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ALCOHOL TRAINING PROGRAM FOR SCHOOL
ADMINISTRATORS AND SUPERVISORS.

CITY UNIVERSITY OF NEW YORK, D.S.N., 1979

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ALCOHOL TRAINING PROGRAM FOR
SCHOOL ADMINISTRATORS AND SUPERVISORS

by

STANLEY ZIMERING

A dissertation submitted to the Graduate
Faculty in Social Work in partial
fulfillment of the requirements for the
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This manuscript has been read and accepted for the Graduate Faculty in Social Work in satisfaction of the dissertation requirement for the degree of Doctor of Social Welfare.

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18 May 1979 date

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Abstract

ALCOHOL TRAINING PROGRAM FOR SCHOOL ADMINISTRATORS AND SUPERVISORS

by

STANLEY ZIMERING

Adviser: Dr. Charles Guzzetta

A three-phase mini-program was conducted in three Long Island school districts to train school administrators and supervisors in alcoholism.

The program was designed to make administrators aware that alcoholism is a disease and it is treatable. It was further intended to make these same individuals aware that effective supervision is the tool of intervention with these troubled employees.

The dissertation explores the educational theory that served as a basis for the training, the planning process involving the school districts, and the training team, the problems encountered both during the planning and implementation of the program, and the three-phase formative evaluation design which aided the planners.

Two forms of evaluation were used: the pre-test and post-test to measure change in knowledge, and the opinion questionnaire to determine how the participants reacted to the structure of the program.

The analysis of the program indicated that there was a significant amount of knowledge gained and that the participants would use this knowledge in developing new programs.

Conclusions and recommendations are provided to aid the planner in replicating this training design.

ACKNOWLEDGEMENTS

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To my colleagues at C. W. Post, I give thanks for their continuing support and encouragement.

To the Doctoral Faculty and to my colleagues, I give thanks for their dedication to the program and for allowing me to share in this rewarding experience.

I also thank the members of my Doctoral Committee, who provided the support and guidance that moved me along to this point.

Most of all, my thanks go to my family for providing the encouragement for me to continue in spite of the adversities that affected our lifestyle.

In conclusion, I would like to dedicate this work to my father, who would have been so proud to be part of this ceremony if he were alive, and my mother, who is proud today.

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CHAPTER I:
ESTABLISHING THE NEED

Introduction

"The dimensions of alcohol abuse and alcoholism are enormous. In this state there are estimated to be between 700,000 and 800,000 alcoholics. Roughly half of the fatalities on the highways involve drunken driving. Countless families are broken, jobs lost, and careers ruined by alcoholism. Health is destroyed and life cut short by addiction to drink. Alcoholism services, at the present level, cannot deal with more than a small fraction of those who are involved with the problem."

Governor Nelson A. Rockefeller,
Governor's Conference on
Alcohol Problems
Americana Hotel
New York, New York
1971 (1, p. 7)

Throughout our history people have turned to drug use in various forms for various reasons. They have consumed drugs in many ways and in varying amounts. The effects of these drugs, both physiologically and psychologically, varies according to the amounts taken, the setting in which they are consumed, the psychological state of the person, and other similar variables. Alcohol is one of these drugs which poses enormous problems to individuals, their families, the communities in which they live, and the state and nation as a whole. Although alcohol is considered a legal drug, it presents many destructive manifestations. It is a potential

hazard to the 75 percent of adult Americans who at one time or another drink alcoholic beverages (2, p. 5).

There is confusion in the field of alcoholism because of the lack of clarity in defining alcoholism and therefore in diagnosing the alcohol addicted individual. As a result, inadequate distinctions exist among the important areas of use, abuse, and addiction.

Presently there is no one definition that is accepted by physicians and others working in the field. However, Mark Keller's definition has received wide acceptance. "Alcoholism is a chronic disease, or disorder of behavior, characterized by the repeated drinking of alcoholic beverages to an extent that exceeds customary dietary use or ordinary compliance with the social drinking customs of the community, and which interferes with the drinker's health, interpersonal relationships, or economic functioning" (3, p. 15).

Other researchers in the field focus their definition around the individuals' behavior or loss of control, such as drinking when one does not intend to and more than he planned; where actual functional or structural damage occurs; physical ailments or social, economic, or domestic problems develop; or where the person believes that alcohol is actually keeping his life together.

