The Montana Institute presents

An Introduction to Positive Community Norms

by Dr. Jeffrey W. Linkenbach

a guide to PCN leadership, communication, integration, and reflection

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AN INTRODUCTION TO POSITIVE COMMUNITY NORMS

Welcome! Transforming community culture to improve health and safety is possible when passionate and courageous leaders like you grow the positives that already exist within your communities. Get ready to embark on a journey that will fundamentally transform the way you look at and respond to health and safety issues. With Positive Community Norms, you will move from a place of fear and uncertainty to one of hope and empowerment. Your work will excite and inspire others. It won't be without challenges, of course, but the rewards of saving lives, reducing risks, and improving health will be worth it.

POSITIVE COMMUNITY NORMS

The Positive Community Norms (PCN) approach to improving community health is a transformational model founded upon The Science of the Positive (SOTP). The Seven Step Montana Model for Positive Community Norms Communication (Linkenbach 1998, 2003) uses the Core Principles of the Science of the Positive to grow positive norms through leadership development, communications strategies, integration of prevention resources, and structured reflection. PCN cultivates cultural transformation by working on multiple community levels and factors at once. This framework has shown itself to be extremely effective in creating meaningful social change around health and safety issues including traffic safety, underage drinking, binge drinking, child maltreatment, and many others.

THE SCIENCE OF THE POSITIVE

The Science of the Positive is the study of how positive factors impact culture and experience. It is focused on how to measure and build the positive, and is based upon the core assumption that the positive is real and is worth growing -- in ourselves, our families, our workplaces, and our communities.

Those of us who work as health and safety professionals can sometimes forget this core truth, as we become so focused on the dangers and problems we are trying to decrease. The Science of the Positive reverses this problem-centered frame, and focuses on growing the healthy, positive, protective factors that already exist in every community. When we start to look at the world

from a position of hope, it has a profound impact on the questions we ask, the data we collect, and the way we lead our teams.

Many of us have gotten locked into a two-dimensional approach to our work, in which science leads to action. The Science of the Positive directs prevention efforts in a unique way by incorporating and integrating *spirit* into this process. By re-engaging with spirit and re-igniting hope, we ensure that our core values guide our work, which allows us to ask different questions, reach people with more authenticity, and truly create room for transformation.

Four essential stages – Spirit, Science, Action, and Return – make up the Science of the Positive process. These stages, when fully engaged, work together to create a synergistic cycle of positive transformation.

The Science of the Positive should not be confused with simple "positive thinking." SOTP is a system for discovery and innovation, involving a rigorous process that works across entire cultures. This process calls for amplifying the positive dimensions in every community and culture to address the suffering, pain and harm that are very real in our lives. One of its principal outcomes is to reduce that suffering in our families, in our communities, and in ourselves.

Cycle of Transformation

RETURN

Rest
Reflection
Evaluation

Integrating
Change and
Transformation

ACTION

SPIRIT

Positive
Hopeful
Energy-giving

Learning
Planning
Effectiveness

SCIENCE

Guiding questions

Spirit
   What is the true purpose of our work?
Science
   What methodologies should we use?
Action
   What are the most effective actions?
Return
   What outcomes will we measure?

The Science of the Positive is currently in use by leaders seeking to change perceptions, behaviors, and outcomes across organizations and communities, as well as by individuals looking to fulfill their own potential.
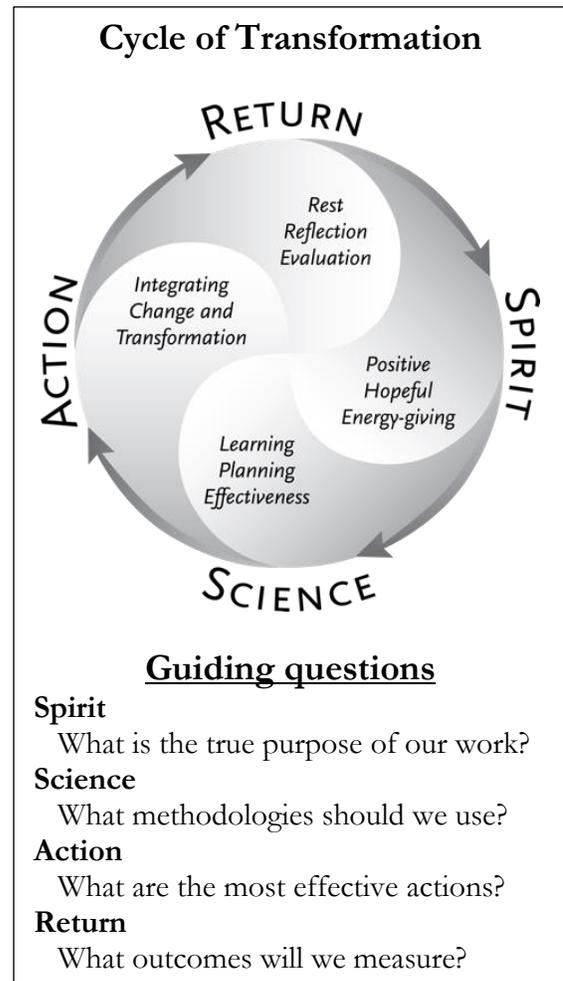
THE POWER OF A POSITIVE, STRENGTH-BASED CHANGE MODEL

Scare tactics, arguably one of the most popular and widely-utilized approaches in prevention history, have been employed for decades to raise awareness about dangerous activities. This strategy ignores the fact that healthy, protective choices are most often the norm.

As a society, it is like we have *cultural cataracts*: our vision has been distorted by the media's "if it bleeds, it leads" focus on the problems and harm caused by the behavior of a small percentage of people (Linkenbach, 2001). Our media obsessively focuses on problems, risk, and danger, fueling ever more exaggerated perceptions of their prevalence. Ironically, this strategy can create

the *opposite* result from the one we seek. A negative focus creates feelings of powerlessness and hopelessness, emotions that are unlikely to ever create positive change.

Fear-based messages are designed to "scare the health" into people by emphasizing or exaggerating the terrible things that will happen (such as death or overdose) if they do not do what the message recommends (such as abstain from drugs and alcohol). The assumption behind fear-based approaches is that awareness of the negative consequences of our actions will result in positive behavior change. Awareness of problems and their risks is critical, but research shows that awareness alone is insufficient to create lasting transformation.

