

# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129



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## OVERVIEW OF THE TCU DRUGS IN THE WORKPLACE PROJECT

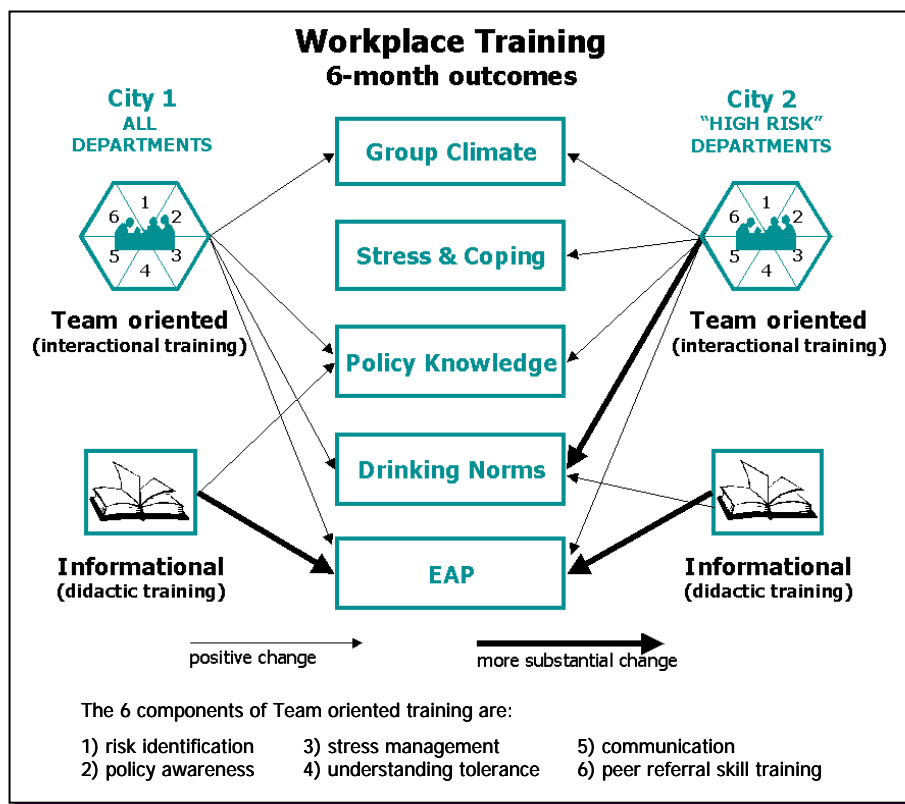
The [Drugs in the Workplace Project](#) at Texas Christian University has studied the prevalence, antecedents, and consequences of employee substance use for over 12 years. Results have emphasized the importance of work environments, policies, and employee characteristics in understanding the pervasiveness and impacts of substance use in the workplace.

In recognizing the changing social contexts in today's workforce, Principal Investigator Dr. Wayne Lehman and researcher Dr. Joel Bennett spearheaded the development of two prevention programs. This manual contains material from the participatory "team-based" program and emphasizes the impact of substance use problems on all team members in a workgroup (in terms of lost productivity, having to cover for absent coworkers, and workplace safety). The approach promotes awareness of group dynamics that serve to condone or create tolerance for drinking or drug use in a workgroup. Issues such as stress management, communication, risk identification, and how to gently "nudge" a troubled coworker to seek professional help are discussed. The second program is an enhanced "informational" training that primarily uses didactic presentations to familiarize employees with their workplace substance abuse policy, the effects of alcohol and various drugs of abuse, and Employee Assistance Programs (EAP).

Both programs have been evaluated in two municipal workforces—a medium-sized suburban city in which work groups from all city departments (except uniform fire and police) were included, and departments that had previously been identified as "at-risk" for substance abuse problems from a larger urban city.

Workgroups were randomly assigned to receive either the team-based or informational training, or were

assigned to a no-training control group. Workgroups were assessed two weeks before and after the trainings, and again at six months post-training. Overall, employees who attended either of the two training conditions showed improvements in important areas compared to employees in the control condition. **Figure 1** summarizes the results at 6-month follow-up for both cities. Five domains of outcomes were examined, including a supportive **Group Climate**, **Stress and Coping**, **Policy Knowledge**, **Drinking Norms**, and information about the **EAP**. Arrows from the training condition to the outcome domain indicate a positive change. The bold arrows indicate more substantial change.



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## Introduction & Facilitator Overview

### Welcome

Welcome to the *Team Awareness* training. This manual will help guide you through the main elements of the training. These elements include preparatory focus groups and the six trainer manuals for each of the modules in the training. This overview is not a substitute for the content and other overview information that is provided in the six module manuals. We strongly recommend that you read through certain sections of these manuals to round out your knowledge of the overall goals and nature of *Team Awareness*. These sections are described below.

This introduction and the other manuals are intended to give you the practical knowledge you will need as a facilitator. We think it very helpful, however, for you to have a grounded conceptual and process overview of the program. Indeed, the *Team Awareness* program is based on a conceptual model of workplace risk and protective factors. This manual is divided into three main sections:

- **Team Awareness Conceptual Background**
- **Team Awareness Structure & Fidelity**
- **Use of Team Awareness Manuals and Materials**

The training is designed to be a mixture of experiential and group-related activities and informational overviews, with emphasis on the experiential aspect. We hope this introductory manual provides sufficient background, so that when facilitators come face-to-face with participants, they can provide them with an enjoyable as well as influential experience. We believe that this experience, along with tools, skills, and information will help workers make wiser choices in their use of alcohol and drugs as well as in how they relate to others who have substance use problems.

### Team Awareness Conceptual Background

#### Risk and Protective Factor Model

The *Team Awareness* program is based on a risk and protective factor model. This model is described in full in the following reference.

Bennett, J.B., Lehman, W.E.K., Reynolds, G.S. (2000). Team awareness for workplace substance abuse prevention: The empirical and conceptual development of a training program. *Prevention Science*, 1 (3), 157-172.

The model argues that risk and protective factors exist in the work environment or overall organizational culture, the immediate workgroup, as well as in the individual employee. The focus of *Team Awareness* is on social factors in the work group and on:

- Reducing coworker enabling of problem employees or neutralization of deviant workers (e.g., ignoring, tolerating, and minimizing problems).

- Reducing drinking climates or social norms that promote the heavy use of alcohol as the sole method of social bonding. (We do not advocate the elimination of drink as much as moderation in such climates).
- Increasing the sense of workgroup cohesion or team spirit as a protective factor in regards to focus on team productivity and safety.

To learn more about this model, please review the Web Presentations available for free download at: (<http://www.ibr.tcu.edu/projects/workplac/prevention.html>)

[Workplace Substance Abuse Prevention: An Integrated Research Model](#)

[A New Model for Workplace Substance Abuse Prevention: Research, Theory, and Initial Evaluation Results](#)

## The Three Functions of Team Awareness

Concepts help facilitators grasp the main ideas of training. Functions help facilitators understand how to best use, or how any particular workplace could benefit from the program. The figure shows three primary functions:

1. **Training may be viewed as an enhanced drug-free workplace program.** Some workplaces may wish to make an extra effort in increasing EAP awareness and providing skills training in peer referral. This function may be best suited for “high risk” groups where there is potential for misuse or where any misuse poses a serious safety risk.

2. **The training may be viewed as an adjunct to any team building or communication program.** There is still much stigma associated with substance abuse and with attending programs on mental health. Instead of advertising as substance abuse training, we recommend piggy-backing modules onto any existing team programs and weaving in the safety/productivity theme. Most business owners will understand substance abuse as a risk to productivity, performance, health, and safety. The figure reviews 5 elements (e.g., find your voice, listening skills) that are relevant.

3. **Some workplaces may suspect drinking climates, enabling, or the presence of shared illicit drug use among coworkers.** If this is the case, the full *Team Awareness* program should be implemented as a work culture intervention. Certain occupations and workgroups may have developed a long-standing subculture that “protects” problem employees by picking up the slack or covering for them when sick, hung-over, or otherwise effected by addiction. Here it is recommended to conduct focus groups to create a sense of trust and rapport with the facilitator prior to delivering training.



## Team Awareness Structure and Fidelity

*Team Awareness* is an experimental model and the design presented here and in the accompanying six modules should be considered a work in progress. The ideas and functions described in the preceding section dictated the current structure and design of the training. There are likely other training strategies that can follow from the same ideas.

This section provides an overview of design elements in sufficient detail so that facilitators can replicate the original *Team Awareness* design. There are several reasons for following this original design, which we enumerate below:

The initial studies of effectiveness are based on this design. We cannot guarantee that similar effectiveness will be obtained if facilitators deviate from this design.

At this point, we cannot identify which of the modules or specific steps within modules are most effective. Further research is necessary to identify the “core” elements of effectiveness. Skipping or adapting certain elements may damage effectiveness.

There is potential for misuse of the training because of the sensitive nature of some of the exercises and the specific training in peer referral (nudge) skills in **Module 6**. Peer referral skills require sensitivity and certain psychosocial awareness in coworkers to be carried out effectively. **We strongly discourage facilitators from using Module 6 alone in any context.** Please review the section below, entitled “Peer Referral (NUDGE) as Capstone of Team Awareness.”

### Overall Structure and Group Size

In its original design, *Team Awareness* was delivered in 3 stages: (1) Focus groups and human resource meetings; (2) Supervisory training; and (3) Employee training. Training was delivered in two 4-hour sessions spaced one to two weeks apart. Supervisors attended sessions separately from their associates. Because there are a number of communication activities and exercises, we found it best to have between 12 and 20 attending classes. It is possible to do the training with as little as 9 and as many as 25 but the dynamics and impact are weakened. Training impact will also depend on your ability to work with smaller and larger groups. We recommend between 12 and 20.

### Fidelity Elements

As just described, *Team Awareness* has *three core elements*: focus groups, supervisor training, and employee training. The figure provides an overview of the time and length of each element. To implement the training with high fidelity, we encourage facilitators to follow this format.

**1. It is important to collect any information that pertains to current health efforts at the worksite.** This includes substance abuse policies, the employee assistance program (EAP), behavioral health benefits, and any related safety or behavioral health trainings (sexual harassment, workplace violence). This information may be used to customize **Module 2** on policy and helps to gauge the level of health promotion in the work culture.

**2. We solicit input from employees and supervisors in focus groups.** The number of focus groups required will depend upon the size of the organization. The methods for focus groups are described below and in the **Appendix**.

It may require anywhere from a few weeks to a few months to take the information gleaned in initial meetings and focus groups and customize or add content to the *Team Awareness* training. It is most important that facilitators are aware of job-related resources, whereby employees can get help for behavioral health and substance abuse concerns in themselves and their dependents. Pamphlets, handouts, and phone numbers from the Employee Assistance Provider are essential to incorporate. It is also important to become familiar with specific drug-testing policies. When an EAP is lacking, facilitators should collect information for referral support in the local and surrounding communities. When a policy is lacking, the facilitators should consult with key personnel (business owner, human resources) about developing a policy prior to delivering training. In some instances, focus groups can be used as a way to get input from workers about policy ideas.

**3. Supervisors should be trained prior to employees.** The supervisor training is nearly identical in content to the employee training, with the exception of **Module 3** on “Tolerance and Responsiveness.” The key difference is that the training should help supervisors review their specific responsibilities concerning referring employees for help (EAP supervisory referral) and initiating reasonable suspicion drug-testing, especially if current policies detail these responsibilities. Many worksites also have supervisory policies on coaching, counseling, and discipline that are important to review. Other worksites that come under Department of Transportation regulations, also require mandatory supervisor training. (Visit the U.S. Dept. of Transportation, Office of Drug and Alcohol Compliance; <http://www.dot.gov/ost/dapc>).

The skilled facilitator will have used initial meetings and focus groups to become familiar with these specific responsibilities. **Module 3** is adapted to help supervisors and managers probe for factors that help or hinder them from carrying out these responsibilities. Put another way, what makes supervisors more or less responsive to employees with problems (problem employees)? Alternatively, what makes them more or less tolerant?

**Ideas and methods for this supervisor module are described in:**

Bennett, J.B., & Lehman, W.E.K., (2002) Supervisor tolerance-responsiveness to substance abuse and workplace prevention training: Use of a cognitive mapping tool. *Health Education Research*, 17 (1), 27-42.

**4. The core of *Team Awareness* training lies in providing all six modules of the employee training.** In keeping with the original design, we encourage the following **guidelines** be used whenever possible:

- Train supervisors a few days before the employee training so that supervisors can “prepare” employees for optional assignments in **Module 1**.
- Be sure to cover information about policy and the EAP. The training should build upon policy knowledge that employees already have. When they lack such knowledge, facilitators should



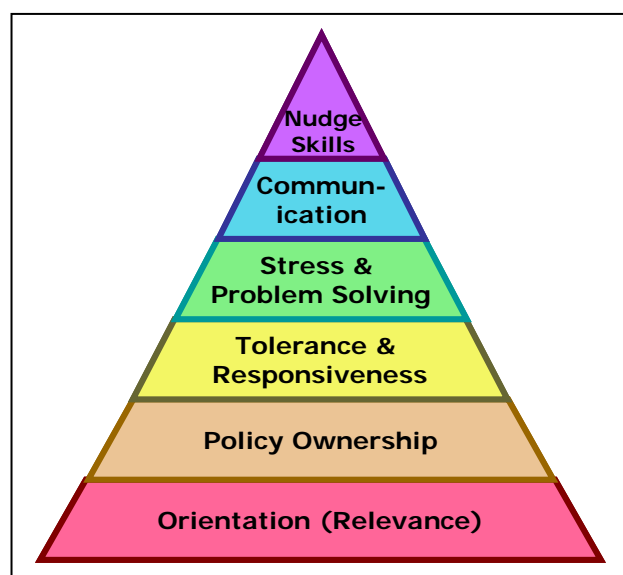
provide a separate information session that covers policy and EAP only. If possible, fully incorporate information into the training (in Module 2 through quizzes and game questions).

- Provide healthy snacks (nuts, fruit, juice) when possible.
- Provide ample breaks during sessions.

### Peer Referral (NUDGE) as Capstone of Team Awareness

The modular and sequential structure of *Team Awareness* helps facilitators set the stage in which peer referral (nudging) is most likely to work. “Setting the stage” means that facilitators should refer to elements that participants are familiar with, especially the social context or team climate back at their worksite. In this way, the act of encouraging a coworker to get help is presented as a natural and obvious outgrowth of the knowledge acquired in the previous modules. **Nudging** may be seen as the capstone of *Team Awareness*.

**Module 1.** The orientation module seeks to help participants understand that substance abuse and related risks either are or can become a relevant concern for them. The concern may be personal, family or coworker related. It could be in terms of safety problems or having to pick up the slack for troubled colleagues. The first module begins to touch on the motivation for getting help or encouraging help-seeking in others. The motivation to reduce risks may be seen as the foundation of the training (see diagram above).



**Module 2.** The policy ownership module describes how policy is a safeguard or protective factor in that it encourages workers to get help. Workers should get such help before a problem reaches the point where they are either disciplined or run the risk of receiving a positive drug test. The module downplays the “rules and regulations” or bureaucratic aspects of policy. Instead, policy is presented as a helpful tool that groups can use for reducing the risks identified in the orientation module. Those aspects of policy that encourage prevention, awareness, and help-seeking are emphasized. Ideally, policy information should be provided in the context of more personal ideas and concerns. In this way, Module 2 builds on Module 3.

**Module 3.** Facilitators present the idea that written or “formal” policy may be very different from the “informal” ways that employees interpret and enact policy. Supervisors and employees may know what policy says or know “the right thing to do.” However, personal beliefs and social norms can cause them to tolerate rather than respond to problems more proactively or directly. Facilitators introduce the concept of “drinking climates” and how such climates may evolve when we tolerate problem drinkers. This third tolerance and responsiveness module helps participants understand that

they have personal and group choices to make about tolerating problems. Responsiveness and accountability is encouraged. This module builds on the policy module by showing that such accountability is really an internal choice and that policy is really a set of guidelines to aid in responsiveness.

**Module 4. The stress and problem solving module continues with the idea that individuals and groups have a choice about how to respond to problems.** How we think about or evaluate stressors is critical to the success of any coping effort. We choose how to evaluate difficulties. Our beliefs and lifestyle can support or detract from effective coping. Thus, stress is presented as an opportunity for problem solving. This module builds on the concept of drinking climates (from Module 3) by discussing drinking as a stress response. Healthy alternatives to coping are presented and employees are encouraged to solve problems together as a group.

