

A New Model for Workplace Substance Abuse Prevention:

Research, Theory, and Initial Evaluation Results

The TCU Drugs in the Workplace Project

Institute of Behavioral Research
at Texas Christian University

IBR

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Overview

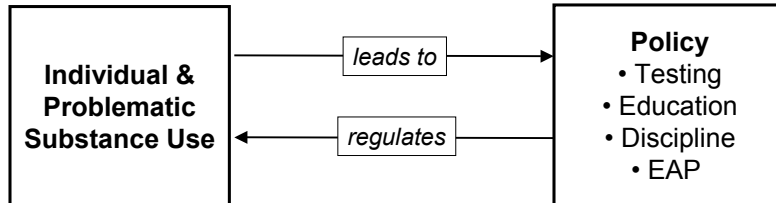
- This presentation provides a brief summary of the workplace project and the evolution of a prevention training model.
- There are four general parts to this presentation:
 - Overview of the risk and protective factors model that we developed based on previous research
 - Overview of the needs assessment strategy we recommend for determining level of prevention needed
 - Rationale and theoretical basis for the new Team Awareness training
 - Results of randomized efficacy trials in two distinct samples

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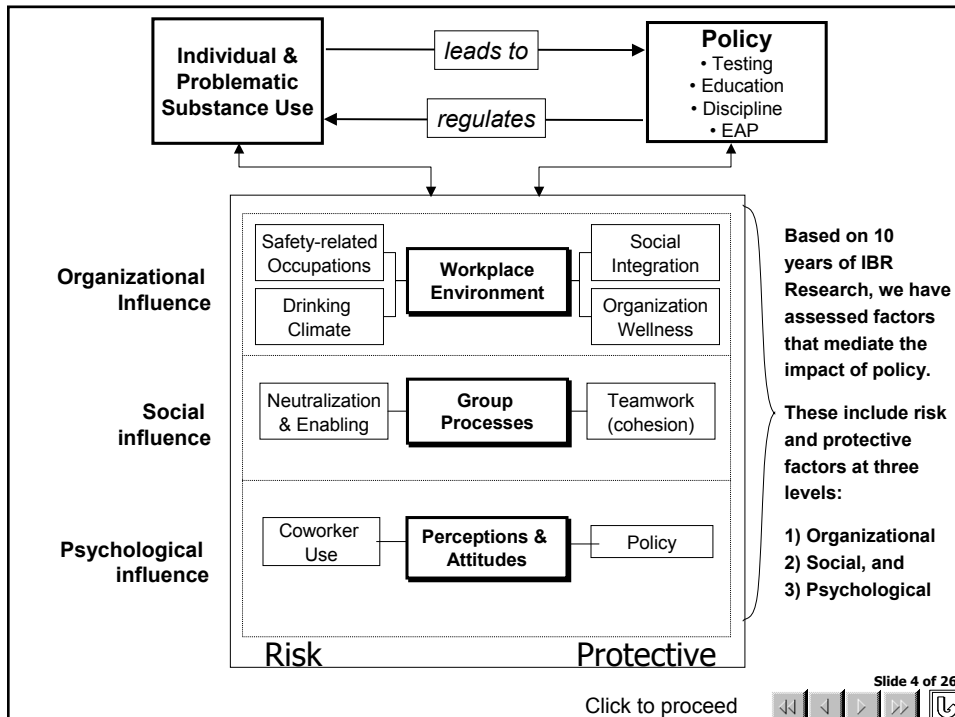
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The Standard View of Policy:



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To obtain more information about the research behind risk and protective factors, please view the presentation [Integrated Research Model](#) on this website.

For example, problem drinking is more likely when coworkers drink after work together. These “drinking climates” are an example of a risk factor.

The following two slides review evidence of the protective factor of group cohesion, which can act as a buffer against work group substance use.