Our work has proven that inflating people's fears can actually create a backlash against the goal of health promotion by supporting and exaggerating misperceptions of negative community norms (Linkenbach, 2001). Using fear to motivate people to action can cause just the reverse: people can become paralyzed by the lack of hope. On an individual level, lack of hope can lead to diminished energy, loss of commitment, and overall poor performance. At the organizational or community level, a lack of hope can lead to despair and loss of engagement.

> ## Key Take-away
>
> Fear appeals can backfire, and have unintended adverse effects. They can:
>
> - Label and stigmatize,
> - Expand social gaps
> - Promote poor health as a value
> - Cause a loss of engagement
>
> "IT IS TIME TO MOVE BEYOND HEALTH TERRORISM.
> IF WE WANT HEALTH, WE MUST PROMOTE HEALTH."
> -- JEFF LINKENBACH

A poster from a Positive Community Norms media campaign.

Another potential negative outcome of fear-based approaches is that they can foster stigmas that divide the community into different groups. Negative behaviors (or negative health outcomes) are strongly linked to the people portrayed as the wrongdoers. We then begin to view these people as harmful and bad. This stigmatization leads to poor communication, shaming, and a breakdown of community. Fear-based approaches are also hard to maintain. In order to engage our audience, we must create messages that stand out against the onslaught of media messages we receive each day. At a certain point, negative messages get tuned out because they are too, well, negative! We have seen campaigns that were so graphic that people rejected the messages by literally changing the channel. A core assumption of the Science of the Positive is that **the solutions are in the community**. SOTP assumes that in every community there is positive, undeniable good that we can discover and amplify. By searching for health -- as opposed to its opposite -- we increase this positive energy and direct it towards that which we want to grow.

It has been demonstrated that messages that portray health as the normative, expected behavior result in increased health protections and lowered risk (Perkins, Haines & Rice, 2005). Using The Science of the Positive as its guide, PCN focuses on the positive, healthy normative attitudes and behaviors we want to grow, transforming our messaging from one of fear to one of hope. There are examples of health and goodness in every community, if we take the time to look for them. We may have to ask different questions and measure healthy behaviors in new ways to uncover these strengths, but they are always there.

THE POSITIVE COMMUNITY NORMS FRAMEWORK

CULTIVATING CULTURAL TRANSFORMATION

When we apply the Positive Community Norms Model in the context of The Science of the Positive, we arrive at a central tenet of the PCN approach: to improve health and safety, we must focus on growing positive community norms to cultivate cultural transformation.

Transformation should not be confused with change. In this work, we seek to cultivate both. Change is more common and easy to measure quantitatively. Change occurs within an existing paradigm, is generally temporary, and happens on the surface. A program that fosters only change within an existing system may see that change disappear once the program ends.

Transformation, on the other hand, occurs at a deeper level, and has long-lasting impacts on our communities. Transformation can often be hard to notice – especially if we are right in the middle of it. One way to see it more easily is to look back through time. Think about issues like smoking on airplanes, using car seats for children, and the use of hard hats, helmets and other protective equipment in the workplace. Transformation around these issues has been so dramatic that it is hard to believe what we used to consider the norm. The goal of the PCN approach is to cultivate this type of cultural transformation, through which we will achieve behavior change and improved health and safety.

> PERCEPTION IS EVERYTHING.
>
> THEREFORE SO, TOO, IS MISPERCEPTION.
>
> -- JEFF LINKENBACH

THEORETICAL FOUNDATIONS
The PCN framework incorporates and integrates elements of several theories about perceptions and norms, including Social Cognitive Theory, Theory of Planned Behavior, Extended Parallel Process Model, the Reconceptualized Theory of Deterrence, and Social Norms Theory, with which it is sometimes confused.

Hundreds of studies have shown that norms have a powerful influence on behaviors and attitudes. What distinguishes the PCN framework is its focus not just on norms, but on community. PCN recognizes that many forces operating in our culture influence our behaviors. Social ecology is the study of these forces.

Social ecology theory, also called the theory of human ecology, originated with psychologists' discontent with individual-level explanations of health and other behaviors. Psychologists such as Urie Bronfenbrenner (1979) and Kurt Lewin instead sought to explain behavior in terms of an "ecology" of forces at individual, social, political, cultural, and other levels.
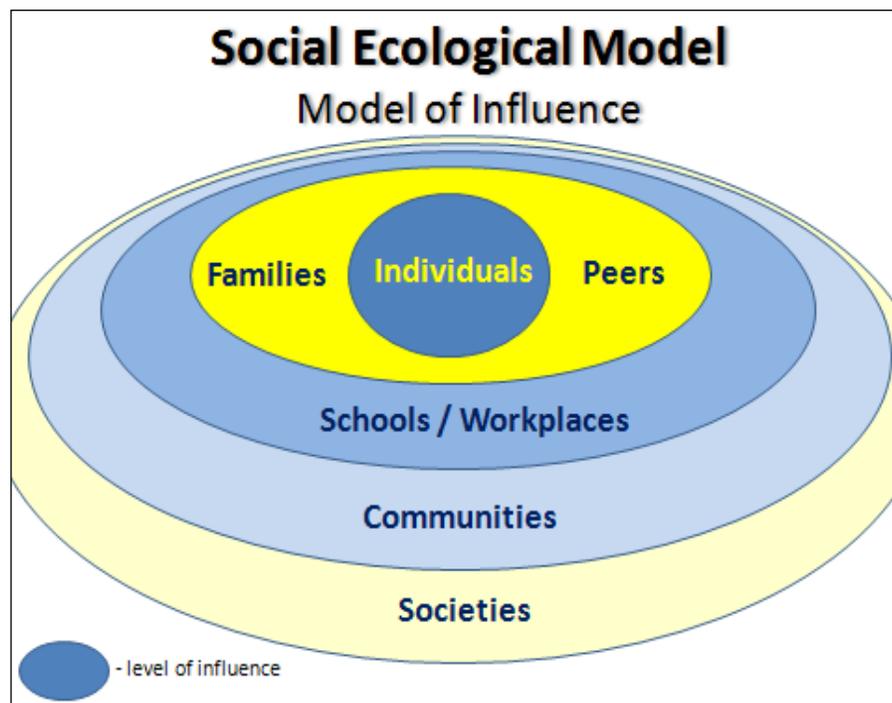
The social ecological model.

