaire with focus group</td>
</tr>
<tr>
<td>March-June 1993</td>
<td>PW telephone interviews</td>
</tr>
<tr>
<td>May 1993</td>
<td>Spring student survey - five pilot schools</td>
</tr>
<tr>
<td>June 1993</td>
<td>Focus group interviews in each of 5 ADP regions</td>
</tr>
<tr>
<td></td>
<td>5 with PWs, 5 with ADP &amp; agency staff</td>
</tr>
<tr>
<td>October, 1993</td>
<td>PW survey</td>
</tr>
<tr>
<td>November 1993</td>
<td>Fall student survey, teacher &amp; administrator surveys</td>
</tr>
<tr>
<td>March 1994</td>
<td>Agency surveys</td>
</tr>
<tr>
<td>May 1994</td>
<td>Pilot case study - 1 school</td>
</tr>
<tr>
<td>October 1994</td>
<td>PW survey</td>
</tr>
<tr>
<td>November 1994</td>
<td>Case studies - 2 schools</td>
</tr>
<tr>
<td>February-March 1995</td>
<td>Case studies - 2 schools</td>
</tr>
<tr>
<td>April-May 1995</td>
<td>Case study - 1 school</td>
</tr>
<tr>
<td>May 1995</td>
<td>Follow-up student survey, teacher and administrator surveys</td>
</tr>
<tr>
<td>January-August 1996</td>
<td>Sporadic follow-up email, telephone and face-to-face interviews with PWs</td>
</tr>
</tbody>
</table>
APPENDIX B
THE PRECEDE-PROCEED AND SCHOOL-BASED PREVENTION MODELS
The School-Based Prevention Model

QUALITY OF LIFE ASSESSMENT

HEALTH ASSESSMENT

BEHAVIORAL & ENVIRONMENTAL ASSESSMENT

M.R.E. ASSESSMENT

IMPLEMENTATION ASSESSMENT

QUALITY OF LIFE

HEALTH

ENVIRONMENT

BEHAVIOR AND LIFESTYLE

MOTIVATING FACTORS

KNOWLEDGE
ATTITUDES
BELIEFS
VALUES
PERCEPTIONS

REWARDING FACTORS

PEER SUPPORT & APPROVAL
FAMILY INFLUENCES
SOCIAL APPROVAL

ENABLING FACTORS

AVAILABILITY OF RESOURCES
SKILLS
ORGANIZATIONAL SUPPORTS
RULES, LAWS
ACCESSIBILITY OF RESOURCES

OUTCOME EVALUATION

IMPACT EVALUATION

HEALTH PROMOTION PROGRAM

HEALTH EDUCATION
ENVIRONMENTAL ACTION
POLICY & REGULATORY CHANGE
COMMUNITY DEVELOPMENT
ORGANIZATIONAL CHANGE

PROCESS AND IMPLEMENTATION EVALUATION

SBPMODEL.XLS
The School-Based Prevention Model
Program Development Cycle

1. Getting Ready
   - Set Up Steering Committee
     - Know the Role
     - Observe & Network
     - Get to Know the School
     - Understand Community View
     - Set Broad Health Objective

   - Observe & Network
   - Get to Know the School
   - Understand Community View
   - Set Broad Health Objective

2. Gathering Data
   - Identify the Problem
     - Assessment of Situation
     - Link to Behavioural and Social-Environmental Factors

3. Identifying Contributing Factors
   - Develop Activities to Achieve Phase III Objectives
     - Consider Barriers to be Overcome
     - Implement Strategies

4. Developing & Implementing Strategies
   - Review Progress and Process
     - Integrate Evaluation Mechanisms Directly Into the Program Plan

5. Evaluating
   - Determine Causes by Identifying Predisposing Facilitating & Reinforcing Factors
     - Develop Comprehensive Program Objectives

Figure 1
Prevention Worker: acts as a facilitator and guide not as the expert with all the answers.

The School-Based Prevention Model presented here has been adopted as the basis for the School-Based Prevention Project (SBPP) in British Columbia. The model was selected as the framework for the SBPP for three reasons:

1. The model has been tested and evaluated in hundreds of applications around the world and has proven both functional and effective;

2. The model is particularly useful for planning and evaluating alcohol and other drug use prevention programs in school settings; and

3. As a new program in British Columbia, the use of a standard model across all program sites makes evaluation easier.

For these reasons it is essential that Prevention Workers become familiar with, and comfortable using, the School-Based Prevention Model. This handbook is intended to provide user-friendly, step-by-step guidelines for the application of the SBPM. It will be used in conjunction with a training program conducted by Alcohol and Drug Services, Ministry of Health and Ministry Responsible for Seniors.

Overview of the Model

A graphic representation of the model is shown in Figure I (page 18). There are five phases linked together in a cyclical design process that over time uses evaluation results to refine program strategies. There are three phases that constitute problem definition and cause determination. There is a strategies development and implementation planning phase and an evaluation planning phase. This last phase is more complicated than Figure I suggests. This will be further explained in the Phase V section (page 117).

