The utilisation of cultural change to improve organisational effectiveness: an exploratory study of three drug and alcohol agencies

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THE UTILISATION OF CULTURAL CHANGE TO IMPROVE ORGANISATIONAL EFFECTIVENESS - AN EXPLORATORY STUDY OF THREE DRUG AND ALCOHOL AGENCIES

A minor thesis submitted in partial fulfilment of the requirements of the award of the degree of

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GARRY LAKE

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This thesis explores how organisational cultural change can be utilised to improve the effectiveness of three drug and alcohol agencies. The thesis is written in two distinct parts.

The first part of the thesis creates a theoretical framework for understanding organisational cultures and organisational cultural change. This is accomplished by outlining the significance of organisational culture for management theory and practice, tracing the origins of the concept of culture through the anthropological and management literature, developing a definition of organisational culture which combines cognitive/affective, behavioural and material elements, defining and classifying organisational subcultures and analysing the mechanisms which generate subcultures in organisations, describing the characteristics of organisational cultures and developing a model of organisational cultural change.

The second part of the thesis utilises the model of organisational cultural change to explore how organisational cultural change can improve the effectiveness of three drug and alcohol agencies. The study involved interviews with the managers of the three centres and the Director who was in charge of all three centres, and the administration of a questionnaire to the staff and managers of the three agencies.
The study found that the staff and managers were able to identify organisational cultural factors as important in improving performance, motivation and job satisfaction. The study also found that there were core cultural elements which were seen as essential for the effective functioning of the three centres, as well as cultural factors which were specific to each centre.

Finally, the wider implications of the study for management theory and practice were discussed.
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CHAPTER 1

INTRODUCTION

Organisational culture and corporate culture have become a mandatory part of management texts on organisational behaviour and organisation development. Over the past decade, there has been a considerable body of literature, mainly in the form of journal articles, on the subject. Despite this extensive and growing quantity of literature, culture in the organisational context is still viewed as a nebulous concept without any clear consensus as to its definition and meaning.

This thesis explores the origins, nature and usefulness of organisational culture to management theory and practice. This thesis is written in two distinct sections. The first section of the thesis creates a theoretical understanding of organisational culture and organisational cultural change. In this section, I will examine the usefulness of organisational culture to management, trace the origins of organisational culture in the anthropological and management literature, define the meaning of organisational culture, describe its characteristics and develop a model of organisational cultural change.
In the second section, I will use this model to explore the potential for organisational cultural change in three drug and alcohol agencies. This study will assess the usefulness of the model and provide valuable insights into how organisational cultural change can improve the effectiveness of small drug and alcohol teams. I will also discuss the wider implications of this study.
CHAPTER 2

THE IMPORTANCE OF ORGANISATIONAL CULTURE

TO MANAGEMENT THEORY AND PRACTICE

The significance of organisational culture in the management of organisations has only relatively recently been widely recognised. It is important for the following reasons:

(a) An understanding of organisational culture can increase our knowledge of how organisations function and evolve, and the behaviour of individuals and groups within organisations.

(b) An understanding of organisational culture will enable us to introduce planned organisation development and change programs more successfully, and to anticipate and overcome resistance to change.

(c) An understanding of organisational culture will open new avenues to change organisations to achieve desired ends.

(d) An understanding of organisational culture will enable us to mobilise forces within organisations to make organisations more efficient and effective.
Human cultures have developed historically with the evolution of humanity and have affected the evolutionary process. Some early manifestations of culture were tools, the development of language, art, kinship systems, food production, belief systems, and later the growth of cities, empires and nations.¹

The term "culture" first appeared in Germany in the latter part of the eighteenth century.² The German word "KULTUR" was used by an intellectual movement which attempted to portray the development of humanity in stages towards a more advanced civilisation. "KULTUR" meant an advanced stage of enlightenment in the context of the evolution of civilisation.

The German word "KULTUR" was adopted into the English language as "culture" by Edward Tylor in 1871.³ Tylor was one of the founders of the discipline of anthropology. He introduced the concept of culture by defining it as:

"that complex whole which includes knowledge, belief, art, law, morals, customs and any other capabilities acquired by man as a member of society."⁴
The systematic study of culture commenced in the middle of the nineteenth century with the establishment of anthropology as a formal discipline. At this time, the first anthropologists attempted to classify cultures on an evolutionary continuum from what they perceived to be the most primitive to the most advanced, based on various criteria, e.g. the development of technology (Morgan) or the evolution of reason and science (Tylor). However the unilineal evolutionary theorists who saw all cultures as passing through their stages sequentially, looked at cultures through an ethnocentric bias. They saw their own society as the most advanced and superior culture.

Contemporary cultural anthropology has developed three distinctive traditions, each of which has its own perspective on culture and cultural change. These are; the American school of cultural anthropology, the British school of social anthropology and the French school of structuralism.

(a) The American School of Cultural Anthropology

This school emphasises the relationship between culture and the physical and geographic environment. This tradition was greatly influenced by the needs of museums in the late nineteenth century and the early twentieth century for artifacts and the collection and classification of customs and beliefs by geographic
areas. Cultural change is seen as the result of diffusion of beliefs and technologies from one culture to another, or adaptation of cultures to changing environments.

(b) **The British School of Social Anthropology**

This school originated from the founders of the discipline of sociology in the nineteenth century who developed their insights and theories in response to the industrial revolution in Western Europe. It was also influenced by the needs of British colonial administrations to control their empire through existing native networks and structures. The primary emphasis of social anthropology is the internal dynamics of culture. Culture is viewed as a coherent, integrated system comprising of interacting, interrelated parts. Beliefs, customs, institutions and forces within a culture are analysed in terms of their psychological and social functions. Cultural change is seen as the product of social forces, conflict or the interaction between cultures.

(c) **The French School of Structuralism**

This school was formalised by Levi-Strauss. All aspects of culture, cultural change and cultural diversity are seen as the manifestation of underlying inherent structures of the human mind which are
universally shared by all people. Cultural phenomenon are analysed and understood in terms of these underlying cognitive structures which are uncovered and reapplied to different cultural contexts.

**Cultural Perspectives and Organisational Theory**

The origins of the impact of organisational culture on management theory and practice can be traced to the Hawthorn Studies carried out at the Hawthorn Works of the Western Electrics Company in Chicago (U.S.A.). Between 1924 and 1926, a number of studies were carried out to ascertain the effects of changes in lighting on work groups. When the results failed to show a simple relationship between light intensity and productivity, Henry Mayo and a team of social scientists from the Harvard School of Business Administration were brought in to conduct further experiments on work groups which lasted for five years. Through studying work groups and interviewing over 21,000 employees, Mayo and his associates found that intergroup and social relationships, and the interest taken in the groups by managers and researchers, were important factors in determining the productivity of work groups. In the majority of groups studied, output increased irrespective of whether working conditions improved or declined and work was determined and controlled by group norms.
The Hawthorn studies demonstrated the importance of human relations in the work environment. This precipitated a human relations movement within management which focussed on individual, interpersonal and social factors in organisations and their relationship to motivation, job satisfaction and work performance.

In the late 1940's, Elliot Jaques and a team from the Travistock Institute utilised a cultural analysis of an organisation in conjunction with a group based change program at the Glacier Metal Company in London. Jaques detailed this project in a book titled "The Changing Culture of a Factory". In the 1950's and 1960's there were undercurrents of cultural perspectives in the analysis of organisations in both the sociological and management literature. However, these insights were not fully developed until the concept of organisational culture began to emerge in the management literature in the 1970's. It was preceded by the concept of organisational climate which focussed on individual perceptions and feelings about organisational characteristics and attributes. In the 1980's organisational culture has become an important tool for understanding and improving organisations.
NOTES


3 Ibid.


5 A discussion of the contributions of Morgan and Tylor to Anthropology is found in M.C. Howard, *Contemporary Cultural Anthropology* 2nd ed. (Boston: Little Brown and Company, 1986), Ch.2.


"Organisational culture" and "corporate culture" are used synonymously in the management literature. I will use the term "organisational culture" in my thesis which will incorporate the term "corporate culture".

Since Tylor's definition of culture, there have been numerous definitions of culture proposed, usually emphasising specific aspects of culture. The attempts to define culture in the anthropological literature have been matched by more recent attempts to define culture in the management literature.

Kroeber and Kluckhohn analysed 161 definitions of culture in the anthropological literature.\(^1\) They classified these definitions into 7 categories which were:


GROUP B: HISTORICAL - Emphasis on Social Heritage or Tradition.

GROUP C: NORMATIVE - Emphasis on Rule or Way...Ideals or Values Plus Behaviour.

GROUP D: PSYCHOLOGICAL - Emphasis on Adjustment, on Culture as a Problem Solving Device...on Learning...on Habit...[and] Purely Psychological Definitions.

GROUP E: STRUCTURAL - Emphasis on the Patterning or Organisation of Culture.