Social ecology can be applied to health promotion interventions by applying its basic principles: understanding how macro theories explain the behavior of individuals, small groups and larger social organizations; learning how social ecology is related to health promotion; and designing health interventions that operate at many levels of analysis (Stokols, 1996).

By recognizing the importance of social ecology and its impact on individual behavior, the PCN framework offers a systems approach that promotes transformation and change at many different levels or domains within a community. For example, when considering traffic safety, not only must we address the beliefs and behaviors of individual drivers, but also the beliefs and behaviors of families, co-workers, workplaces, community practices, policies and laws, as well as

broader societal factors. We will need multiple strategies in our prevention portfolio to address this one issue, and we will be working to transform not only our focus audience, but groups throughout the relevant social ecology as well.

A HOLISTIC PARADIGM

As we become more sophisticated in our prevention work, we recognize the need to design more comprehensive programs. We need strategies that address all members in a group as well as ones to reach people who are at risk for certain behaviors (i.e., selective strategies) and individuals who are engaging in these behaviors (i.e., indicated populations). We need to explore activities that both change *and* transform the environment. We need to capture or codify improvements that take the form of policies, regulations, and laws. A comprehensive approach involves many different activities working throughout a community at many different levels.

But comprehensive programs are not enough. Even the most comprehensive program designs can be ineffective when replicated in new settings or in new cultures. The PCN approach moves beyond a comprehensive paradigm (which is by definition deficit-based and focused on reducing the problem) to a holistic process of authentic community transformation. Authentic community transformation occurs when many efforts work together in a synergistic way to reveal and grow the goodness present in every community – the core ideal in the Science of the Positive (Linkenbach, 2007). The PCN model connects these activities through a common spirit and a scientific framework that recognizes and honors the communities it serves.

PCN LEADERSHIP, COMMUNICATION, INTEGRATION & REFLECTION

The PCN framework focuses on four key elements: leadership, communication, integration, and reflection. Below is a "map" of the PCN framework and how its components interact.

Positive Community Norms Framework
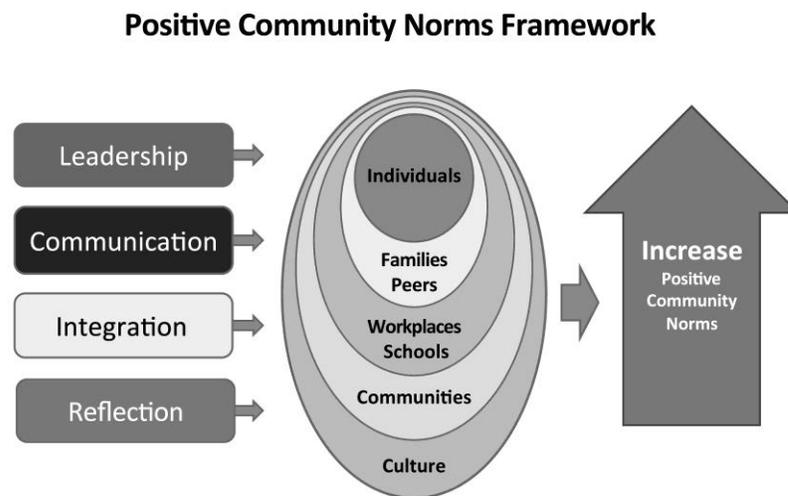
Linkenbach, 2015

Positive Community Norms is an environmental approach that engages different audiences across the social ecology. The framework offers multiple strategies, each designed for a specific audience, which together form a holistic prevention portfolio that works to grow positive community norms.

PCN LEADERSHIP: CULTIVATING TRANSFORMATION

Key Take-away

PCN leaders are PASSIONATE and COURAGEOUS.

They learn to guide the community towards health and safety by fostering an environment that supports healthier choices.

"MY UNDERSTANDING OF THE SCIENCE OF THE POSITIVE TRANSFORMED THE WAY I THINK ABOUT PEOPLE AND SITUATIONS. I ALWAYS CONSIDER IF IT'S MY PERCEPTION OR REALITY AND CHALLENGE HOW I LOOK AT THINGS."
-- COALITION LEADER
THE MOVEMENT COALITION
DEER RIVER, MINNESOTA

As practitioners working to transform our communities, we lead people to make healthier, safer choices. In this way, our work is all about leadership. Successful leaders know they cannot *force* people to make these decisions. Instead, effective leaders create conditions that help people *choose* to be healthier and safer.

As a person working to improve health and safety, it is important that you recognize and embrace your role as a community leader. If you are working on the issue of underage drinking, you are leading your community youth from the risks of drinking and towards healthier living. And your role is even greater than that. You are leading your community away from a negative image of youth, towards a positive image of youth. You are leading your community away from a fearful, hopeless vision of its future towards a positive, hopeful one. Engaging in the process of Positive Community Norms leadership is about daring to see things as they really are in order to embrace the unknowable future with the willingness to believe that something wonderful is about to happen. PCN leaders are passionate about this model because through the process of transforming ourselves and our perceptions, people and communities learn to be more purposeful lives achieve their true potential.

PCN COMMUNICATION: TELLING A NEW STORY

Communication is a critical tool for teaching, correcting misperceptions, and closing gaps. Communication helps a community better understand an issue, learn how to behave in safer and healthier ways, and accurately perceive the positive norms that exist in their community. Communication modules of all kinds (paid media, earned media, presentations, outreach -- even one-on-one conversations) can tell a new story about our community and its health and safety behaviors. It is through this new story that improved health and safety behaviors can become a part of the culture.

For example, we may use a PCN Communication campaign to correct certain misperceptions of normative behaviors, thus building the energy and willingness of the community to engage in healthier, safer behaviors. Misperceptions can impact behaviors at all levels of the social ecology.

For example, youth who perceive that the majority of their peers drink are more likely to drink themselves. Parents who believe most youth drink may be less likely to take protective actions with their own child. School leaders who believe most children drink may consider underage drinking a "rite of passage" and be unwilling to adopt appropriate policies. Law enforcement leaders who believe the community condones underage drinking may be less likely to strongly enforce underage drinking laws. A PCN communications campaign should address the misperceptions held by multiple audiences.