Generally, definitions tend to deal with the destructive dependency that alcohol has on the individual.

Drs. Morris Chafetz and H. W. Demone, Jr. describe alcoholism as:

"A chronic behavioral disorder which is manifested by undue preoccupation with alcohol to the detriment of physical and mental health, by a loss of control when drinking has begun (although it may not be carried to the point of intoxication) and by a self-destructive attitude in dealing with personal relationships and life situations. Alcoholism, we believe, is the result of disturbance and deprivation in early infantile experience and the related alterations in basic physiochemical responsiveness; the identification by the alcoholic with significant figures who deal with life problems through the excessive use of alcohol; and socio-cultural milieu which causes ambivalence, conflict, and guilt in the case of alcohol" (1, p. 15).

Since uniform definitions of alcoholism have not readily emerged from our scientific community, a broad interpretation of the problem will allow us to focus on a wide range of individuals affected by the problem. In addition, it is not actually known if alcoholism is a single unitary disease with clearly defined symptoms, a characteristic cause of development, and a picture which is universal for all individuals.

For our purposes, alcoholism will be considered as a chronic complex disease of unknown etiology. It can be identified by uncontrolled drinking. This loss of control manifests itself in compulsive drinking of alcohol and frequent loss of control over behavior. The person with this disease is unable to refrain from taking a drink or in stopping himself after the first drink, so as a result he may inflict physical, psychological, or social harm to himself (4, p. 674).

Extent of the Problem

"There is an increasing acceptance of the view that alcohol abuse and alcoholism constitute a public health problem of major proportions and complexities" (5, p. 11). To support this view, statistics issued by the National Institute on Alcohol and Alcoholism indicate that at least 9 percent of the drinking population is estimated to be alcoholic; in fact, out of the 95 million or so social drinkers, approximately 9 or 10 million are alcoholics (6).

A closer look at the harmful effects of alcoholism is illustrative in a few major categories:

Productivity -- Alcoholics average twenty-two more absences per year than non-alcoholic workers, suffer twice the industrial injuries, and cause capital losses due to poor decisions or mismanagement.

Fire -- 80 percent of the fire-related deaths in Memphis, Tennessee were apparently caused by persons abusing alcohol.

Health -- 75 percent of juveniles treated for drug abuse returned to homes in which one or both parents abused alcohol. 50 percent of the patients in one county hospital were being treated for alcohol-related illness.

Social Services -- 26.9 percent of Colorado's aid to families with dependent children were paid to households with alcohol problems.

Criminal Justice -- 47.8 percent of the population of the Baltimore County Jail were diagnosed as alcoholics" (7, p. 2).

The New York affiliate of the National Council on Alcoholism showed similar findings in their 1976 publication entitled "Alcohol Facts" (8).

The Woman Alcoholic

For many years it was believed that alcoholism was primarily a male disorder. However, recent literature in the field of alcohol suggests that women are either drinking more than they did in the past or that they are now becoming more visible by seeking out help. There is much concern over the fact that the rate of alcoholism among women has risen alarmingly; that many, if not most, women who drink are secret drinkers; and that efforts must be made to bring these "closet drinkers" into treatment.

Although it has been widely accepted that statistics on the woman alcoholic are often extrapolated and fragmented, information from Alcoholics Anonymous groups reveal increased female membership. Social disapproval of women drinking in public places forces many to drink alone. Even the skid row woman has a pattern of solitary drinking. As a result, statistics to date have been virtually non-existent.

Some experts estimate the population of women alcoholics exceeds two million (9, pp. 797-824). However, there are those who feel that one of every three alcoholics is a woman. All authorities seem to agree that statistics are on the rise, due to the Women's Liberation Movement which is making

the women drinkers more visible. Our changing morals and mores may also be a factor in focusing upon women who, until recently, were "cloistered".

More women are working and being exposed to the public eye, where drinking characteristics become apparent to the world. This changing role of the woman may be a causative factor, but more studies and research must be made before the extent of alcoholism in women can be understood and assessed. Morris E. Chafetz, M.D., former director of the N.I.A.A.A., stated: "Women account for the largest increase in drinking in recent years, and the figures are rising rapidly" (p, pp. 1-10). It has also been found by Dr. Donald Moses, Manhasset Day Care Center, that women are drinking openly at an early age. The female teenager drinks openly with her male counterpart (10, p. 62).