**Module 5. The communication module reviews communication responsibilities in the work setting and guidelines for effective communication.** This module seeks to build on employees' awareness of policy (module 2), and knowledge about workplace social climate (Module 3), by focusing more on the skills necessary for communicating this awareness and knowledge effectively. Communication is also a critical skill for team problem solving (Module 4) and provides the necessary foundation for the introduction of the peer referral (nudging) process.

**Module 6. The encouragement module is the capstone of *Team Awareness* because it builds upon or uses elements within the previous modules.** Facilitators should ask themselves these two questions "*Why would anyone want to go through the trouble of encouraging someone else to get help for a problem?*" and "*Do participants have enough motivation and knowledge to effectively use peer referral/encouragement skills?*" It is likely that employees themselves have to be "nudged" in order to nudge others.

In a few cases, the peer referral aspects of nudging may be able to "take root" without previous modules. In many cases, work groups will need all modules, and others may need only some of the previous modules. The *Team Awareness* model has been examined in only a few organizations and it is an empirical question how much is needed or which components are essential.

While the *Team Awareness* training makes reference to the problem of substance abuse, the motivation, knowledge, and skills, developed in the training may apply to any behavioral health problem. Thus, when employees are aware of or suspect problems in coworkers or family members, they may use their nudging skills to help for a variety of concerns.

### **Focus Groups (Background)**

As described later (see section "Functions of Team Awareness"), this training program may be considered an intervention in workgroup culture or social ecology. In other words, *Team Awareness* seeks to help workgroups, the relationships between coworkers, or the social environment of the workplace.

*Team Awareness* provides skills training and enhances current drug-free workplace policies. It also has the potential to move beyond formal training programs by delivering these messages in the context of current work practices and social relationships, as these practices and relationships are perceived and construed by employees.

In our original studies, we consulted with some employees and supervisors before actually delivering the workplace training. These meetings were focus groups that helped to meet **several objectives**:

- Obtain employee perceptions of policies, work culture, and stressors
- Informally assess level of readiness for the training
- Evaluate current substance use policies and procedures, as understood by employees
- Establish rapport between trainers and employees
- Solicit input into training design (since several modules are customized to information about the worksite)
- Provide samples of training activities

**Transfer Climate and Social Construction.** The philosophy behind our use of focus groups draws on two fields of research: (1) Transfer Climate, and (2) Social Construction of Policy. The idea behind transfer climate is that training programs can be made much more effective if the environment is receptive to the program and has the resources to transfer information, skills, and attitudes from the training environment back into the work environment.

Too often, employees receive training but—once they go back to work—the climate takes over and employees can learn a less effective way of working. For example, job stress, unmotivated supervisors, and policies that are incongruent with training messages can block transfer of training. Focus groups are an effective way of gaining insight into both the positive facilitators and negative blocks of transfer.

The social construction of policy refers to the gap between policies as they are formally written and as they are carried out in the day-to-day atmosphere of the workplace. As trainers, it is critical to understand how employees and supervisors construe and enact policy in their own (often idiosyncratic) ways. The power of coworker social relationships should not be underestimated. Such relationships mediate how policies are implemented. Focus groups are an effective way of understanding the social construction of policy.

### **Focus Groups (Procedure)**

There are a number of good resources on the World Wide Web that provide a background and introduction to focus groups. To best understand the methodology and adequately prepare focus groups, we suggest reading through the following books:

Krueger, R. A., & Casey, M. A. 2000. *Focus groups: a practical guide for applied research* (3rd ed.). Thousand Oaks, Calif.: Sage Publications.

Morgan, D. L. 1997. *Focus groups as qualitative research*. Thousand Oaks, Calif.: Sage Publications.

In the original trials of *Team Awareness*, facilitators conducted focus groups with various types of employee sub-populations. These different groups were assembled to make sure that trainers

understand any differences in group subcultures. It is particularly important to implement several such groups in large organizations (200 or more workers), because it cannot be assumed that employee populations are uniform or homogenous. Indeed, it is critical to get a wide representation of workers as some may be more aware of risks than others. We have found that employees from the same organization are surprised to hear stories from coworkers they usually do not interface with. The following are examples of the composition of different types of focus groups that we have conducted.

- Supervisors only
- Males only
- Females only
- Mixed groups
- Ethnically diverse groups
- Employees only from safety sensitive jobs
- Employees from internal safety teams

The Appendix provides the protocol used for conducting these focus groups.

### **The Trade-off between Flexibility and Fidelity**

While we strongly encourage fidelity to initial design, we are aware that not all workplaces will provide a full four hours for training. Also, important group discussion in training may take more time than anticipated. As you read through the six modules, you will note that several modules provide various options for using materials. For example, Module 1 can take from 1 hour to 2 hours and 30 minutes. There are other options for adapting materials (noted with the "◆◆ Option:"). These options are provided to give facilitators a sense of flexibility rather than rigidity in following the core philosophy of *Team Awareness*. More importantly, the materials should be used to promote the goals and philosophy of the training. When spontaneous opportunities arise to promote these goals, facilitators should know how to condense materials.

The core philosophy of *Team Awareness* is the promotion of social health in the local work culture of specific workgroups. *Team Awareness* seeks to promote healthy communication, reduce social distance and isolation, build team spirit, increase trust in coworkers, reduce stigma associated with help-seeking, and improve work group accountability for handling stress and solving social/communication problems that lead to stress.

In order to promote this philosophy, facilitators need to be sensitive to the specific issues and concerns of participants and, whenever possible, encourage some discussion and appropriate self-disclosure about issues and concerns. Some groups will be more open than others and skilled facilitators will know when to probe or push for discussion.

In facilitating discussion, it often happens that there is not enough time to cover all the training materials provided in *Team Awareness*. Facilitators may be concerned about missing important

material for those groups that need it. For this reason, we encourage you to become familiar with all steps in all modules. You may have to offer condensed versions, skip steps, or adapt programs to the setting and time frame available.

### **Obtaining Locally Relevant Materials**

Facilitators are encouraged to obtain materials that are locally relevant to the participant population and that show the facilitator has interest and knowledge in their policies, risks, and concerns. Suggestions for finding such materials are provided in the modules themselves but are briefly reviewed here because of the importance of customizing *Team Awareness*.

**The two most important sets of materials to obtain are:** (1) the substance abuse policy of the worksite and related disciplinary and safety policies, and (2) any and all information concerning getting help through counseling or therapy as provided by the employer (Employee Assistance Program and Behavioral Health Benefits). When either policy or benefits are lacking, facilitators should consult with key personnel (see section “Fidelity Elements” on page 5). The policy and benefits information is useful in Modules 1, 2, and 6 primarily but should be referred to throughout the training.

It helps to do your own research and obtain this information to make the substance abuse issue as relevant as possible through reference to the local community. You may also obtain statistical information relevant to the particular industry, occupation, or other distinguishing characteristic of relevance. Below are some questions to consider for customizing training by bringing in such local information.

- Is the training in a small, medium, or large size business? What special concerns or risks is involved regarding business size?
- Are the participants mostly younger, older, or mixed? What special concerns or risks is involved regarding age group?
- Are the participants mostly male, female, or mixed? What special concerns or risks is involved regarding gender?
- Is the worksite run as profit, non-profit, private, public, local, state, or federal government? What special concerns or risks are involved regarding the regulations associated with these different types?
- Are employee participants mostly involved in working together as a group or team or do they work alone more often?
- What is known about the level of crime associated with substance abuse in the local community?
- Are occupations involved that may have particular risks associated with access to alcohol or drugs (e.g., entertainment, restaurant, pharmaceutical workers)?
- Do employees work more in an urban or rural environment?

We strongly recommend doing some research on these questions whenever possible. Some sources available from the Internet are listed here.

**Center for Substance Abuse Prevention – Workplace Resource Center**

<http://wmcare.samhsa.gov/>

**Office of Applied Studies – Drug Abuse Statistics**

<http://www.drugabusestatistics.samhsa.gov/>

**National Clearinghouse of Alcohol and Drug Information – Workplace Publications**

<http://www.health.org/workplace/>

**Institute for a Drug Free Workplace – Gallup Survey**

<http://www.drugfreeworkplace.org/survey.htm>

### **Microsoft® PowerPoint® Notes**

Facilitators can also conduct the *Team Awareness* training by using the overhead/slide notes that are provided in the “Notes” PDF file for each module. Each slide or overhead from the modules’ “Overheads/Slides” PDF files can be printed out onto a transparency and used. Facilitators can then follow directions for using these overheads directly from the manual steps, and in addition, they can print out the Notes pages and use these to provide direction in the classroom as well. The Notes are abbreviations and not a substitute for the step descriptions in the manuals. They are provided as a trainer accessory.

## APPENDIX MATERIALS

*The following was sent to department managers along with a cover letter to help recruit participants for focus groups:*

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### Focus Group Announcement: A Training Module on Substance Abuse

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**Purpose of Group.** Members of the focus group will serve as consultants—offering knowledge, opinions, and insights—on how to best design a training module that can meet employee and supervisor concerns about the following:

- (1) Substance use among coworkers,
- (2) The effect of such use on individual and group performance, and
- (3) The effect of such use on the workplace as a whole.

The group is not a task force that has to actually design training but rather a panel of “customers” who tell the group facilitators what kind of training will work best, be the most helpful, and will involve and interest the widest spectrum of workplace staff.

**Who are the members?** Between 6 and 10 members will be chosen who have credibility with coworkers, a positive attitude, and who (as much as possible) represent the department with regard to varying departmental, managerial, gender and diversity needs. Some background with recovery, 12-step, or sensitivity to these issues will also be included.

**Purpose of the Actual Training.** To provide a team-oriented, high participant involvement training session that links substance abuse issues to providing better service and that gives employees an opportunity to express concerns about these issues. Possible skills training may entail learning about EAP-supervisory referral options, understanding policy better, and dealing with problematic employees or difficult situations.

### Focus Group Orientation and Guidelines

**Note:**

This text is a more detailed version of facilitator text than can be used in the focus group. The exact wording of this orientation is up to the discretion of the facilitator. However, the spirit of creating a safe discussion environment is of utmost importance to the success of the group. After each section (IA, IB, IIA, IIB), facilitators should stop and ask if there are any questions.

A primary goal of this focus group is to establish rapport between the trainers and the employees. Facilitators should be conscious of the tone that is set in this introduction and assure that appropriate guidelines are followed in the discussion. These guidelines manner apply in three areas (a) professionalism—making sure that the facilitator follows the guidelines, (b) protection—making sure that individuals are not persuaded or influenced in any way to disclose information of a private nature, (c) honesty—as discussion proceeds, the facilitator may describe incidents or situations that feed into the discussion. This can be very effective in enhancing rapport but should only follow the guidelines set below.

### **The following is to be shared with focus group participants:**

There are two aspects to these orientation/guidelines:

1. Orientation to Role and
2. Orientation to the Content.

#### **I.A. Orientation to Your Role in the Focus Group**

You have two basic roles in this focus group:

**The first is the role of a customer.** We want you to tell us what is needed in the way of training to help employees deal with substance use issues in the workplace (both for themselves and for coworkers). We want you to take the opportunity to voice your opinions and concerns about all the issues related to employee substance use. Your feedback and your ideas will help us to make the training relevant and enjoyable.

**The second role is that of an actual trainee.** We will be previewing some of the exercises that we will—in some form—be using in the training. You will be participating in these exercises as if you were actual participants in the training. Your honest reactions to this material will help us to improve upon the training when we actually conduct it.

#### **I.B. Guidelines Concerning Roles**

**Our Role:** Because we are interested in your responses we will be writing down as much as possible of what you tell us. This information will be recorded on FLIP CHARTS, which we will put up around the room so you can see and refer to your previous comments as we proceed. Whatever you say will be “out in the open” unless you tell us otherwise. That is, we will record much of what is said unless you tell us “Don’t write that down.” Alcohol and drug use issues can often be associated with very personal, private, and emotional experiences. The information you give will only be used for training development and will not be used to identify any individual, focus group, department, or (name of business). Because we want to encourage you to talk, we hope you follow these CHAT guidelines to help make this a safe environment.

**CONFIDENTIALITY—What is said in this room should stay in this room.** This includes what was said, who said it, and where they said it. As we proceed you may find that other participants share some information that may be sensitive and that they do not want others to know they have said. Please remember that when you leave here, each of you may have more information



than before. We ask that you do not refer to this focus group as a place where you heard certain information.

**HONOR (DISAGREEMENT, PRIVACY)**—as mentioned earlier, alcohol and drug use issues can often be associated with very personal, private, and emotional experiences. Your views and opinions may or may not be the same as others. This can be a very good thing for discussion. If something is said that you disagree with, we ask that you respect that viewpoint by speaking in a respectful, non-condemning and friendly way. We are very interested in what you have to say, so please try and find a way to express yourself. You could begin with, *“This is how I see it...”*

**ANONYMITY**—As we proceed you may have experiences pertaining to alcohol or drug use in yourself and others that you know. If you choose to talk about these experiences, please do the best you can to refrain from mentioning any names, departments, work groups or including any information that could be used to identify who you may be speaking about (even if you are talking about you). You can do this easily by saying, *“I know someone...”* or *“There was this situation once...”* or *“Let me give you a hypothetical situation, suppose...”*

**TEAM TRUST**—In a way, this focus group is like a temporary team. Like a team, everyone should have the opportunity to participate, should they choose to. We ask that you give each other the opportunity to speak. On one hand, no one person or group of persons should dominate. On the other hand, some people may not wish to share or may not have anything they think will be helpful to share. This is their choice. In other words, we trust that you will trust each other to share what you need to share and let others talk as well.

## **II. A. Orientation to the Content of the Focus Group.**

This group is designed to share as much information as possible in the shortest amount of time. When we say “share,” we mean that we (the facilitators) will be sharing with you and you will be sharing with us. The content of this sharing must follow the (CHAT) guidelines we have listed.

There is also the content of the training that we will be conducting and it is important that you know as much about the training as possible. In a way, you are a select group of people because you will be hearing about the training before it begins.

As you may know, many workplaces do have some basic or standard form of substance use awareness training. These trainings include a review of policy, the employee assistance program, employee’s rights and responsibilities regarding drug-testing, and other regulations required by Department of Transportation or supervisory responsibilities.

Some of these standard trainings are done through a review of a video, some in a lecture format in an employee orientation, and—most recently—some are offered through computer-based training.

Unfortunately, very few studies have been done that actually assess whether these trainings (or the different types) are effective. From a financial standpoint, effectiveness is important. Trainings are required in many businesses and so they are a fixed cost. It is likely that millions of dollars are spent every year (just in the public sector alone) on these standard trainings. So, there is a need to really do a good job of studying the effectiveness of trainings.

The *Team Awareness* training has been studied in research experiments and found to be effective in improving employee willingness to seek out help for problems, appropriately encouraging others to seek out help, improving confidence in the EAP, improving knowledge about policy, and actually reducing drinking problems. These are initial findings and we think the success of *Team Awareness* partly depends upon employee input. Indeed, focus groups were used in the initial research studies.

We want you to help us make this training effective. In this focus group you will be shown a small portion of some of the training that we plan to do later.

## **FOCUS GROUP OUTLINE**

### **MATERIALS**

- ✓ Copy of workplace policy
- ✓ Overheads of training samples
- ✓ Consent Form (required for research study)
- ✓ Focus Group Guidelines
- ✓ Sample Training Materials

### **OUTLINE**

- Introduction to Focus Group
- Purpose
- Why You Were Chosen (Representatives/Customers)
- Informed Consent Procedures
- Ice Breaker
- Introduction to Flip-Chart
- Flip-Chart Questions
- Background/Orientation
- Policy and EAP
- Sample Activity
- How can we do better?

## BACKGROUND QUESTIONS

- What are the main sources of stress for you and your coworkers?
- What kinds of changes have happened in the last 1 to 2 years in your workplace related to how work is done?
- How have these changes impacted you?
- How many of you have participated in any of the different trainings that have been given over the past year or two? (following are examples)
  - Sexual harassment
  - Cultural diversity
  - Workplace Violence
  - EEOC (FMLA/ADA)
- What did you think of these trainings? Were you able to use what you learned? Why or why not? What were some obstacles to using training?

## POLICY QUESTIONS

- What have you heard about the substance use policy?
- What are the key or core aspects of policy?
- How do you feel about it?
- What do you know about your EAP? What have you heard?
- Describe a situation where you might use your EAP?
- What are some ways that your workplace could improve upon EAP services to you and your coworkers?
- What do you know about your mental health benefits?