PCN communication campaigns intentionally focus on positive attitudinal and behavioral norms. Some community leaders may be attached to old prevention practices, and it may be challenging to get them on board with a new, positive approach. However, while those implementing fear appeals have good intentions, many groups (such as youth) may not respond well to the "health terrorism" found in some anti-smoking, drinking, or drug ads. Research panels commissioned by leading government agencies to study underage drinking (Bonnie and O'Connell, 2004) and other health-risk behaviors in adolescents (National Institutes of Health, 2004) have found that the use of scare tactics is not merely ineffective, but may actually make problems worse.

There are seven steps in the Montana Model of PCN Communications, and each step corresponds to one of the Seven Core Principles of the Science of the Positive. It takes approximately a year to design a PCN campaign and to get key stakeholders on board. The campaign itself can take several years more to implement. As prevention leaders learn how to implement a successful campaign, they begin to see more opportunities to use PCN to energize and engage people in prevention activities.

Key Take-away

Our COMMUNICATION should TELL A NEW STORY to improve health and safety behaviors.

PCN communication is focused on closing the gap between misperceptions of norms and actual norms across the social ecology. As this misperception gap is closed, community members show an increased willingness to engage in healthier, safer behaviors.

"WE ARE SEEING A REMARKABLE DIFFERENCE IN HOW THE PUBLIC IS PERCEIVING SUBSTANCE USE AMONG TEENS. PEOPLE ARE PERCEIVING THINGS MORE ACCURATELY."

-- COALITION LEADER
CITIZENS AGAINST DRUGS COALITION
TODD COUNTY, MINNESOTA

Core Principle	PCN Communication Step
1. Be Positive	Planning and Environmental Advocacy
2. Be Present	Baseline Data
3. Be Perceptive	Message Development
4. Be Purposeful	Communication Plan
5. Be Perfected	Pilot Testing and Refining
6. Be Proactive	Campaign Implementation
7. Be Passionate	Evaluation

PCN INTEGRATION: MANAGING THE PREVENTION PORTFOLIO

Just as an individual may develop and manage a portfolio of financial investments to meet her financial needs, the PCN prevention leader develops a prevention portfolio of activities and resources to improve health in her community. These resources should address the continuum of care and should reach all aspects of the social ecology. These prevention resources are carefully selected to address identified needs and accomplish specific goals. The prevention leader manages the strategic allocation of resources to achieve the best health "return" for the available prevention "investment."

The first step in managing a prevention portfolio is to conduct a survey of current community prevention efforts. Use the table below as a guide for this initial inventory. Additional information for each program or strategy can be included in the table, such as whether the program or strategy is evidence-based, how many people it reaches, how much it costs, and the results of its evaluation. After current prevention activities are mapped, the gaps in programs and strategies can be readily identified. These gaps provide guidance on how the prevention portfolio can be strengthened.

As a prevention leader reviews the activities in their existing portfolio, in addition to identifying gaps, they should also consider how Positive Community Norms can be integrated into **all** aspects of the work being done to address a particular issue. Consistently using Positive Community Norms in all prevention activities will help foster cultural transformation.

🔑 Key Take-away

STRATEGIC allocation of prevention resources = the BEST HEALTH RETURN on investment.

To improve community health, PCN leaders manage a diverse prevention portfolio that addresses the continuum of care across the social ecology. Effective leaders **integrate PCN** into all their prevention strategies and activities.

"PCN HAS BEEN INTEGRATED THROUGHOUT ALL STRATEGIES. IT IS A PART OF HOW WE DO EVERY PROJECT. FOR RESPONSIBLE BEVERAGE SERVER TRAINING, WE FOCUS ON THE WIN-WIN, HOW THE TRAINING BENEFITS BOTH THE COMMUNITY AND THE ESTABLISHMENTS."
-- COALITION LEADER
LAKE OF THE WOODS COALITION
LAKE OF THE WOODS, MINNESOTA

Positive Community Norms Prevention Portfolio Worksheet

	Individual Programs or strategies designed to impact the individual, like specific curricula, programs, or interventions	**Family** Programs or strategies designed to impact the family, like parent training, family therapy, or family education	**School** Programs or strategies designed to impact the school, like school-wide policies or discipline programs, or trainings for all teachers	**Community** Programs or strategies designed to impact the community, like ordinances, laws, taxes, or policies, or community-wide education programs
Indicated Youth who are known to exhibit the behavior				
Selected Youth who are at risk for exhibiting the behavior				
Universal All youth who you serve				

PCN REFLECTION: GENERATING WISDOM

A fourth key skill for transformational leaders implementing the PCN framework is reflection. Structured reflection is a conscious activity designed for learning and generating wisdom about the PCN process. The importance of reflection as a way of generating wisdom is ancient. For Socrates, as for many eastern philosophers, the path to wisdom was through contemplation of carefully-constructed reflection questions. Today, critical reflection remains a cornerstone of transformational learning; It impacts our perceptions and allows us to question the integrity of our deeply-held assumptions (Taylor, 2009).

PCN leaders gain wisdom through experience, but they must take the time to reflect on and make meaning of this experience. Structured reflection and contemplation are an integral part of the process, allowing leaders to gain and apply insights as they implement their project.

> **📷 COMMUNITY SNAPSHOT:**
> **Turning Down the Volume on Counterproductive Messages**
>
> The Maine Community Youth Assistance Foundation proactively worked with the schools in their district to eliminate the mock car crashes they traditionally organized before prom. Instead, the Foundation and two local high schools initiated the "Positive Prom Car Project" as a component of their campaigns. Instead of displaying a crashed car on the school lawn, they parked a new top-of-the-line sports car, with the following message:
>
> 1,130 Maine South students attended Junior and Senior prom in 2006, and
> 1,130 Maine South students arrived home safely.
> 89% don't drink and drive
>
> The project team confirmed the data for the message with the Police Department and school. No alcohol or drug related incidents and no accidents were reported.

PCN SUSTAINABILITY

Sustainability is a natural outcome of the PCN process. The PCN approach achieves sustainability as its leadership development process transforms key stakeholders across the social ecology. A new story is created and told about the health and safety of the community (which then becomes a part of the community's culture), and key strategies and programs are aligned around a common spirit and demonstrated effectiveness. PCN becomes sustainable not through the acquisition of additional funding to spend on programs, but rather through the transformation of leaders, organizations, and individuals who embed health into the community.