In a paper presented at the National Alcohol Forum, Edith Gowberg said about the women alcoholic that "there is, in fact, a lot of disagreement as to whether the emancipation of women lessens or magnifies the extent of alcoholism among them. I don't see how such a question can be really resolved -- it is an emotional issue, complexly tying together women's rights, changes in patterns of acceptable social behavior, the dissatisfactions and frustrations of contemporary existence..... and alcohol" (11, p. 5).

Perhaps the best way to summarize this phenomenon is by the following quote from "The Female Alcoholic" published by Health Communications, Inc. (12, p. 6):

"Increases in female problem drinking are reflected broadly. Recent studies, reported last year [1976] to the National Council on Alcoholism meeting in Washington, D.C. show that women now account for nearly one in every three new members in Alcoholics Anonymous. Furthermore, women now constitute approximately 28 percent of A.A.'s total membership. Alcoholism treatment centers across the country that used to see one woman for every six men now see one woman for every three men."

Further studies done in San Mateo County indicate that drinking by teenage girls more than doubled from 1968, when 15 percent reported alcohol use, to 1975, when 54 percent said they drank.

Teenage Drinking

The incidence of teenage drinking has been the source of concern among educators, parents, Public Health Officers, and numerous other agencies within society.

Various studies have indicated that experimentation with alcohol has become almost universal among high school students. Beer seems to be the beverage of choice, though it is suggested that young people have played a major role in the rapidly gaining popularity of "sweet pop" wines since the massive marketing of the fruit flavored wines began in the late 1960s.

Jarred into recognition of the problem by events such as drunk driving fatalities involving teenagers and the rising

number of arrests of youths for alcohol-related offenses, both public and private agencies have become concerned. Estimates of the extent of problem drinking differ widely, partly reflecting varying definitions of what constitutes "problem drinking".

One clear cut example of increasing drinking problems is a rise in adolescents running afoul of the law because of alcohol use. Arrests of persons under 18 for alcohol-related offenses: driving while intoxicated, liquor law violations, and public intoxication, increased nationally by 135 percent between 1960 and 1973. Among these, arrests for driving while intoxicated increased by more than 400 percent during the same period (13, p. 6).

Alcohol-related problems in schools are increasing, and community resources which deal with acute alcohol problems, including adult-oriented alcoholism treatment programs and A.A., report an increase in participation by adolescents. In many areas, it has caused the formation of teenage A.A. groups. Whatever the causes for the increase of youthful drinking, over the past decade both adults and young people have become more accepting of alcohol use by adolescents.

In recent years a number of studies have been conducted to help determine the extent of alcohol use in teenagers. Although the results could be expected, the facts were alarming. For example, experimentation with alcohol has become almost universal among high school students; the number of regular drinkers, the quantity of alcohol consumed,

and the frequency of use in this population increase proportionately with age; and these trends have been accelerating in recent years (14, p. 2). A nationwide study done in 1974 for the N.I.A.A.A. found 93 percent of boys and 87 percent of girls in their senior year of school had experimented with alcohol, and more than half of the seventh graders had tried drinking at least once during the previous year. The study also noted that beer was the beverage most preferred, with 10 percent of seventh grade boys and 42 percent of twelfth grade boys drinking at least once a week. Even more surprising was the fact that almost 50 percent of the twelfth grade boys and girls admitted to drinking distilled spirits once a month or more (15). Other reports by the National Commission on Marijuana and Drug Abuse, The Addiction Research Foundation of Ontario, and local authorities in California and Florida similarly conclude that there is a steady increase both in absolute use of alcohol and in frequency of use among high school students.

Perhaps the most dramatic findings were found in a survey conducted among New York state junior and senior high school students during 1974-75, where it was found that alcohol is the drug of choice. Other important conclusions of the study were:

- Over 80 percent of the students who ever used any drug substance also used alcohol.

- Recent multiple substance use is not predominant among marijuana users, but is predominant among users of alcohol.
- 95 percent of the twelfth grade students from the area which included Nassau and Suffolk Counties used alcohol, contrasted with 83.4 percent from New York City (16, pp. 4, 33, 20).

It is important to emphasize that drinking alcohol does not necessarily imply abuse. Drinking alcohol is a norm, and many adults and youths are able to enjoy its pleasurable effects when taken in moderation. The national experiment of prohibition was rejected, and today it is generally accepted that those who wish to drink have the right to do so.