## PREVIEW ENHANCED TRAINING MATERIALS

*The following sample training materials were selected to preview in the focus groups; some groups used 1 or 2 but not all 3*

- RISKS & STRENGTHS ASSESSMENT (TEAMWORK & GROUP RISKS) + FLIP CHART OTHER RISKS (Module 1; Step 5)
- MAPPING ACTIVITY+TOLERANCE CONSENSUS DISCUSSION (Module 3; Steps 4 and 5)

- COMMUNICATION CASE STUDIES AND DEBRIEFING (Module 6, Step 4)

#### ADDITIONAL QUESTIONS

- In what ways can the material we presented be improved upon or made easier to understand?
- How can we encourage attendance and participation in the program?
- What kinds of questions will come up (that we should anticipate)?
- What racial/ethnic/gender issues should we be sensitive to?
- Are there any special needs of particular employee groups that you would like to see the training address?
  - African American
  - Hispanic
  - Asian
  - Women
  - Men
  - Supervisors

# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition

#### Module 1:

#### Relevance to You and Your Work Group: Orientation and Risk Identification



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129



## Module 1

### Relevance to You and Your Work Group: An Orientation to Team Awareness Training

#### Participants will:

Recognize the importance of addressing employee alcohol or drug (AOD) abuse and how AOD abuse is relevant to teamwork and group performance

Identify current levels of behavioral risk in the work setting related, but not limited, to AOD abuse (hostility, harassment, withdrawal on the job)

Set specific goals for enhancing team communication as a way of reducing risks

#### Materials

- ✓ Flip Chart or chalkboard
- ✓ Overhead or LCD projector and screen
- ✓ Calculator
- ✓ Markers or chalk
- ✓ Pencils for participants
- ✓ Slides or handout of slides for participants to follow
- ✓ A water soluble or erasable pen for overheads
- ✓ Handout materials (see below)

#### Prepare before class

- ✓ Review all overheads and/or flipchart statements.
- ✓ Handouts-Make copies for each participant:
  - Personal Exercise: "Initial Assessment of Risks & Strengths" (2 sided copies).
  - "Ounce of Prevention" Pocket Cards
- ✓ In addition, to the above, you may wish to practice your simple drawing or art skills for Tool # 1 (7 Prevention Principles).

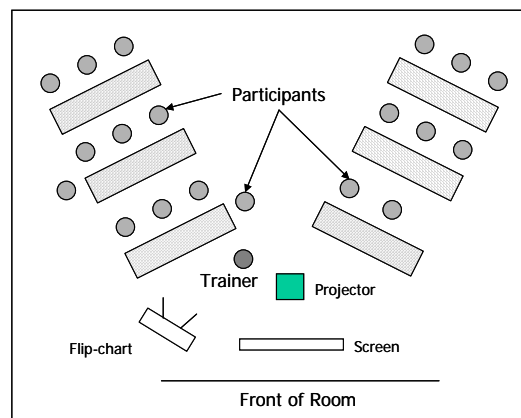
## Participant and Classroom set-up

Number of Participants: 8-24

This session involves participants working solo, in pairs, and as a large group.

When possible, set up the room so that individuals can write on a table and also participate in a large group discussion.

We have used the herringbone style of table set-up. The diagram below shows one possible configuration. **Make sure you have space to move around to facilitate group interaction.**



## Slides/Overheads

**Step 1:** Welcome, training introduction, and session introduction (Slides 1-8)

Welcome participants as they arrive.

### 1.1 Training overview (Slide 1-2)

**Introduce the overall topic and purpose.** (You may use your own words, but cover the three main ideas below)

*"Team Awareness training has the purpose of creating or helping you to maintain a healthy work environment, especially a healthy work group. By "healthy" I mean several things: positive communication, safe work practices, a sense of purpose and meaning, team spirit, and also actually physically and emotionally healthy workers"*

*"Researchers have studied how the workplace can either contribute to employee health or cause health problems. What do you think are some of the important causes—in the work environment—of individual physical health?"*

*Perhaps the most important factor is having supportive and helpful coworkers and supervisors. Employees who feel they belong to a good work group or have supportive coworkers and supervisors are generally healthier than employees who lack a supportive work environment.*

*"This training is really designed to give you tools to help you make the workplace more supportive. Our commitment is to both give you the tools and show you how to use them. We hope that—if you need to—you will actually use them."*

*"The real focus is substance abuse (both alcohol and drugs) because we recognize that such abuse can lead to the above risks (whether the problem is in oneself, in a coworker, or in a friend or family member)."*

“So, we designed the training to be relevant to all these things and hope you find something relevant to you.”

## 1.2 Some Core Distinctions (Slides 3-6)

**For the Trainer:** There are two basic core distinctions that form the core ideas to this training. These distinctions are described in Overheads 4 – 5 and Overheads 6 – 7:

**Substance abuse is:**  
a private problem

**Substance abuse is:**  
a public concern

**Workplace training should:**  
Focus on individuals

**Workplace training should:**  
Help work groups and teams

**As you put up the overheads, simply explain that:**

“The current training is different than traditional trainings in workplace substance abuse awareness because it seeks to give the entire work group tools for dealing with problems and improving communication.”

Add the following, especially if linking the program with any quality, team building, or service initiatives:

“We also recognize that substance abuse can have effects on your ability to provide services as a team.”

### **ADVISORY AND SUPPORT TO TRAINERS**

**Note.** In some settings, participants may complain or believe that this is “Narc” training; that they will be learning skills to “turn their buddies in.” Explain the training is sensitive to concerns about confidentiality and refer to the following information at any point during the training.

**To the trainer:** the following information is provided to help you allay any concerns employees have about the intent of the training.

The training is completely confidential, what participants choose to say to their coworkers is completely up to them. The training does not advocate “snitching” or “whistle blowing” or “turning anyone in.” In fact, it seeks to do just the opposite, to encourage employees to get help before problems get so bad that some intervention is required. Explain rules for confidentiality.

Policies in the current workplace (if they are developed) may stipulate that coworkers are required to report problems. If so, explain that is about policy not about this training. Explain that you will be reviewing policy in the next module (Module 2).



If the workplace does not have a fully developed policy, or it has no provision for coworker awareness, you may add: “One possible outcome of this training is that you, as employees, can form some advisory council or committee that helps to draft a policy.” If appropriate, explain: “Sometimes the most effective policies are those that you create yourselves. One workplace, who received this training, did just that.”

Emphasize that the first and most important purpose of the training is (as explained in Slide 2)—“Enhance team communication” and that, in fact, it would contradict the purpose of the training to promote any “snitching” or “indirect” communication. If appropriate, explain that Modules 5 and 6 will cover this.

### Step 2: *Substance Use & Blocks to Service* (Slide 7)

This activity introduces the topic of stress management and offers a prelude to Step 5. Stress management, especially the ability to cope as a work group, is a major strength that counters the different risks just discussed in Step 3.

Tell Participants “Research suggests that when people get along together they increase their ability to cope—both individually and as a group. Communication, group coping, or team problem solving, also increases employee health and makes workers more resistant to disease.”

Tell Participants “In addition, stress can cause problems in being productive and servicing customers or clients.”

### Step 3: *Ground Rules* (Slide 8)

**For the Trainer:** The GROUND-RULES are essential to display.

### Step 4: *Prevention Principles* (Slides 9-10)

**Explain:** “This training is really about prevention. If you have problems NOW this training can help. If you don’t have problems NOW this training can help you prevent them from happening in the future. Training skills can help you stop little problems from becoming BIG PROBLEMS.”

#### Seven Principles Guided Mnemonic

1. Display slide of the **Seven Principles** and direct participants attention to the Seven Principles cards in their packets (or distribute cards listing the Seven Principles).
2. Review these Principles by reading them aloud and offering clarification. Encourage participants to add ideas or comments.
3. Tell participants that you want to lead them in a brief exercise designed to help them remember these principles.

4. Explain that purposefully and thoughtfully associating a picture or mental image with an idea can help us remember that idea. Ask if anyone has ever taken a course or read an article on memory "tricks." Use example of how to remember a grocery list (celery dancing like Carmen Miranda, eggs being juggled by a clown, a man slipping on a banana peel, a penguin looking in the freezer for some frozen fish sticks, etc.). Taking time to mentally associate a thing with a mental picture (especially if the image is relevant but slightly off the wall) helps memory.
5. Explain that you would like to have the group come up with Seven mental pictures or images to help everyone remember key words/ideas associated with the Seven Principles.
6. With group input, use flip chart to draw a picture/image for the key word/idea in each of the principles. For example, risks may be a "gun" or "spilled water on the floor" or "an ambulance." Quickly get group consensus, then draw the picture. Do for each principle.
7. Review the list and associated images when task is completed.
8. Thank participants for their help; compliment the list/images.

#### Step 5: Introduce Personal Exercise (Slide 11)

**Review Orientation to Relevance Module.** Review the purpose and indicate that we will begin by completing an anonymous/confidential self-assessment.

Introduce this exercise by telling participants that we start the training by looking at the first two principles.

**1. Identify and reduce risks that cause or aggravate the problem**

**2. Identify and increase benefits & strengths that address the problem**

**Explain:**

"To help you get the most out of the training, we want you to think about and share your own impressions about the risks and strengths you see. We have designed a Personal Exercise to help you do this. Be as honest as you can"

**INSTRUCTIONS FOR PERSONAL EXERCISE 2** (Use Handouts 2a-2b as 2-sided, folded pamphlet)

**EXPLAIN:** "In this pamphlet (hold up/point to a Personal Exercise pamphlet), I would like you to be as honest as you can. You will not be asked to share your responses with anyone. However, I want to give your group (as a whole) feedback about how you scored on this. We will be reviewing your responses later in this session."

**EXPLAIN:** "THIS IS NOT A TEST; NO ONE WILL KNOW RESULTS OF THE GROUP EXCEPT FOR PARTICIPANTS IN THIS ROOM."

**EXPLAIN:** “You get to keep this pamphlet. After you write down your responses, please add them up following the instructions. Record your score in the spaces provided for Steps 2 and Step 4 at the bottom of the page. THEN PLEASE ALSO WRITE THE SCORES ON THE PROVIDED SLIPS AND I WILL COME AROUND AND COLLECT THEM AFTER YOU ARE ALL DONE.”

### INSTRUCTIONS TO FACILITATOR:

Before proceeding, ask participants to complete the survey anonymously. Make sure to get their responses by having them write their SCORE ON PROVIDED RED AND GREEN SLIPS OR BY TEARING OFF THE BOTTOM SLIP OF THE PAMPHLET BELOW THE DOTTED LINE.

It is best to ask an assistant to tabulate feedback. You can take a short class break just before giving feedback (see slide #11).

### HOW TO TABULATE

1. Collect all slips (See below for sample)
2. Separate into two piles, one for risk scores and one for strength scores
3. For each pile, add all scores and get the average score

For example, in a class with 12 participants, you have the following scores:

Risks: 0, 1, 1, 2, 0, 4, 1, 5, 6, 3, 3, 0—When summed = 26;  $26/12 = 2.2$

Strengths: 7, 14, 23, 23, 21, 15, 16, 19, 22, 8, 19, 11- When summed = 198;  $198/12 = 16.5$

You will show these scores later with an erasable marker on Overhead #13 (see page 29).

For example, the first participant listed above had a “0” risk score and a “7” strength score.

### Step 6: Introduction to Communication

#### **NOTE TO FACILITATOR:**

Do this activity as a flipchart to help participants begin identifying beliefs and assumptions about communicating or not communicating, particularly when there is a problem, a concern, a conflict, an unresolved issue or when things could be improved.

Draw two columns on the flipchart. Show Overhead 12. ASK FOR PARTICIPANT RESPONSES.

RISKS OF COMMUNICATING	RISKS OF NOT COMMUNICATING

If participants are not forthcoming you can prompt:

Risks of communicating include: being seen as whiny, as a troublemaker, as rocking the boat, upsetting those who might be in control, causing stress for yourself or others, possibly losing one's job, etc.

Risks of not communicating include: the problem continues, stagnation, risks accumulate, isolation, alienation, withdrawal, etc.

If appropriate and you plan on using Modules 5 or 6, add:

"Later in this training we will learn more about communication (Module 5) and also some skills for being able to break through some barriers to communicating (Module 6)"

If appropriate and you plan on using Module 3, add:

"Sometimes we feel it is just better to TOLERATE problems, rather than go through the trouble of communicating about them; later in the training we will explore your tolerance levels." Add: Who remembers which principle this relates to (Answer: 4. Understand your own tolerance for the situation & adjust if necessary)

### **Step 7: Assess Risks and Strengths** (Review of Personal Exercise) (Slide 13)

Before introducing the next overhead be sure to have collected and tabulated the risk and strengths scores from all participants from their PERSONAL EXERCISE 2.

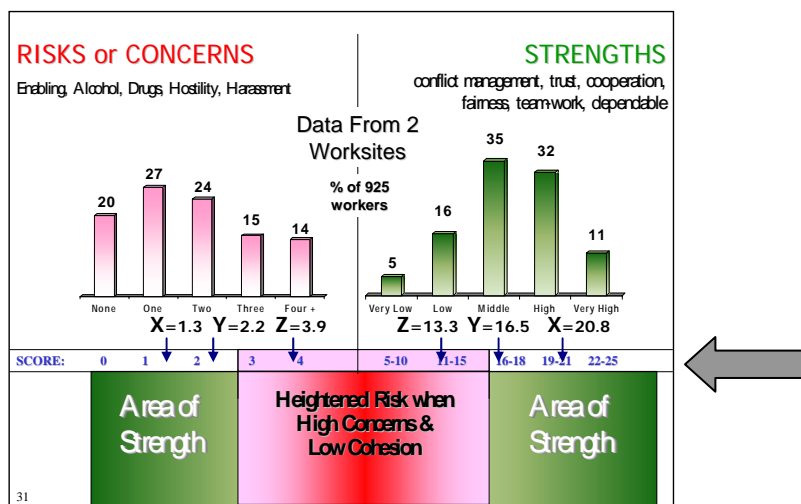
>> DO NOT COLLECT THE ACTUAL SURVEY PAMPHLET, ONLY THE SCORES FROM INDIVIDUALS. (YOU MAY HAVE USED THE RED & GREEN SLIPS OF PAPER OR JUST ASKED THEM TO TEAR OFF THE BOTTOM SLIP OF THE PAMPHLET BELOW THE DOTTED LINE).

### **NOTE ABOUT FEEDBACK AND DEBRIEFING OVERHEAD**

In giving quantitative and real-time feedback to a group of individuals about their own scores, several things should be kept in mind.

1. You may wish to explain your role to clarify any concerns or reduce anxiety. That is, explain that you are not here as a psychologist or evaluator; rather you are here to HELP participants understand risks so that they can take action to do something.
2. If all participants are from the same group and/or coworkers spend a good deal of time together, the scores may accurately reflect the dynamics of the assembled group. Participants may become uncomfortable. Facilitator comments should always balance sensitivity, and confidentiality, while addressing curiosity (avoid/disarm confrontational comments). This activity could be a very powerful icebreaker for a group that has high risks and low cohesion.
3. It is important to emphasize that the scores are NOT DIAGNOSTIC (THIS IS NOT A TEST); that is, they cannot be used to determine with certainty that PROBLEMS ACTUALLY EXIST, because the survey is based on self-report and attitudes and personal biases can influence ratings. EMPHASIZE this is an exploratory activity.

4. If you (the facilitator) have never given feedback on survey scores, we strongly encourage you to become familiar with professional ethical standards of either organization below:
- American Psychological Association Ethical Principles of Psychologists and Code of Conduct (visit <http://www.apa.org/ethics/code.html>)
  - American Educational Research Association (visit <http://www.aera.net/about/policy/ethics.htm>)



**Present feedback on Overhead 13.** After you tabulate and get average scores for the group you can circle the average RISK score (in red) and the average STRENGTH score (in green) on the overhead with an erasable marker.

Remain sensitive to high risks and maintain confidentiality. **DO NOT REPORT THE SCORE OF ANY SINGLE INDIVIDUAL.** It is useful to know if some participants are experiencing high risks and may help you be more sensitive to the needs of the group.

It may help to review **Ground Rules**.

#### EXAMPLE X (MOST SHOW LOW RISK with one high risk participant)

In a class with 10 participants, you have the following scores:

Risks: 0, 1, 0, 1, 2, 1, 0, 1, 1, 6—When summed = 13;  $13/10 = 1.3$

Strengths: 21, 18, 24, 23, 21, 21, 25, 24, 22, 10—Summed = 204;  $204/10 = 20.4$

The average suggests that the group as a whole is doing well, with low risk (1.3) and high cohesion (20.8). However, one individual reports all risks. If all participants are from the same workgroup and work together, this could mean that either one individual is exposed to problems that others are not, that individual is distorting their responses, or the rest of the group is “faking to look good.”