The importance of community and health professional input will vary in each phase, but the school community’s own aspirations and ambitions should be paramount. This means that the Prevention Worker acts as facilitator and guide to the process, not as the expert with all the answers.
The Five Phases

The first three phases of the SBPM define the problem, its causes, and program objectives. Specifically:

I. Getting Ready:
   - Understanding the school;
   - Understanding the school community viewpoint as it relates to the alcohol and other drug issue;
   - Identifying a network of key players;
   - Establishing a Steering Committee;
   - Clarifying and communicating the Prevention Worker role;
   - Establishing an overall health objective.

II. Gathering Data:
   - Gathering data that quantify the problem;
   - Identifying data that link the problem with individual behavioural factors, and social-environmental factors.

III. Identifying Contributing Factors:
   - Determining the predisposing, facilitating and reinforcing factors that cause the behavioural and environmental factors identified in Phase II;
   - Developing specific objectives.

Altering the predisposing, facilitating and reinforcing factors is the heart of the SBPM.

When these three phases are complete, the Steering Committee will have:

- Established a solid base of support for the Steering Committee’s efforts within the school and its related community, and mechanisms through which to accomplish this work;
- Identified the perceived causes (both environmental and individual) of alcohol and other drug use and supported these with documented information; and
✓ Ranked the causes, concerns or goals in terms of importance and changeability, and developed measurable goals and objectives.

These design elements are grounded in the principles of prevention and health promotion, and in theories of behavioural and social change.

The fourth phase concentrates on defining the strategies to realize the Phase III objectives. Specifically:

IV. Developing and Implementing Strategies:

- Operationalizing the action plan;
- Building on working relationships within the school;
- Identifying and selecting specific strategies.

Throughout the design process to this point, the Prevention Worker and the Steering Committee identified strengths, concerns and relevant individual and environmental factors. Decisions were made about priorities and strategies that seemed most likely to achieve the program's objectives. In the planning, assumptions were made and the program was based to some degree on guesswork and thus may not achieve the intended results. This is the concern of the fifth phase of the SBPM:

V. Evaluating:

- Planning ways of checking assumptions so as to refine the program over time;
- Determining whether or not the program is successful in reducing or eliminating the risks in the identified group;

A course-correction mechanism central to any well-conceived program.
APPENDIX C
MINISTRY OF HEALTH ORGANIZATIONAL CHARTS
ACCOUNTABILITY FOR THE SBPP
Pre 1994

Ministry of Health

ADP
Executive Director

Central Office
Prevention

SBPP Coordinator

Regional Programs

Outpatient Clinics

Prevention Worker

Ministry of Education

School District

School

--- Represents a reporting or contractual relationship
----- Represents a functional relationship
---------- Shows instances where the contract for the SBPP was held with a School District
ACCOUNTABILITY FOR THE SBPP

Ministry of Health

Executive Director
Community and Public Health Division

Prevention & Health Promotion Branch

Alcohol and Drug Prevention Services

SBPP Coordinator

Regional Operations Branch

Regional Programs

Outpatient Clinics

Prevention Worker

Ministry of Education

School District

School

-- Represents a reporting or contractual relationship
----- Represents a Functional Relationship
---------------- Shows instances where the contract for the SBPP was held with a School District
APPENDIX D

GENERIC SERVICE SCHEDULES AND CONTRACTS FOR PWS
GENERIC SERVICE SCHEDULE
for
SCHOOL-BASED PREVENTION PROJECT: PREVENTION WORKER

Context:

The School Based Prevention Project will provide prevention services within the school setting which support the three components of Learning for Living - healthy school environment, services for students, and curriculum. Specifically, the Prevention Worker will be responsible for providing five main components:

- Assist in the development and maintenance of a school-based substance misuse prevention steering committee consisting of students, teachers, school administrators and parents;

- Assist in the development of comprehensive school health policies;

- Develop, implement and evaluate health promotion programs specifically in substance misuse prevention;

- On referral from the school counsellor, provide short term early intervention services including screening, referrals, and the development of support groups; and,

- Provide teacher inservice training and support on relevant strategies pertaining to substance misuse.

The Prevention Worker will assist and support teachers and others involved with school health initiatives such as the Learning for Living Curriculum, Healthy Schools Initiative, and Drug Awareness Week, and will also utilize community resources.

Alcohol and Drug Programs
Ministry of Health and Ministry Responsible for Seniors
Service Deliverables:

Primary Prevention (30%)

- assist and support teachers and others involved with school health initiatives such as Drug Awareness Week
- assist teachers and/or school counsellors who train/support peer helpers to implement/enhance peer helping programs
- support teachers by acting as a resource for classroom presentations specifically related to the topics of health promotion and substance misuse prevention

Secondary Prevention (25%)

- on referral from the school counsellor/school-based team, provide individual and family assessments
- make referrals to other service providers and follow-up the referral process
- on referral from the school counsellor/school-based team, provide individual alcohol and other drug intervention of a brief nature (1-3 sessions)
- in conjunction with the school counsellor(s), develop and implement time-limited support groups (such as life skills group dealing with coping mechanisms)
Service Deliverables cont.

