

Team Awareness Training

For Workplace Substance Abuse Prevention

Small Business 4-Hour Edition



The Workplace Project
Institute of Behavioral Research
Texas Christian University
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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.

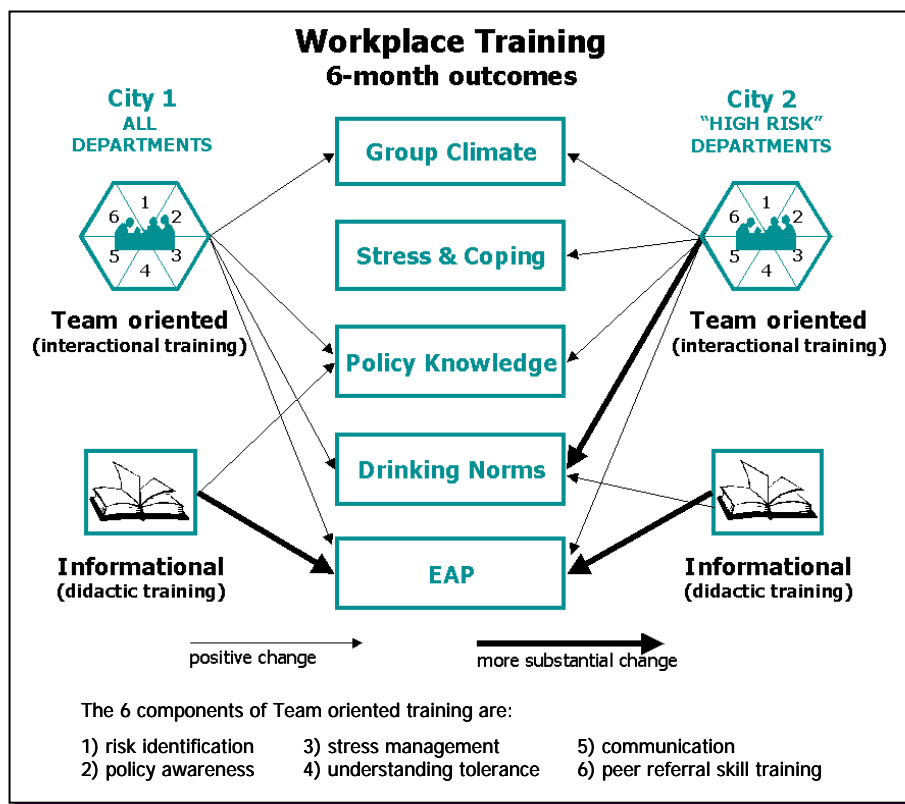


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Introduction & Facilitator Overview

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

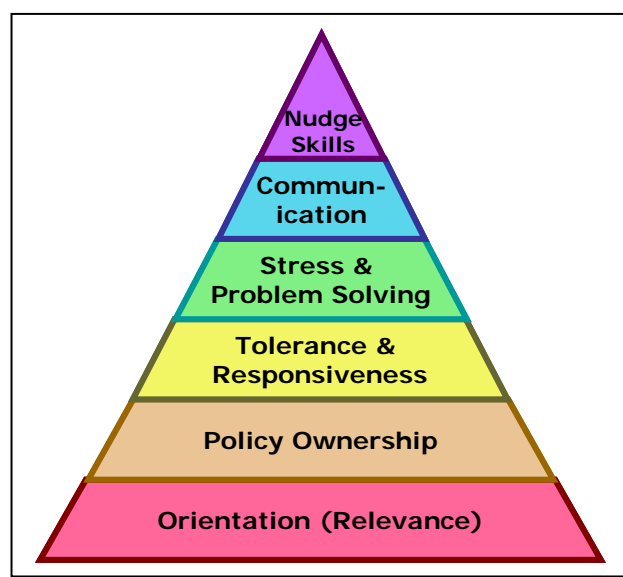
provide a separate information session that covers policy and EAP only. If possible, fully incorporate information into the training (in Module 2 through quizzes and game questions).

- 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:

Focus Group Announcement: A Training Module on Substance Abuse

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