### EXAMPLE Y (MODERATE RISK)

In a class with 12 participants, you have the following scores:

Risks: 0, 1, 1, 2, 0, 4, 1, 5, 6, 3, 3, 0—When summed = 26;  $26/12 = 2.2$

Strengths: 7, 14, 23, 23, 21, 15, 16, 19, 22, 8, 19, 11—Summed = 198;  $198/12 = 16.5$

This would suggest a group that is on the borderline (between 2 and 3) with regard to their risk scores; and also on the borderline (middle range between 16 and 18) on their strength scores. You might say that a group with these scores may have a particular need for training and ask participants to identify what they think their special needs are.

### EXAMPLE Z (MODERATE TO HIGH RISK)

In a class with 10 participants, you have the following scores:

Risks: 3, 1, 2, 4, 5, 6, 3, 5, 4, 6—When summed = 39;  $39/10 = 3.9$

Strengths: 16, 18, 10, 12, 14, 11, 15, 12, 13, 10—Summed = 131;  $131/10 = 13.3$

The average suggests that different members of the group as a whole may be experiencing several different types of risks or all individuals are exposed to the same type of risk. At the same time, group cohesion is relatively low. If participants work together, you may want to inquire about the special needs of the group and also ask them if there has been any attempt to deal with the situation. A real potential problem may be revealed in discussion (a hostile employee or harassment situation that has not been corrected). If so, ask the participants if you have their permission to support them to get additional help. You may help them to contact their human resources director, employee relations director, or employee assistance program. At all times, maintain confidentiality and provide support and encouragement to employees to get help.

**Conclude.** Thank participants for being willing to examine themselves and their workplace. In concluding Step 5, you can make many points about healthy communication, honoring privacy, and also reinforce the importance of honesty and self-awareness as keys to healthy relationships.

**Say:** "One important quality of a healthy workplace is it includes employees who are willing to self-assess how healthy they are. This is what we just did. I encourage you to talk about the results with each other when you can. If you have coworkers attending a different session, ask them about their own scores, as well. We think it is important to get problems out in the open. However, we also want to remind you about confidentiality and encourage you to talk directly to each other and not go behind anyone's back. Remember the primary purpose of this training is...?"

**Say:** "Identifying risks and strengths is also the first step toward correcting situations. Additional skills may be needed to take the next steps. These steps, which we will cover next and in other modules are:

- Communicating clearly about ways to get help
- Overcoming resistance to communicating
- Generating options for getting help
- Reducing stigma to getting help
- Increasing your ability to respond to others in need
- Getting support to make changes

### **OVERHEADS**

1. Title page
2. Overall purpose
3. Private concern
4. Public concern
5. Traditional training
6. Team training
7. Substance use & service quality
8. Ground rules
9. Ounce of prevention
10. 7 Principles
11. Risk & strength assessment
12. Risk of communicating/not communicating
13. Risk & strength feedback

### **Handouts:**

1. Ounce of prevention cards
2. Risk & strength assessment (Copy Handout 2a as front and 2b as back; then fold to make assessment as a pamphlet.)

# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition

## Module 2

### Team Ownership of Policy: The Risks & Strengths Game



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129





## Module 2

### Team Ownership of Policy: The Risks & Strengths Game

#### Participants will:

- Understand how substance use policy protects employees
- Identify ways that policy can enhance team or workgroup health as well as reduce risks
- Understand that effective policy requires shared responsibility

#### Materials

- ✓ Flip Chart or chalkboard
- ✓ Overhead or LCD projector and screen
- ✓ Markers or chalk
- ✓ Pencils for participants
- ✓ Slides or handout of slides for participants to follow
- ✓ Handout materials (see below)

Risk & Strength Game Board and Materials (see Appendix)

#### Prepare before class

Handouts: "Getting Help/Getting Caught" activity

**Note.**

We encourage you to customize the "Risks & Strengths" game spaces. You can make up questions that will be most relevant to your participants. Make sure you bring any materials (handouts, pamphlets, newsletters) that explain wellness programs, health benefits, or alternative paths to getting help for substance abuse (alcoholics anonymous). If possible, incorporate this information into Step 5 overheads. Provide summary of any drug testing policy.

**Ideas Behind This Module**

This overview, while not part of the training material, may help facilitators better understand the current approach. This Module of the Team Awareness looks at workplace policies from a personal, social, informal, and customized perspective. In contrast, most employee training views policy exclusively as an impersonal document, designed to inform individuals about the formal procedures that administrators will follow in dealing with substance abuse.

## Team Awareness Versus Traditional Views of Policy

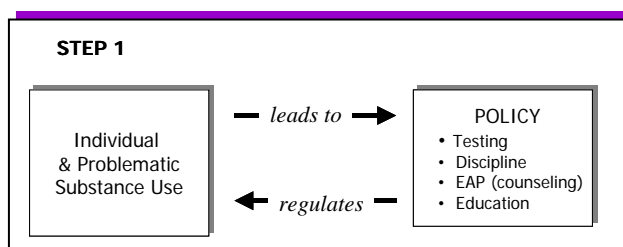
The following table shows the different emphases of the current training versus standard or traditional training programs. This is not a hard and fast distinction but rather a different emphasis or continuum through which workplaces implement policies.

Team Awareness	Standard or Traditional
Personal—Policies address the personal reality of employees: past experience with alcohol and drugs; exposure to other's use; attitudes toward employer attempts to control, punish, educate, or help users.	Impersonal—Policies are tools of accountability so that employers do not have to deal with individual workers on a case-by-case basis. They provide rules that apply equally to all workers.
Social—Policies are enacted according to relationships in the workplace. Abusers may be seen "at risk" by coworkers, who share responsibility for getting help.	Individual—Policies require that individuals understand the rules and follow them so that alcohol or drug abuse does not occur.
Informal—Policies work according to how they are interpreted in informal ways in the day-to-day setting of personal and social activities at work.	Formal—Policies work according to how well they follow legal protocol and adhere to federal, state, or other regulations.
Customized—To be most effective, training on policy should be sensitive to the personal, social, and informal process of policy interpretation and enactment at the local level.	General—Policy training is effective if it adheres to guidelines and includes certain standard and core components, regardless of the particular work setting.

### TCU Workplace Process Model of Policy

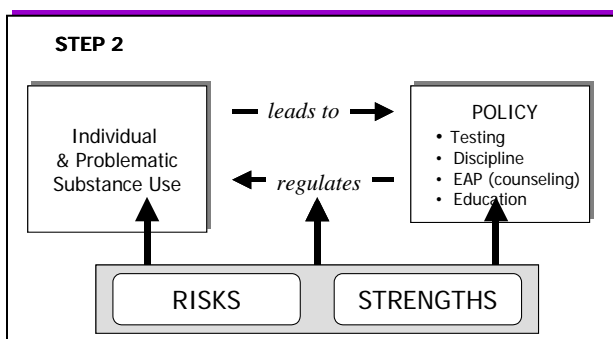
Over several years of research, our team developed a model to help understand social aspects of policy.<sup>1</sup> This model describes—in three steps—a different approach to policy training.

**STEP 1.** Generally speaking, policies develop because the federal government, employers, and other stakeholders in companies are concerned that an employee may abuse alcohol or drugs. This concern is represented in the first step



<sup>1</sup> For a complete review of this model, see the following reference: Bennett, J.B., Lehman, W.E.K., Reynolds, and G.S., (2000) Team awareness for workplace substance abuse prevention: The empirical and conceptual development of a training program. *Prevention Science*, 1 (3), 157-172

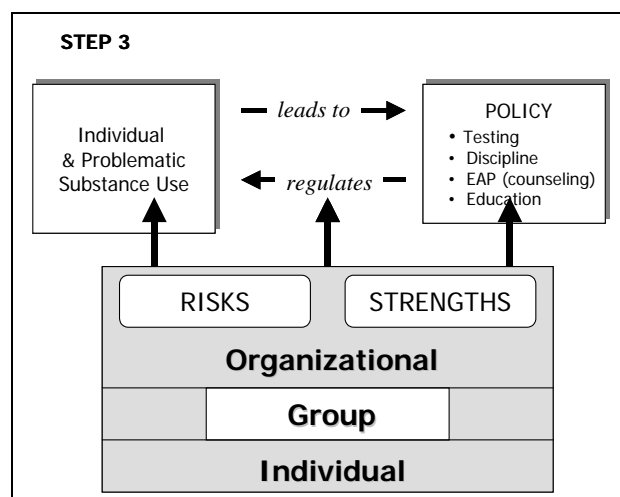
of the process model, shown above. From the standard view, policies develop to regulate individual and problematic substance use. As mandated by law, policies are presumed to be effective if they have four components: (1) drug testing, (2) discipline for violations, (3) availability of counseling (e.g., Employee Assistance Program), and (4) educational training for employees, especially supervisors.



**STEP 2.** In an ideal and rational world, this model should work. Put simply, substance abusers who are educated about policy should "get help" before they "get caught". Alternatively, if caught, they should then get help and get better. Unfortunately, many factors prevent this ideal from working so smoothly. Some of these factors were discussed as "risks" in Module 1 of this training. As discussed in Module 1, there are also

protective factors or "strengths" that can make policy more effective. For example, policy is more likely to work for cohesive work groups that have lower behavioral risks (see STEP 5 in Module 1). As shown above, risk and protective factors influence: (1) substance use, (2) policy implementation, and (3) the effectiveness of policy.

**STEP 3.** The process model suggests that workplace training on policy would be more effective if it helps employees address these risk and protective factors. There are three different types of risk and protective factors. There are risk and strengths in (1) the individual, (2) the workgroup, and (3) the organization. For example, individual risk factors include all those psychological, physiological, and experiential risks that lead someone to use drugs in the first place and that keep someone dependent on alcohol or drugs. Organizational protective factors include healthy work practices, good benefits for employees, and a positive work environment. The focus of the *Team Awareness* training is to help workgroups and relationships at work to increase group strengths and reduce group risks. Specifically, this module emphasizes the importance of the work group as a major factor in helping policy to succeed or fail. One objective of this module is to increase team or workgroup knowledge about policy and substance abuse. Another objective is to help improve work group decision-making about how to use policy as a tool for prevention.



Because this model focuses on group interpretation of policy, it is important that facilitators thoroughly read and understand substance use policy. Before delivering this module we encourage you to become familiar with workplace substance use policies—in general—as well as the particular policy in the workplace where the training will be delivered. If the workplace does not have a policy, then a

general knowledge of policies and some review of specific policies can be very helpful. The appendix to this module provides some resources for facilitators to review.

### Step 1: Overview: How Policy Works (Slides 14-16)

#### SOME IMPORTANT TIPS FOR THIS MODULE

This module was originally designed and implemented to address the specific policy components of the worksite in which the trainees worked. We encourage you to become familiar with current policy before providing this training.

IF THERE IS NO POLICY IN PLACE\*--then you may use this module to help the employer and workers see the value of having a policy. You may possibly involve some workers in a task force or committee to help in policy development.

IF YOU HAVE A POLICY IN PLACE—VERY IMPORTANT. The *Team Awareness* training places a great deal of emphasis on GETTING HELP for problems and contrasts the awareness and initiative in self-help (GETTING HELP) with the disciplinary policy and surveillance of drug-testing (GETTING CAUGHT). Please review your policy for any and all indications where employees are:

Encouraged to get help

Given unrestricted and confidential access to an employee assistance program or counseling professional

Provided access to alcohol or drug treatment as part of a health benefits plan

Also, note that while the "RISKS & STRENGTHS" Board Game uses standard questions that should apply to different work settings, facilitators should be prepared to answer any questions about the specific policy at the worksite.

WE ALWAYS RECOMMEND DEVELOPING YOUR OWN QUESTIONS AND KEEPING A COPY OF THE POLICY WITH YOU IN THE TRAINING CLASSROOM.

**A number of helpful guides and booklets** are available from the Center for Substance Abuse Prevention at [http://wmcare.samhsa.gov/frames/frame\\_resource.htm](http://wmcare.samhsa.gov/frames/frame_resource.htm). See "Drug Free Workplace Policy- Program Development." A good starting place is "Making Your Workplace Drug Free: A Kit for Employers".

#### INTRODUCE THE SESSION (Slides 14-15)

Read overhead and explain that this is the purpose of Module 2 on policy.

**Say:** There are two basic components to the module. The first component focuses on understanding policy. The second component is the "Risks & Strengths" board game.

>>**Ask:** What does the term "policy" mean?

>>**Say:** Policy is usually understood as a written document or set of rules and guidelines that we follow when governing and managing affairs. One definition reads “prudence or wisdom in the management of affairs”. In this training, we make the distinction between (1) this written document and (2) how policy actually gets used, implemented, or acted on in the day-to-day realities of your workplace. There is often a difference between “formal” policy and the “informal” reality of daily work life.

>>**Ask:** Do you always do everything by the book? Do you follow all rules and guidelines like you are supposed to every day? (Some will say yes, but note that many adapt, accommodate, and find ways of doing things without having to dot every “i” and cross every “T.” Moreover, some even “bend” the rules.)

>>**Say:** For this training, we see that policy really has three basic components:

1. It tells you what the problems are and how you should avoid substance abuse
2. It encourages you to get help for problems (GETTING HELP – A STRENGTH)
3. It tells you what happens if you don’t get help; substance abuse either effects your performance or you are drug tested positive (GETTING CAUGHT – A RISK)

>>**Say:** In the first part of the module we will learn about policy, in the second part we will explore how policy is a TEAM EFFORT and that it requires SHARED RESPONSIBILITY. You will play a game that looks at team risks and strengths and teaches about substance abuse and policy at the same time.

### **EXPLAIN HOW POLICY WORKS (Slide 16)**

Read overhead and explain that this is the purpose of Module 2 on policy.

>> **Read the overhead as shown.** If you have a copy of the actual workplace policy with you, take a minute to point to phrases or clauses that illustrate or exemplify any of the points in the overhead.

Identify “RESPONSIBLE BEHAVIORS” – most policies have a statement that says employees may not report to work under the influence of alcohol or illicit drugs or use substances while at work. Find the statement in the policy and read it.

Also, read any part that identifies “DISCIPLINE” – most policies have a statement that says employees who are found to violate the policy will be subject to disciplinary action of some sort. Find the statement in the policy and read it.

### **Step 3: Policy Components (Slides 17-19)**

This overhead shows THREE CORE ASPECTS of Policy and provides an overview to the next overhead. (Slide 17)

>>**SAY:** In general terms, we can look at policy as having three primary goals, all with the objectives of helping employees to GET BETTER.

The three objectives are:

- ❑ To know what problems are or identify when alcohol or drug use has become a problem
- ❑ To know how to get help and to reduce barriers to getting help, and
- ❑ To know about consequences of not getting help and any drug testing procedures associated with GETTING CAUGHT

>> **SAY:** Let's look at each of these three components in more detail. (Slide 18)

- ❑ (top panel) **KNOWLEDGE OF PROBLEMS** requires understanding:
  - Different levels of use– USE >>> MISUSE >>> ABUSE
  - Job Warning Signs and what they MAY mean Risks and Hazards associated with misuse or abuse
- ❑ (middle panel) **GETTING HELP** requires understanding that you have alternatives, options, or different ways of getting help:
  - If we are SELF-AWARE, we may be able to help ourselves (SELF HELP) or we can go to the EAP, a counselor or 12 step program (SELF REFERRAL).
  - >> **ASK:** What can be the problem with GETTING HELP on one's own, if you are addicted or have dependence on a drug?
  - If Coworkers or others (friends or family) are aware, they may also encourage us to get help; OR they may ask the EAP what to do.
  - >> **SAY:** We will do an exercise that asks you to weigh the costs & benefits of getting help in a few minutes.
  - [TIP. READ/REVIEW any portion of policy on EAP or getting help]
- ❑ (bottom panel) **GETTING CAUGHT** can happen in several ways:
  - Supervisor observes JOB WARNING SIGNS and decides to drug test (REASONABLE SUSPICION).
  - Other types of drug testing pick up use of drugs; What are these other types of testing? (POST ACCIDENT; RANDOM; Or PRE-EMPLOYMENT (if you leave here to work somewhere else).
  - Also note that there is often, if not ALWAYS, some form of DISCIPLINE involved w/getting caught.
  - >> **SAY:** We will do an exercise that asks you to weigh the costs & benefits of getting caught in a few minutes.
  - [TIP. READ/REVIEW any portion of policy on drug testing/discipline].

>> **SAY:** Generally speaking, we can distinguish three levels of use. (Invite participants to read each of the three from the overhead). (Slide 19)

>> **ASK:** What does policy say about each of these?

>> **EMPHASIZE** (If appropriate): Your policy says nothing about the use of alcohol when you are not at work or in ways that do not affect your work. So, USE of alcohol and legal drugs is generally permissible under policy. It is when such use can impair your performance at work that you may be MISUSING.