Community Development (45%)

- participate in the development of a comprehensive school health policy
- assist or participate in the mobilization of the school community to plan for a healthy school environment
- with direction from school personnel, support and advise parent groups concerned with student welfare
- provide inservice training for school personnel on relevant topics concerning alcohol and other drugs
- be available for consultation with administrators and school boards about alcohol and other drug misuse issues of concern to students, teachers and parents
- develop and implement an appropriate evaluation protocol to assess School-Based Prevention Project initiatives
- network with community agencies
- attend Prevention Worker orientation/training sessions(s) sponsored by Alcohol and Drug Programs
- other
SCHEDULE A

SCHEDULE OF SERVICES
School Based Prevention Program

The Contractor will provide a School Based Prevention Service to ________________________, in accordance with Alcohol and Drug Programs "School Based Prevention Project Model" dated February, 1992.

1. Employ and ensure supervision of a qualified substance abuse prevention/early intervention worker(s) to provide the deliverable services as outlined herein:

   A. Primary Prevention
   
   (Assisting teachers to organize activities targeted to students who do not currently have a substance misuse problem, for the purpose of avoiding or reducing the likelihood of a problem occurring, or improving, or reinforcing healthy attitudes and/or behaviours).
   
   a) assist and support teachers and others involved with Drug Awareness Week (DAW) and other school health initiatives; e.g.,: "It's Cool To Be Yourself" video contest
   b) work with teachers, counsellors who train/support peer helpers and implement/bolster a peer helping program
   c) support teachers through acting as a resource for classroom presentations specifically related to the topics of health promotion and prevention
   d) other student centred activities outside the school-setting

   B. Early Intervention
   
   (Activities targeted to students identified by school counsellor(s)/school-based team as those at risk of developing substance abuse problems or in the initial stages of developing a problem, for the purpose of avoiding the problem or stopping it at the earliest possible stage).
   
   a) on referral from school counsellor/school-based team provide individual and family assessments
   b) make referrals to other service providers and follow-up referral process
   c) on referral from school counsellor/school-based team provide on or off-site, individual alcohol and other drug intervention of a brief nature (1-3 sessions)
   d) in conjunction with school counsellor(s) develop and implement time-limited support groups e.g.,: life skills group dealing with coping mechanisms

   C. Community Development
   
   (Activities that are intended to develop the capacity of school and community personnel to be effective partners in the prevention of substance abuse).
   
   a) participate in the development of a comprehensive school health policy
   b) provide in-service training for school personnel on relevant topics concerning alcohol and other drugs e.g.,: primary prevention
   c) attend Prevention Worker orientation/training session(s) sponsored by Alcohol and Drug Programs
   d) attend Regional Prevention Worker meetings a minimum of twice per year (e.g., teleconference, face to face)
   e) assist or participate in the mobilization of the community (school) to plan for a healthy school environment
3. Cooperate with and assist Alcohol and Drug Services in conducting program evaluation.

4. Comply with audit, review and quality assurance requirements of Alcohol and Drug Services.

5. Comply with Alcohol and Drug Services Prevention Standards and Provincial Program Standards (revised, ________, 19__)

6. All materials produced by the Contractor will:

   (a) acknowledge the funding provided by Alcohol and drug Services; and

   (b) include a disclaimer that the views expressed by the Contractor are not necessarily those of Alcohol and Drug Services, ministry of Health.

Materials include, but are not limited to, informational brochures, pamphlets, videos, and journal articles.

7. Ensure that the following reports and information are submitted to Regional office by the designated time:

   Current Operating Budget by
   Monthly Cost Sharing Forms by
   Quarterly Statement of Revenue / Expenses by
   Prevention Reporting Process Quarterly

DRAFT: 4 May 1995 GSS
SCHEDULE A
SCHEDULE OF SERVICES
for
SCHOOL-BASED PREVENTION PROGRAM

The Contractor will:
1. Provide a School-Based Prevention Program to School District #_____, in the context of Alcohol and drug Services Prevention Planning Model. The service will be delivered to __________ School.
2. Employ and ensure supervision of a qualified substance misuse prevention / early intervention worker to provide the deliverable services as outlined herein:

Context:

The School-Based Prevention Project will provide prevention services within the school setting which support the three components of comprehensive school health: healthy school environment, services for students, and curriculum (Career and Personal Planning 8 - 12).

In the context of the School-Based Prevention Model (the Prevention Planning Model), the Prevention Worker will assist the school community to plan and implement programs and strategies that intend to:

• prevent the onset of alcohol and other drug use;
• encourage students who currently use alcohol and/or other drugs to decrease or cease their use;
• reduce the consequences of alcohol and other drug use.

Service deliverables:

Submit a program proposal for the SBPP to Regional Office by ________.

Phase I:
• Assist in the development and maintenance of a school-based alcohol and other drug misuse prevention Steering Committee consisting of, but not limited to: students, teachers, school administrators, parents, community agency personnel and others concerned with the reduction of alcohol, tobacco and other drug use by youth;

Phase II:
• Assist in the gathering of information about the strengths of the school community as well as data regarding alcohol and other drug use by students and the problems caused by its use;

DRAFT: 4 May 1995
Phase III:
- Assist the steering committee in the process of determining the factors that predispose, reinforce and facilitate the use/misuse of alcohol and other drugs by students;
- Assist in the development of specific program objectives for the key predisposing, reinforcing and facilitating factors identified;

Phase IV:
- Assist in the development and implementation of strategies to meet the identified objectives;

Phase V:
- Assist in the development and implementation of an evaluation plan.