GROUP F: GENETIC - Emphasis on Culture as a Product or Artifact...on Ideas...on Symbols...[and] Residual Category Definitions.\(^2\)

GROUP G: INCOMPLETE DEFINITIONS
Cultural anthropologists developed their conceptions and definitions of culture by studying small, homogeneous, stable, isolated and self contained native communities. Contemporary organisations exist within complex industrialised societies and in the case of multi-national corporations, across a number of societies. These societies are composed of diverse elements, shaped historically by social, economic, technological, religious and political forces which produce the institutional framework and accompanying values, beliefs and norms that create the culture inherent in a society. Change and transformation are an integral part of industrialised societies.

An organisation exists within the environment of the culture of a society and organisational members bring this culture with them to the work place, as well as their membership of sub groups based on socio-economic status, ethnic origin, religion, location, work experiences, professional training, political beliefs and other subcultures. This complicates the investigation and analysis of organisational cultures by raising the question of which aspects of an organisation's culture are unique, and which aspects are part of society's culture or subcultures. Those aspects of an organisation's culture which are rooted in the cultural
fabric of a society may be very resistant to change. However they may also be harnessed in the organisation's interests.

A comprehensive definition of organisational culture must contain three interrelated elements. These are:

(a) **Cognitive/Affective Elements**

This includes values, beliefs, assumptions, norms, ideologies, attitudes, expectations, feelings, myths, ideas, shared understanding and frames of reference.

(b) **Behavioural Elements**

This includes actions, interactions, jargon, styles of dress, standards of behaviour and presentation of self.

(c) **Material Elements**

This includes structures, objects, symbols, written material and artifacts.
Most definitions of organisational culture emphasise the cognitive/affective elements and are therefore inadequate. The following definition incorporates all of the above elements. I define organisational culture as:

"an interrelated whole, whose members have shared assumptions, values, beliefs and norms which affect the manner in which the members of a culture behave and interact, and which leads to the creation of objects and structures."

In addition to a dominant culture, an organisation may also contain subcultures. An organisational subculture is a group within an organisational culture which has its own distinctive values, beliefs, norms and patterns of behaviour which distinguish it from the dominant culture. There are three types of subcultures:

(a) **Enhancing Subcultures**

In this subculture members adhere to the core values of the dominant culture more fervently than the members of the dominant culture. A common example of an enhancing subculture is a group of junior or middle managers in an organisation.

(b) **Countercultures**

In this subculture members possess shared values, beliefs and norms which are opposed to the dominant culture. Countercultures often form around individuals in organisations.
(c) **Orthogonal Subcultures**

In this category of subculture members accept the core values of the dominant culture but have a distinctive set of values, beliefs and norms which do not conflict with the dominant culture. Orthogonal subcultures often form around tasks within an organisation.

Subcultures may form in an organisation around the senior management, in a vertical slice of the organisation (e.g. a department or division), in a horizontal slice of the organisation (e.g. around particular jobs or within hierarchial levels), by the creation of a designated work unit, around a profession (e.g. accountants or engineers) or through informal networks.

Processes within organisations can contribute to the formation of subcultures. These include:

(a) **SEGMENTATION AND DIFFERENTIATION** due to the way work is organised and reorganised within organisations which brings people together in organisations.

(b) **IMPORTATION** of new subcultures. This may be the result of mergers, acquisitions, or the addition of new work groups and departments.
(c) TECHNOLOGICAL INNOVATION which may destroy some subcultures, empower existing subcultures or create new subcultures. The culture and subcultures of an organisation have developed in conjunction with the kind and level of technology. The introduction of new technology will break and recreate the nexus between organisational culture and technology which can reshape subcultures within organisations.°

(d) IDEOLOGICAL DIFFERENTIATION which may occur in an organisation or a subculture when members develop competing ideologies in relation to aspects of their work. This split may lead to the creation of new subcultures.

(e) CONTRACULTURAL MOVEMENTS which create countercultures within organisations. This may occur when one or more of the following are present: blocked ambitions, poor rewards, inadequately trained workers and managers, individuals who are burned out, impersonal management, inadequate resources, outdated equipment, unrealistic performance expectations, overly authoritarian or inconsistent managers or a general level of dissatisfaction. Individuals may form a counterculture to express their grievances.

(f) CAREER FILTERS, where overly conformist management behaviour is encouraged and used as a preselection criteria for more senior management positions. This may result in the creation of enhancing subcultures.
(g) **INDIVIDUALS, ISSUES AND INCIDENTS** may facilitate the creation of subcultures. Subcultures may form around charismatic individuals. Issues and incidents can create schisms within organisations which lead to the formation of subcultures.

(h) **INSULARITY** of work groups or sections of the organisation due to geographic isolation, the protection of a unit by a powerful unit head or other boundary creating mechanisms. This insularity will promote the emergence of subcultures.7,8

**The Genesis of Organisational Cultures**

An organisational culture forms when a group of people come together to establish an organisation in order to achieve its mission, goals and objectives. In the initial period there is usually enthusiasm and a search for new methods and philosophies. There are some major influences in the formation of an organisation. The personality and leadership style of the founder and the senior management, are crucial influences on the development of the culture. Critical incidents which occur become the myths and folklore of the organisation. Once a culture has been established as a separate identity, it is resistent to change. An organisation's culture pervades every aspect of an organisation.
Those who join an organisation are socialised into the culture. Socialisation (sociological term) or enculturation (anthropological term) is the process by which individuals internalise the values, beliefs and norms of a group, organisation or society and make them their own. This is achieved in an organisation by formal and informal rewards and sanctions for compliance/non compliance with the dictates of the established culture. Once socialised, an individual becomes an agent of cultural transmission.
NOTES


2 The term "genetic" is used by Kroeber and Kluckhohn to denote "the factors that have made culture possible or caused it to come into existence" in A.L. Kroeber and C. Kluckhohn, *Culture, a Critical Review of Concepts and Definitions* (New York: Vintage Books, 1963), p.128.

3 Orthogonal is defined as "of, or involving right angles" in *The Concise Oxford Dictionary* (7th ed., 1982), p.721.


6 This relationship between technology and subcultures in organisations is adapted from the relationship between technology and society analysed in S. Hill, *The Tragedy of Technology* (Stanmore, Sydney: Pluto Press, 1988).


CHARACTERISTICS OF ORGANISATIONAL CULTURES

There are a number of characteristics with which organisational cultures are endowed. These characteristics enhance our understanding of the nature of organisational cultures. These characteristics are:

(a) Culture is cumulative.
(b) Culture is an interrelated whole.
(c) Culture is shared.
(d) Culture is learned and transmitted.
(e) Culture exists at different levels.
(f) Cultures have boundaries.
(g) Culture has a direction of impact.
(h) Culture has a strength of impact.
(i) Culture has a pervasiveness of impact.
(j) Culture is linked to other aspects of the organisation.
(k) Culture affects individual, group, and organisational work related outcomes.
(l) Culture is resistant to change.

I will examine each of these in turn.

(a) **Culture is Cumulative**

Organisational cultures develop historically from the commencement of organisations. Cultures are continually built upon as new events, changes in the
environment, internal organisational changes and changes in the membership of organisations create new additions to cultures, cumulatively building on the cultures already present. Organisational cultures are not fixed and static but are growing, evolving and dynamic entities.

(b) **Culture is an Interrelated Whole**

The content of a culture is an integrated and interrelated system, comprising of mutually interacting parts. One facet or component of a culture cannot be fully understood unless its relationship to the entire culture is comprehended. When one aspect of a culture undergoes change, it will affect other aspects of the culture, and in the case of a major change, the entire culture will undergo transformation.

(c) **Culture is Shared**

The cognitive/affective, behavioural and material elements of culture (incorporated into the definition of culture) are shared by the members of a culture. The sharing of culture permits the development and maintenance of patterns of culture.

(d) **Culture is Learned and Transmitted**

New members are incorporated into a culture by being socialised into it. Attitudes and behaviours of new organisational members which fit into a culture are
reinforced and encouraged, whereas attitudes and behaviours which are not culturally acceptable are discouraged and condemned. New organisational members learn the culture by internalising the values, beliefs and norms of the culture. Organisational culture is not something which a person or a group of people is constantly aware of. Nevertheless it affects the way an individual thinks, behaves and interacts with others. Eventually, a new socialised member becomes a socialising agent and transmits the culture by teaching it to others.

(e) **Culture Exists at Different Levels**

The conception of culture as a layered phenomenon has been proposed by a number of authors. Edgar Schein views culture as comprising three levels. In descending order of depth these are; a) artifacts (e.g. physical space, technology, written and spoken language, and overt behaviour), b) values and c) basic assumptions (concerning humanity's relationship to nature, the nature of reality and truth, the nature of human nature, the nature of human activity and the nature of human relationships). Kilmann, Saxton and Serpa also propose a three level model of culture. Again in descending depth these are; a) behavioural norms b) hidden assumptions and c) human nature. The deepest level of culture is described as:

"the collective manifestation of human nature - the collection of human dynamics, wants, motives, and desires that make a group of people unique."
At its deepest conceivable level, organisational culture can be seen as what the psychoanalyst Carl Jung termed a "collective unconscious" which is linked to the collective unconscious of humanity.⁴

All of the levels discussed in this section are interrelated and each level is a manifestation of the level beneath it.

(f) **Cultures have Boundaries**

A culture is a network of social relations within a social boundary system. A social boundary separates the members of a culture or subculture from all other persons. A culture can be firmly bounded or it can have permeable boundaries, permitting individuals and influences to pass across it.