◆◆ **Option:** Copy and distribute handouts of this slide.

#### Step 4: Getting Help/Getting Caught (Slide 20)

This exercise requires (1) a handout of the overhead, and (2) a flip chart or overhead erasable marker. Follow the steps in conducting this exercise.

Distribute the handout so that each table (of 2 to 5 participants) has one.

Divide the room in half or randomly ask half the room to focus on GETTING HELP and the other half to do GETTING CAUGHT.

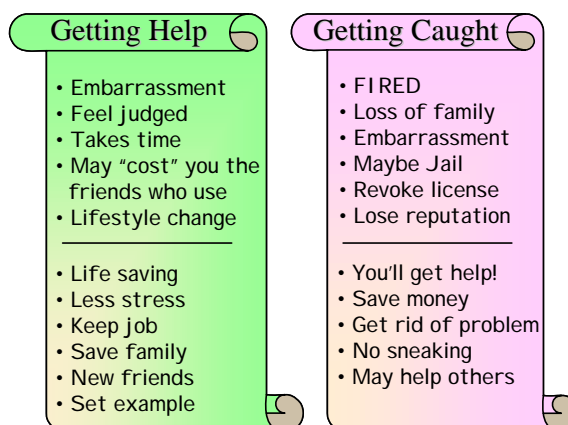
Ask the participants (at their tables) to write out and list as many costs and benefits that they can think of to their assigned list.

Ask for feedback and have a volunteer/participant write down the answers on the flipchart or overhead (using erasable marker).

Ask participants to weigh costs and benefits and decide whether it is better to get help or get caught.

Ask why people do not get help, even when the benefits of doing so seem to outweigh the costs.

Here is an example of previous responses seen in this exercise...



#### Step 5. Signs of not coping well (Slide 21)

>> **Overhead 21:** Ask volunteers to read the overhead out loud.

Make sure to indicate that if participants are experiencing but a few of these symptoms, they may want to get help or look into changing their habits or coping styles.

◆◆ **Option:** Make handouts of this slide and suggest that participants leave it up on their refrigerator.

## Step 6: Additional Components and Complementary Supports

### **Note.**

It is important to include additional information that is vital to employee understanding of policy, especially in the areas just discussed: Getting Help and Getting Caught. The next three overheads are provided as examples of the type of information we suggest you review with participants.

This overhead will require customization depending upon your worksites' Employee Assistance Program

Employee Assistance and/or Other Counseling/Self-Help. In making the case for supporting GETTING HELP instead of GETTING CAUGHT, it is important to provide additional information about the Employee Assistance Program.

Check with your EAP to provide brochures or other handouts that explain the EAP services that are available.

**TIP.** If possible have an EAP representative come to the session to provide a five minute overview of services that are available.

Very often, the EAP will provide a phone number (sometimes TOLL-FREE) that employees and their dependents can use. Be sure to provide this information as well.

(If there are other community services, Alcoholics Anonymous, or other 12 step programs you may also want to have literature on hand for these groups as well)

## Step 7: Preparing "Risks & Strengths" Board Game for Teams

**Preparation.** To prepare for the game, you will need to take the following steps.

Print out 5 or 6 color versions of the Risks and Strengths Game Board. See instructions in the Appendix of this module for printing and formatting the game board.

Use overheads of the different questions as well as overheads that display the portion of the Game Board that follows each question.

Purchase a box of Red and Green Poker Chips. You should have at least 50 chips of Green and 50 of Red.

Purchase 6 pairs of dice, preferably 6 red-colored dice and 6 green-colored dice.

Design or purchase a set of playing pieces or tokens that a team can use to distinguish itself from other teams (different colored beads, parts of a charm bracelet, or Monopoly pieces).

Use a piece of paper to hide the bottom half of the overheads that displays the answer to the questions. You will want to hide the answer until all teams have provided their response.



## Set-up Room for Play.

Divide participants evenly into three to six teams, depending upon number attending the session, so that there are 3 (bare minimum) to 6 in a team.

Ask participants of each team to sit around their own table.

Provide each team with a game board, and two dice, and ask them to choose a playing piece.

## Explaining the Rules. (Slide 23)

Explain the rules of the game in the following steps, referring to overhead:

**Questions drive the game.** All teams will be asked a question, the same question. I will show you the question on the overhead. After you are asked a question, discuss the answer with your team and decide on the correct answer by writing it down. Think quickly, you will have 30 seconds.

**Red (incorrect) and Green (correct) Spaces.** Look at your game board, and you will notice there are RED and GREEN spaces. If your team gets the answer correct you will advance your token on the game board to a GREEN Square. Your team will also get a GREEN poker chip. (Hold up chip and say "This is a strength.")

**Red and Green Chips.** If your team gets the answer incorrect you will advance your token on the game board to a RED Square. Your team will also get a RED poker chip. (Hold up chip and say "This is a risk").

**Reading the space.** I will ask one of the teams to read what it says in the space that you landed on.

**Getting Help (Roll One Dice).** You want to AVOID accumulating RED chips or RISKS. One way to do so is by GETTING HELP. Take a look at the very top of your Game Board. You will notice that there are spaces on the board where you have the opportunity to get help (after Level 3; 6B; 7F). THERE IS NO PENALTY FOR GETTING HELP. If you choose to get help, someone on your team will roll ONE DICE and read what the DICE tells you to do at the top of the game board.

**Getting Caught (Roll One Dice).** You will note that some RED spaces indicate that you have to go for TESTING or to GETTING CAUGHT. If you GET CAUGHT you will look at the bottom of your game board and roll ONE DICE to determine what action to take regarding GETTING CAUGHT.

**Objective of Game.** Your objective—as your team answers questions and moves from space to space—is to keep a positive balance of STRENGTHS OVER RISKS. That is, make sure you have more GREEN CHIPS than RED CHIPS. Ultimately, you should have no RED CHIPS by the end of the game.

## Drug Testing.

Note that there are several spaces on the board where a team may be required to go for a drug test. If a team lands on a drug test space they are required to ROLL TWO DICE and use the chart at the right hand side to determine the outcome of the drug test.

### 1. **KNOW THE TYPES OF TESTS:** There are four types of tests:

Post-accident (game space 6B)

Random Test (game space 7F and 10B)

Reasonable Suspicion (game space 10D and 11F)

Test for Promotion (required as the final question.

There are also other ways of getting tested (see Getting Caught Dice roll 5 and 6 at bottom of board).

### 2. **SUBTRACT RISKS FROM STRENGTHS:** The grid at the right of the game board shows that a team's chance of getting a POSITIVE TEST depends on the Total Number of Risks when they get tested. As the board indicates "The chance of getting a positive test increases if your group has more risks than strengths." To determine # of risks, the team should subtract the number of RED CHIPS from the number of GREEN CHIPS and give to the facilitator all the green and red chips that are subtracted. For example, if a team had 5 green chips and 3 red chips, they would turn in the 3 red chips and 3 green chips and would be left with 2 STRENGTHS ( $5 - 3 = 2$ GREEN CHIPS). Thus, they would have NO or ZERO RISKS left and would roll TWO DICE and look at the result on the right hand chart.

### 3. **READ THE RESULTS OF THE DICE TOSS:** As Overhead 20 indicates, a team with 0 or ZERO risks can never get a positive test, but a ROLL of "2" (Snake eyes) shows "Possible Tampering" and the team gains an additional risk. With 1 Risk, a team has two chances of getting a positive test (a roll of "2" or "12"). With 2 or more risks, a team can gain a positive test (a roll of "2" "3" "4" "5" or "6").

### 4. **TESTING POSITIVE.** Any team that tests positive twice for drugs is immediately disqualified from the game.

### 5. **END OF GAME.** Every team has to roll the dice at the very end of the game to test for promotion.

**Winning the Game:** Gain Strengths/Avoid and Lose Risks. Be sure to indicate that teams should get as many strengths (GREEN CHIPS) as possible and explain below. (Slide 24)

**SUBTRACTING RISKS (red chips) FROM STRENGTHS (green chips):** There are three places on the game board where you can remind participants to determine their tally of risks versus strengths. These occur at the end of ROUND 1 (level 4 or column 4 on the game board); the

end of ROUND 2 (level 8), and at the end of the game (Test for Promotion). Overhead # 29 helps you guide participants in assessing their overall level of risk. For example, if a team ends up on Space 3B, they will have answered 2 questions correctly (2 green chips) and 1 question incorrectly (1 red chip). This means that overall they have no risks and 1 strength because  $2 \text{ green} - 1 \text{ red} = 1 \text{ green}$ . The message here is that **STRENGTHS BALANCE OUT RISKS**. You can have teams accumulate all risks and strengths to the end of the game or keep balancing them out by turning in the subtracted green or red chips after ROUND 1 and ROUND 2.

**Note.** The “Risks & Strengths” game has some built-in flexibility. Please see the appendix for how to customize the game board and include questions of your own.

**ENDING THE GAME.** How you decide to end the game will depend on how much time you have, what the participants want, and how much fun they are having. Generally, the game ends when, after the last question and answer, all teams test for promotion and the final tally of GREEN CHIPS is taken.

**DETERMINE FINAL TALLY:** Ask each team to subtract the RISKS from STRENGTHS. The team with most STRENGTHS wins.

**IN CASE OF TIE:** You have the option of providing participating teams with an extra question to break the tie or you can declare the tying teams as both winners.

**AWARDS/GIFT CERTIFICATES:** We encourage you to provide winning team participants with some sort of award for winning. We have found that participants enjoy a choice of gift certificates from local restaurants, department stores, and movie rental outlets.

### Actual play of “Risks & Strengths” Board Game

Familiarize yourself with the game board, questions, and answers: In order to make the game fast-paced, exciting, and fun, it is important to become familiar with the following factors:

Your Role as Facilitator

Set-up of Game

Actual Play

Debriefing

**Your Role as Facilitator.** Your role when facilitating the actual play of the Risks and Strengths game is like that of a game show host or radio announcer (think “Bob Barker”). You should become very familiar with the sequence and speak clearly but quickly.

Question → Answer → Hand out Chips → Game board →

Question → Answer → Hand out Chips → Game board

### Set-up of Game.

- Make sure you place all overheads in sequence.
- Make sure you have your red and green poker chips.
- Prepare to move very quickly from reading the answer—to the question—to the next overhead – and use the overhead to show where participant teams move on the board.

**Actual Play.** The following sequence for the first question is generally repeated throughout the game. (Slides 26-46)

1. READ THE QUESTION WHILE HIDING THE ANSWER.
2. GIVE PARTICIPANT TEAMS 30 SECOND TO DISCUSS ANSWER (Some teams take a little longer but try to keep it less than 45 seconds before answers are given).
3. ONLY AFTER ALL TEAMS ARE READY, HAVE THEM GIVE THEIR ANSWER.
4. SHOW THE ANSWER.
5. PASS OUT CHIPS. ACCORDING TO WHETHER THE ANSWER IS CORRECT (GREEN) OR INCORRECT (RED).
6. MOVE TO NEXT OVERHEAD.
7. ASK A TEAM THAT RECEIVED THE CORRECT ANSWER TO READ THE GREEN SPACE (1A). After they read say “that is a strength”.
8. ASK A TEAM THAT RECEIVED THE INCORRECT ANSWER TO READ THE RED SPACE (1B). After they read say “that is a risk”.
9. PROCEED TO NEXT QUESTION.

**After the Last Round of Play.** Please note that there are **three** rounds of play. Following the last round of play, you may have teams “Test for Promotion,” (see left) especially if the green/red chip count is close between the teams. After this final “test” and last question, the game should be over unless there is a tie.

**Debriefing.** After the game is over, take a moment to ask participants the following questions:

- What does this game teach us about getting help?
- What does it teach about getting caught?
- How does team knowledge about policy help you gain strengths?
- What else did you notice about the game?

## Appendix I

### Risks and Strengths Game Board

The Risks and Strengths of Policy game is provided as a PowerPoint TM file. If desired, trainers can customize the game's content. The trainer will need to print, and preferably laminate the game board before playing the game. This section will explain how to format and print the game board. The files "RSGAMEBOARD" and "RSGAMEBOARD2" contain two versions. "RSGAMEBOARD" fits the game board onto one page, which requires enlargement. "RSGAMEBOARD2" shows the fully expanded version in the suggested 24.5" by 18.5" format. Directions below explain how to print this version.

### Content of the Game Board: Risk & Strength Squares

Various spaces on the game board contain text that describes actions taken by the team as a result of their move. Some actions are strengths ("Your work team decides to go to a class on stress management."), and some actions are risks ("An employee spreads rumors about a coworker's addiction to hard drugs."). Some risk squares also contain text that directs the players to the top of the game board where they "get help" after testing, and some risk squares--"get caught"--directs players to the bottom of the board.

<p><b>Example of Strength Space</b></p>	<p><b>Example of Risk Space</b></p>
<p>A co-worker tells you he is stressed with a supervisor. You listen and help to solve the problem.</p> <p><b>1A</b></p>	<p>Members in your work group believe that getting help is a sign of weakness and loss of control. This keeps some from talking about problems.</p> <p><b>2B</b></p>
<p><b>Example of Get Help Space</b></p>	<p><b>Example of Get Caught Space</b></p>
<p><b>POST-ACCIDENT TEST</b> Refer to TESTING chart &amp; Roll Dice. After the test, <b>Get Help</b> if you wish.</p> <p><b>6B</b></p>	<p>A team member fails to tell a supervisor when taking medications that affect work. Refer to <b>Getting Caught</b></p> <p><b>6D</b></p>

Some facilitators and/or organizations might wish to change the content of these squares to personalize the game for their particular situation. Information on the following pages explains how you can print the "Risks & Strengths" game board as well as modify and customize the information in the different spaces.

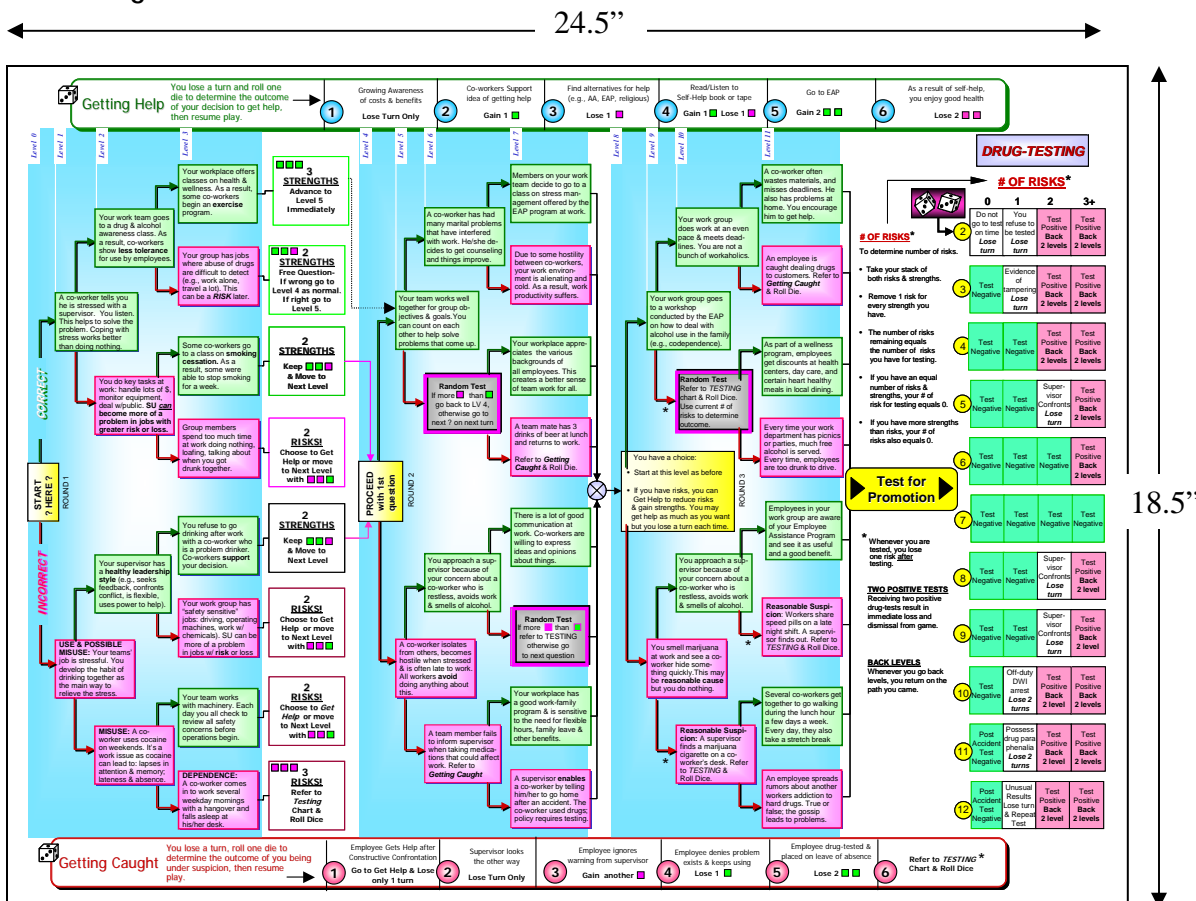
### Printing the Game Board

Printing the Game Board requires the use of an oversized printer available at your local copying services store. Contact your local copying services store, and explain that you need to print a copy that

is 24.5 inches by 18.5 inches in size. They should direct you to save the PowerPoint™ Game Board file onto a floppy disk and bring it to the copying services store.