Other:
1. Attend Prevention Worker orientation/training sessions and meetings as directed by the health region alcohol and drug manager.
2. Observe the following in the provision of the above services:
   A. Work cooperatively with other programs in the Alcohol and Drug Services' "System of Care" and with other care providers to ensure appropriate continuity of services.
   
   In accordance with school policy, assist the school counsellor and/or school-based team by: screening students and/or families for alcohol and other drug related problems; recommending appropriate treatment resources; and assisting in the implementation of referrals.
   
   B. Work cooperatively with other stakeholders and partners to plan and develop prevention programs that meet the needs of the students and the school community.
   
   C. Notify Regional Office verbally as soon as possible and in writing within 10 days of any critical operating incident.
   
   D. Prior to employment confirmation:

(a) all new employees will be subject to satisfactory reference checks; and

(b) Regional Office must be consulted if a potential employee has a criminal record or reference check which may be incompatible with the work of the Contractor.

DRAFT: 4 May 1995
POLICY GUIDELINES
FOR PREVENTION WORKERS IN SCHOOLS

PREAMBLE:

The following are suggested guidelines for the actions of the School-Based Prevention Project Prevention Workers (PWs) employed in secondary schools. Detailed procedures will be established in collaboration with Counsellors and Administrators in the individual school and will be guided by relevant School District policies, the BCTF Code of Ethics and the Prevention Worker Standards of Ethical Behaviour and Alcohol and Drug Services Standards.

REPORTING:

PWs explain to all students who request time with them that their Counsellor and/or Administrator will be informed that they have been seen.

CONFIDENTIALITY

Students are assured that personal information shared with the PW is confidential and will not be willingly disclosed.

PWs are required by law to disclose any report of suspected or actual physical, emotional, or sexual child abuse, past or present. When such a report is made School District policy will be followed.

PWs will disclose information about behaviours (eg. suicide plans, suicide attempts, dangerous use of alcohol or other drugs, threats of harm to others) that pose a risk to self or others to appropriate authorities (e.g. MSS, Counsellor, Administration, Parents) with the full knowledge of the student.

It is important that PWs inform students during initial contact of the limits to confidentiality.

When problem-solving with students, the goal is to involve the parents or guardians whenever possible and to facilitate the sharing of relevant information with them. PWs respect and understand the student’s desire for privacy, and appreciate that this goal will only be achieved after trust has been established.

CLASSROOM PRESENTATIONS:

A teacher must be in attendance when the PW is presenting material during a scheduled class.
GUIDELINES FOR
STANDARDS OF ETHICAL CONDUCT

As a Prevention Worker I commit myself to fulfill to the best of my ability the following obligations:

1. I will regard the well-being of the persons I serve as my primary professional obligation.

2. I will fulfill my obligations and responsibilities with integrity.

3. I will be competent in the performance of the services and functions I undertake on behalf of the persons I serve.

4. I will act in a conscientious, diligent and efficient manner.

5. I will respect the intrinsic worth of persons in my professional relationships with them.

6. I will protect the confidentiality of all professionally acquired information. I will disclose such information only when properly authorized or when obligated legally or professionally to do so.

7. I will ensure that outside interests do not jeopardize my professional judgment, independence or competence.

8. I will direct any criticism of the performance of a colleague to that colleague and only then, after informing the colleague of the intent to do so, may direct in confidence the criticism to appropriate officials who are in a position to offer advice and assistance.

Accepted: May 12, 1993
SCHOOL-BASED PREVENTION PROGRAM
PREVENTION WORKER ROLE

- Assist in the development and maintenance of a school-based alcohol and other drug misuse prevention Steering (Advisory) Committee consisting of, but not limited to: students, teachers, school administrators, parents and community agency personnel;

- Assist in the gathering of information about the strengths of the school community as well as other data regarding alcohol and other drug use by students and the problems caused by use;

- Assist in the development of specific program objectives for factors that predispose, reinforce and facilitate the identified alcohol and/or other drug use behaviour;

- Assist in the development and implementation of strategies to meet the program objectives;

- Assist in the development and implementation of evaluation plans;

- Network with community agencies concerned with youth health issues;

- Support comprehensive school health, the Career and Personal Planning Curriculum (Substance Abuse Prevention), the integration of services to students and the maintenance of a healthy school environment;

- The Prevention Worker is in no way to replace or duplicate the role and responsibilities of school staff.

DRAFT 4 May 1995
APPENDIX F
PW TELEPHONE INTERVIEW SCHEDULE
Appendix F
Prevention Worker Telephone Interview Schedule

The first set of questions are about the early stages of your job as a PW, your job expectations, etc.

1. What were you told about the job expectations?
2. How has the job conformed or not conformed to what you were told about the job expectations?
3. Do you feel that you were adequately prepared for the job? Please explain.