Yehudi Cohen has outlined the major characteristics of firmly bounded social systems. These are:

(a) In a firmly bounded network, members have interchangeable roles.

(b) Firmly bounded social systems are less likely to tolerate dissent than less firmly bounded systems.

(c) The stronger the boundaries maintained by a culture, the weaker are the boundaries of subcultures contained within the culture and the more homogeneous is the membership of the culture.⁵
A firmly bounded culture or subculture systematically excludes people and influences, and has ritualised admission into it by a rite of passage. The firmness or permeability of a culture or a subculture has implications for boundary spanning activities and attempts to change organisational culture.

(g) **Culture has a Direction of Impact**

The direction of impact is the direction which the culture is influencing individuals, groups and the organisation. This direction can be in support of an organisation's mission, goals and objectives, in opposition to achieving its mission, goals and objectives or in conflicting directions due to subcultures within the organisation.

(h) **Culture has a Strength of Impact**

The strength of impact is the degree to which a culture exerts pressure on its members to comply with the culture. A strong culture will exert a high level of pressure, whereas a weak culture will exert a mild level of pressure on its members.
(i) **Culture has a Pervasiveness of Impact**

The pervasiveness of impact is the extent to which a culture is shared by its members. A highly pervasive culture will result in a homogeneous culture. A low degree of pervasiveness will result in cultural members behaving, and viewing the culture, differently, and forming subcultures.

(j) **Culture is Linked with Other Aspects of the Organisation**

The culture of an organisation is interlinked with other organisational variables which shape the organisation. Peters and Waterman outline the relationship between culture and other organisational variables in the Mckinsey 7-S framework. The seven interrelated variables of the Mckinsey 7-S model are: "structure, strategy, people, management style, systems and procedures, guiding concepts and shared values (i.e. culture), and the present and hoped-for corporate strengths or skills". Peters and Waterman make culture the central focus of their model. The culture of an organisation cannot be seen in isolation from the rest of the organisation.
(k) **Culture Affects Individual, Group and Organisational Work Related Outcomes**

The culture of an organisation influences the manner in which individuals and work groups carry out their jobs as well as their attitudes and values towards their work. This affects work related outcomes such as motivation, job satisfaction and work performance.

(1) **Culture is Resistent to Change**

Once an organisational culture has been established, it assumes an identity of its own which is resistent to change. Changing the culture of an organisation ultimately involves changing how organisational members think, behave and relate to each other and the organisation. Assessing and changing inappropriate cultures are skills which managers and organisation development consultants need to acquire in order to maintain and improve organisational efficiency and effectiveness in rapidly changing social, economic, technological and political circumstances.

Having described the major characteristics of organisational cultures, I will now examine the process of changing the culture of an organisation.
NOTES

1 E.H. Schein, Organisational Culture and Leadership, A Dynamic View (San Francisco: Jossey-Bass Publishers, 1987), Ch.4.


3 Ibid., p.7.


6 Boundary spanning activities are activities carried out by persons whose role is to regulate activities at the interface of organisational boundaries e.g. between work groups or between departments.


8 Ibid., p.9.

9 Peters and Waterman condense the wording of these seven variables into: structure, strategy, staff, style, systems, shared values and skills.
Organisations in Australia in the late 1980's function within an industrialised society which is undergoing social, economic, technological and political changes. This creates a turbulent environment for organisations to operate within. Organisations must learn to adapt and succeed within this rapidly changing environment. For organisations to change, organisational members must be amenable to changes which take place. Any program of organisation development and change ultimately depends on the willingness and ability of people to change.

Organisational cultures and subcultures, once established, are aspects of organisations which may be resistent to change. However, changing an organisation's culture and subculture(s) may be crucial in ensuring the efficiency, effectiveness and even the viability of an organisation.

I would like to propose a model of organisational cultural change which is depicted in the following diagram (Diagram 1). This model is an expanded version of common cultural change themes described by Edwards and Kleiner.¹

My model commences with indicators which demonstrate a need for organisational change.
A MODEL OF ORGANISATIONAL CULTURAL CHANGE

1) A period of organisational stability
   a) Indications of a need for organisational change.
   b) Type of change required - is it cultural or other?

   Non cultural organisation development
   c) Decision to change the culture
   d) Diagnose existing culture

   e) A vision of a new culture.
   f) Cultural change technologies
   g) Participation
   h) Resistance

   k) Evaluation and Reassessment

   j) Realign organisational variables

   i) Organisational Performance MOTIVATION SATISFACTION

   Affects
The components of the model in sequence are:

(a) **Indications of a Need for Organisational Change**

Adverse trends within an organisation, or its relationship to its environment, signal the need for the organisation to change. These adverse trends may include declining profitability, declining performance, declining morale, increasing dysfunctional conflict, declining competitive advantage, changing environmental forces adversely impacting on the organisation or a realisation that improvements will benefit the organisation.

(b) **Type of Change Required - Is it Culture which Needs to be Changed?**

A preliminary assessment of the types of changes required will need to be made. As culture is one of the more difficult aspects of an organisation to modify, it may be more appropriate to achieve desired changes by manipulating other organisational factors such as leadership styles, structure, systems and procedures, job design or the strategy of the organisation. It may be necessary to simultaneously attempt to change two or more organisational factors which may include cultural change as one of the factors targeted for change.
There have been some attempts to define the conditions which indicate the need for organisational culture to be changed. Robert Allen suggests that there are three key indicators which are:

• Is the problem chronic?
• Is the problem widespread?
• Has the problem resisted prior change efforts?"²

Bro Uttal quotes Allan Kennedy in describing five reasons to justify changing organisational cultures. These are:

if your company has strong values that don't fit a changing environment; if the industry is very competitive and moves with lightning speed; if your company is mediocre or worse; if the company is about to join the ranks of the very largest companies; or if it's smaller but growing rapidly. Otherwise, don't do it.³

(c) The Decision to Change the Culture

Once the decision to change the organisation's culture has been made, there are two important considerations which must be addressed. The first consideration is the time frame for the change process, whether it is necessary to accomplish the changes in the short term or over a longer period of time. The second consideration is the extent of the changes, whether it is a revolutionary change requiring the replacement of the whole or major part of the existing culture, or an incremental change which builds on the existing culture.⁴
(d) **Diagnose the Existing Culture**

Before undertaking an organisation development program to change organisational culture, a comprehensive analysis of the existing culture, the culture's relationship to other organisational factors and the environment, the existing culture's potential for change and its impact on individuals, groups and the organisation will need to be conducted.

This cultural analysis should include: the history of the organisation; the impact of the founders and senior management; critical incidents and major changes which have shaped the culture; the effects of environmental factors and stakeholders; identifying subcultures and their relationship to the dominant culture and other subcultures; shared values and beliefs; the effect of the culture and subcultures on organisational outcomes such as work performance, motivation and job satisfaction.

(e) **A Vision of a New Culture**

For cultural change to take place, a conception of a more desirable culture must be formulated. This vision may come from the chief executive or senior management. Alternatively, it may be a collective vision which emanates from the participation of organisational members at all levels within an organisation in formulating the vision of the new culture.
Allen and Kraft\(^5\), and Kilmann and Saxton\(^6\) have designed instruments to establish differences between the existing culture and the collective vision of a desired culture by utilising questionnaires to assess organisational norms.

(f) **Cultural Change Technologies**

As an organisation's culture is interlinked with other aspects of an organisation, organisation development techniques and methods which attempt to change any part of an organisation will invariably indirectly affect an organisation's culture. However I will focus on methods which attempt to change organisational culture directly.

I will examine five cultural change technologies. Although this is not an exhaustive list of cultural change technologies, the technologies which I will describe are prominent in the literature, have a practical application and have the potential to modify organisational culture in a substantial way. The five cultural change technologies are;

(1) **Regulating Norms**

Norms are unwritten shared rules which govern behaviour. Kilmann and Saxton have developed the Kilmann-Saxton Culture-Gap Survey to assess the difference between perceived existing norms and desired norms. They have termed these differences "culture gaps". The instrument identifies culture gaps on 4 scales which are Task Support, Task Innovation, Social
Relationships and Personal Freedom. Once the desired norms have been identified, a commitment is made by all work group or organisational members to internalise and comply with the new norms. This commitment process can be facilitated by organisational members taking responsibility for monitoring compliance with the new norms. Individuals are allocated specific norms to ensure breaches are brought to the attention of those who transgress the norms.

Allen and Kraft have constructed the "As I See It - Norm Indicator For Organisations" instrument which can also assess the difference between existing and desired norms. They utilise an Action Research model to change the normative framework of an organisation. They have called their approach "The Normative Systems Model For Cultural Change". Changes are implemented on four dimensions. These are; on the individual level (relating individual behaviour to desired norms), the group level (reinforcing desired behaviour), leadership (developing appropriate leadership skills and supporting desirable behaviour) and the organisational level (changing policies, procedures, rewards and officially recognising desired behaviour).