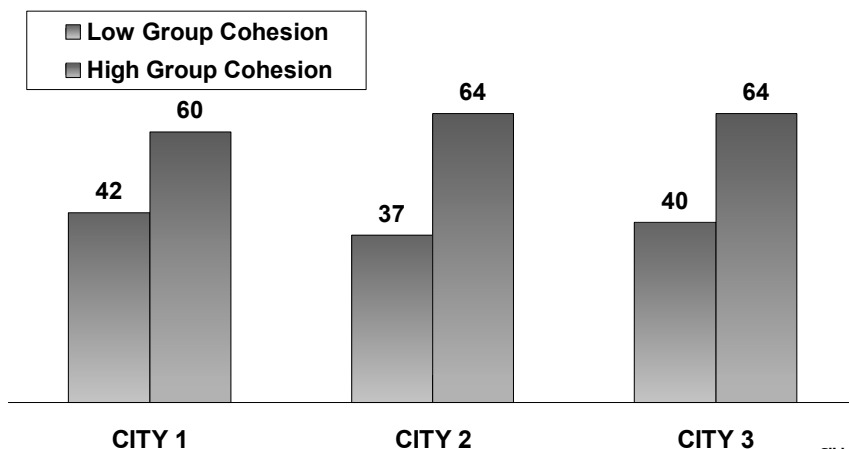
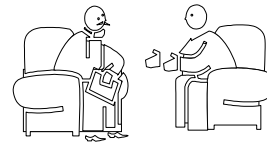
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SUPPORT FROM SUPERVISOR

If you had an alcohol/drug problem, would you feel free to talk with your supervisor without fear of being punished or fired?



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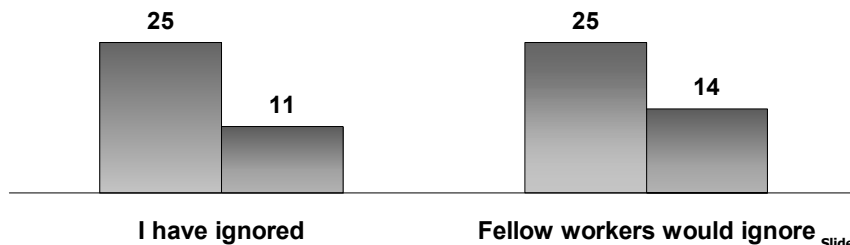
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IGNORING THE PROBLEM

If you have ever experienced a co-worker using...have you ignored **and** would fellow workers ignore? (% indicating ignore)



■ Low Group Cohesion
■ High Group Cohesion



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Assessment and Needs Analysis

This past research suggests that workplace need for training will vary according to risk levels.

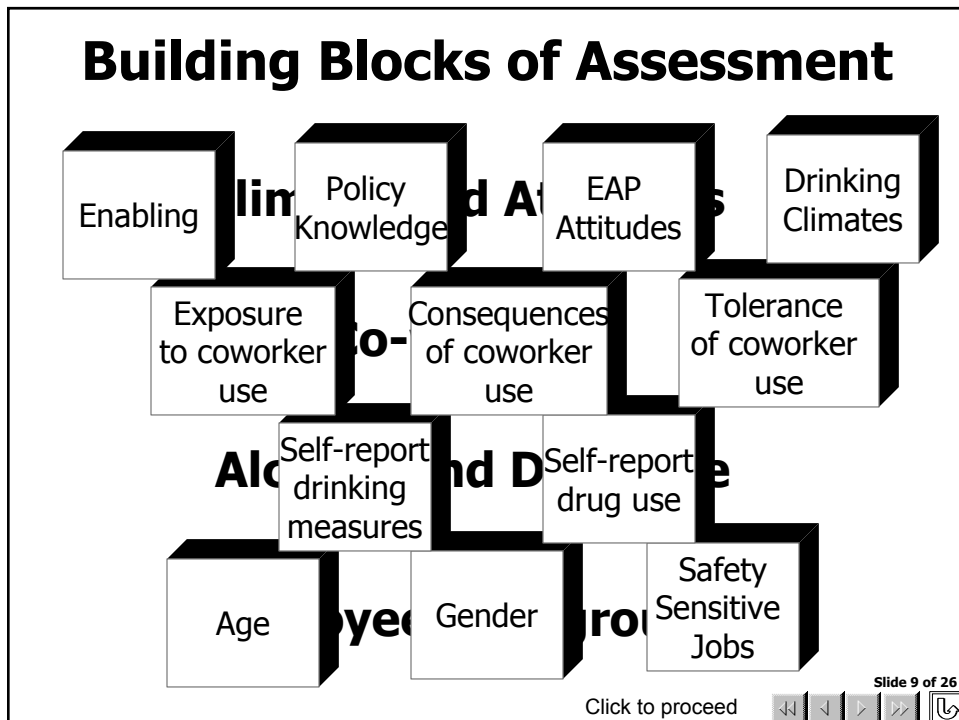
- When is prevention needed in a workplace?
- What types of problems are present?
- What is the culture of the organization?
- What cultures are present in the work groups?
- What type of prevention approach is needed?