The next two questions related to the training seminar.

4. What did you expect to get from the training seminar?
5. Did the workshop measure up to your expectations? Please explain.

Now I have several questions about the SBPM.

6. Had you ever heard about the PRECEDE-PROCEED model (on which the SBPM is based) before the training seminar? Before becoming a PW? Where? Did you use it before?
7. What were you told about the SBPM when you were first hired?
8. What was your first impression of the SBPM?
9. What do you think of the revised framework?
10. Can you describe to me in your own words what you perceive the SBPM to be?
11. How do you think the SBPM fits into the overall SBPP?
12. What do you think are its strengths and weaknesses?
13. What is your understanding about the requirement to use the model? What do you think are the consequences for you if you do not make an attempt to use it?
14. What do you think about this requirement to use the model and the consequences for not using it?
15. When you left the seminar, what were your intentions about using the framework?
16. Describe what happened when you got back to the job after the training seminar?
17. Were you able to apply the model?
18. How did you apply it? Can you give me an example?
19. What were the barriers to applying the model? (What made it difficult to apply?)
20. What were the facilitators? (What helped you to apply it?)
21. Do you think using the framework will make a difference? In terms of planning activities? In terms of involving the school community? In terms of preventing substance misuse?
22. Do you think another type of model or another approach might work better? Please explain.
23. How does the model fit with your own approach to prevention, or your own working style?
24. To what extent would you say you have applied the model?

The next questions are about the SBPP in general, support, acceptance and understanding of the project, and support for you in the school.

25. What changes do you expect as a result of the SBPP? At the school level? At the student level?
26. Who is your supervisor in the school?
27. To what extent is she/he aware of the SBPM? Does she/he understand it? Support its use?
28. Who is your agency supervisor? (for those working for contracted agency).
29. What is his/her understanding of the model? Does he/she understand it? Support its use? Advocate
another model/method?

30. To what extent do you feel supported by your agency supervisor?
31. To what extent do you feel personally supported in your school? By the principal? By teachers? By counsellors? By students? By parents?
32. To what extent is the SBPP supported in your school? By the principal? By teachers? By counsellors? By students? By parents?
33. What additional training or continuing education programs do you need to do your job? To use the model?
34. Are there any union problems with respect to your position in the school?
35. What kind of feedback are you getting for your work in the school? From your agency supervisor? From your school supervisor? From teachers? From students?

Now, last but not least:

36. What advice would you have for ADP in terms of making changes or improvements in: a) the program; b) the process? c) anything else?
APPENDIX G
CASE DESCRIPTION
Appendix G
Case Studies School Selection

Mandatory Selection Criteria:

1. Must be experimental, pilot study or voluntary school with Grades 8-12 (i.e. student data available).
2. Teacher, Admin and PW questionnaire data available.
3. PW data available (may have to relax last two criteria in some instances).

Potential Selection Criteria:

1. Teacher versus Non-teacher PW
2. Regional representation
3. Low versus high PW implementation scores
4. Year 1 vs year 2 implementation
5. Smooth versus Rough early implementation (many facilitators versus many barriers)
6. PW covering one versus two schools (or full versus part time).
7. School District versus Agency contract
8. Willingness of school district and schools to participate
9. Supportive vs non-supportive school environment/climate
10. Supportive versus non-supportive orientation of PW toward client groups (e.g., students, teachers, school administration, community members).

Experimental and Voluntary Schools - 11 schools available to choose from (12th school was the pilot case study school)

1. School 1 - large urban, Region 5
   - PW started 92
   - student questionnaires available
   - PW questionnaire completed
   - 100% teacher response rate
   - 100% administrator response rate
   - Agency questionnaire complete
   - Implementation score - highest
   - Known as a "tough school" in the community, but serves diverse SES areas of city
   - Low rates of drug use relative to provincial average and to 1990
   - Very supportive agency supervisor, supportive peer network

2. School 2 - small community - semi rural - Region 2
   - PW started in 93
   - student questionnaires available
   - No PW questionnaire
   - 25% teacher response rate
   - 50% administrator response rate
   - Agency questionnaire completed
   - Implementation score - unable to calculate from PW data
   - drug use generally higher than provincial average except for smoking among older grades
   - One of most recent PWs, so data more of true baseline than any others
3. School 3 - small town - rural - Region 4 (Gr. 8-10 voluntary school)
   - PW started in 92 (on leave with replacement)
   - student questionnaires available
   - PW questionnaire
   - >50% teacher response rate
   - 100% administrator response rate
   - agency questionnaire available
   - Implementation score - high
   - moderate income blue collar community
   - Higher than average drug use in grade 8 cohort, but lower than average in Grades 9 and 10

4. School 4 - small town - rural - Region 4
   - PW started late 92 and attended april 93 training
   - student questionnaires available
   - PW questionnaire
   - approx. 30% teacher response rate
   - 50% administrator response rate
   - no agency questionnaire
   - Implementation score - moderate
   - high income, blue collar community
   - part-time PW
   - generally lower drug use rates than provincial average except alcohol use which is slightly higher than the average

5. School 5 - moderate urban - Region 3
   - PW started in 92
   - student questionnaires available
   - No PW questionnaire
   - approx. 33% teacher response rate
   - 50% administrator response rate
   - Agency questionnaire completed
   - Implementation score - unable to calculate from PW data
   - PW serves two schools
   - serves low to middle-income population, high First Nations population
   - High rates of LSD use relative to provincial average, higher smoking rates, lower alcohol rates in grades 8 and 9, Cannabis use mixed pattern (some higher, some lower).