(2) Symbolic Management

A new culture is communicated and transmitted throughout an organisation by the actions, behaviour and statements of the chief executive and management which symbolises the desired organisational culture. Through symbolic management, the senior management takes the lead in creating, reinforcing and supporting the new culture
and providing a role model for organisational members to emulate. All aspects of the organisation must be redirected to achieve congruence with the reshaped culture.  

(3) Recruiting and Socialising New Organisational Members and Terminating Cultural Deviants

As some managers, supervisors and workers will be unable or unwilling to adapt to a new culture, they may have to be replaced. New organisational members will have to be recruited not only with relevant occupational qualifications, but also with appropriate personality characteristics to match the new culture. Emphasis will need to be placed on induction, training, coaching, mentoring and career/management development of new recruits in order to socialise them into the desired culture. As organisational membership changes, a new organisational culture can be consolidated.  

A relevant consideration in recruiting new organisational members into an organisation which is involved with the process of cultural change is to recruit individuals who are flexible and adaptable enough to undergo further cultural changes in the future. Bergwerk has identified key indicators which determine whether individuals can adapt to changing conditions. The flexible worker is characterised by reliability,
quality consciousness and effort, whereas the flexible manager is characterised by a proactive disposition, initiative, self analytical skills and people skills.\textsuperscript{12}

(4) Utilising Rites and Rituals to Change Culture

Introducing new rites and rituals or changing existing ones can facilitate the transition to a new culture. Trice and Beyer describe six organisational rites which can be used to change organisational cultures. These are: rites of passage (an ordeal by which an outsider becomes accepted as a group member), rites of degradation (the expulsion or discrediting of a group member), rites of conflict reduction (the ritualisation of conflict to keep it manageable), rites of renewal (regeneration of existing parts of the organisation), rites of integration (activities which encourage positive feelings towards the group or organisation) and rites of enhancement (celebration of group or organisational accomplishments).\textsuperscript{13}

(5) Changing Culture by Using Metaphors

A metaphor can be defined as "an explanation of one thing, the topic, in terms of another, the vehicle, where the topic and the vehicle share some characteristics, but not others".\textsuperscript{14} Krefting and Frost suggest that metaphors can be used to create organisational cultural change by clarifying organisational issues, illuminating aspects of the organisation's unconscious and working towards solving organisational cultural problems.\textsuperscript{15}
Morgan uses the metaphors of machines, organisms, brains, cultures, political systems, psychic prisons, flux and transformation and instruments of domination to create useful perspectives on how organisations function. Smith and Simmons describe how the fairy tale of Rumpelstiltskin encapsulated the problems of a new psycho-educational facility for emotionally disturbed children.

The use of metaphors as an organisation development tool to change organisational cultures is still in its formative stages. However it has the potential to tap into and change organisational cultures at a deep level.

(g) Participation in the Cultural Change Process

In order for organisational cultural change to be implemented successfully, participation and involvement is necessary to ensure a commitment to a new culture. Arnstein has developed a model of participation to assess levels of participation. Arnstein developed her model from studying community development projects in the United States of America, however it is equally applicable to an industrial setting (which is noted in her article). Arnstein's "Ladder of Participation" is shown in the following diagram. I have substituted "worker" for "citizen" and added the implications for organisational changes.
ARNSTEIN'S LADDER OF PARTICIPATION

8. WORKER CONTROL  Workers control the entire change process.

7. DELEGATED POWER  Responsibility for segments of the change program is delegated to groups of workers.

6. PARTNERSHIP  Decision making power is shared between management and workers.

5. PLACATION  Committees or task forces are established to plan and advise, however management reserves the right to make final decisions.

4. CONSULTATION  Asking for views and opinions permits some degree of influence.

3. INFORMING  Informing workers of changes permits some understanding of what is taking place.

2. THERAPY  Participation is permitted to defuse hostility which may arise from changes.

1. MANIPULATION  People are co-opted onto committees or advisory groups to change their views or gain their support.
Arnstein's model depicts decreasing levels of participation. Some participation is required for a successful cultural change program. This model is useful for distinguishing genuine forms of participation from tokenism and non participation. Although very few organisations in Australia would be prepared to give workers complete control over a process of organisational change, "delegated power" and "partnership" may be seen as feasible for many organisations. However there may be some circumstances where lower levels of participation may be considered appropriate.

Another important question is the range of organisational stakeholders which should be included in a cultural change program. Mitroff defines organisational stakeholders as:

those interested groups, parties, actors, claimants and institutions - both internal and external to the corporation - that exert a hold on it. That is, stakeholders are all those parties who either affect or are affected by a corporation's actions, behaviour and policies.

Should customers/clients, suppliers, shareholders, government regulatory agencies, parent companies and affected communities be invited to participate in organisational change programs or should we limit cultural change programs to organisational members.

Resistance to change must be overcome if a cultural change program is to be successfully implemented and maintained. Kotter and Schlesinger have analysed the major reasons for resisting change in organisations, and approaches to deal with resistance to change.

They list the major reasons for resisting change as:

1) parochial self interest - anticipated loss as a result of change,
2) misunderstanding of the implications of change and/or a lack of trust between change agents and employees,
3) different assessments of the situation and remedies required, and
4) a low tolerance for change.

The methods of dealing with resistance to change proposed by Kotter and Schlesinger are:

1) education and communication,
2) participation and involvement,
3) facilitation and support,
4) negotiation and agreement,
5) manipulation and co-optation, and
6) explicit and implicit coercion.
(i) **Cultural Change and Organisational Outcomes**

The culture of an organisation influences individual and group attitudes and behaviour. A successful cultural change program will improve individual and work group outcomes such as performance, job satisfaction and motivation.

(j) **Realign Organisational Variables with the New Culture**

Organisational cultures are interlinked with other aspects of the organisation (this has been discussed in the previous chapter). If the newly created culture is to be sustained, other aspects of the organisation must be reoriented to reinforce the newly shaped culture. Using the Mckinsey 7-S model (described previously), we can realign other aspects of the organisation which are structure, strategy, skills, staff, systems and management style in support of the new culture.²¹

Different authors emphasise the links between culture and specific organisational variables as the most crucial factors in an organisation. Tichy postulates the need to align technical, political and cultural systems within organisations, and mission and strategy, structure and human resources within each of the three systems.²² Schwartz and Davis advocate matching strategy and culture.²³ Sethia and Von Glinow propose aligning reward
systems with culture\textsuperscript{24} and Harris emphasises the relationship between culture and human resource development.\textsuperscript{25}

(k) \textbf{Evaluation and Reassessment}

During, and after the completion of, the cultural change program, an evaluation of the cultural change process must be undertaken to gauge the success of the program. Quantitative and/or qualitative methods of evaluation can be utilised. Specific techniques may include interviews, questionnaires, observations, participant observation, unobtrusive measures and scientifically developed research instruments. After the changes have been completed and evaluated, a reassessment of the organisation's need for further changes can take place.

(1) \textbf{A Period of Stability Versus the Next Change Process}

Following a successful cultural change program, an organisation may enter a period of stability. Alternatively, internal organisational changes and/or external environmental changes may indicate an immediate necessity for a renewed process of change within an organisation. As we live in an era of rapid social, economic, political and technological change, periods of stability are likely to be short lived.
NOTES


6 R.H. Kilmann, Beyond the Quick Fix (San Francisco: Jossey-Bass Publishers, 1985), Ch.3.


8 This technique is described in R.H. Kilmann, "Five Steps for Closing Culture Gaps" in Gaining Control of the Corporate Culture, by R.H. Kilmann et al. (San Francisco: Jossey-Bass Publishers, 1986), pp.351-369.

9 Allen and Kraft, op. cit., Ch.4.


11 The need for recruiting and socialising organisational members to fit an organisational culture is discussed in E.J. Wallach, "Individuals and Organisations: The Cultural Match", Training and Development Journal, (February 1983), 29.


15 Ibid.


A study using the model presented in the previous chapter was undertaken to explore how cultural change can be utilised to improve the effectiveness of three drug and alcohol agencies. The research was a qualitative study of these three agencies using questionnaires and interviews. The methodology is described in detail in the following chapter.

The three agencies are part of the Illawarra Area Health Service's Drug and Alcohol Service. The Illawarra Area Health Service currently covers a coastal area from just north of Helensburgh to just south of Ulladulla on the N.S.W. south coast. A map of this area is contained in Appendix 1.

The three drug and alcohol centres which are located in Wollongong are:

(a) Kembla House Drug and Alcohol Service.
(b) Orana House Detoxification Unit.
(c) The Wollongong Methadone Maintenance Unit.
The History of the Illawarra Area Health Service's Drug and Alcohol Service

The Drug and Alcohol Service became a separate service in 1976 with the establishment of Kembla House. Prior to the establishment of Kembla House, drug and alcohol workers were stationed at Wollongong Community Health Centre which was a multi-disciplinary community health team. The impetus for the establishment of Kembla House came from lobbying from community groups and in response to some difficulties which were being experienced in relation to voluntary drug and alcohol agencies.

The first head of the service was a psychologist who instituted an approach to clients based on a caring attitude, an in-depth understanding of the causes of addiction, a compassionate but firm approach and a dynamic orientation to the development of services. She also promoted a broad framework for the services which included research, community education, public relations and linking in with other organisations, in addition to assessment, counselling and treatment of drug dependence. The broad framework and clinical perspectives are legacies which remain with the service.