We suggest conducting a needs/risk assessment as a way of determining type and level of prevention needed.

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Traditional Informational Training

- Traditional Workplace Training Focuses on
 - ▶ Signs and symptoms of substance use,
 - ▶ Identification & referral of the problem employee to some intervention, e.g. EAP, treatment, or disciplinary action.
- It is generally didactic, using lectures and videos to provide information on substance use and policy, focusing on the individual user.
- It is often a stand-alone program that is not well-integrated with other organizational functions and agendas (e.g., performance initiatives).
- Rigorous evaluation of such programs is rare.

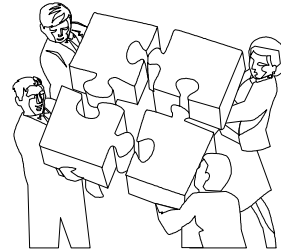
Signs & Symptoms

- Blood shot
- Sleepy
- Absent
- Late
- Other

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Need for a New Training Approach

- Surveillance requirements for substance use are increasing in many industries, e.g. DOT rules on alcohol testing.
- Substance abuse training programs can incorporate principles from quality and organizational change initiatives, specifically those that address teamwork and work cultures.
- Substance abuse in the workplace takes place in a culture that may condone and enable it.
- In a teamwork environment, use by any member affects other members in terms of productivity, safety, morale.



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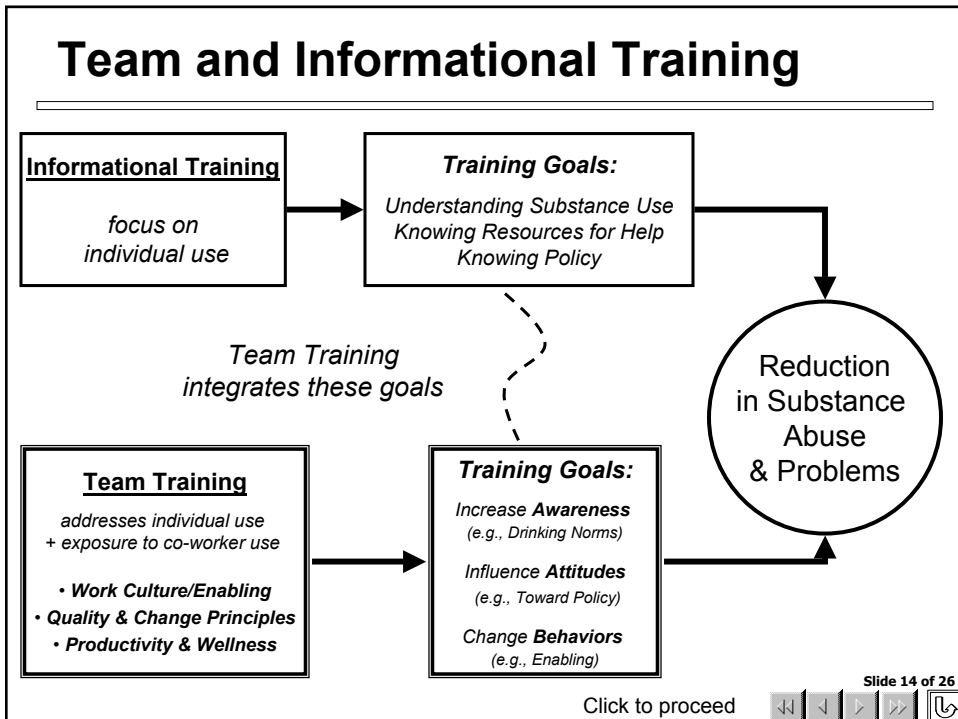
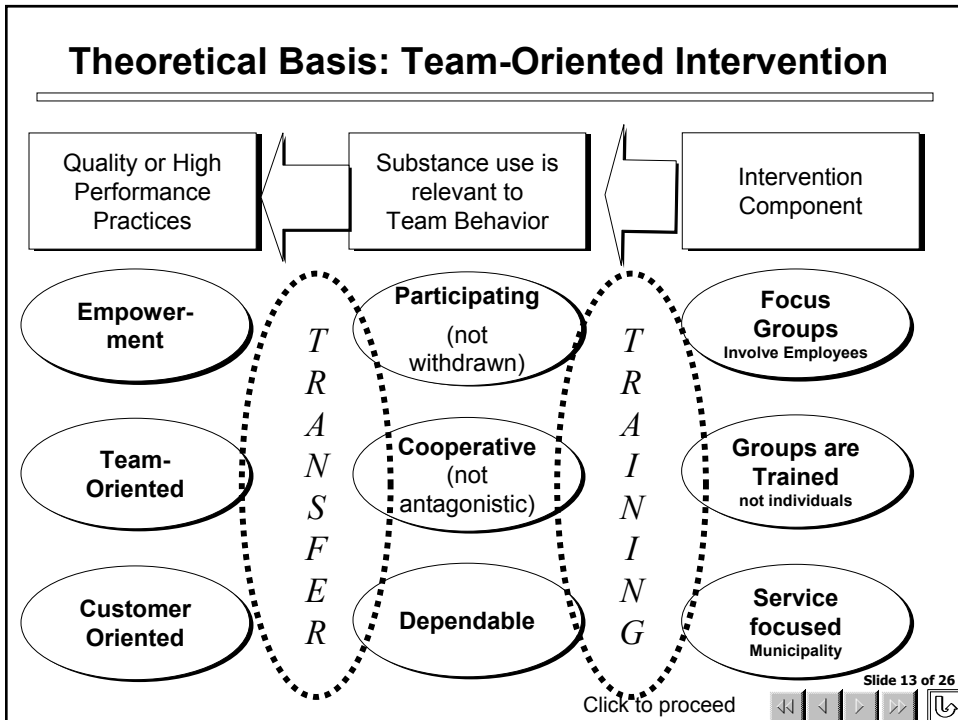
"New & Improved" Team-Based Training