Finally, when we attempt to describe the extent of the problem we face the dilemma of varying definitions of "problem drinking". The Second Special Report to the United States Congress on Alcohol and Health from the Secretary of Health, Education, and Welfare points out that according to some criteria, any drinking by an adolescent may be defined as a problem (9, p. x). On the other hand, based on a problem drinking criterion of getting "high or tight" at least once a week, estimates from the 1974 N.I.A.A.A. survey indicate that approximately 5 percent of the students are problem drinkers. A survey by the National Highway Traffic Safety Administration points out that 30 percent of the high school students polled reported they had been "pretty drunk"

at least once during the previous month, and 7 percent said they had been drunk four or more times (17).

The Second Special Report to the United States Congress sums it up when it succinctly states: "The proportion of American youth who drink has been increasing. Most adolescents have at least tried alcohol, and the highest scores on an index of possible problem drinking behavior were recorded in the youngest age group for which data are available, the 18-20 year olds" (9, p. x).

Occupational Alcoholism

The Second Special Report to the United States Congress on Alcohol and Health, commenting on the economic effects of alcohol-related problems, conservatively estimated, for the year 1971, a loss to society of over 25 billion dollars. The estimates were based on an analysis of six areas of social behavior which included health, production, auto accidents, programs and research, criminal justice, social welfare.

The greatest category of cost, amounting to 9.35 billion dollars, was due to lost production of goods and services attributed to the reduced productivity of alcohol troubled male employees (10, pp. 49-51).

In a study completed in 1973, the causes of lost production were identified as: "loss of efficiency, absenteeism, lost time on the job, faulty decision making,

accidents, impaired morale of co-workers, and the cost of rehabilitation programs." The same study commented on the economic impact of alcoholism as a result of premature disability or death, resulting in a shortage of specially trained skilled employees (18, pp. 120-125).

Unfortunately data on some groups within society is too inadequate to allow cost estimates based on their characteristics and behavior. Two groups in particular fall into this category: women and alcoholic persons who are institutionalized or living on skid row. They are not included in the 9.35 billion figure previously mentioned. However, the cost of reduced or lost production among women is probably substantial. These estimates are difficult to determine because there are no reliable market prices which would indicate the value of women's services in the household or non-market production, and further there are no reliable estimates as to the actual number of alcoholic women. Estimates, however vague, suggest that there are from 900,000 women alcohol addicts (19) to as many as 4.5 million problem drinkers (20).

In a 1976 publication of the Nassau County Employee Counseling Service, it was indicated that between 6 and 10 percent of our nation's work forces are alcoholic. This means that over 4.5 million individuals representing auto workers, steel workers, garment workers, educators, and others are troubled with alcohol (21, p. 1).

The National Clearing House for Alcohol Information in 1976 reported on occupational alcoholism programs in this country. This elaborate report, entitled, "Selected Publications on Occupational Alcoholism Programs", identified three major categories and described over seventy-five programs. These programs fell primarily into employee, military, and veterans' programs. Nowhere in the document did they refer to or mention programs centering around education, particularly staff, faculty, supervisors, and administrators (22, pp. 1-9). The N.I.A.A.A. suggests that over 240,000 workers employed by governments are alcoholics, and that programs are being formulated to motivate these employees to seek professional help. Business and industry, with the cooperation of unions, have developed personnel policies consonant with the emerging view that alcoholism is a treatable disease. This approach generally helps the alcohol-troubled employee locate help rather than ignoring his needs and worth and forcing him into job dismissal.

Preliminary findings of these programs are heartening. When faced with these alternatives and offered competent treatment programs, from six to seven out of ten alcoholic employees achieve control of their condition (23, pp. 18-19).

Morris Chafetz, M.D., Chairman of the Task Force for the First Special Report to the United States Congress on Alcoholism reported that over 4.5 million workers suffer from alcohol-related problems. Those in the teaching profession would be naive to believe that teachers in the private

schools, public schools, and universities are not among those afflicted by the disorder called alcoholism. Reports from school districts around the country tend to support Dr. Chafetz's figures (25, p. vii). Dr. William Manning, a principal in Minnesota, wrote:

"We believe that 90 percent of our drug and chemical dependency problems in adults and students center around alcoholism. We also believe that one out of every five people are harmfully dependent or are receiving pain in their lives because of alcohol. I believe that in our staff here at the High School between 10 and 15 percent are chemically dependent. In our work throughout the state of Minnesota, I believe these figures are a minimal figure and accurate."