**A Word of Caution.** When picking-up your printed game board, remember to look over the copy thoroughly for formatting mistakes, which often occur during the printing process. The text should be well aligned and inside the boundaries of each text box. The various lines, text boxes, and “floating text” should be properly aligned, etc.

### Reformatting the Size of the Game Board



For various reasons, the trainer might desire to reformat the size of the game board.

### To increase the size of the game board:

Open the game board file with the Microsoft PowerPoint™ software program. This file is titled “RSGAMEBOARD.ppt.”

Save the game board as a new file by selecting from the Menu Bar **File**, then **Save As**. In the File Name: field, type a new name for your resized board, and click **Save**.

On the Menu Bar select **File**, then **Page Setup**.

In the “Slides sized for:” field select **Custom**.

In the Width: field enter the desired width in inches. (24.5" suggested)

In the Height: field enter the desired height in inches. (18.5" suggested]

Click OK. The "white space" under the game's content expands to the new width and height.

Each square, line, and image of the game board's content has been "grouped" as one large image. Select this image by clicking once on the image in a non-text area (e.g., on the blue space between strength and risk squares). As described above, clicking on text will only activate a cursor in the clicked-on textbox.

Use the mouse to position the cursor over the lower right corner of the image. The cursor changes to the "resize" cursor.

Click and hold the left mouse button on the corner of the image. Drag the corner down and to the right until the desired size of the game board's content is approximated. Release the left mouse button.

After resizing the game board's content image to match the newly resized game board, some of the objects within the game board's content image might need reformatting.

Increase the font size by selecting the game board's content image (See # 8), and select from the Menu Bar Format, then Font.

### **Reformatting Content of the Game Board**

To reformat the content of the strengths and risks squares:

Open the game board file with the Microsoft PowerPoint TM software program. This file is titled "R&S GAMEBOARD.ppt."

Locate the square that will be changed by clicking on the up-down scroll bars on the right of the computer screen and the right-left scroll bars on the bottom of the screen.

Click once on the text that you wish to change. This will activate a cursor in the textbox containing the text you wish to change.

Press the delete and backspace keys until the existing text is deleted, or highlight all the existing text and press the delete key once.

Type the new text that you wish to appear in the game board space.

Note that only a certain number of characters will fit in the space provided. If only a few characters flow outside of the space's boundary you might try and resize the font of your text, but it is recommended that you shorten the amount of new text. Font sizes less than 12 will be difficult to view by the team of players during training.

After you have reformatted the content, save the new game board. From the Menu Bar select File, then Save.

## Appendix II

### Resources for Facilitators

There are a number of drug-free workplace resources available for free on the World Wide Web. The following list offers a good starting place.

Center for Substance Abuse Prevention - Workplace Resource Center <http://wmcare.samhsa.gov/>

Click on "Resources & Tools"

Click on "Drug Free Workplace" and then "Assistance in Developing a DFWP"

Click on "Guidance in Developing a DFWP"

The National Clearinghouse for Alcohol and Drug Information - Publications for Workplace <http://www.health.org/workplace/> This will take you to a page "Publications for Workplace" with materials in these five areas

<a href="#">Information for Employees</a>	<a href="#">Information for Employers</a>	<a href="#">Information for Small Businesses</a>	<a href="#">Federal Agencies</a>	<a href="#">Federal Managers</a>
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### OVERHEADS

14. Title page
15. Objectives
16. How policy works for you
17. Policy components
18. Policy detail
19. Levels of use
20. Getting help/getting caught
21. Signs of not coping well
22. EAP
- 23-46. Risk & strength game...

### Handouts:

3. Company policy (optional, prepare new for Step 1)
4. Getting help/getting caught
5. EAP materials
6. Community resource guide (prepare new – see Appendix II above)



# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition

## Module 3

### Reducing Stigma and Tolerance

### Increasing Responsiveness



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129



## Module 3

### Reducing Stigma and Tolerance and Increasing Responsiveness

#### Participants will:

- Identify both personal and group attitudes toward coworkers with alcohol, drug, or other behavior problems.
- Recognize and potentially reduce risky levels of supervisor and coworker tolerance (stigma, enabling, and codependence).
- Increase responsiveness to problems

#### Materials

- ✓ Flip Chart or chalkboard
- ✓ Overhead or LCD projector and screen
- ✓ Markers or chalk
- ✓ Pencils for participants
- ✓ Slides or handout of slides for participants to follow
- ✓ A water soluble or erasable pen for overheads
- ✓ Handout materials (see below)

#### Prepare before class

Review all overheads and/or flipchart statements.

Handouts-Make copies for each participant:

“Group Tolerance” 3-item survey

Slides/Overheads

#### Step 1 (Slides 47-48)

**Introduce the session topic.** (You may use your own words, but cover the three main ideas below)

“This session will focus on our attitudes toward real or imagined coworkers who have problems with alcohol or drug use. Specifically, the session examines the attitude of unhelpful or harmful tolerance.”

“Sometimes we tolerate problems because there is nothing we can do about them, we feel helpless about them, and decide that the best attitude is to just “put up with” or tolerate the situation.”

"This session is designed to increase awareness of this unhelpful attitude and to help participants generate alternative, more helpful, and more responsive attitudes."

Write session purpose on flipchart or blackboard. [To save time, prepare purpose beforehand]

### **Step 2: Define Tolerance (Slide 49)**

Prepare flipchart; record responses to following.

**ASK** participants what "tolerance" means or what does it mean to "tolerate" a situation or a particular person.

"The ideas and definitions you give are all accurate and acceptable. This is because tolerance can be a very personal feeling or attitude. Very often we tolerate something because it is causing us pain or discomfort."

"We also tolerate something because we believe that taking action to correct the situation would cause us pain, discomfort, and anxiety. Instead of taking action, we resign ourselves to the situation."

"In fact, the dictionary definition of tolerance reads:"

Definition of Tolerance:

capacity to endure pain or hardship: Endurance, Fortitude, Stamina

Sympathy or indulgence for beliefs or practices differing from or conflicting with one's own

**SAY:** "For today, we will focus more on the second definition. Human beings are each different and we all have likes and dislikes. Some of us indulge or tolerate things that others cannot tolerate."

### **Step 3: What do you/don't you tolerate? (Slide 50)**

Introduce this exercise by encouraging participants to think about all the different situations and people they tolerate and do not tolerate. Set the tone by encouraging a fun atmosphere and giving some examples. For example, in some sessions participants have come up with the following items they do or don't tolerate:

Toilet paper rolled under or over the toilet roll.

People who take more than 10 items on the "Quick Checkout" 10-item grocery line.

A certain style or genre of music (rap, opera, electronic, etc.).

Work directly off the prepared flip-chart or blackboard or use the overhead.

**To begin the exercise SAY:** "Please list what you do and what you don't tolerate"

Note that some participants may or may not have had some more serious items: political issues, beliefs about religion, morality, sexuality, violence, etc.

If there are any work-related or substance abuse items, recognize and elaborate. Some you might use, and ask the group:

- "Do you or don't you tolerate second hand smoke?"
- "Do you or don't you tolerate people who are dependent on alcohol?"
- "Are there some people whose views and opinions you tolerate?"

Use participant answers to segue into the next step.

#### Step 4: Self-assess tolerance at work (Slide 51)

Randomly divide participants into groups of four to six people. Ask participants to number themselves out loud ("1" or "2" or "3") as they go in sequence around the room. Indicate that all "1s" go to one area, all "2s" go to another area, etc.

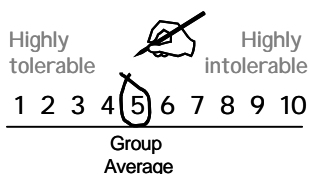
#### Distribute Handout "Group Tolerance"

**SAY:** "Please complete the three items on this questionnaire on your own. Circle the number that shows your degree of tolerance. When you are done turn the survey over and look up. This should take no more than 5 minutes."

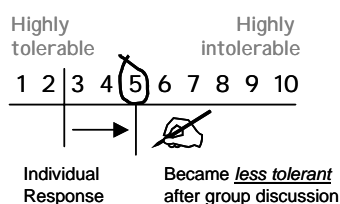
#### NOTE.

Facilitator Preparation: Familiarize yourself with Handout and how you will be recording the average response for each group. In Step 5, you will be showing how the group changed (or did not change) [see diagram below: "2. Show change of individual responses"]).

#### 1. Circle on Overhead



#### 2. Show change of individual response (example)



#### Step 5: Group Decision-Making & Tolerance

**Distribute Handout** ("Group tolerance")—one to each of the newly formed groups, immediately following Step 4 without any pauses.

**SAY:** "In this next exercise, we would like each of your small groups to discuss the three-items one at a time. Your objective is to reach consensus and come to total agreement about each item. Please circle the number that best fits the overall agreement or consensus for the group."

After all groups are done, ask for one group to report its final scores.

Ask participants in the group the following questions: [Write responses on flipchart or blackboard]

- Who changed their original scores?
- Did you become more or less tolerant?
- What factors influenced you to change your scores?

As time permits, ask other groups the same questions.

**ASK:** “There are several main points to get from this exercise, what do you think they are?” [Record responses on flipchart or blackboard]

After listening and writing, stress or re-emphasize two additional points:

Sometimes tolerating other’s problems can put us at risk. (If this is not clear, review the three scenarios and ask “How do these scenarios involve risk?”)

Tolerance can occur at the group level. You may believe or feel one way but—in order to conform with the group—you go along with the majority opinion.

### **EXAMPLES SHOWING GROUP SHIFTS IN TOLERANCE**

When marking on the overhead you can use different symbols or colors to show how participants change their scores.

Use a circle ( ) symbol to show individual responses from a group.

Use an X symbol or circle the average number to show group average and how people changed after group discussion.

For example, in item 1 below, prior to discussion a group of five (5) participants had different scores--2, 4, 8, 8, and 10. These were the ratings they made on Handout from Step 4 of this module. Following discussion, however, the group moves to a 3 because Participant A (with original score of 3) is especially convincing and shifts the group to become more tolerant. You can draw arrows to show these shifts.

**NOTE.** THE POINT OF THIS EXERCISE IS TO SHOW HOW GROUPS CAN INFLUENCE INDIVIDUAL ATTITUDES. YOU MAY ONLY NEED TO DEMONSTRATE THE FOLLOWING WITH ONE OR TWO ITEMS FOR ONE OR TWO GROUPS IN ORDER TO MAKE THE POINT.

	Highly Tolerable								Highly Intolerable	
	1	2	3	4	5	6	7	8	9	10
<b>BEFORE DISCUSSION (Step 4)</b>										
1. A coworker comes to work late several days in a row in the past few weeks, and explains that he/she has problems at home.	1	2	3	4	5	6	7	8	9	10
Individual Participant		A		B				c&d		E
<b>AFTER DISCUSSION (Step 5)</b>										
1. A coworker comes to work late several days in a row in the past few weeks, and explains that he/she has problems at home.	1	2	③	4	5	6	7	8	9	10
Group Average (X):			→ X ←							

#### Overheads:

47. Title page
48. Purpose of session
49. Definition of tolerance
50. What do you tolerate/not tolerate
51. Group tolerance

#### Handouts:

7. Group tolerance (Slide 51)

## APPENDIX -- THEORETICAL BACKGROUND ON TOLERANCE

The following material is excerpted from:

Bennett, J.B., Lehman, W.E.K., Reynolds, G.S., (2000) Team awareness for workplace substance abuse prevention: The empirical and conceptual development of a training program. *Prevention Science*, 1 (3), 157-172.

The negative cycle. The negative cycle is sustained by the presence of more risk than protective factors, such as those reviewed above (drinking climate, alienation, safety risks). A representative sequence of behaviors describes this cycle.

**Problem presentation:** an employee presents with a deviant or problematic behavior (poor attendance) which is a direct or indirect result of alcohol or drug abuse;

Problem enabling or neutralization: coworkers and/or supervisors, through a set of self-reinforcing actions (tolerance, poor communication, withdrawal, inadequate coping), enable or neutralize the behavior;

**Problem continuance:** the problem remains unaddressed, re-appears, or is sustained over time;

**Climate reinforcement:** as a result, negative aspects of the environment endure.

We designed training objectives to address these four factors, focusing on attitudes and behaviors that—aggregated across employees in a group—constitute work climate.

**Enabling and neutralization.** Attitudes and behaviors that support enabling include: 1) disconnection from policy—employees do not see policy as meaningful or their group's informal norms run counter to policy as formally written; 2) poor communication—employees fail to speak up, avoid conflict, and otherwise stigmatize, minimize, or deny the problem; 3) inadequate coping—coworkers experience job strain and inability to cope with stress due to poor communication or employee withdrawal/antagonism; 4) tolerance and resignation—tolerance of the problem (apathy) results from and contributes to other factors in this cycle; and 5) withdrawal and antagonism—employees in the work group act withdrawn or antagonistic. Because of withdrawal, resignation, and the belief that “nothing will change,” workers are unwilling to address issues—such as encourage a troubled employee or seek assistance from the EAP.”

### RESEARCH ON TOLERANCE

“Just as norms reflect group variation in tolerance for deviance, individuals vary in tolerant attitudes for coworker substance abuse. To elicit these attitudes, Lehman, Rosenbaum, and Holcomb (1994) created vignettes describing employee substance use. The vignettes varied by drug type (tobacco, alcohol, marijuana), location (at work, away from work), and job type (low versus high risk). For each vignette, employees responded by indicating if they would be willing to work with, cover for, and report the coworker. Employee tolerance was lowest when vignettes depicted coworkers who used marijuana, at work, in a high-risk job. Across vignettes, tolerance increased as a function of history of use. Illicit drug users reported more tolerance than problem/heavy drinkers (who did not use illicit drugs) who, in turn, reported more tolerance than non-users. Tolerant employees are also less willing

to utilize EAP services (Reynolds, 1999). Among problem drinkers, those who are tolerant also seem the most reluctant to get help.

Tolerant attitudes also reflect risk factors for substance abuse. Lehman (1994) classified employees into one of three groups based on their overall level of tolerance (low, medium, and high) and compared these groups on a profile of variables (personal background and job factors). The profile of variables that best described highly tolerant employees showed them to be younger males with higher levels of deviance (arrest record, peers with deviance, risk-taking behaviors) who also worked in safety-sensitive jobs. The demographic profile of highly tolerant attitudes matches very closely the one that describes marijuana users (Lehman, 1995). Most importantly, Lehman, Olson, and Rosenbaum (1996) simultaneously entered tolerance along with six personal background factors (religious attendance, arrest history, depression) and job risk in order to estimate substance use. The tolerance measure was the best predictor of recent illicit drug use and, following arrest history, the best predictor for use at work.

**Application.** Both perceptions and tolerant attitudes provide windows into employee cognition and motivation. The training used participatory exercises where employees shared perceptions and attitudes about tolerance in small-group discussions. We reasoned that through communication, employees might dispel stereotypes and cognitive barriers (stigma) that prevent them from using the EAP or referring a troubled colleague."

**The following material is excerpted from:**

Bennett, J.B., & Lehman, W.E.K., (2002). Supervisor tolerance-responsiveness to substance abuse and workplace prevention training: Use of a cognitive mapping tool. *Health Education Research*, 17 (1), 27-42.

For the past twenty years, health education practices have been increasingly applied in work settings, typically through health promotion programs (HPPs, O'Donnell & Harris, 1994) or employee assistance programs (EAPs, Oher, 1999). EAPs typically include consultative support for supervisors, worksite training (e.g., stress management), and short-term counseling for employees. Supervisors can play a critical role in both HPPs and EAPs, especially when they become aware of substance abuse or mental health problems in employees. Supervisors can either respond to such problems or ignore them. Proactive responses range from seeking others' input, informal discussions with the troubled employee, consultation with the EAP or HPP, or initiating a drug test. Supervisors can also tolerate problems; i.e., avoid issues or even enable the troubled employee (Ames & Delaney, 1992; Hall, 1990). The concept of tolerance-responsiveness is used here to represent supervisory decisions to ignore or take proactive steps with troubled employees. This concept may be of value to health educators who recognize that the success of their efforts can depend on workplace social environment or culture, specifically the role of supervisors in the culture (Heaney & van Ryn, 1996; Peterson & Wilson, 1998; Tessaro et al., 2000).