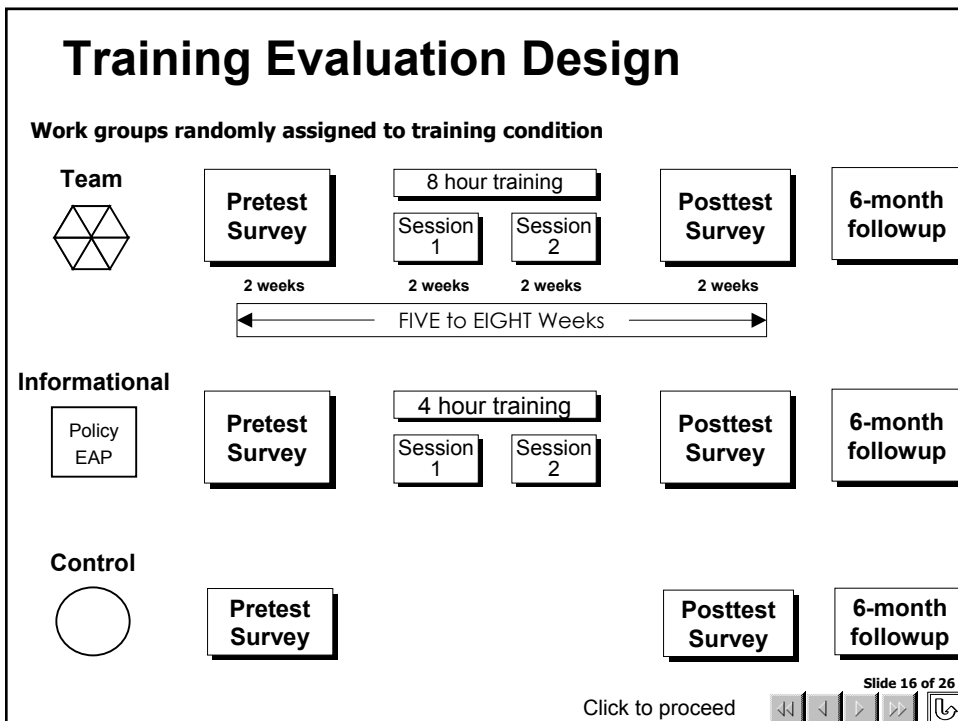
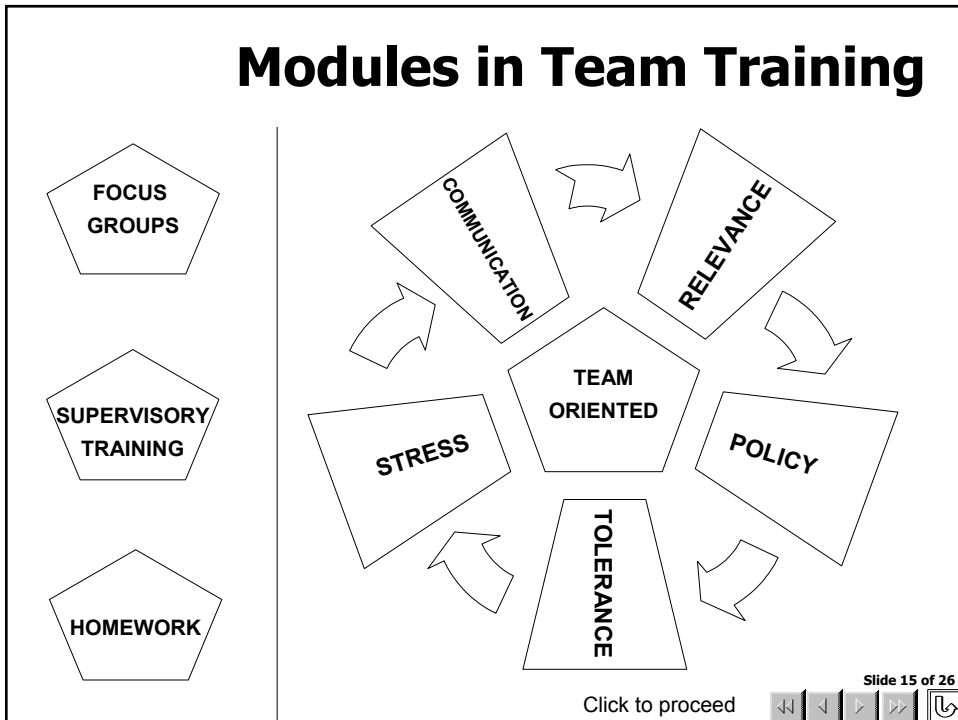
- Substance use is viewed from a work group perspective.
 - **Emphasis placed on how use of any member effects other members, especially in a team-based environment.**
- Work culture, & employee behavior & attitudes which enable, support, encourage, or ignore use is addressed.
- Training is integrated with overall organizational objectives:
 - **Performance Improvement** ▸ **Team-work** ▸ **Customer Service**
- Focus groups enhance employee ownership of training and help customize training - relevant to employee needs.
- Highly involving & participatory exercises are used - which should assist transfer of training into everyday work practices.