By 1978, the team had become too large for its premises and was relocated to its present premises. A satellite service was established in Nowra in 1979.
In 1979, the current Director became head of the service. He originally had a narrow clinical focus. However he also gradually developed a broader approach. A prolonged period of conflict between the service head and some staff members commenced which lasted for several years. This conflict was over accountability and participation. It resulted in the formation of a counterculture. The staff members felt that there was insufficient participation in decision making, whereas the head of the service felt that there was insufficient accountability. The conflict was eventually resolved when some staff members left the centre, with the appointment of a team leader for Kembla House in 1986 and with the introduction of mechanisms for greater staff consultation.

In 1986 the Illawarra Area Health Service was created in a reorganisation of the N.S.W. Department of Health under the Area Health Services Act (1986).\(^1\) In 1987 the Illawarra Area Health Service assumed responsibility for the administration of Orana House which had operated since its foundation in 1982 as a voluntary agency, administered by a committee that received funding from the N.S.W. Drug and Alcohol Authority.\(^2\) The boundaries of the Illawarra Area Health Service were redefined by an incoming state Liberal Government in 1988.

In recent years, there has been a major influx of funds into the drug and alcohol field through the creation of a joint state and federal government
nationwide "Drug Offensive" which commenced in 1985. This has resulted in substantially increased funding for drug and alcohol services. In New South Wales, the Directorate of the Drug Offensive, which was established under the Drug Offensive Act (1987), administers these additional funds.\(^3\) The Wollongong Methadone Maintenance Unit was established with part of the additional Drug Offensive funding which was received by the Illawarra Area Health Service.

The influx of funds from the Directorate of the Drug Offensive has also resulted in an upgrading of equipment, some additional positions for Kembla House and the development of new centres. This expansion has taken place while the rest of the Illawarra Area Health Service has had its funding reduced.

The Administrative Structure of the Illawarra Area Health Service's Drug and Alcohol Service

The Illawarra Area Health Service is responsible for public sector hospital and community health services in its designated area. The Drug and Alcohol Service is part of the Community Health Service. Funding for the Drug and Alcohol service originates from the Directorate of the Drug Offensive, the A.I.D.S. Bureau of the N.S.W. Department of Health and the budget of the Illawarra Area Health Service.\(^4\) The following organisational chart (Diagram 2) depicts the formal organisational structure and lines of responsibility for the Drug and Alcohol Service.
ILLAWARRA AREA HEALTH SERVICE'S DRUG AND ALCOHOL SERVICE

Illawarra Area Health Service Board

Chief Executive Office

Six Directors of Operations, Corporate Services, Health Service Development, Finance, Medical Services and Nursing Services

Director of Community Health (Service Delivery)

Executive Officer of Community Health (Finance and Administration)

Director of the Drug and Alcohol Service

Team Leader
Kembla House

Staff
Kembla House

Staff
Needle Exchange Program

Director
Orana House

Staff
Orana House

Co-Ordinator
Methadone Unit

Staff
Methadone Unit

Team Leader
Nurse Consultant (Drug and Alcohol)
Nowra Community Health Centre

Team Leader
Drug & Alcohol Staff in the Shoalhaven Area

Team Leader
Adolescent Drug and Alcohol Service

Service Under Development

Team Leader
Adolescent Drug and Alcohol Service
NOTES

1 The Area Health Service Act (1986) is New South Wales state legislation which established Area Health Services in New South Wales.

2 The New South Wales Drug and Alcohol Authority has been reorganised and renamed the Directorate of the Drug Offensive.

3 The Drug Offensive Act (1987) is New South Wales state government legislation which establishes The Directorate of the Drug Offensive to replace the New South Wales Drug and Alcohol Authority. This Act outlines the structure, role and functions of the Directorate.

4 The A.I.D.S. Bureau funds a Needle and Syringe Exchange Program through The Illawarra Area Health Service, to prevent the spread of A.I.D.S. amongst intravenous drug users.
CHAPTER 8

METHODOLOGY

A qualitative research study was undertaken between May and August 1989 to explore the potential for organisational cultural change in the three drug and alcohol agencies. The first part of the study was an initial recorded interview with the persons in charge of the three centres and the Director of the Drug and Alcohol Service. The purpose of these initial interviews was to diagnose the existing cultures and to gather information on the centres. The initial interview questions are contained in Appendix 2.

The questions covered the history of the centre and the Drug and Alcohol Service, critical incidents and major changes which had taken place, environmental factors and stakeholders, subcultures, and beliefs and values which were held in common by the staff. As my occupational role is the team leader of Kembla House, the member of staff who is the relieving team leader was designated team leader for the purpose of this study.

The second part of the study involved issuing a questionnaire to the staff and team leaders of the three centres. The 12 item questionnaire is contained in Appendix 3. As the term "organisational culture" is not a commonly used or understood term, the term "work
"environment" was substituted for organisational culture. Although it is not an identical term, the pre-testing of the questionnaire demonstrated that it was broad enough to cover cultural factors when it was clarified in its first use in the questionnaire in question 4.

The original formulation of the questionnaire contained 9 questions. The reasons for the 9 questions were:

(a) To obtain a vision of a desired culture with comparisons to the existing culture (questions 4, 5 and 7). The desired culture was stipulated as one which was "realistically attainable" to eliminate fantasising.

(b) To assess how the envisaged ideal work culture would affect individual and team work performance, work motivation and job satisfaction (question 6).

(c) To determine which forces or factors are seen as impeding the attainment of a more ideal work culture (question 8).

(d) To assess how the respondents would rate their centre's overall work performance, work motivation and job satisfaction on a seven point scale from low (1 point) to average (4 points) to high (7 points) on each of the three variables (question 11).
(e) To obtain additional information on organisational culture by asking how the centre is perceived as being unique (question 1) and by providing an opportunity to express any additional cultural information by asking what the respondents liked most and least about their work and work environment (questions 8 and 9).

The Expansion of the Questionnaire

Approval was sought from the Director of the Drug and Alcohol Service to administer the questionnaire to his staff. After reading the initial 9 item questionnaire, he stated that it was weighted towards eliciting more negative than positive responses and did not permit staff to fully express their positive feelings towards the service. This highlights an inherent difference between academic research which relies on critical evaluations and the needs of managers to portray their organisations in a favourable light and avoid criticism.

In order to overcome this negative reaction to the questionnaire, three questions were added to provide staff with the opportunity to express positive feelings towards the service. These were question 2 (What do you like most about working for the Illawarra Area Health Service?), question 3 (What are the things you value most in a Team Leader/Co-ordinator/Director?) and question 12
(How does your centre contribute to combating drug and alcohol abuse in your community?). These three questions were basically dummy questions. However the responses were analysed for any additional cultural data. The use of dummy questions which do not interfere with the rest of the questionnaire may be a useful method of overcoming management's sensitivity to academic research. However, it is beyond the scope of this thesis to fully explore the implications of the use of dummy questions in research methodology.

The final questionnaire comprised 12 questions. Questions 3 and 4 had to be modified for the questionnaire administered to the managers of the three centres to make them relevant and to clarify the questions.1,2

Pre-testing the Two Instruments

The initial interview questions and the questionnaire were pre-tested. The initial interview questions were pre-tested on two managers of voluntary drug and alcohol agencies. One was the Director of Kadesh House which is a drug and alcohol rehabilitation centre situated at Berkeley, a southern suburb of Wollongong. The other manager was the Co-ordinator of the Adolescent Drug and Alcohol Service in Campbelltown. The questionnaire was pre-tested on two drug and alcohol workers at Kadesh House.
Following the pre-testing and modifications to the interview questions and questionnaire in accordance with the pre-testing responses, the instruments were ready for administration.

**The Final Interviews**

The third part of the study explored the potential for changing the cultures of the three drug and alcohol agencies towards more ideal organisational cultures which were described in the questionnaire responses by the staff of the centres. This involved a final interview with the heads of the three units and combined interview questions with rating assessments. The final interview which consisted of 4 questions is contained in Appendix 4.

The interview commenced by feeding back to each unit manager a composite picture of their own centre's ideal cultural vision compiled by extracting cultural information from the staff questionnaires. These composite visions are outlined in the following chapter.

In this final interview, the centre managers were asked the following questions:

(a) Whether the ideal culture described by their staff in the questionnaires was desirable for their centre. If it was, why was it desirable, or if not, why not (question 1).
(b) Whether the ideal culture described by their staff was realistically attainable. If not, why not. If it was, how could the centre achieve this ideal culture (question 2).

(c) Whether staff participation was necessary in a cultural change process and to rate the appropriate level of participation on a scale developed by Arnstein which was described in chapter 6. This question also asked for the reasons why the level of participation they had chosen was seen as the most appropriate for their centre (question 3).

(d) To choose methods which would be used to overcome resistance to change if a cultural change program was initiated. The choice was from a modified list of methods proposed by Kotter and Schlesinger which was outlined in chapter 6. For any additional methods, an "other-please specify" category was added to the list (question 4).