He further explained, "From September 1, 1975 to March, 1977 we have sent into long-term treatment roughly 115 students, 31 parents, and 15 staff members or spouses of staff members for the treatment of chemical dependency" (26, pp. 46-48).

In a letter dated January 6, 1977, to a principal in Suffolk County, James F. Cowley, Executive Director of the Johnson Institute wrote:

"We believe that most school districts approach the problem of chemical dependency at the level of student involvement, with very little or no attention given to the teaching staff and other personnel. It has been our experience that this approach, however well-planned, has failed repeatedly. Success is obstructed by the staff's ignorance and misconceptions about the disease of chemical dependency, as well as those who have ambivalent feelings about their own use, or who are presently harmfully dependent."

Although specific information may not be available on the alcoholic teacher, increasing awareness on the part of unions and administrators is becoming more obvious. An administrator in the Northport, Long Island School District reported:

"During my three years as an administrator, I became aware that there were a number of troubled teachers. How to handle these teachers depended upon the mood and moment of the supervisor, the make-up of the central office support, and the whims of the current Board of Education. Procedures followed in the district were determined by the immediate supervisor's concept of alcohol and the results harsh and unbending. I believe teachers working on Long Island are probably in one of the highest geographic stress areas in the nation. Most teachers must drive to work and cope with traffic problems before arriving at school. Most are concerned about job security, job seniority, the necessity of obtaining dual certification to remain competent and in service education for promotion and raises. They also face hostile Boards of Education, erratic parent behavior, incompetent principals, and frenzied central office patterns."

This pressure and the inability to cope with problems may result in ulcers, colitis, mental illness, and the abuse of alcohol and other drugs.

This administrator's comments are reinforced by an unpublished study conducted in November of 1976. The study involved all schools in Huntington Township. These included Cold Spring Harbor, Commack, Elwood, Half Hollow Hills, Harborfields, Huntington, South Huntington, and Northport.

It was the consensus of the superintendents that alcoholism may be on the rise within their professional staff and that principals are not adequately prepared to deal with the alcoholic teacher. The study also revealed that the union was not doing much with regard to this troubled employee.

Three of the surveyed districts suggested that rather than start with the teacher, there should be concern about the mental health of administrators (27). There seems to be enough evidence for professionals to be concerned about the problem of alcoholism in the educational domain.

There are many points of entry into the school systems: the students, non-professionals, the Board of Education, and the supervisors and administrators.

In the March, 1978 issue of Education U.S.A., it was stated: "the growing incidence of alcoholism in the United States cannot help but run over into the nation's schools, and many districts are finding that it is not just students who are affected. According to national statistics, the 'average alcoholic teacher' is about 45 years old and has been teaching for about 18 years" (28, p. 20).

Summary

Alcoholism is not a new problem that is facing industry, the schools, the public, and society in general. It is a problem with a new perspective; one that looks at alcoholism

as a disease, not a weakness in character that can be dealt with by the individual using "will power" to stop drinking.

Alcohol affects all segments of society; however, in recent years attention has been focused on women, teenagers, and industry. Research indicates that alcoholism among women as a group accounts for the largest increase in drinking in recent years. Studies show that experimentation with alcohol has become almost universal among high school students. And the second Special Report to Congress on Alcoholism indicated a 25 billion dollar loss to society as a result of drinking on the job.

Finally, as one principal put it, "We believe that 90 percent of our drug and chemical dependency problems in adults and students center around alcoholism, and that between 10 and 15 percent of our high school staff are chemically dependent."

Because of this rapid rise in alcohol use and abuse, new programs are needed in both prevention and intervention in order to reach the troubled individuals before they hit "rock bottom".

The training program that follows is designed for school administrators and is concerned with intervention. The chapters cover the development of the program, its implementation, results, and recommendations.

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CHAPTER II:
THE DEVELOPMENT OF THE MODEL

The study of administrators in Huntington Township served to alert the school superintendents of the possible occurrence of alcohol problems among their administrators, faculty, students, and the community. Some of these administrators refused to acknowledge the problem by ignoring phone calls to arrange an interview schedule, and by eventually indicating by letter that "he has polled his administrative staff and they did not see a problem of alcoholism existing within their supervision duties."