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Evaluation Samples

The new Team Training and an Enhanced Informational Training were implemented and evaluated in municipal workforces in two different cities.



City 1 was a suburban city (approximate population 100,000) in a large metropolitan area. Training was implemented in all city departments (except for uniform fire and police).



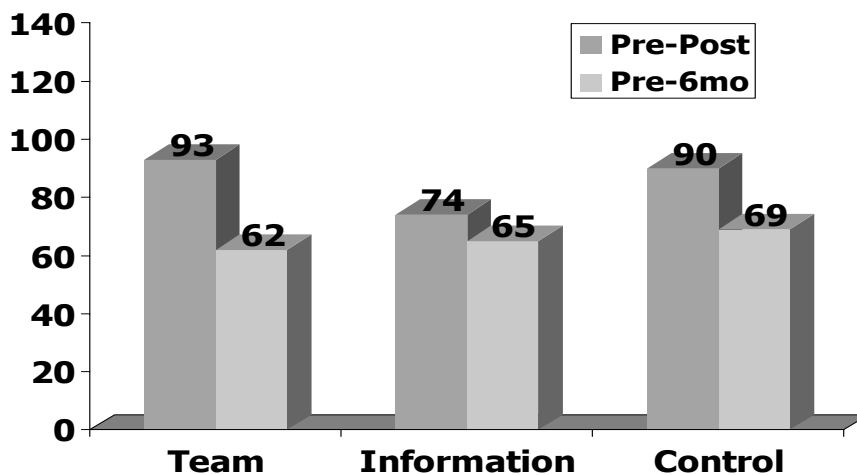
City 2 was a larger city and training was implemented in three large departments identified as at high-risk for alcohol and drug problems.