6. School 6 - small urban - Region 4
   - PW started in 92
   - student questionnaires available
   - No PW questionnaire
   - No teacher questionnaires
   - No administrator questionnaires
   - Agency questionnaire completed
   - Implementation score - unable to calculate from PW data
   - Lower rates than provincial average for all drugs but LSD
   - Part-time PW
7. School 7 - large suburban - Region 5
   - PW started 91
   - student questionnaires available
   - PW questionnaire
   - 80% teacher response rate
   - 50% administrator response rate
   - Agency questionnaire completed
   - Implementation score - high
   - generally lower rates than provincial average for all drugs except higher cannabis in grades 11 and 12

8. School 8 - small community - rural - Region 4
   - PW started 92
   - student questionnaires available
   - PW questionnaire
   - 44% teacher response rate
   - 50% administrator response rate
   - No Agency questionnaire
   - Implementation Score - moderate
   - Moderate to high income, blue collar population
   - Lower LSD rates than provincial average, but higher alcohol rates. Higher rates of cannabis use in grades 8 and 12 only, lower in all other grades. Lower rates of smoking in all grades.

9. School 9 - large suburban - Region 2
   - PW started in 92 - PW is a teacher and contract with school district
   - student questionnaires available
   - PW questionnaire
   - 36% teacher response rate
   - 50% administrator response rate
   - No agency questionnaire (not applicable)
   - PW is a teacher and has contract with school board not ADP agency
   - Implementation score - high
   - low to middle income population, blue collar
   - school has reputation as "tough school" in the community
   - much higher smoking rates in lower grades, lower rates in higher grades.

10. School 10 - small community - rural - Region 3
    - PW started in 92
    - student questionnaires available
    - PW questionnaire
    - 35% teacher response rate
    - No administrator questionnaires
    - No agency questionnaire
    - Implementation score - high
    - Potential for dropout
• higher LSD and alcohol rates, lower smoking rates, mixed pattern for cannabis

11. School 11 - small community - rural - Region 3
• PW started in 92
• student questionnaires available
• PW questionnaire
• 25% teacher response rate
• 50% administrator response rate
• Agency questionnaire completed
• Implementation score - moderate
• low to middle income population
• PW serves two schools
• known to be in area supporting high production of marijuana
• Lower rates of LSD use, higher rates of alcohol use in the lower grades and lower than average alcohol rates in higher grades. Lower cannabis rates in the lower grades, but higher rates in the higher grades. Lower smoking rates overall.
APPENDIX H
CASE STUDY INTERVIEW SCHEDULE
Sample Questions

Administrator, Teacher, Agency Staff and Prevention Worker Interviews

1. Please describe your experience with implementation of the School-Based Prevention Project in your school (from initiation of the program to present).

2. What has been your involvement with the project?

3. How has the SBPP been accepted in your school by: a) parents, b) teachers, c) students?

4. What have been the barriers to program implementation?

5. What factors have facilitated implementation of the SBPP?

6. What would improve the program?

7. How well has the PW been able to integrate into the school system?

8. Is there anything about the SBPP that you think will make a difference?

9. What involvement have students had in the implementation of the SBPP?

10. Is there a SBPP Steering Committee in your school? What is its role?
Sample Questions

Student Focus Groups

1. Please describe your experience with the SBPP.

2. How have students in general been involved in the project?

3. How have you been involved in the project? What was that like for you?

4. What do you think you have gained from being involved in the SBPP?

5. Have there been any problems with the SBPP in your school? Can you tell me about those?

6. What do you think have been the major successes of the SBPP?

7. What would improve the program?
APPENDIX I
POST-INTEVIEW CODING FORM
Interview with C, School counsellor. Post-interview preliminary coding form.

Key ideas coming out of interview:

1. Strong support for the program and PW - enthusiastic even from the beginning (differs from G who was initially sceptical).
2. Strong prior commitment to prevention in the school helped program get off the ground well.
3. Clear recognition of the need for a "getting ready" phase.
4. Observed shift in emphasis of program over time from assessment to doing.
5. Recognition of need for resources to make prevention work.
6. Program needs full-time attention. Doesn't think part time would work and cannot see how it could work if PW split between 2 schools.
7. Importance of symbolism of SM's office location and furnishings.
8. Recognition of notion of school as client.
9. Sees clear advantages to kids for person not being "of the school".
10. Kids see her very differently than they do teachers or counsellors.
11. Raised the notion of a "mutual adjustment period" between school and PW.
12. Fear of "add on work" makes teachers sceptical.
13. PW message getting out to both students and teachers.
14. No real union issues because school saw clear need for program and saw clearly how it differed from teacher/counsellor role.
15. Identified many barriers and pitfalls to implementation (spontaneously).
17. Average age of teachers - lots of years of experience - may be part of the participation problem.
18. Recognition of the long term nature of prevention outcomes. It is the quality of SM's relationships with the kids that convinces her that the program is making a difference.
19. Sees the important focus of the program as being on preventing adverse consequences of drug use rather than use itself. Does not have strong feelings against drug use by youth. Admits to having used drugs herself in the 60s.
20. Does not see abstinence as a realistic goal to work toward for youth. Takes more of a harm reduction focus.