The final questionnaire was not pre-tested because the key concept of "ideal work environment" which was used as a synonym for "organisational culture" in the final interview, had already been pre-tested in the pre-testing of the questionnaire, guarantees of confidentiality for the subjects of the study meant that the composite cultural pictures could not be pre-tested (and therefore shared) outside each individual centre,
and because the final interview questions were much more straightforward than the initial interview questions and the questionnaire.

The Issue of Confidentiality

In order to maximise the possibility of eliciting complete and honest responses to the questionnaire, a guarantee that the responses would not be shared outside of the centre was given. Staff were told not to put their names on their questionnaires to avoid identification. Despite these measures, the staff at Kembla House decided to have their completed questionnaires retyped by the stenographer at the centre to ensure that I would not be able to identify my staff by their handwriting. Some of the staff at Orana House preferred to place their completed questionnaires in sealed envelopes to be collected at a later date to avoid identification.

The Response Rates for the Questionnaires

The response rates for Kembla House and the Methadone Maintenance Unit were 100% for each centre. The response rate for Orana House was 66 2/3%. The lower response rate for Orana House was probably due to internal conflicts which the centre was experiencing.
NOTES

1 Question 3 was altered from "what are the things you value most in a Team Leader/Co-ordinator/Director?" in the staff questionnaire to "what do you consider to be the most important attributes of a Team Leader/Co-ordinator/Director?" in the questionnaire administered to the managers of the centres.

2 The questionnaire administered to the centre managers had "for your centre" inserted into question 4 to clarify that the question referred to the centre's work environment and not the administrative environment of middle management in the Illawarra Area Health Service.


5 To clarify the methods of overcoming resistance to change, "education and communication" was changed to "education and persuasion", "facilitation and support" was changed to "encouragement and support", "negotiation and agreement" was changed to "negotiation and bargaining". These changed terms encapsulated the meanings proposed by Kotter and Schlesinger.

6 The response rate for Orana House includes the questionnaire completed by the Director of Orana House.
CHAPTER 9

RESULTS

I will examine the results of the interviews and the questionnaires for each of the three centres (Kembla House, Orana House and The Methadone Maintenance Unit). For each of the centres I will describe the centre, the collective vision of the ideal culture as seen by the staff of the centre, the obstacles to achieving the ideal culture and how the centre can move towards its vision of a more ideal organisational culture. I will then proceed to analyse the similarities and differences between the ideal cultures of the three centres and describe how the staff of the three centres perceive the importance of a more ideal organisational culture in improving organisational outcomes.

KEMBLA HOUSE DRUG AND ALCOHOL SERVICE

Kembla House is a multi-disciplinary community based drug and alcohol team located in Wollongong. The team was first established as a separate entity in 1976. In 1978 it moved to its present location. As described in Chapter 7, the centre has gone through a period of intense conflict which has had a major effect on the centre. The conflict was between the Director of the Drug and Alcohol Service who was requesting greater
accountability and some members of staff who desired greater participation in decision making. This conflict lasted for several years. It was finally resolved by the appointment of a team leader, through quality assurance activities which involved all the staff at the centre in reassessing service provision and the departure of some of the staff who were engaged in this conflict. At the time of this study, the centre was staffed by 2 psychologists, 2 counsellors, 1 nurse consultant, 1 community development officer, 1 health education officer/team leader, 1 clerical assistant and 1 stenographer.

Services provided by the team are:

a) treatment of drug dependence,
b) prevention of drug abuse,
c) training drug and alcohol workers, other health and welfare workers and volunteers,
d) research, and evaluation of drug and alcohol programs, and
e) developing drug and alcohol services in the Illawarra region and assisting in-patient drug and alcohol agencies with their programs.

The centre is primarily funded by the Illawarra Area Health Service. However the Community Development Officer is funded separately through the Directorate of the Drug Offensive. The centre has an orthogonal
subculture which comprises the 5 clinical staff. This subculture has developed because of their need to discuss cases and hold an additional clinical staff meeting each week.

The Vision of the Ideal Culture

The ideal culture is seen by the staff of the centre as comprising three components. These are:

(a) Interpersonal Relations

Staff and their ideas are valued, staff listen to one another, staff support each other and there is good communication between staff.

(b) How Work is Carried Out

Staff should act professionally, there should be a team approach and enough flexibility to meet staff's interests and the goals of the service.

(c) Shared Philosophy

There is a broad view of the causes of, and solutions to, drug problems, there is an agreed philosophy, staff should be idealistic and the service should be in touch with the community in order to meet the community's needs.
The centre is already close to achieving its ideal work environment. The major area which is yet to be achieved is being able to simultaneously meet staff interests and the goals of the service.

Factors and Forces which Make it Difficult to Achieve an Ideal Culture

The factors and forces which are seen as impeding the attainment of an ideal culture for the centre are: individual differences; pressures from management, the community and other services; lack of funds; an insufficient level of staff participation; lack of full knowledge and objectivity in relation to the centre and how to change it (the centre requires an outside consultant); and management commitment to what is seen as an outdated work practice. This "outdated" work practice is a system of covering the centre for urgent/crisis cases which present at the centre. One of the clinical staff members is rostered each working day to deal with these urgent/crisis problems. Despite a number of attempts to find alternative methods of providing this service, a suitable alternative method has yet to be found. This system, which is unpopular with some staff members, is an essential service.
Achieving the Ideal Work Culture

The ideal work culture is seen by the team leader as being desirable for the centre, and the centre is close to attaining the ideal work culture which is described by the staff. An increase in staff numbers is the method which will enable the centre to have sufficient flexibility to simultaneously meet staff interests and the goals of the service and provide the centre with the opportunity to achieve its ideal culture.

Staff participation in the process of cultural change is seen as desirable by the Team Leader. The appropriate level of participation is where decision making power is shared between staff and management. Resistance to change can be overcome by participation and involvement, encouragement and support, and negotiation and bargaining.

ORANA HOUSE DETOXIFICATION UNIT

Orana House was founded in 1982 by a committee which obtained funds from the N.S.W. Drug and Alcohol Authority (since renamed the Directorate of the Drug Offensive). The present Director of Orana House was appointed to the position in 1985. The previous, and first Director, had been very cost conscious whereas the present Director is more concerned with improving the provision of the service.
In 1985 the Centre was incorporated into the region's community health network and was administered by the Regional Office of the N.S.W. Department of Health. This led to a greater feeling of job security among the staff because funding became permanent, compared to a yearly renewable grant when it was a non-government organisation.

Orana House is a 10 bed community based in-patient alcohol detoxification centre, situated in Wollongong. The centre is staffed by a Director of the unit and 8 detox workers. The centre provides a 5-7 day non-medical alcohol withdrawal program. The program includes therapy groups and induction into the Alcoholics Anonymous program. The centre is now administered by the Illawarra Area Health Service and is part of its Drug and Alcohol Service.

The centre had developed 2 subcultures, which were 2 countercultures around 2 individuals, with some staff who did not belong to either group. These two countercultures engaged in conflict and were also in conflict with the management of the centre. This culminated in an incident at the centre in January 1989 which resulted in both of the counterculture leaders being dismissed by the Illawarra Area Health Service. As some members of the two countercultures still remain at the centre, the legacy of this prolonged period of conflict still remains.
The Vision of the Ideal Culture

The vision of the ideal culture is seen by the staff of the centre as comprising 3 components. These are:

(a) Interpersonal Relations

Good relations between staff with a minimum of conflict, good communication between staff and between staff and management, staff respect each other and the management of the centre.

(b) How Work is Carried Out

There is a high level of team work, staff display a high degree of professionalism and services are delivered efficiently.

(c) The Centre Environment

There is a serene, pleasant, relaxed and homely atmosphere in the centre.

Factors and Forces which Make it Difficult to Achieve the Ideal Culture

The factors and forces which are seen as impeding the attainment of an ideal culture for the centre are: Staff conflicts; choosing inappropriate staff to work at
the centre; failure by some staff to carry out the centre's policies; funding cutbacks and the Illawarra Area Health Service's policy of privatising some of its services impacting adversely on any attempts to change the centre.

The interpersonal and subcultural conflicts, and the conflicts between staff and management, are a major impediment to achieving cultural change in the centre.

**Achieving the Ideal Work Culture**

The ideal work culture is seen as both desirable and achievable by the Director of the centre. A more ideal culture can be achieved by staff being open with each other, using staff meetings to say what staff members really think and to sort out problems and conflicts, and dealing with situations before they get out of hand.

There would be staff participation in a process of cultural change. The most desirable level of participation is seen by the Director as management seeking views and opinions from staff before making the final decisions. Resistance to change can be overcome by education and persuasion, participation and involvement and encouragement and support.
THE WOLLONGONG METHADONE MAINTENANCE UNIT

The unit commenced operation in September 1988. It is a community based methadone centre situated in Wollongong. The centre is staffed by a Co-ordinator/Nurse Unit Manager, 2 full time nurses and 1 part time nurse, a part time medical officer and a full time clerical assistant. The centre provides methadone maintenance and methadone withdrawal programs for persons addicted to heroin who have not been successful at drug free rehabilitation programs. The present Co-ordinator was employed in November 1987. She established the program and recruited the staff.