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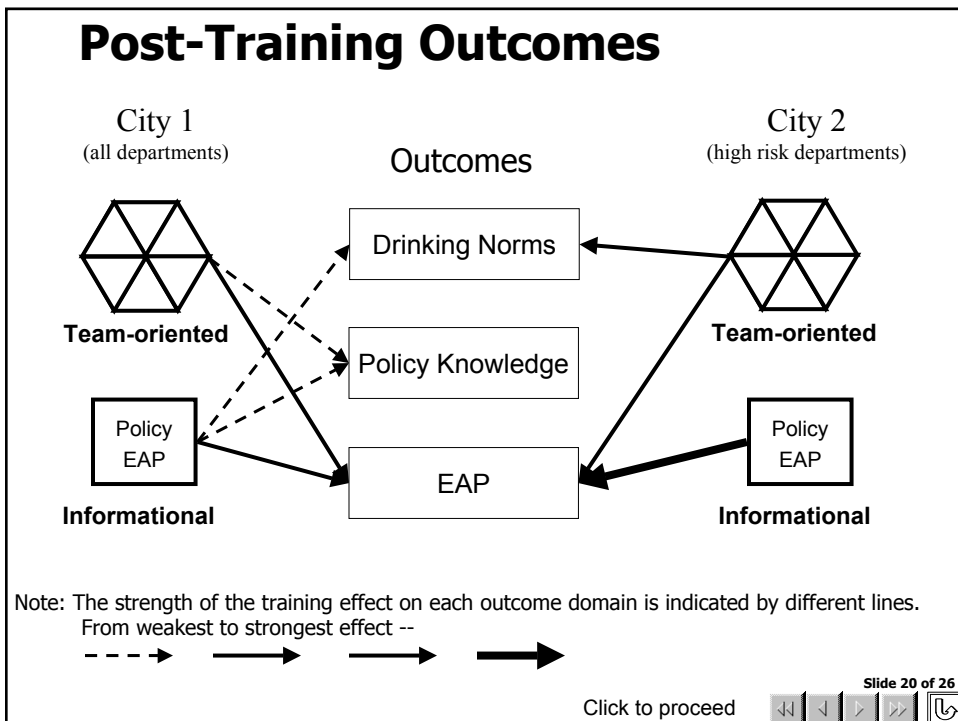
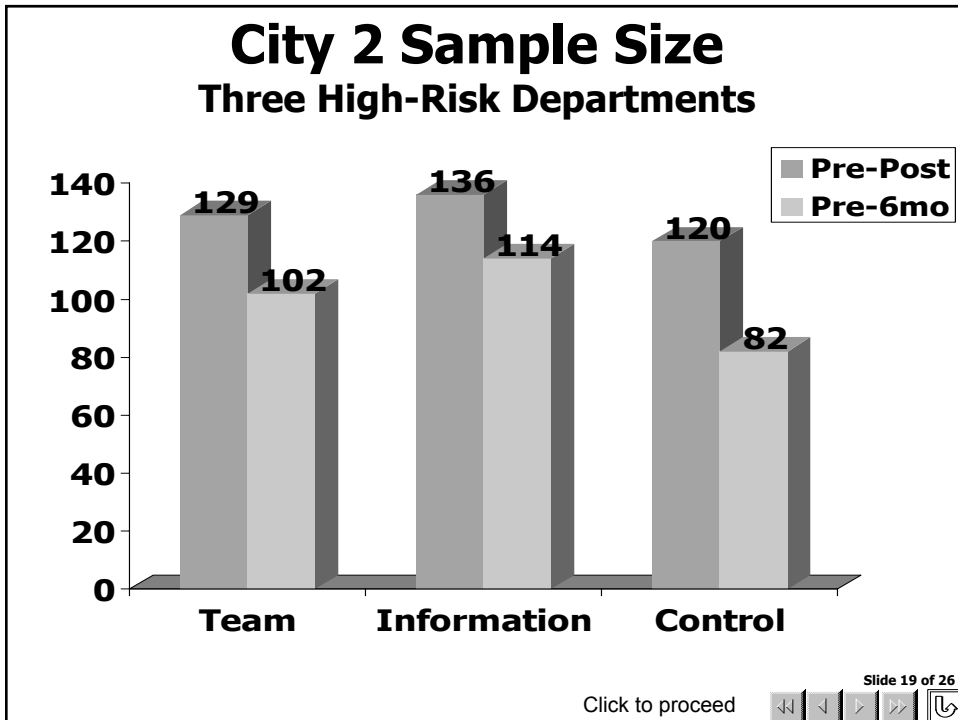
City 1 Sample Size All Departments