PCN leaders can develop a better concept of the true meaning of sustainability by reflecting on the following questions:

- Are we seeking transformation or change, or both?
- How does the PCN process build capacity and develop leaders?
- What is it that we are actually wanting to sustain, and why?
- What elements will be sustained in spite of our efforts (i.e., community)?
- What is not worth sustaining? How do we know?
- What is inherently sustained?
- What is the role of leadership in sustainability?
- Why is an environmental focus more sustainable than an individual focus?
- Is sustainability synonymous with job/agency preservation?
- Is sustainability synonymous with getting another grant?
- What assets already exist to help us sustain community health?
- Do we want to sustain busyness or effectiveness?
- Does fear erode or sustain community health?
- As an investor, where do we invest prevention resources?

- Are we trying to sustain health or sustain our jobs and programs?

As guided by The Science of the Positive, the PCN approach builds sustainability by connecting leaders to a strong sense of spirit, outlining effective strategies grounded in science, and providing a way for practitioners to move beyond the "issue of the day" to develop authentic, healthy communities.

COMMUNITY SNAPSHOT:
Maintaining Sustainability Through Positive Relationships

The community coalition that developed the Our Choices, Our Future campaign in Little Falls, Minnesota, created a great foundation for sustainability by developing a positive relationship with their local school district. As a result, the school district provided office space for the campaign coordinator, access to students for surveys and project activities, as well as grant writing support. In addition, school district staff and administrators were highly engaged in the project, and put in a lot of time ensuring its success. Because of this close relationship and the coordinator's physical presence in the school, the coalition was able to identify opportunities for sustainability that may have otherwise been missed.

For example, the coalition realized their Positive Community Norms communications aligned closely with the Positive Behavioral Intervention and Supports (PBIS) initiative the district was engaged in and sustaining. Through conversation and planning, the coalition was able to incorporate PCN messages into the district's PBIS activities and messages, setting the stage for long-term sustainability with Positive Community Norms.

The school district eventually became a fiscal host for the coalition's Drug Free Communities grant, and continues to provide thousands of dollars of in-kind contributions to the project each year. The time invested in developing this relationship resulted in a great return.

APPENDIX A: COMPARING THREE KINDS OF CAMPAIGNS

Social Marketing	Social Norms Marketing	PCN Communication Campaigns
Uses traditional marketing techniques (such as advertising) to elicit a change in behavior among a certain target population.	Uses traditional marketing techniques (such as advertising) to elicit a change in perceived normative beliefs among a certain target population.	Uses traditional marketing techniques and other communication strategies to foster dialogue and promote change about perceived normative beliefs among various focus populations.
Messages are created which communicate <u>information</u> about risk or protective behaviors (such as wear a seatbelt or don't smoke).	Messages are created to close perceptual gaps with accurate <u>normative information</u> about certain risk or protective behaviors or beliefs. (Such as most people wear seatbelts or MOST don't smoke).	Message environments are developed based upon 7 Core Principles of The Science of the Positive to communicate accurate normative information across the social ecology to close perception gaps about certain behaviors or beliefs.
Often uses fear and cost / benefits as behavioral motivators. Main focus is on individuals.	Avoids fear tactics and uses social conformity as behavioral motivator. Main focus is on individuals.	Promotes positive norms to achieve behavior change, and integrates the 7 core principles of The Science of the Positive for transformation.
A certain population is segmented to target.	A certain population is segmented to target.	The community is segmented into focus audiences to impact perceptions across the social ecology.
Appropriate communication channels are researched and used to reach the target population.	Appropriate communication channels are researched and used to reach the target population.	Appropriate communication channels are researched and used to reach focus audiences.
Focus groups and surveys may be used to test various messages with the target population. Participant perceptions of norms not considered when framing media messages.	Focus groups and surveys may be used to test various messages with the target population. Participant perceptions and misperceptions of norms are essential when framing media messages.	Focus groups and surveys are used to test various messages with each focus audience. Context is established by weaving both hope & concern.
Various forms of media are used to achieve the appropriate reach and saturation of the target population.	Various forms of media are used to achieve the appropriate reach and saturation of the target population.	Various forms of media and activities are used to shift the environmental context – including the appropriate reach and saturation among focus audiences.
Typically viewed as a universal prevention strategy (reaching a broad audience).	Typically viewed as a universal prevention strategy (reaching a broad audience).	Prevention strategies may be universal, selected or indicated across the social ecology.
Social marketing is a strategy.	Social Norms Marketing is a strategy based upon Social Norms Theory.	Positive Community Norms is a conceptual framework that works to integrate leadership and communication utilizing multiple strategies to change attitudes and behaviors.

APPENDIX B: COMPARING THE "OLD" PREVENTION PARADIGM WITH PCN

Old Prevention Paradigm	Positive Community Norms Framework	How the PCN Approach Differs From the Old Paradigm
Program	Framework based upon the Science of the Positive Process (a journey)	This isn't a "Program-In-A-Box." It's a framework to guide process.
Individual OR Environmental Focus	Individual AND Community Focus (the entire social ecological continuum)	PCN is NOT the "Silver Bullet." There is NO SILVER BULLET! Who you are as a leader is equally important as what you do.
Curriculum	7 Core Principles of SOTP PCN Leadership Development PCN Communication (7 Steps) PCN Integration and Prevention Portfolio Management	It's not about "right vs. wrong." It is about process and guiding principles and about leadership development. Prevention leaders **will** be at different levels.
Cultural Competence	The solutions are in the community.	We don't have all the answers, the community does. The process is what we focus on: the Spirit – Science- Action – Return cycle.
Fidelity means following the time requirements, lesson designs, or core topics.	Fidelity is authenticity by truly applying the Core Principles of the SOTP and 7 Steps. This is a leadership development approach.	It's about trusting and following the process. Steps look the same, but the content will look different in each community.
You buy a curriculum and training for your local implementers.	You work with a guide to support you in leadership development, learning and using the process, and managing your prevention portfolio.	PCN is very individualized. Guides help us learn and experience the Science of the Positive process as it is applied to PCN.

The Constructive, Destructive, and Reconstructive Power of Social Norms

Schultz, P. W., Nolan, J. M., Cialdini, R. B., Goldstein, N. J., & Griskevicius, V. (2007). The Constructive, Destructive, and Reconstructive Power of Social Norms. *Psychological Science, 18*(5), 429-434.

Social norms marketing campaigns are used to reduce unhealthy or undesirable behaviors by correcting misperceptions about the prevalence of the undesirable behaviors. Communications expose the difference between perceived and actual prevalence of a behavior; e.g., that underage drinking actually occurs less often than most people think. By revealing facts like this, the social norms approach seeks to validate and increase positive behaviors.