The term "tolerance" is often associated with constructive responses among health educators, e.g., tolerance for diversity. However, in the context of others problem behaviors, tolerance can be dysfunctional—e.g., tolerating those who work with a hangover (or tolerance of coworker smoking, Stephens, 1989). Research has identified behaviors related to dysfunctional tolerance, including enabling (Roman, Blum & Martin, 1992), problem minimization (Ames & Delaney, 1992), and neutralization of deviance (Robinson & Kraatz, 1998). Borrowing from these studies, the current



investigation introduces the concept of dysfunctional tolerance as a potentially useful teaching tool for workplace health educators.

Many factors influence tolerance-responsiveness. EAPs can enhance responsiveness to alcohol problems (Beyer & Trice, 1978; Putnam & Stout, 1982), but supervisors who doubt EAP confidentiality will not refer workers. Supervisors may also be anxious about initiating discussion that encroaches on a coworker's private problems (Donahoe et al., 1998) and such anxiety can be reinforced by a work climate that avoids communication (organizational codependency; McMillan & Northern, 1995).

Generally, two factors appear to facilitate responsiveness: a climate that supports discussion of problems and a positive orientation to the EAP. Hopkins (1997) identified psychosocial factors that predict whether supervisors will intervene with a troubled employee, including psychological closeness with workers, managerial support for helping employees, and beliefs surrounding helping. Successful supervisory training programs are often integrated with an EAP, and include performance-based interventions and consultation with a counselor (Roman & Blum, 1996). Supervisors are more apt to talk with troubled workers when an ethos of helping exists (Sonnenstuhl, 1990) and a well-marketed EAP appears critical in building this ethos (Roman, 1990).

# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition

## Module 4

### Stress, Problem Solving, and Substance Use



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129



## Module 4

### Work Stress, Problem Solving, and Substance Use

#### Participants will:

Identify their own personal coping style and whether stress is a risk factor for alcohol or drug use.

The “**Stress at Work**” **pamphlet** is available in PDF and HTML format from <http://www.cdc.gov/niosh/99-101pd.html>. This pamphlet is available by calling **1-800-356-4674**, or contacting **NIOSH Publications** 4676 Columbia Parkway, Mail Stop C-13, Cincinnati, OH 45226-1998.

#### Materials

- ✓ Overhead or LCD projector and screen
- ✓ Slides or handout of slides for participants to follow
- ✓ Handout materials (see below)

#### Prepare before class

Review all overheads and/or flipchart statements.

**Handouts** - Have available or make copies for each participant:

“Stress at Work” pamphlet available in PDF and HTML format from <http://www.cdc.gov/niosh/99-101pd.html>.

“Stress, Problem Solving, and You” self-assessment booklet. Available as a PDF file at <http://www.sbwi.org/programs/documents/stressbooklet.pdf>.

Slides/Overheads

#### Step 1: Mini-lecture on stress

How much stress is caused by poor communication?

Show Overhead.

You may flipchart responses to the question shown on Overhead.

ASK: How much stress is caused by poor communication? There are several different ways to ask this question:

- (1) How is stress and communication related?
- (2) In the past week, have you experienced stress because of poor communication?

## Types of stress at work

It is important to recognize that there are always two major factors behind our experience of stress: the individual and the environment or working conditions. There is increasing recognition that the workplace can put employees at risk for increased stress.

>>> Distribute the “Stress at Work” pamphlet, and add:

“NIOSH (The National Institute of Occupational Safety & Health”) suggests that working conditions play a primary role in causing job stress. This booklet makes suggestions for how to change working conditions to be less stressful.”

### Step 2 (Take home)

Self-assessment of personal coping style Uses a questionnaire and includes the following components:

Healthy Lifestyle (Stress Buffering Scale)

Four Coping Styles (Coping Styles)

### Discussion

>>> Distribute the “Stress: Problem Solving and You” questionnaire.

“As we discussed earlier, how we evaluate events is an important part of how much stress we feel and how well we cope with stress. This diagram—also on the cover of your questionnaire—shows 3 factors which determine how we evaluate the stressful event:

Our Personal Lifestyle,

The stressful Event or Situation itself (what happened)

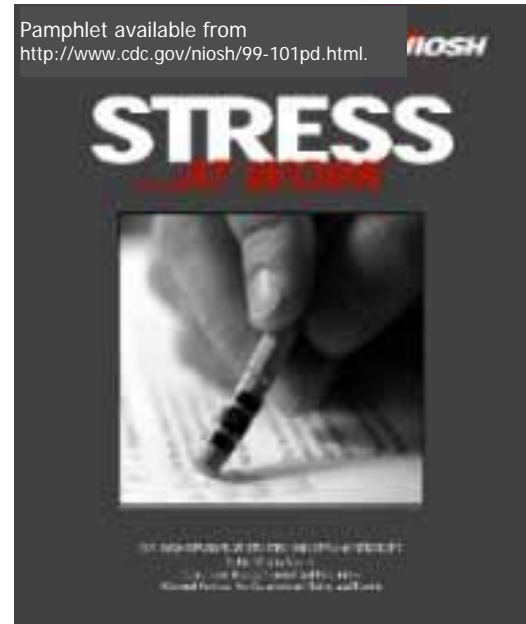
Beliefs we have about ourselves

>> **Ask:** Which of these three can you do anything about? (Some may answer that only 2 (lifestyle) and 3 (beliefs). But we can also avoid or try to change (1) situations that cause us stress;

>> **Explain:** You have the most direct control over your beliefs and your lifestyle.

#### For readings on Hardiness see:

Kobasa, S.C.(1979) Stressful life events, personality, and health: An inquiry into hardiness. *Journal of Personality and Social Psychology*, 37,1-11.



Kobasa, S. C. (1982). *The hardy personality: Toward a social psychology of stress and health*. In G. S. Sanders & J. Suls (Eds.) *Social Psychology of Health and Illness*. Hillsdale, NJ: Lawrence Erlbaum Associates.

Mawinski-Jennings, M., & Stagers, A. (1994). A critical analysis of hardiness. *Nursing Research*, 43(5), 274-281.

## OVERHEADS

52. How much stress

## Handouts

8. Stress at Work (available in PDF or HTML at: <http://www.cdc.gov/niosh/99-101pd.html>).
9. Stress, Problem Solving & You (available in PDF at: <http://www.sbwi.org/programs/documents/stressbooklet.pdf>).

# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition

## Module 5

## Improving Workplace Communication



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129



## Module 5

### Improving Workplace Communication

#### Participants will:

- Identify norms and responsibilities in workplace communication
- Identify and reduce blocks to effective listening

#### Materials

- ✓ Flip Chart or chalkboard
- ✓ Overhead or LCD projector and screen
- ✓ Markers or chalk
- ✓ Pens or Pencils for participants
- ✓ Slides or handout of slides for participants to follow
- ✓ A water soluble or erasable pen for overheads
- ✓ Handout materials (see below)

#### Prepare before class

Review all overheads and/or flipchart statements.

Handouts - Have available or make copies for each participant:

Seven Guidelines for Effective Communication

Slides/Overheads

#### Step 1: Mini-lecture: Communication norms and responsibilities (Slide 53)

##### **Rationale (for the facilitator)**

Workers often are hesitant to come forward with their concerns about coworker substance abuse or other coworker problems that may interfere with workplace productivity and cohesion. In many cases, this hesitancy may reflect a lack of basic assertiveness skills and an uncertainty and anxiety about communication responsibilities inherent in work settings. This module allows participants to (1) explore issues of personal responsibility in various workplace communication situations and (2) to review and practice skills that contribute to responsible and effective communication. This module also serves as an introduction to Module 6 that provides more guided review and skills practice for peer referral.

**Session Purpose:** Introduce the overall topic and purpose. (You may use your own words, but cover the two main ideas in the overhead).

Explain that “norms” means social rules or what is expected to be the “normal” or routine ways that people agree on how to communicate with each other.

Explain that communication norms and responsibilities go together. For example, we may only communicate what we think is normal to communicate because it is what we think is expected. The question is who are we responsible to when we choose to communicate or not communicate? Also, do we withhold information because it may hurt the group? Do we share information because it may help us?

**What makes someone easy to talk with?** (Slide 54)

You may flipchart responses to the question shown on Overhead.

**ASK:** What makes someone easy to talk with? As participants give their responses, reinforce any reference to specific behaviors, such as “they show you they are listening... facing you, making eye contact, being relaxed, smiling, they spend time with you, don’t allow disruptions or distractions to take away from spending time, etc.” Mentioning of other traits or qualities is also good—such as approachable, attractive, warm personality, honest, friendly, easy going. Facilitators want to impress the idea that a relaxed or easy going style has specific behaviors and manners associated with them.

**Show Overhead 55 and Explain:** “The workplace is an important communication setting. Like all communication settings it, too, has rules and guidelines. Of special importance in workplace settings are communication responsibilities. Let’s consider some communication guidelines we may find in a workplace setting:”

- How would you describe the workplace setting—as “formal” or “informal”?
- Who is allowed to speak in the workplace?
- Who or what governs who is allowed to speak in the workplace?
- How about how you are allowed to speak—what are the rules?
- When should you speak up at work?
- What responsibilities do you have in a workplace communication setting?

The workplace is a unique communication setting, with its own set of guidelines and responsibilities. As mentioned earlier, the very life of any organization depends on communication. In healthy and productive organizations, communication is geared toward the actual work process, as well as information sharing, problem solving, and heading off potential problems before they take their toll.

In keeping with your policy, there are specific communication responsibilities each worker has concerning safety issues, impaired coworkers, or suspicions of coworker impairment.



Let's look next at some general ideas about communication strategies for addressing these responsibilities.

### Step 2: Seven guidelines for effective communication (Slide 56)

**Distribute handout** Seven Guidelines for Effective Communication. Review Overhead and discuss each point below. Provide examples and model appropriate nonverbal signals such as eye contact, level tone of voice, emotional neutrality, and active listening.

**Explain:** "If you suspect coworker impairment or other violations of policy, you are faced with several choices—do nothing, talk to a supervisor or manager, or talk to your coworker about getting help. Complaining to other coworkers or engaging in gossip may make you feel better, but it won't solve the problem.

And that's a key point. If you suspect violations or have concerns, problem solving communication is the kind to focus on.

Let's review some key ideas for effective, problem solving communication:"

**Think about what you want to say.** Before bringing up the issue, give it some consideration. Think about what you know, what you suspect, what you are concerned about. Make notes. Have some idea of what you want to have happen as result of the meeting.

**Make your move.** Request a meeting to discuss the issue. If you decide to talk with a supervisor or manager, ask for an appointment. If you are comfortable talking with the co-worker, ask him or her to meet with you.

**Get right to the point.** When we are anxious or nervous, we may talk around a subject. This dilutes your effectiveness when the main point finally arrives.

**Practice good communication.** Use I-Messages and listening skills. I-Messages are non-blaming and non-aggressive ways of presenting ideas, feelings, and concerns. Listening creates a supportive atmosphere.

**Make a clear statement about what you want to see happen.** If you are reporting to a supervisor, these might be a request for action. If talking with a co-worker, make a clear request that the behavior stop or that help be sought.

**Roll with resistance.** Supervisors may not want to hear about the problem or may downplay it. Co-workers may become angry or deny the problem. These are normal defensive reactions to hearing things we don't like as human beings. Listening respectfully and using a "broken record" can help dissipate strong feelings and make sure that your clear request for action is taken seriously.

**End on a positive note.** Thank the person for their willingness to listen. State your belief that the supervisor or co-worker can and will handle the problem.

### Step 3: Really Listening Exercise (Slides 57-61)

**SHOW** and read Overhead 57-58. (“Lets not complicate...” and “I know you believe that you understand...”)

**SAY:** “We are about to do a listening exercise. As we can see from this overhead, listening and hearing are not the same thing. We can listen very well and believe that we understand what was said. Unfortunately, what we listen to, what we hear, and what we understand may have little to do with the message intended for us.”

**SHOW** Overhead 59 (Listening Do’s and Don’ts) and review each point.

◆◆ **Option:** Create a handout from Overhead #11

**SAY** (after reviewing the overhead): “I will leave this overhead up during the exercise so you can refer to it as needed.”

**Really Listening Group Exercise.** (Slide 60)

**ASK** participants to get into groups of three or four individuals.

**DISTRIBUTE** Handout “Really Listening” so that each group has at least one handout.

**REVIEW** Handout and Instruct participants to take about 2 minutes each to express their views. Ask them to monitor themselves so that everyone gets a chance to speak and respond.

**SHOW** and emphasize the rule in Overhead 61. (“Each person can speak only after restating the ideas of the previous speaker accurately...”)

Topics for “Really Listening” are listed here.

<u>Topics</u>
Capital punishment
Euthanasia
Liberal politics
Conservative politics
How to Best Deal with Terrorism
Gun Control
Censorship
Frozen human embryos
Salaries of football players
Sports team rivals: (for example, Cowboys fans vs. Bronco fans, etc.)
Cloning
The US Space program
The United Nations
Schools/Education

**Discussion:** Lead a Discussion using the following discussion questions

- Was it easy to really listen, or was it hard to do?
- What was hardest to remember to do?

- What came easiest?
- Did it get easier as you went along?
- How did this kind of listening compare with the kind you do every day?
- Did this method of listening help you see other people's point of view?
- How could you use this kind of listening to increase how well you understand what other people are trying to say?

**Concluding Points:** Make the following concluding points:

Listening is the foundation of effective communication.

Effective listening leads to effective speaking. If nothing else, it helps us avoid jumping to conclusions, putting a foot in the mouth, etc.

Listening is a skill. Honest. The more you practice, the better you get at it.

The world loves a listener. When asked to list the qualities they truly respect in others, most people put "good listener" on the list.

Learning to listen better can help reduce stress and confusion in most areas of life: work, family, relationships, and healthcare.

As we will see next (Module 6), listening is also the foundation of being able to encourage people who might need to get help.

#### OVERHEADS

- 53. Employees may know more...
- 54. What makes someone easy to talk to?
- 55. Communication & responsibility
- 56. Seven guidelines...
- 57. Let's not complicate...
- 58. I know you believe...
- 59. Listening do's and don'ts
- 60. Each person can...
- 61. Really listening activity

#### Handouts:

- 10. 7 Guidelines...
- 11. Controversial topics (sample in Step 3)
- 12. Listening Do's and Don'ts (optional)
- 13. Really Listening

# Team Awareness Training

## For Workplace Substance Abuse Prevention

### Small Business 4-Hour Edition

## Module 6

### Encouragement: The NUDGE Model



The Workplace Project  
Institute of Behavioral Research  
Texas Christian University  
Fort Worth, Texas, 76129



## Module 6

### Encouragement: The Nudge Model

#### Participants will:

- Understand connection between stress, resistance, and poor communication
- Understand Resistance to Change and the NUDGE model
- Practice guidelines for effective communication
- Encourage others to get help (Use NUDGE)

#### Materials

- ✓ Handouts on EAP, other resources (AA, Al-Anon)
- ✓ Overhead or LCD projector and screen
- ✓ Slides or handout of slides for participants to follow
- ✓ Handout materials (see below)

#### Prepare before class

Review all overheads

Handouts: Have available or make copies for each participant:

More Guides for Effective Communication

Case Study Handouts (Role Plays for Step 4). There are six role plays from which to choose. We encourage you to create your own role plays. Use occupations or jobs similar to those of the employee population you will be working with.

"NUDGE" Cards. These cards require cutting and laminating.

Slides/Overheads

#### Step 1: Explore relationship between communication and stress (Slides 62-64)

The premise of this module is that even small and subtle gestures may be sufficient in effectively encouraging coworkers or others to seek out help for problems they may be having. Peer referral is likely to be most effective:

When it is part of everyday conversation,

When workers understand that they are not confronting others,

When everyday casual talk (connection) is understood as part of the way workers relieve stress, and

When self-disclosure or sharing personal feelings and concerns is not stigmatized

We call this a **NUDGE model**, because it seeks to draw on the natural and spontaneous opportunities for encouragement that emerge among workers as part of their ordinary conversations, discussions, or talks. This is not training in constructive confrontation, although participants will learn how to roll with resistance when the concerned party denies or resists being encouraged. This is also not training in formal peer referral; that is, participants who attend this training should not be considered as peer “counselors” or peer referral agents. However, participants should know about sources for referral, such as the employee assistance program, and this training may be adapted as part of a more formal peer referral program.