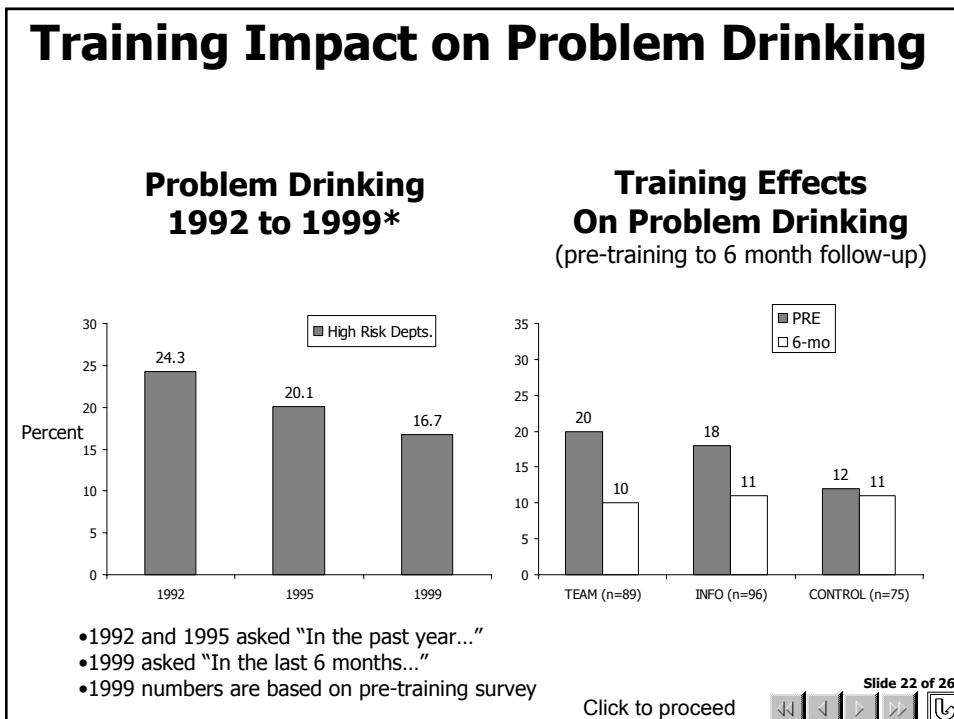
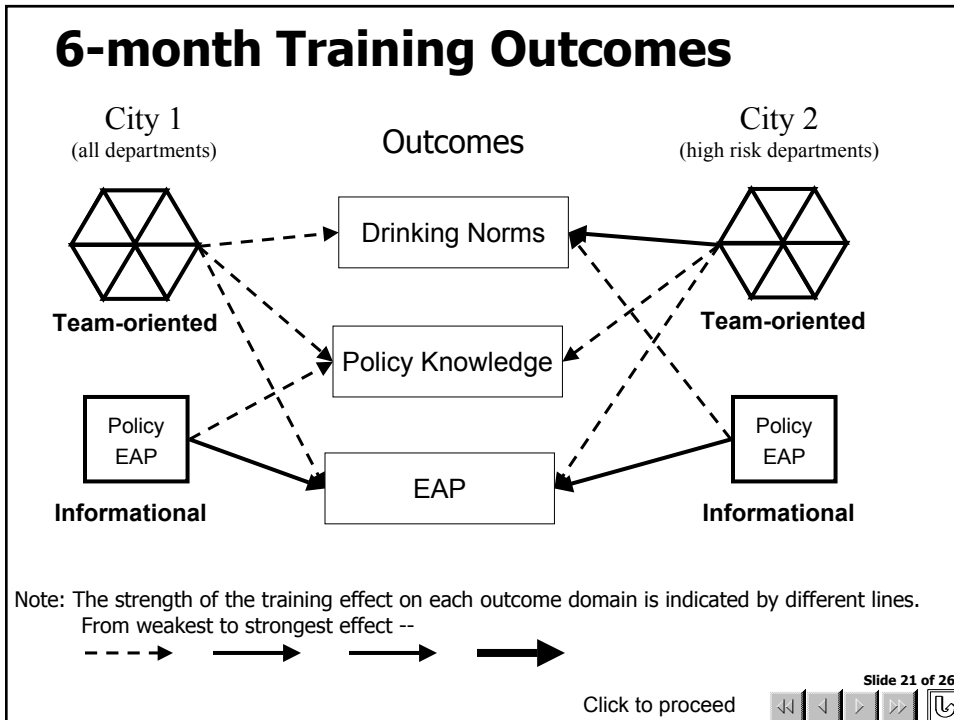