The centre is funded by a grant from The Directorate of the Drug Offensive which is administered by the Illawarra Area Health Service. It is part of the Illawarra Area Health Service's network of drug and alcohol services.

Being a relatively new organisation, the centre, and its culture, are still in its formative stage of development. There are no identifiable subcultures in the centre.
The Vision of the Ideal Culture

The ideal culture is seen by the staff of the centre as again comprising three components. These are:

(a) Interpersonal Relations

Good communication and openness between staff, mutual respect and understanding between staff and respect for the views of staff members.

(b) How Work is Carried Out

A professional approach with mutual respect for professional roles, an awareness by staff of each others roles in the team, a team decision making process, more flexibility and less bureaucracy and a homogeneous approach to work by the staff.

(c) The Centre Environment

A harmonious and relaxed environment in the centre.

Factors and Forces which Make it Difficult to Achieve the Ideal Culture.

The factors and forces which are seen as impeding the attainment of an ideal culture for the centre are: lack of funds, interference from the Area Health Service
hierarchy, human nature, the expectations and demands of other drug and alcohol services, government policies, self doubt about the effectiveness of the program and the motivation of the clients of the program, and the conflict between the need for staff to work set hours to dispense methadone and a desire for more flexible working arrangements.

Achieving the Ideal Work Culture

The ideal work culture is seen by the Co-ordinator as both achievable and desirable for the centre, except for the team decision making process. Most decisions are made in consultation with the team, however there are some decisions which are made by the Co-ordinator even though the team disagrees.

The centre could achieve the more ideal work environment if it could employ a paramedic staff member, such as a psychologist, to compliment the medically trained team of nurses and a medical officer. This would overcome many of the frustrations felt by the staff by enabling clients' psychological and social problems to be dealt with.

Staff participation in the process of cultural change is seen as desirable by the Co-ordinator. The most appropriate level of participation is where management asks for views and opinions from the staff
before making final decisions. Resistance to change would be overcome by education and persuasion, participation and involvement and encouragement and support.

**Similarities and Differences Between the Cultural Visions**

There are two areas of commonality between the visions of the ideal culture for the three centres. These areas are good interpersonal relationships and desirable work practices (how work is carried out). These two core areas are manifested in slightly different ways in each of the three centres.

The difference between the centres is the importance of a pleasant and serene atmosphere for Orana House and The Methadone Maintenance Unit, in contrast to the need for a shared philosophy for Kembla House. The need for a pleasant and serene environment is due to the types of clients which present at the centre. A pleasant and serene environment is crucial to the success of both Orana House and The Methadone Maintenance Unit. However with Kembla House, the need for a shared philosophy can be explained by the multi-disciplinary nature of the team and the diversity of treatment, prevention, research and training activities conducted by the centre.

The similarities and differences between the cultural visions for the three centres are shown in the following diagram (Diagram 3).
### SIMILARITIES AND DIFFERENCES BETWEEN THE CULTURAL VISIONS

#### SIMILARITIES

<table>
<thead>
<tr>
<th>KEMBLA HOUSE</th>
<th>ORANA HOUSE</th>
<th>METHADONE UNIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpersonal Relations</td>
<td>Interpersonal Relations</td>
<td>Interpersonal Relations</td>
</tr>
<tr>
<td>- Staff are valued</td>
<td>- Mutual respect</td>
<td>- Mutual respect</td>
</tr>
<tr>
<td>- Staff's ideas are valued</td>
<td>- Conflict minimised</td>
<td>- Staff's views respected</td>
</tr>
<tr>
<td>- Staff listen to each other</td>
<td>- Good relations</td>
<td>- Openness</td>
</tr>
<tr>
<td>- Good Communication</td>
<td>- Good communication</td>
<td>- Good communication</td>
</tr>
<tr>
<td>- Staff respect Management</td>
<td>- Staff respect Management</td>
<td>- Mutual understanding</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How Work Is Carried Out</th>
<th>How Work Is Carried Out</th>
<th>How Work Is Carried Out</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Professionalism</td>
<td>- Professionalism</td>
<td>- Professionalism</td>
</tr>
<tr>
<td>- Teamwork</td>
<td>- Teamwork</td>
<td>- Team decision making</td>
</tr>
<tr>
<td>- Flexibility</td>
<td>- Efficient Service Delivery</td>
<td>- Flexibility</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Awareness of Roles</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Homogeneous approach</td>
</tr>
</tbody>
</table>

#### DIFFERENCES

<table>
<thead>
<tr>
<th>KEMBLA HOUSE</th>
<th>ORANA HOUSE</th>
<th>METHADONE UNIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shared Philosophy</td>
<td>Centre Environment</td>
<td>Centre Environment</td>
</tr>
<tr>
<td>- Broad views on causes and solutions to drug problems</td>
<td>- A serene, pleasant, relaxed and homely atmosphere in the centre</td>
<td>- A harmonious and relaxed environment in the Centre</td>
</tr>
<tr>
<td>- An agreed philosophy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Idealism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Service in touch with community needs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Cultural Change and Organisation Outcomes

The staff at the centres were asked to rate their centre's work performance, work motivation and job satisfaction on a 7 point scale from low (1 point) to average (4 points) to high (7 points) in question 11 of the Questionnaire administered to the staff. The average score for the staff at Kembla House was 6.0 for centre performance, 5.8 for staff motivation and 5.5 for job satisfaction. The average score for the staff at Orana House was 6.2 for centre performance, 5.5 for staff motivation and 5.8 for job satisfaction. For The Methadone Maintenance Unit the average score was 5.7 for work performance, 5.0 for staff motivation and 4.4 for job satisfaction. Although the scores for all the centres on the three organisational outcome variables (performance, motivation and job satisfaction) were between average and high, the scores also indicated that there was room for improvement.

Question 6 of the staff questionnaire asked the respondents how their vision of an ideal work environment (which included an ideal culture) would affect the respondent's work performance (question 6a), the work performance of the team (question 6b), the respondent's work motivation (question 6c), the work motivation of the team (question 6d), the respondent's job satisfaction (question 6e) and the job satisfaction of the team (question 6f). Aggregating the replies from the staff at
all three centres, 88.2% indicated that their ideal work environment would have a positive impact on their own work performance, 100% indicated that their ideal work environment would have a positive impact on their team's work performance, 88.2% stated that their ideal work environment would have a positive impact on their own work motivation, 94.1% stated that their ideal work environment would have a positive impact on their team's work motivation, 94.1% stated that their ideal work environment would have a positive impact on their own job satisfaction and 94.1% stated that their ideal work environment would have a positive impact on their team's job satisfaction.

These results show that the staff of the centres can identify improvements in their work environment (which includes the organisational culture) which will lead to improvements in organisational outcomes. These improvements can reduce the gaps between their assessment of their centre's organisational outcomes and an ideal 7 point rating on their team's work performance, work motivation and job satisfaction in question 11 of the staff questionnaire.
NOTES

1 One of these two persons has since been reinstated.

2 See questionnaire, Appendix 3.
CHAPTER 10

IMPLICATIONS OF THE RESULTS

The study of the potential for change in the three drug and alcohol agencies explored the usefulness of the model of cultural change developed in Chapter 6. The study utilised interviews with the heads of the three units and the overall Director of Drug and Alcohol Services who is in charge of all three centres. The aspects of the model which were explored were diagnosing the existing culture, creating a vision of a new and more ideal organisational culture, changing the organisation towards the more ideal culture, participation in the process of change, overcoming resistance to change and the impact of organisational cultural change on organisational outcomes (performance, motivation and job satisfaction). The results showed that there were common cultural areas which were important to all three drug and alcohol agencies, as well as cultural factors which were specific to each of the centres. An ideal organisational culture was seen as important in improving the functioning and effectiveness of these centres.

As a result of this study, six major implications can be ascertained. These are:

(a) Staff and managers of drug and alcohol agencies are able to identify organisational cultural factors as important to the effectiveness of their
organisations. They are also able to describe how organisational cultural factors can contribute to improving organisational outcomes.

(b) There are common aspects of organisational cultures which are essential for the effectiveness of drug and alcohol agencies. These common aspects are good interpersonal relationships and desirable work practices (which are shown in Diagram 3).

(c) In addition to the essential common cultural aspects, each centre has its own specific set of cultural factors which is also essential to the effectiveness of each individual centre. This specific set of factors is derived from the centre's historical development, its environment, the characteristics of its client population, the backgrounds of the staff, any larger organisation within which the centre is situated, its mission, goals and objectives and the services it provides.

(d) A multi-disciplinary team which provides a variety of programs and services will evolve and require a more complex organisational culture to accommodate the different staff disciplines and the diversity of activities, compared to a centre which has homogeneous staff, a more narrowly focussed service and more structured tasks. This is exemplified by the Kembla House multi-disciplinary team's ideal organisational culture which includes a shared philosophy.
The shared philosophy is based on broad views, an idealistic orientation and requires the service to be in touch with community needs. In contrast, Orana House and the Methadone Maintenance Unit which do not have multi-disciplinary teams, emphasise a pleasant and serene centre environment.