Evidence for the success of such campaigns has been shown in studies to be mixed. While some studies confirm the effectiveness of the social norms marketing approach, others have been seen to actually increase the very behaviors they set out to reduce (referred to as a boomerang effect). Why? Because if people already perform an unwanted behavior less often than or below the norm, a positive thing, sometimes marketing the norm actually serves to bring those people closer to that normative behavior – a negative outcome. Communicating the actual (versus perceived) norm conveys to these people that they can increase the unwanted actions and still be at or under the norm. This research sought to apply an additional aspect to the social marketing intervention that would eliminate or reduce this boomerang effect, thereby strengthening the success of the social norms approach.

Defining two different types of social norms helps to clarify the methodologies used in this study. A descriptive norm is one that refers to the perceptions of what is typically done in a certain situation (i.e., what happens). An injunctive norm refers to the perceptions of what is commonly approved (or disapproved) of within a particular environment (i.e., what is thought of as good or bad).

In a California community, the researchers examined the effects of normative information on household energy consumption by providing feedback to residents on how much energy they had consumed as well as descriptive normative information on the average consumption of neighboring households. Researchers took several meter readings and left messages to residents about their consumption via door hangers. Half of the households received the descriptive normative information only (how much energy they'd used the previous week, the consumption of the average household in their neighborhood, and information on how to conserve energy). The other half received this same information plus an injunctive message about whether their energy consumption was positive or negative (researchers drew happy or sad faces next to the information).

Outcomes were as predicted by the researchers. For households consuming more than the average amount of energy in their neighborhood, the descriptive-only feedback produced the desired outcome: a decrease in consumption. But households that were already using below average energy and that received only the descriptive norm information increased their energy use – the boomerang effect.

What happened when the injunctive information was added to the message conveyed to households above and below average use? Households consuming above-average energy amounts decreased their usage, as desired. Perhaps most significantly, households that were already using below-average energy continued to; thus, applying an injunctive message of approval reinforced the sought-after action and buffered the potential for a boomerang result.

In sum, mixed results of social norm campaigns may be explained by the fact that those whose behaviors begin at a more desirable level are exposed to messaging that can actually increase the undesirable actions.

However, adding the injunctive element to communications can mitigate this unwelcome boomerang effect.

The Social Side of Sanctions: Personal and Social Norms as Moderators of Deterrence

Wenzel, M. (2004). The Social Side of Sanctions: Personal and Social Norms as Moderators of Deterrence. *Law and Human Behavior, 28*(5), 547-567.

This paper explores personal and social norms in relation to tax compliance to understand better the effectiveness of deterrents and regulatory sanctions. What drives people to pay or evade taxes? There has been growing evidence that such decisions are affected by moral and social factors and not just economic sanctions.

People have two primary options in relation to paying taxes: being compliant and losing money by paying tax, or evading tax payment and gaining money, but risking greater loss than the original payment would've been if detected and penalized. Clearly, there are monetary considerations in a citizen's decision-making process. It has been increasingly recognized that noneconomic factors such as morals, fairness, and norms also play into this process, even moderating the effect of deterrence factors like detection risk and penalty in some cases. In fact, might ethics and norms outperform legal sanctions in their deterrence effect? This research focused on parsing out the role of personal and social norms in relation to deterrence by surveying Australians about their decision-making process in response to past tax decisions as well as a hypothetical receipt of money that could possibly be hidden from taxing authorities or deducted as work expenses when the money had nothing to do with work.

Personal norms are people's own moral standards, perhaps acquired by internalizing social norms. Social norms are moral standards attributed to a certain group. For some, personal and social norms are different, depending upon whether they identify with the group and the extent to which they regard the group norms as their own. Wenzel posited that legal sanctions for tax evasion become irrelevant to people when personal ethics exclude tax evasion as an option. But norms can add social costs to legal sanctions making them more significant, even when the offender had not internalized those norms. Thus, externalized norms can add deterrent effects to other sanctions.

Study respondents were asked to imagine receiving $5,000 for work outside their regular job and not declaring it as income. In another scenario, they were asked to imagine claiming the same amount as a deduction when in fact the money did not relate to work. They were then asked about the probability of getting caught and of certain legal consequences as well as the severity of those consequences and how much of a problem the consequences would be for the person to experience. Further, respondents were asked about the importance of belonging to the Australian community. Lastly, they were asked about what they thought most people think (social norms) and what their own personal norms would dictate in these circumstances.

Legal sanction probability and sanction severity were both negatively related to tax evasion and thus were, overall, effective as deterrents. Norms and ethics proved highly relevant, though. Even though both sanction probability and sanction severity were generally found to have an impact, the effects of sanction severity were qualified by personal norms; that is, there was only a deterrent effect when individual morality was lax and did not exclude tax evasion from the person's options. This was not the case with sanction probability.

Most notably, personal and social norms were not as correlated in results as Wenzel expected, meaning that they can have different effects on this decision-making process. The level of identification with the relevant group determines whether social or personal norm effects emerge, as less identified people are

less likely to internalize social norms. Yet, social norms are not altogether irrelevant; people still depend upon others for respect, cooperation, and access to resources, even if they don't share the group's norms.

Wenzel found that <u>personal</u> norms (e.g., of tax honesty) reduced tax evasion as well as the effect of deterrence variables like legal sanctions. If a person's code of behavior already excludes the option of cheating, the risk of legal consequences is largely irrelevant.

<u>Social</u> norms in and of themselves do not influence taxpaying behavior unless they have been internalized and operate as one's own personal norms as described above, in response to group identification. However, social norms, even if a person has not adopted them as her own, can be relevant in that they add social costs to legal sanctions, making the legal sanctions more meaningful. Thus, externalized norms can increase the effects of other deterrence strategies.

Wenzel concludes that the implications of this research are potentially simple policies: (1) nurture personal norms of honesty; (2) utilize deterrence because it works when personal norms fail; (3) order regulatory strategies in such a way as to elicit personal norm responses first (then deterrents); and (4) develop strong identification between people and their communities given that social norms play a role in decision-making despite personal norms.

Social norms information enhances the efficacy of an appearance-based sun protection intervention

Mahler, H. I. M., Kulik, J. A., Butler, H. A., Gerrard, M. & Gibbons, F. X. (2008). Social norms information enhances the efficacy of an appearance-based sun protection intervention. *Social Science & Medicine 67*, 321-329.