Overall, seems to be a strong understanding of the nature of prevention in this school and support for prevention.

Key codes/categories for theoretical sampling:

1. School support for PW (extent, nature, conditions, consequences)
2. Prevention commitment.
4. Teacher Burnout.
5. Implementation barriers. (types, conditions, consequences)
6. PW relationships with others (youth, teachers, administrators).
7. Mutual adjustment period (between PW and school, nature, duration, influencing factors, consequences).
8. Shifting program emphasis. (conditions, contingencies, consequences).
9. Harm reduction vs primary prevention focus.
11. Problem definition (re: A&D use, extent, seriousness etc.)
SUMMARY OF KEY ISSUES

John is the second PW in this position. He was told nothing about the SBPM when he was hired, although a school rep, the agency supervisor and the previous PW attended the first training session in which the model was introduced. When he was hired, his expectation was that the job involved a lot of student counselling around alcohol and drug issues, as well as classroom education. John felt, at the time of the interview, that there was no pressure to use the SBPM, as long as some type of community development model was used. In fact, his understanding was that the regional office actually supported use of a healthy communities type community development model in place of the SBPP.

The training made a big difference for John, in terms of clarifying the ADP expectations for the SBPP around the health promotion/community development aspect. The agency did not seem to attend to the time allocations for each of the contract components.

John seemed to have the sense that there was a lot of background conflict influencing the "anarchy" that happened at the training session around the model. The PWs perceptions of lack of support in the school system, the animosity between the contract holders and the PWs, and the PWs frustration and pessimism about the program all served to create an unreceptive atmosphere for the model. And, being told that they had no choice in whether or not to use it all served to create a negative reaction to the model that probably had very little to do with the intrinsic characteristics of the model itself.

John did not really see what the big deal was about in terms of the opposition to the model. All jobs have requirements and the model itself was a good one with lots of research to back it up, so why all the fuss? However, he thought that ADP could have avoided many of the problems associated with the SBPP by doing more groundwork before the program was implemented.

In John's view, the model is fairly straightforward and based on sound principles. It is not too complex or difficult. In terms of the model's fit with the project, he thinks it depends on what one conceptualizes as one's work environment. He sees it as more of a community development model and so fits very well when the whole community is conceptualized as the work environment. He wonders how it might fit if the person sees their work environment as limited to the school. Thus, the notion of "
unit of intervention" seems to be important here - a micro versus a macro distinction of sorts. Some people see the school as the community in the model, others see the larger community as the focus for the model.

The role of the school in the community also becomes an important issue in the program. Some schools see themselves in more of a leadership role on youth health issues in the community and as being "central" to the community. In this view, the school sees itself as providing more than just education. Other schools see themselves more as a traditional educational institution that is quite separate from the day to day life in the community. There are clear boundaries between the school and the community. His two schools represent these two "typologies" and the particular view held by the school can influence the entire process of going through the community development process outlined in the model.

There were barriers to using the model in the community. First, there was a lot of opposition from two subgroups within one community (one particular ethnic group, and the "ex-hippie drug using" group). Second, it was extremely difficult to get much parent participation in the project, even in the community that was not so much in opposition to the program. In one community, there were actually threats and intimidation of parents who were involved in the task force by parents who opposed the whole idea of alcohol and drug prevention.

So, the notion of parent participation is a particularly difficult one, so much so that he has pretty much given up on trying to get individual participation and is focusing more on forming partnerships with existing groups.

Other barriers include the distance that people have to travel and the fact that the communities are small and the same group of people are involved in everything so its difficult to get even more participation.

Another issue about the model raised by John is the notion of using it as a more comprehensive, global planning framework versus using it in a quick and dirty way on a project-by-project basis. It seems to John that there is a real variation in the way people actually use and interpret the model, certainly in his region, but he views this as a very positive thing. In terms of the ADP training, there was no clarity on this issue - i.e. guidelines on a time frame for working through the project.

He thinks the model is important in terms of providing some structure around this very nebulous thing called "community development".
The program began in both schools in an opportunistic kind of way. The support was not very strong for him by the teachers in the beginning but has grown. Part of the improvement is related to a clarity around what the role of the PW is in the school and creating clear boundaries around what is a teacher/counsellor's job and what the PW job is. John is clearly viewed as an "outside resource". By working in the community at large, he is not stepping on anybody's toes in the school.

The union issues in the beginning of the program created some real stress and strife for many PWs. He believes that something could and should have been done to avoid that. Part of the answer is in involving people at the lower levels of the hierarchy in the decision. There was no ownership and buy in. He equates this situation with the PWs lack of buyin to the SBPM. ADP broke all the rules of proper community development. But something needs to be done about the really hostile environment that many PWs work in.