(e) A period of conflict may be inevitable in the cultural development of small drug and alcohol teams. Conflict between staff and between staff and management was a prominent feature of both Kembla House and Orana House, but not the Methadone Maintenance Unit. If these centres are placed on a time continuum, a pattern emerges. Kembla House which was established in 1976 had passed through a period of conflict which had been successfully resolved. Orana House which was established in 1982, was in the midst of a period of conflict. The Methadone Maintenance Unit which was established in 1988 had not experienced any significant conflict. This pattern indicates that a period of conflict may be a feature of a small drug and alcohol team's cultural development.

This conclusion is not surprising, because small drug and alcohol teams function as small groups and will be subject to the same or similar stages of group development as any other small groups. Most models of group development such as those proposed
by Schutz (1958)\textsuperscript{3}, Modlin and Faris (1958)\textsuperscript{4}, Tuckman (1965)\textsuperscript{5}, Garland, Jones and Kolodny (1973)\textsuperscript{6} and Hill and Grunner (1973)\textsuperscript{7} contain a stage of conflict which must be passed through before effective group performance is established. Small drug and alcohol teams, like other small groups, may need to resolve a period of conflict before the team can function effectively.

(f) The exploratory study of the three Drug and Alcohol agencies demonstrates that the model developed in Chapter 6 is a useful model to implement and analyse organisational cultural change.
NOTES

1 The managers of the centres would not be expected to know about the cultural change techniques outlined in chapter 6. Their suggestions for implementing organisational cultural change focussed on expanding staff numbers (Kembla House and The Methadone Maintenance Unit) and improving interpersonal communication (Orana House).

2 Desirable work practices are shown under "How Work is Carried Out" in Diagram 3.


CHAPTER 11

CONCLUSION

This thesis examined the origins, nature and usefulness of the concept of organisational culture, and proceeded to develop a model of organisational cultural change which was used to explore how organisational cultural change could improve the effectiveness of three drug and alcohol agencies.

A successful program of cultural change in a work group or organisation can be a complex and difficult undertaking because of the number of variables impinging on the process of change. Cultural change within organisations may fail because of lack of top management support, inflexible organisations, underskilled change agents, inaccurate diagnosis, an unrealistic vision of a more ideal culture, inappropriate cultural change technologies, insufficient staff participation leading to a lack of commitment and enthusiasm by workers, difficult organisational members, inadequate methods of dealing with resistance to change and vested interests misdirecting the process of change.

An important ethical consideration is raised by the process of organisational cultural change. Cultural change involves modifying a person's values and beliefs in relation to the workplace. However, an individual's
values and beliefs are an integrated framework. Changing one part of a person's value and belief system will invariably affect other aspects of an individual's system of values and beliefs. This may have ramifications for the person's life outside of the workplace. Do we have the moral right to tamper with an individual's system of values and beliefs? Should we bear any responsibility for any adverse consequences? These are as yet unresolved ethical dilemmas in contemplating organisational cultural change.

Organisational cultural change has the potential to be used as a tool of manipulative control. However it also has the potential to be used as a positive factor in improving the efficiency and effectiveness of organisations.

The development of cultural perspectives on organisations and work groups has created new insights into how organisations function and how individuals behave in organisational settings. This has made a significant contribution to the understanding of organisational behaviour and to the theory and practice of organisation development.
NOTES


MAP OF THE AREA COVERED BY
THE ILLAWARRA AREA HEALTH SERVICE
APPENDIX 2

FIRST INTERVIEW

I would like to ask you some questions about your organisation/service.

A. HISTORY

1. How long have you been with the organisation?

2. How long have you been in charge?

3. Tell me about the history of your centre/service.

4. How was it founded?

5. Tell me about the person or persons who founded your centre/service.

6. How did the founder(s) influence your centre/service?

7. Does this influence still remain? How does it continue to affect your centre/service?

8. What changes have taken place in the management of the centre/service?

9. How have these changes affected the centre/service?
B. **CRITICAL INCIDENTS AND MAJOR CHANGES**

1. What major changes have taken place in the history of your centre/service?

2. Have there been important incidents or experiences which are still remembered today? What are they? How do they still affect your centre/service?

C. **ENVIRONMENTAL FACTORS AND STAKEHOLDERS**

1. Can you list the individuals, organisations and forces which affect your centre/service?

2. Which of these do you consider to be the most important for your centre/service and why?

3. What pressures are your centre/service facing from within the Department of Health (Illawarra Area Health Service, Directorate of the Drug Offensive, other sections of the Department of Health)?

4. What are the pressures on your centre/service which are coming from outside the Department of Health?
D. **SUBCULTURES**

1. Are there any identifiable subgroups in your centre/service amongst the staff. (These subgroups may be based on professional or friendship associations, or the way work is structured in your centre/service)?

2. Can you describe these subgroups and the factors they are based on?

3. What is the membership of these subgroups (which staff belong to which groups)?

E. **BELIEFS AND VALUES**

1. Can you tell me about any shared beliefs and/or values which are held in common by the staff in your centre/service in relation to the following:

   - causes of addiction
     how do these beliefs and values affect your centre/service

   - best methods of treating addiction
     how do these beliefs and values affect your centre/service
- clients
  how do these beliefs and values affect your centre/service

- how work is carried out
  how do these beliefs and values affect your centre/service

- Illawarra Area Health Service
  how do these beliefs and values affect your centre/service
This is a questionnaire about your work and your working environment. Your working environment includes psychological, social, physical and organisational aspects of work.

Question 1:

What makes your centre unique?

QUESTION 2:

What do you like most about working for the Illawarra Area Health Service?

QUESTION 3:

What are the things you value most in a Team Leader/Co-ordinator/Director?
QUESTION 4:

Describe your ideal work environment which is realistically attainable (taking into account relationships between staff members; relationships between staff and the official hierarchy; how you approach your work; how the centre functions and delivers its services).

QUESTION 5:

How does your ideal work environment differ from your present work environment?

QUESTION 6:

How would your ideal work environment affect:

(a) Your work performance
(b) The work performance of your team

How would your ideal work environment affect:

(c) Your work motivation
(d) The work motivation of your team

How would your ideal work environment affect:

(e) Your job satisfaction
(f) The job satisfaction of all team members
QUESTION 7:

If your ideal work environment came into existence, what changes would take place in your centre? How would your centre be different?

QUESTION 8:

If your centre moved towards your ideal work environment, which factors or forces would make it difficult for your centre to achieve this ideal work environment?

QUESTION 9:

What do you like most about your work and work environment?

QUESTION 10:

What do you like least about your work and present work environment?
QUESTION 11:

How would you rate your centre on the following? Place a cross on each of the lines below.

WORK PERFORMANCE

<table>
<thead>
<tr>
<th>Centre has low performance</th>
<th>Centre has average performance</th>
<th>Centre has high performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>Average</td>
<td>High</td>
</tr>
</tbody>
</table>

WORK MOTIVATION

<table>
<thead>
<tr>
<th>Staff have low motivation</th>
<th>Staff have average motivation</th>
<th>Staff have high motivation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>Average</td>
<td>High</td>
</tr>
</tbody>
</table>

JOB SATISFACTION

<table>
<thead>
<tr>
<th>Staff have low job satisfaction</th>
<th>Staff have average job satisfaction</th>
<th>Staff have high job satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>Average</td>
<td>High</td>
</tr>
</tbody>
</table>

QUESTION 12:

How does your centre contribute to combating drug and alcohol abuse in your community?
SECOND INTERVIEW

I would like to obtain your views about aspects of work and the work environment in your centre which were described in the questionnaires completed by the staff at the centre.

FEEDBACK

The staff see their ideal work environment as.............

QUESTION 1

Is the ideal work environment described by the staff desirable for your centre?

- If not, why not?
- If it is, why is it desirable?

QUESTION 2

Is the ideal work environment described by the staff realistically attainable?

- If not, why not?
- If it is, how could your centre achieve this ideal work environment?
QUESTION 3

(a) If an attempt were made to change the working environment to create a more ideal work environment, would the change process involve staff participation.

(b) Indicate the level of participation which you think is appropriate for such a change process in your centre by placing ONE cross in a box below. Read all the options before making a choice.

1[ ] Staff are co-opted onto committees and advisory groups to change their views and gain their support.

2[ ] Some staff participation is permitted to defuse hostility which may arise from the changes.

3[ ] Staff are informed of proposed changes to enable them to understand and adjust.

4[ ] Management asks for views and opinions from staff before making the final decisions.

5[ ] Committees are established to plan and advise, however management reserves the right to make final decisions.

6[ ] Decision making power is shared between staff and management.
7[ ] Responsibility for segments of the change program is delegated to the staff.

8[ ] Staff plan and control the entire change process independently from management.

(c) Why is the level of participation you have chosen the most appropriate for your centre.

**QUESTION 4**

If you encountered resistance amongst your staff to creating a more desirable work environment for your centre, which of the methods listed below would you utilise. Place a cross in the appropriate boxes. You may place a cross in as many boxes as you wish.

[ ] education and persuasion

[ ] participation and involvement

[ ] encouragement and support

[ ] negotiation and bargaining

[ ] manipulation and co-optation

[ ] actual or implied coercion

[ ] others - please specify

...........................................

...........................................


N.S.W. Area Health Service Act 1986, No.50.

N.S.W. Drug Offensive Act 1987, No.119.


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