Although there were a few responses indicating the absence of a problem, it became clear that most administrators were aware of the problem, but not the extent of it. One administrator said, "You are right on target. I have spent the better part of a week dealing with this particular problem and frankly, I don't know what to do. Would you consider giving a workshop?"

Another superintendent suspected the problem of alcoholism and spoke of his inefficient principals and the need for training in this area. Still another felt that there may be a problem and said he would be willing to have his administrators participate in a workshop.

One administrator insisted that any training on alcoholism in his school district be directed at the

administrative force and that a problem surely existed at this level of staffing.

It became clear, as a result of the survey, that most administrators in the Huntington Township area viewed alcoholism as a problem, and training for administrative staff as a first step. Subsequent meetings with these same administrators revealed long-range plans that included workshops for teachers, programs for students, and public education for the community.

Actually, at this point three school districts, expressing interest in an in-service program, were identified as our initial target. The expressed interest was verbalized by the superintendent of each district, and it is suspected that this decision was arbitrary, without the support of staff or faculty.

Getting Support

Although there was support for training, the planners felt a weak commitment on the part of the superintendents. To encourage greater support, we agreed to involve the participating school districts, wherever possible, in the planning process. Through this involvement, it was hoped that these individuals would become more enthusiastic and supportive of the program. It has been observed that when groups are involved in the planning, they tend to accept more responsibilities and to carry them out more effectively. In

this regard, a practicing school administrator who was concerned about the rising problems of alcoholism in the schools and active in the alcohol field agreed to help in the development of the program. This individual, specially trained in alcohol prevention and counseling, was considered by his peers as an expert in both educational methodology and alcoholism.

The other members of the team, also assisting in the planning and development of the training model, were selected because of their special skills in both planning and communication. All were known for their characteristic abilities, their knowledge, expertise in alcoholism, and for their skill in involving an audience in their presentation.

In addition, through their professional affiliations representing the Long Island Council on Alcoholism, Brunswick House, and the Department of Psychiatry at the State University at Stony Brook, they participated as both planners and speakers at numerous conferences and training sessions throughout the country.

Once the superintendents of the target schools agreed upon the need for training, they preferred to sit back and allow outsiders to bring in a program in spite of the team's efforts to include them in all aspects of program development. Although they were reluctant to set up planning sessions with staff, they all seemed to be extremely concerned with the quality of the program that would be brought into their school district.

As arrangements for meetings were being discussed with these superintendents, it became clear that a time allocation for the program of more than one-half day could not be expected. As a matter of fact, it was pointed out that even though administrators were required to attend because the time was designated as a conference day, not all administrators would attend, come on time, or stay for the entire session.

Finally, a meeting was arranged with one of the superintendents. The outcome of that meeting was the scheduling of another meeting with the Director of Pupil Personnel. At this session, which did not include the superintendent, it became clear that this individual was not briefed on the purposes of the proposed program. Also at this meeting, he arbitrarily decided that the union president and a member of the administrative staff be involved.

At the same time this organizational pyramid was occurring, the superintendent of one of the other school districts confirmed a date for the conference, indicating that everyone's schedule was too full to sit through a series of planning sessions.

While all this was going on, the half-day training program was tentatively set up by the committee through informed telephone discussions.

The third superintendent in a meeting with us was concerned with the quality of the program and the format. Once satisfied that a competent team would highlight the program, he made the decision to go and set a date.

Finally, another meeting with the group from the first school district was arranged. We attempted to discuss the need and purposes of the conference. However, the union president was hostile, and the representative of the administrators was a last-minute replacement and had no idea what was going on. Certain relevant issues did, however, emerge. For example, the union president used the term "witch hunt" with implications that this program was a ploy to fire teachers. Another issue resulting in public outcries emerged when the public found that the school district was running alcohol programs for its administrators. This meeting convinced us that this school district would not participate. Subsequently, the superintendent contacted us and explained that the effects of the previous year's teachers' strike could still be felt. Teachers no longer associated with principals, and the residual results would be around for a long time. Although this superintendent all along seemed to be the most supportive of the alcohol program, he appeared to have retreated from his original position.

As a result of this experience, we were very careful to keep open lines of communication with the other school districts, reassuring them of the intent and goals of the program.