A big part of the union battle has to do with the early intervention part of the job. From his perspective, that part of the job description should be dropped, but he would get no support from his colleagues for that, or from the regional office since they seem to want to focus on the early intervention/counselling issues. Community development is hard work, it requires vigilance, and when that part of the job falls apart, people like to feel they can fall back on the counselling.
APPENDIX K
ETHICS REVIEW APPROVAL AND CONSENT
Dear Parent:

The Ministry of Health, in collaboration with the Ministry of Education, has recently developed and is evaluating a school-based program aimed at preventing the use of tobacco, alcohol, and other drugs by youth. This program (School-Based Prevention Program) is now being implemented in selected schools throughout British Columbia, including your school.

The Institute of Health Promotion Research at the University of British Columbia has been contracted by the Ministry of Health to evaluate the implementation and effectiveness of this prevention program. In order to do this, we will be interviewing school personnel and meeting with students in focus groups to ask them about their experiences with the program and what suggestions or concerns they may have. Your school principal has agreed to be involved in this research.

Participation is voluntary and there are no risks associated with the procedure. All students will be given the option of not participating if they so choose, or of participating in the discussion when they want to. The discussion will take one hour or less during regular class time. All sessions will be tape-recorded for transcription and analysis. Names and identifying information will not be transcribed and the tapes will be erased upon completion of the analysis. All information will remain confidential. Only members of the research team at UBC will have access to the recorded information. Only group information will be reported so it will not be possible to identify the responses of individual students.

Your cooperation in permitting your daughter or son to participate in this research is greatly appreciated, however, there is no penalty of any kind if she or he does not participate. Class standing will not be jeopardized by refusing to participate or withdraw. Your child will be allowed to continue with his or her usual school work while the group discussion is in progress.

If you agree that your child may participate, please sign the attached form and return it to your child's school by March 3, 1995. If you do not want your child to participate, DO NOT sign the form.

If you have any questions or concerns regarding this research, please contact me at the Institute of Health Promotion Research in Vancouver by phone at 822-6108 or by fax at 822-3328.

Thank you for your cooperation.

Sincerely yours,

Marjorie MacDonald
Evaluation Coordinator
School-Based Prevention Project Evaluation

FOCUS GROUP DISCUSSIONS

Please complete and sign this form if you agree to have your child participate in the discussion group for evaluation of the School-Based Prevention Project being conducted by the University of British Columbia. Please return this sheet to your school principal when you have signed it. Thank you.

I agree that my child, ________________________________ (PLEASE PRINT CHILD'S NAME HERE) may participate in this study. I understand that by signing this form, my child will be asked to participate in a Focus Group Discussion to be held during the week of February 27th, 1995. I understand that the session will be tape recorded but that all information will remain strictly confidential. No one but the evaluation team at the University of British Columbia will have access to the tape. I also understand that my child may choose to withdraw from participation at any time during the discussion.

Parent's Name: ________________________________ (PLEASE PRINT YOUR NAME HERE)

Signature: ________________________________
Dear Participant:

The Ministry of Health, in collaboration with the Ministry of Education, has recently developed and is evaluating a school-based program aimed at preventing the use of tobacco, alcohol, and other drugs by youth. This program (School-Based Prevention Program) is now being implemented in selected schools throughout British Columbia, including your school.

The Institute of Health Promotion Research at the University of British Columbia has been contracted by the Ministry of Health to evaluate the implementation and effectiveness of this prevention program. In order to do this, we will be interviewing school personnel and meeting with students in focus groups to ask them about their experiences with the program and what suggestions or concerns they may have. The Superintendent of Schools in your district and your school principal have agreed to be involved in this research.

Participation is voluntary and there are no risks associated with the procedure. Interviews will take approximately one hour. All interviews will be tape-recorded for transcription and analysis. Names and identifying information will not be transcribed and the tapes will be erased upon completion of the analysis. All information will remain confidential. Only members of the research team at UBC will have access to the recorded information. Only group information will be reported so it will not be possible to identify the responses of individuals.

Your participation in this research is greatly appreciated; however, there is no penalty of any kind if you do not participate. Names of those who choose not to be interviewed will not be divulged. If you agree to participate, please sign the attached form and return it to the interviewer at the time of the interview.

If you have any questions or concerns regarding this research, please call Brenda Canitz or Marjorie MacDonald at the Institute of Health Promotion Research in Vancouver at 822-6108.

Thank you for your cooperation.

Sincerely,

Lawrence W. Green, Dr. PH.
Director
School-Based Prevention Project Evaluation

INTERVIEW CONSENT

I, the undersigned, agree to participate in an interview for the purposes of evaluating the School-Based Prevention Project. I understand that the interview will be tape recorded for transcription and analysis and that tapes will be erased when the analysis is complete. I understand that only the research team at UBC will have access to the tapes and transcripts, that no participant will be named individually, and that all information will remain strictly confidential.

I am aware that participation is voluntary and I have the right to refuse to participate or to terminate the interview at any time.

Please sign below.

Name: ____________________________________________

Date: __________________________