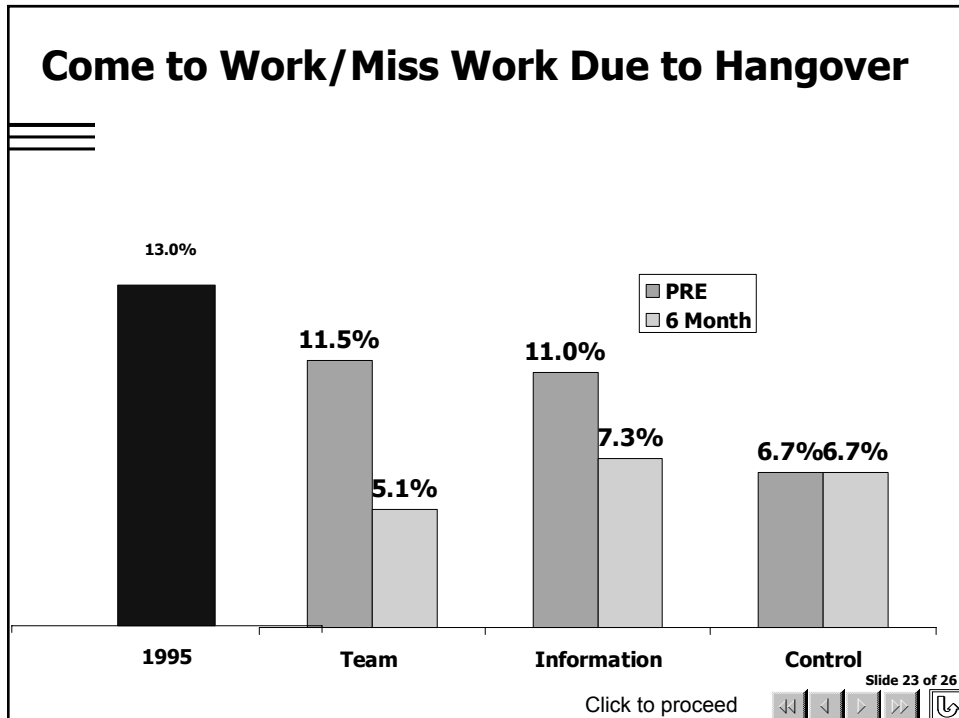
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Summary of Findings

- Team and Informational training were both effective at increasing Policy and EAP knowledge and attitudes.
- Informational training fared better than Team training in increasing knowledge of the EAP at at post-training and 6-month follow-up in City 1.
- Team training was more effective at changing drinking climates and reducing reports of problem drinking in City 2.
- Both trainings resulted in better outcomes than did the Control condition.

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Conclusions

Informational training may be sufficient in work groups where risk for problems is relatively low.

Team training appears to be more effective in work groups where risk for problems is high.

Work group assessment of risk and problems is important in determining optimal treatment approaches.

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For more information...

- For a more detailed description of the theoretical model and supporting evidence of the training approaches, see the [Integrated Research Model](#).
- Downloadable manuals for the Team and the Enhanced Informational training are available on this website.
- Instruments and measures that can be used for workgroup assessment and evaluation are available on this website.

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