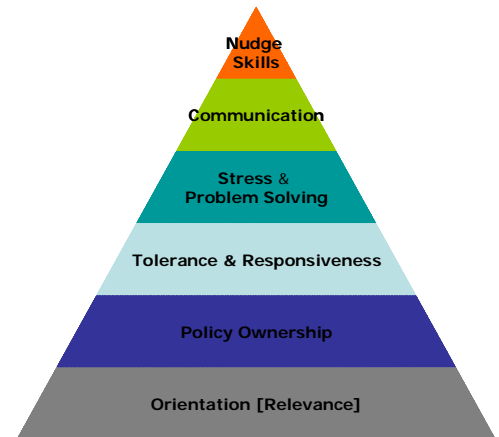
Importantly, workers may be encouraged to use their own slang (as appropriate) and work language when talking with each other. We encourage facilitators to read the GUIDELINES beforehand and derive language that will be most comfortable for participants.



**Nudging and the Butterfly Effect:** Another way to understand the NUDGE model is in terms of the “Butterfly Effect,” a phrase borrowed from chaos theory in mathematics. The butterfly effect is the idea that in a chaotic system, a very small change to the system applied at a certain point in time makes the future change in a very dramatic way. Something as small as a butterfly flapping its wings now might affect the weather system on a global scale six months in the future. In a similar manner, a small caring gesture from a coworker (at the right time) may have a positive, cumulative effect months later. In training, facilitators may say that nudging may be just

a causal statement, like “Are you doing OK today?” or “I have noticed you seem down lately.” It can also be a kind gesture, a caring look, an invitation, or any small way that we reach out to others.

**NUDGING as the Capstone of the training.** The NUDGE model is a capstone aspect of the *Team Awareness* training. In theory, it may be done independently of other modules. However, the previous modules can best set the stage, the social context, or the team climate in which nudging is most likely to work. A helpful analogy is plowing a field, providing the right nutrients, and waiting for the right water and temperature conditions before planting a seed.



In a few cases, the peer referral aspects of nudging may be able to “take root” without previous modules. In many cases, workgroups will need all modules, and others may need only some of the previous modules. The *Team Awareness* model has been examined in only a few organizations and it is an empirical question how much is needed or which components are essential.

We placed the NUDGE model at the very end of *Team Awareness* based on the assumption that the work climate—social relations between group members—must first be made salient or “tapped” into within the training setting. For example, the “Risks & Strengths” board game (Module 2) is intended to be socially fun, to release tension, and to build camaraderie. “Tolerance” (Module 3) increases awareness of how social attitudes impact individual attitudes.

“Set the stage” or tie things together with these tips:

Observe and monitor the social distance or closeness of participants during the previous activities

Use these observations to determine how to best gauge or calibrate the introduction of the NUDGE model

Refer back to any relevant participants’ disclosures or interactions from previous modules

**When introducing this module**, you may want to mention the ideas presented above: (Slides 62-63)

Butterfly Effect

NUDGE as Capstone

Setting the Stage

**Show Overhead** (Slide 64).

**Explain that another aspect of stress and communication is in the area of resistance.**

Sometimes we don’t communicate with each other because we resist change, resist hearing the truth, resist being told what to do, and resist doing things differently. Sometimes we just resist other people who—for whatever reason—we “just don’t like.” The three areas shown in the overhead are:

**“Problem” coworkers.** We assume or label others as “stubborn,” “difficult,” “troublemakers,” or “whining,” “nosy,” and “bothersome.” People who resist hearing us.

**The Grapevine.** This refers to how the grapevine (rumors, gossip) can sometimes cause stress.

**Avoids conflict.** Avoiding conflict is a form of resistance. If a workplace tends to avoid conflict, we may build up feelings of tension because no one is willing to talk things out or solve issues.

**Summary Points.** Conclude with the following points.

When we can find someone who is “easy to talk with” we often can find a way to alleviate stress.

Having a “confidante” or someone you can talk through problems with makes life a whole lot easier.

Communication is much less likely to cause stress when we have a confidante.

**Emphasize these next points:**

In addition, we can remove stress in our life by practicing and polishing our own communication skills.

And, we can also learn how to deal with resistance through better communication skills.

**Step 2: Rolling with Resistance** (Slides 65-67)

**Review 7 guidelines** (Review of Module 5) (Slide 65)

**Show Overhead 65**

**Review and discuss each of the 7 points.** Be sure to point out that this module deals especially with point # 6, “Roll with Resistance.” Provide examples and model appropriate nonverbal signals such as eye contact, level tone of voice, emotional neutrality, and active listening.

**Explain:** “If you suspect coworker impairment or other violations of policy, you are faced with several choices—do nothing, talk to a supervisor or manager, or talk to your coworker about getting help. Complaining to other coworkers or engaging in gossip may make you feel better, but it won’t solve the problem.

And that’s a key point. If you suspect violations or have concerns, problem solving communication is the kind to focus on.

**Let’s review some key ideas** for effective, problem solving communication (Slide 66):

**Think about what you want to say.** Before bringing up the issue, give it some consideration. Think about what you know, what you suspect, what you are concerned about. Make notes. Have some idea of what you want to have happen as result of the meeting.

**Make your move.** Request a meeting to discuss the issue. If you decide to talk with a supervisor or manager, ask for an appointment. If you are comfortable talking with the coworker, ask him or her to meet with you.

**Get right to the point.** When we are anxious or nervous, we may talk around a subject. This dilutes your effectiveness when the main point finally arrives.



**Practice good communication.** Use I-Messages and listening skills. I-Messages are non-blaming and non-aggressive ways of presenting ideas, feelings, and concerns. Listening creates a supportive atmosphere.

**Make a clear statement about what you want to see happen.** If you are reporting to a supervisor, this might be a request for action. If talking with a coworker, make a clear request that the behavior stop or that help be sought.

**Roll with resistance.** Supervisors may not want to hear about the problem or may downplay it. Coworkers may become angry or deny the problem. These are normal defensive reactions to hearing things we don't like as human beings. Listening respectfully and using a "broken record" can help dissipate strong feelings and make sure that your clear request for action is taken seriously.

**End on a positive note.** Thank the person for their willingness to listen. State your belief that the supervisor or coworker can and will handle the problem.

Ask for a volunteer to read Point 6 from the Handout Understanding resistance

Show Overhead 67.

**Explain.** In the area of addiction or dependence it is easy to understand that someone will resist giving up something that makes them feel good, that helps them deal with pain. Especially, if it is the one thing they have that helps. The truth is that most of us have some area that we resist changing in our lives, some old habit, or old way of seeing things.

Ask for a volunteer to read what is on the Overhead.

The "Stages of Change" model (Slide 68)

**Explain.** Research suggests that whenever we make a positive change in our behaviors, when we try to "kick a habit," we go through certain prescribed stages of change. This is not just about drug addiction, it could also be about stopping smoking, losing weight, adopting a more positive attitude, or even spending more time with the one's we love. Understanding how difficult it is to move through the stages of change will help us to have more empathy (compassion, concern) whenever someone is resistant to getting help.

Briefly explain each step (or ask volunteers to read and attempt to explain the meaning of each).\*

**No Thoughts of Change.** Individuals have no intention of changing behavior. They lack awareness or are in denial.

**Thinking About It.** Individuals are aware that a problem exists and begin to seriously think about dealing with it.

**Determination.** Individuals have a specific plan for behavior change that they seriously intend on implementing soon (within the next month) and/or they have made unsuccessful attempts to do something recently.

**Action.** Individuals modify their behavior, experiences, or environment in order to overcome their problems. Action involves the most overt behavioral changes and requires considerable commitment of time and energy.

**Ask:** “Why might it be helpful to know this model, before you try to encourage someone to get help?”

Answers could include that resistance is likely to be higher at earlier stages, that before encouraging it may help to know that the person is determined and that they need more than encouragement, or that they are ready for actions but only need to know specific resources.

**Some Quotes on Change you may wish to read:**

Be not angry that you cannot make others as you wish them to be, since you cannot make yourself as you wish to be. --Thomas a Kempis

There came a time when the risk to remain tight in the bud was more painful than the risk it took to blossom. - Anais Nin

God grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference.

**The Stages of Change model** shown here is a simplified and adapted version of the “Transtheoretical Model of Change.” This model was developed by James Prochaska and colleagues at the University of Rhode Island (URI). In the full model there are five stages: (1) Precontemplation, (2) Contemplation, (3) Preparation, (4) Action, and (5) Maintenance. Helpful references are given below. Visit the URI website (<http://www.uri.edu/research/cprc/about-us.htm>).

Prochaska, J. O., & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. *Journal of Consulting and Clinical Psychology*, 51, 390-395.

Prochaska, J. O., DiClemente, C. C., & Norcross, J. C. (1992). In search of how people change: Applications to addictive behavior. *American Psychologist*, 47, 1102-1114.

Prochaska, J.O., Norcross, J.C., & DiClemente, C.C. (1994). *Changing for Good*. New York, NY: William Morrow.

**More guides for effective communication (Slide 69)**

**Show Overhead 69 and Distribute Handout.**

**Explain:** “We have additional guidelines for effective communication that will help you to be more skillful when rolling with resistance.

**Ask for several volunteers to read what is on the Overhead.**

**Ask if there are any questions.** Give participants a minute to read the handout. Tell them to keep this handout with the previous handout and that they may use it in an exercise that is coming up.

## Practice Rolling with Resistance (Slides 70-73)

### Preparation for Facilitator

Overheads are materials for a lively exercise between you (the “resister”) and the participants (who play the role of “nudgers”). To make it fun, practice acting out the roles of the resisters beforehand. You may also use props.

**Explain:** “In this next exercise, I am going to call on volunteers to begin using their communication guidelines. I will play the role of someone who has a problem and who also is not thinking about changing behavior. I will be THE RESISTER. I want you to take on the role of the NUDGER who is Rolling with Resistance. This will be easy because I already have your lines ready for you in call-out clouds on these overheads.”

◆◆ **Option:** Create a handout from Overheads.

**Begin by showing Overhead and asking for a volunteer.**

**Say, pointing to the overhead:** “Thanks (name of volunteer). I am resisting your trying to help me. I am going to say the statement—‘The job pressure makes me drink!!’—and you respond with the entire Roll with Resistance statement ‘We have been under a lot of pressure. But drinking is a poor way of coping. It’s time to think about making some changes.’

Say your role.

Point to the screen to cue the volunteer for his or her role.

**Continue in this way for Overheads 70-73**, asking for a different volunteer to play the role of the NUDGER, who is meeting your resistance:

When you get to Overhead 73, with a blank call-out with question marks (???)...

Ask for one or more volunteers to come up with (ad-lib) their own rolling with resistance statement.

**Step 3: Introduction.** (Slide 74)

**Introduce the NUDGE model** as a tool for communicating with others when you want to express your concerns over other’s behavior. This can buffer stress, build team strength, and help you feel more confident.

The NUDGE model can be used to address coworker substance abuse or any problem behavior that blocks service or creates bad feelings.

**Review NUDGE Overheads and the 5 NUDGE points.**

You may use any ideas to illustrate the 5 points. Suggestions follow.

**NOTICE** someone with stress or problems.

You may notice several things IN YOURSELF that begin the process of encouraging someone to get help. These can be: ● signs of stress in yourself ● an inkling ● a change in the pattern of interaction ● symptoms from any of previous modules: stress/ costs vs. benefits/ tolerance ● a sense of rightness or synchronicity. ● You may also notice that the other is reaching out to you.

**UNDERSTAND** that you may have a role to play in the solution.

There are several things to understand before your decision to do anything. These include: ● your role in the situation ● costs/benefits of tolerating versus responding ● the right way to communicate ● stages of change in the help-seeking process (thinking about it, determination, etc.) ● your own spiritual values: acceptance, gratitude.

**DECIDE** if you should say something.

Realize that there are several decisions/ alternatives to make: ● call the EAP ● talk with your supervisor ● go to a meeting (AA/AL-ANON) ● talk to the person involved ● when talking to the person, be mindful of when, where, how, and what, and keep it brief at first (“the butterfly effect”)

Use **GUIDES** for communicating with effectiveness (refer to Guideline Handouts)

“I” statements ● “Avoid “You” statements ● Listen ● Body language ● Get to the point ● Make a clear request ● Roll with resistance ● End on a POSITIVE note.

**ENCOURAGE** him or her to get help (know your limits)

Give confidence ● hearten ● cheer ● share positive belief in person ● inspire ● raise spirits ● uplift ● motivate ● throw down a positive challenge ● use affirmations ● use hardiness statements ● draw on your own self-efficacy ● walk the talk

**Say:** “When encouraging, remember to know your limits. People can only change by themselves. If you fail in encouraging don’t take it personally.”

Conclude by noting that when we decide to use the NUDGE model, we are likely to experience resistance from the other person. This is why it’s a good idea to have some information about what resistance looks like and how to deal with it in any situation where another person is reacting to a request for change.

**Step 4: Role Plays: Practice Nudging (Slides 75-77)**

**Say:** “In a minute I am going to ask you to get into groups of three individuals and you are going to practice using the NUDGE model and the guides for effective communication. In each group, one will play the role of concerned coworker (nuder), one of resister, and one of observer.”

**Rules (Slide 75)**

**Show and review Overhead 75: "Rules for Role Plays."** Explain to participants that they will be working on a case study involving substance misuse issues, but that the skills can apply to any type of NUDGING to encourage others to change behavior.

Explain that they will have a chance to talk with their partner about how best to handle the case study situation and come up with ideas. Then they will role play the case study in their small group.

Explain that the Observers will watch role plays with an eye toward how well the "concerned coworker" follows the IDEAS and GUIDES for effective communication (refer to handouts). The person who plays the concerned coworker role should concentrate on the IDEAS handout.

**Case Studies (Slide 76)**

**Note.** Preview case studies to select those most appropriate or design your own.

Ask the pairs to read over their case studies together and discuss how to approach the situation. Then decide who will play each of the two parts in the role play. While they are doing this, encourage Observers to review the handouts.

**Show Overhead** to remind participants of all the tools they have to help them NUDGE.

**Distribute Case Studies.** Make sure each member of a small group has a copy of the same case study.

**Allow about 20 minutes for small groups to conduct role plays** at their seat (5 to 7 minutes for each pair). After about 7 minutes ask group participants to switch roles. Repeat after another 7 minutes. Walk around and encourage participants to use tools.

**Use the CASE STUDY slides to brief the larger group** about the role playing scenario of a given pair. Encourage partners to do their role plays, one at a time, before the larger group.

**Discussion of Role Plays in the larger group; NUDGE cards.**

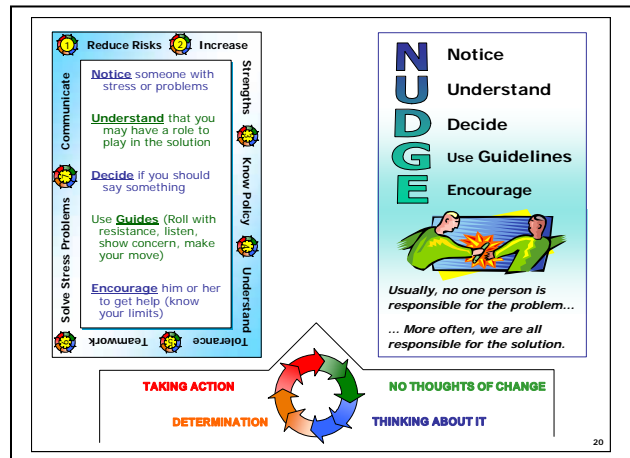
Ask Observers to comment on what they observed and how well the IDEAS were followed.

Ask role players how it felt to play the roles.

Invite the larger group to comment and give observations on how well the communication guides were followed.

**Distribute NUDGE cards.**

Explain that these cards are for participants to keep. They show the NUDGE model.



Thank participants for their participation. You can conclude with the *Team Awareness* motto; printed on the NUDGE card:

**Team Awareness Motto**

Usually, no one person is responsible for the problem... More often, we are all responsible for the solution.

**OVERHEADS**

- 62. Title page
- 63. Objective
- 64. Communication & stress
- 65. 7 guidelines...
- 66. 7 ideas ...
- 67. Understanding resistance
- 68. Stages of change
- 69. More guides...
- 70-73. Rolling with resistance
- 74. NUDGE
- 75. Rules for role plays
- 76. Case studies...
- 77. NUDGE

**HANDOUTS**

- 14. More guides...
- 15-20. Case studies
- 21. NUDGE cards