In the U.S. alone, skin cancer accounts for more than 50% of all new cancers diagnosed and malignant melanoma causes roughly 8,000 deaths. Skin cancer is one of the most costly of cancers.

The primary cause of skin cancer incidence appears to be recreational UV exposure. Interventions that seek to increase UV protection behaviors have the potential to significantly impact this incidence. The most common interventions have attempted to raise awareness of the link between UV exposure and skin cancer, and to inform people about protections. While knowledge of this link and solutions has increased, behaviors have not yet changed significantly. Most intentional UV exposure relates to appearance (i.e., getting a tan); thus, interventions that focus on health concerns may not be effective enough to produce the results concerned practitioners are looking for. Instead, appearance-based solutions may be more useful.

This study set out to discover whether the promising effectiveness of appearance-based interventions could be further enhanced with injunctive and/or descriptive norms information. Young adults in Southern California received photoaging information along with UV facial photographs. Injunctive norms information – that people should protect their skin from the sun – was used with some of the participants. Descriptive norms information – that 85% of Southern California college students are using sunscreen regularly – was also used with some of the young adults. An assessment was completed immediately following the intervention, and a surprise follow-up was conducted one month after the session.

As anticipated, a greater percentage of those who received the injunctive and descriptive norms information increased the frequency of sunscreen use following the intervention compared to those who received information on only one of the norms or imaging. Almost twice as many participants who received the UV photo or photo aging information increased sunscreen use on their face and nearly three times as many on their bodies. Inclusion of the social norms information resulted in even greater sun

protection intentions, and using both norms increased sun protection behaviors during the month after the intervention. Thus, it may be possible to increase the effectiveness of UV photo and photoaging interventions in decreasing skin cancer by sharing what people should be doing (injunctive) as well as what peers are actually doing (descriptive).

Effectiveness of Social Norms Media Marketing in Reducing Drinking and Driving: A Statewide Campaign

Perkins, H. W., Linkenbach, J. W., Lewis, M. A., & Neighbors, C. (2011).

Social norms marketing is an approach for addressing public health issues that has received much study but less application. The goal of the strategy is to correct misperceptions about and thus reduce the prevalence of harmful behaviors such as underage drinking and drug use. Functionally, information is disseminated about accurate norms, typically in the form of flyers, posters, news ads, and electronic distribution channels. Social norms marketing has been particularly helpful in reducing drinking, primarily in adolescent and college student populations. However, few published studies have extended to behavior changes in the general population.

This study was designed to evaluate a statewide social norms media marketing campaign to reduce drinking and driving by young adults between the ages of 21 and 34 in Montana. Regions of the state were assigned to one of three groups: an intensive social norms campaign, a buffer, and a control group. The social norms campaign area consisted of fifteen counties in western Montana. These counties received a high dosage of media, including television and radio messages. The buffer area was used because there was no way to contain the dissemination of information at the border of the intervention (campaign) area. The control group received minimal to no messages intended for the campaign.

Additionally, fear-producing messages were eliminated or restricted in the campaign counties, while counties outside the intervention area continued business as usual, employing popular fear-based media messaging. Fear-based efforts may solidify misperceptions about the prevalence of impaired driving, thereby reducing an initiative's effectiveness. In order to maximize potential for success, this factor was eliminated in the campaign counties.

The media campaign ran for 15 months and was comprised of television, radio, print and theater ads, posters, and promotional gifts. Messaging consistently highlighted positive behaviors; e.g., that most young adults do not drink and drive. Target participants were surveyed four times, once prior to the campaign, once during, once at the end, and once following the intervention. Participants were asked about whether they saw the communications, their perceptions of the normative behavior, and their personal attitudes and behaviors.

Results showed that, overall, the campaign exposed the focus population to its messages and reduced misperceptions. Those in the campaign counties believed the average peer had driven significantly less often within one hour of drinking than those in the control counties.

What about attitudes and behaviors? The study revealed that the percentage of young adults in the intervention counties who reported driving within an hour of drinking was reduced following the campaign by 2%, whereas increased in the control counties by 12%. Results also show that the percentage of individuals in the intervention counties who reported they always used a designated driver increased following the media campaign. There was a drop in control counties (contributing to a 15% overall difference between the two areas). Similar findings occurred related to support for changing the blood-alcohol content legal limit to .08% following the campaign. With the use of modeling, the predicted effect of the campaign on personal drinking and driving was that the behavior would be reduced by 43%.

These results provide strong support for the effectiveness of large scale social norms marketing campaigns. Key factors to the success of such strategies are that the intended audience actually views or hears the message so that recall occurs, and that perceived norms are changed. Results in this study showed that the campaign was successful in that behavior changes closely followed perception changes. Perhaps most important is the scope and intensity of the media campaign. Without a concentrated intervention, messages in a campaign are a small percentage of what people are exposed to; the dosage of communication must be high.

Overall, social norms marketing can be effective in changing drinking and driving behaviors in young adults and provides an effective approach to addressing other public health issues.

Using social norms to reduce bullying: A research intervention among adolescents in five middle schools

Perkins, H. W., Craig, D. W., & Perkins, J. M. (2011). Using social norms to reduce bullying: A research intervention among adolescents in five middle schools. *Group Processes & Intergroup Relations*, 1-20.

Studies show a prevalence of bullying among adolescents, particularly in school settings. Bullying has several harmful consequences, including shootings, suicide, and other violent and psychosomatic effects. Many risk factors have been identified as to why some people are victims and others perpetrators of bullying. Another set of risk factors – peer norms and perception of peer norms – require attention and research. Decades of examination have revealed a strong tendency of people to conform to peer norms; research on adolescents' health has singled out peer influence as critical in regards to alcohol, drug, and tobacco use. Given that bullying is a relational process that involves domination, victimization, and often bystanders, it stands to reason that norms, or norm perceptions, would play a role in the development of these dynamics.

Before this one, no studies had examined the accuracy of student perceptions of bullying norms; further, no study had reported an intervention to correct misperceptions as a means to reduce bullying. This study sought to consider the extent to which misperception about bullying exists in perceived norms, the degree of association between perceptions of the norm and personal involvement in bullying, and the impact produced by disseminating information about actual norms about bullying. Social norms theory predicts that by reducing misperceptions and increasing the number of target individuals with accurate information about actual norms, occurrences of problem behaviors will be reduced. Social norms interventions seek to turn the process around by communicating the truth about positive norms based on data drawn from the target population, in this case, adolescents.

Students between the ages of 11 and 14 from five middle schools in New Jersey participated in the study. Four of the schools were very large middle schools, and one was mid-sized. Three were located in suburban settings, one was in a combined urban and suburban area, and one was rural. Three were largely homogenous and two had a high diversity of racial composition. Data was collected via survey. Students were asked about bullying behaviors, their own experiences and perceptions of norms, pro-bullying attitudes, reporting bullying, and whether they recalled the poster material relating to this study.

The intervention consisted of providing students with the results of the survey by conveying actual positive norms, which the survey revealed to be widely misperceived. Social norm messages about the prevalence of positive behavior were created for each school based on its data. For example: "9 out of 10 ___ Middle School students agree that students should not threaten to hit another student even if they don't actually hit the other student." Posters did not display negative messages, only positive images and information.

The campaign was carried out for 1-1/5 years, depending on the school. Exposure levels to the campaign were strongly correlated to overall change experienced. The intervention to reduce misperceptions about bullying was the key to post-intervention reduction in bullying. The research found that students had been grossly overestimating the prevalence of bullying and overestimating the support for it in their perceptions of the norm for peer attitudes.

The predicted result of the intervention was exactly what was observed in comparing pre- and post-intervention data. Results showed significant reductions in problematic misperceptions of the prevalence of bullying and of peer support for bullying and simultaneous reductions in personal bullying behaviors and victimization experiences. Students were also more supportive of reporting bullying to school authorities and parents.

All five schools in the study demonstrated significant positive changes. The perception of peer norms is a strong determinant of personal attitudes and behaviors, suggesting that interventions to reduce misperceptions can help reduce problem behaviors.

Using social norms to reduce alcohol and tobacco use in two Midwestern high schools

Haines, M. P., Barker, G. P. & Rice, R. (2003). Using Social Norms to Reduce Alcohol and Tobacco Use in Two Midwestern High Schools. In H. W. Perkins (Ed). *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians.* San Francisco, CA: Jossey-Bass, 2003.

A growing number of studies suggest that the social norms approach is effective in reducing alcohol use among college students. Research also shows that the methodology may work in high school settings, as adolescents overestimate alcohol and cigarette use among middle and high school age students. Importantly, overestimation of peer use is a predictor of alcohol and cigarette use.

A social norms media campaign was chosen as an intervention strategy by a Midwestern community to reduce alcohol and cigarette use by students at two area high schools. The strategy was modeled on a campaign that significantly reduced consumption at Northern Illinois University, except that at the high schools the norm was nonuse (unlike at the University, where it was moderate or safe use), and parents and teachers, not just students, were targeted. Thus, the campaign was community-based rather than focusing on a sub-population and its goal was to reduce the overestimation by all three groups of student consumption, and determine whether this then resulted in a reduction of alcohol and tobacco use.

The study involved four stages: data collection, development of intervention strategies, implementation, and evaluation. The data collection consisted of surveying the students, parents, and teachers. Intervention strategies involved the use of various media to correct overestimation of consumption by disseminating the message that most students do not drink or smoke as well as messages modeling protective behaviors students use to avoid consumption. Implementation meant that parents, teachers, and students viewed ads, posters, direct mailings, educational information, and pamphlets and flyers. Radio ads aired as well. To evaluate effectiveness of the intervention, follow up surveys were done. The perception of parents, teachers, and students as to the number of students/peers getting drunk or smoking in the last 30 days significantly declined. Actual use also declined.

This research showed that the social norms media campaign led to a reduction in all three groups' overestimation of peer alcohol and cigarette use and, most importantly, a reduction in actual consumption. The study was additionally significant in that it was the first project to apply this approach on a community level (targeting three groups). National data indicate that adolescent alcohol and cigarette use continues to be a problem, with traditional prevention programs showing mixed results or little-no

impact. The success of this research provides new hope in the field for addressing alcohol and tobacco consumption in adolescents, and possibly other issues such as traffic safety, violence prevention, literacy, and bullying.

APPENDIX D: IS THE PCN PROCESS AN EVIDENCE-BASED STRATEGY?

PCN is a framework that incorporates different change-oriented strategies.

SAMHSA (2009) offers three definitions of evidence-based strategies. The following is a description of how the PCN approach fits within these definitions:

1. Inclusion in Federal registries of evidence-based interventions
   o PCN is not currently included on one of the Federal registries
2. Reported (with positive effects on the primary targeted outcome) in peer-reviewed journals
   o Emerging and in-process depending on the issue
3. Documented effectiveness supported by other sources of information and the consensus judgment of informed experts, as described in the following set of guidelines:

   o Guideline 1: The intervention is based on a theory of change that is documented in a clear logic model or conceptual model.

       ▪ Social norms theory is an established theory of change documented in both group and individual interventions.

   o Guideline 2: The intervention is similar in content and structure to interventions that appear in registries and/or the peer-reviewed literature.

       ▪ PCN is based on social norms theory, which is the core element of the program "Challenging College Alcohol Abuse" which is on the National Registry of Evidence-based Practices and Programs (NREPP) as implemented by Dr. Linkenbach.

   o Guideline 3: The intervention is supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a consistent pattern of credible and positive effects.

       Linkenbach, J.W. and Perkins, H.W. (2005). MOST Of Us Prevent Drinking and Driving: A Successful Social Norms Campaign to Reduce Driving after Drinking among Young Adults in Western Montana. A publication by the National Highway Traffic Safety Administration—U.S. Department of Transportation. DOT HS 809 869.

       Linkenbach J. and Perkins H.W. (2003). Most Of Us® Are Tobacco-Free: An Eight-Month Social Norms Campaign Reducing Youth Initiation Of Smoking In Montana. In H.W. Perkins (Ed), The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians. San Francisco: Jossey-Bass.

   o Guideline 4: The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review; local prevention practitioners; and key community leaders as appropriate, e.g., officials from law enforcement and education sectors or elders within indigenous cultures.

Source: Center for Substance Abuse Prevention. Identifying and Selecting Evidence-Based Interventions Revised Guidance Document for the Strategic Prevention Framework State Incentive Grant Program. HHS Pub. No. (SMA)09-4205. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, 2009.

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