The reluctant superintendent finally submitted and established a date for training after the first conference was held and deemed a success by the superintendent and the administrators.

Once we had some input from the school districts, we proceeded to complete the program design considering both learning and educational theory and its application to short-term training. What follows is a review of a select number of theories that seem to be appropriate for this type of training. It was found that certain theories tend to apply to a much greater extent than others. These were identified and, where possible, incorporated into the final training model.

Learning Theory

The beginning of the learning process probably starts at conception, but during the early stages of infant growth and development, the child becomes aware of how his family feels about people, authority, money, love, sex, and other related issues. This learning takes place through observation and imitation. These various categories are actively assimilated and processed by the child. This stage is regarded as one of translation and a readiness for learning about the world in general.

There are three intellectual stages in the development of a young mind:

- (1) At pre-school level, between the ages of four and six years, the child's world is concerned with establishing a relationship between experience and action. Good

times at parties, laughing, sociability, friends, relaxation may be some of the early remembrances.

- (2) At the second stage of development, during the pre-teenage period, these data are being organized and used selectively in the solution of problems.
- (3) At the third level, generally during high school, there may be experimentation coupled with observation (1, p. 23).

It should be noted that these age ranges are only approximations. All children proceed through each stage at different rates. However, the sequence of development is the same for all children.

Television and other multi-media sources pictorially presenting a model may be contributing to what Bandura describes as symbolic modeling (2, p. 97). The child may acquire attitudes, emotional responses, and complex patterns of behavior through exposure to the pictorially-presented model. Since the child may spend a large amount of time watching televised productions and observing real-life situations, the mass media may play an influential role in shaping behavior and social attitudes regarding various issues like alcohol and drinking. The strong, virile, athletic male, the good times, happiness, laughter, one of the in-crowd, love, sociability, success, friends, joy of

living the good life, are just some of the vicarious experiences that the communications technology may be presenting to the young man or woman. These models provided through movies and television as well as magazine advertisements have probably served as one of the most influential sources for the socialization of the young child.

The concept of modeling has been supported by contemporary theorists who have demonstrated that exposure to the same modeling influence simultaneously produces in observers analogous changes in specific behavior, emotional responsiveness, and self-evaluation (3, pp. 55-61).

It has been thought that modeling was instinctual, that people reproduced behavior because their bodies had innate responses to certain stimuli. However, it has since been observed that the stimuli that cause an individual to perform a certain act tend to become the cues for that same act to be repeated (4, p. 15). Further observations report that for imitative learning to occur, observers must be motivated to act, modeling cues for the required behavior must be provided, observers must perform matching responses, and positive reinforcement must occur (5, p. 42). Social learning theory supports the notion that through observation of a model, a student can learn new behavior or have already learned behavior inhibited or disinhibited. For example, a student may learn how to pump gasoline into his car by watching the gas attendant perform this operation on other cars. Or he may learn to use a microscope through a prepared film using

a laboratory worker as a model demonstrating how to set up the equipment and make necessary adjustments (6, p. 12). Feedback is provided by vicarious reinforcement. Most prominently social learning theory is concerned with the learning of attitudes and motor skill; kinds of learning outcomes that information processing theories have not attempted to encompass (6, p. 41).

The operant conditioning theory by Skinner begins with the proposition that an organism will show an increase in the strength of any response that is reinforced. The initial emission of the response is not clear, but later responses can be controlled by discriminative stimuli. For example, a student working alone is exposed to discriminative stimuli, through instructional material that ends in a question or an incomplete statement. As a result of the student's previous learning, the incomplete statement or question serves as a discriminative stimulus and elicits an overt or covert response of a certain kind. The student gets immediate feedback as to the accuracy of his response through a programmed plan of study which acknowledges success by allowing the student to proceed to the next step. The acknowledgement of a correct response is a positive reinforcer, indicating that learning has occurred (6, p. 8). Acknowledgement of an incorrect answer serves as a discriminative stimulus in the form of mild punishment, indicating to the student to try again. When the student gives a correct response, he moved on to the next question

and the cycle is repeated. Instructional goals are served as a result of the process of stimulus generalization and discrimination; the appropriate transfer of learning has taken place (6, p. 9).

This concept is applicable to small or large groups. Discriminative stimuli can be provided by the lecturer or a student. This signals for a response from other members of the group. Some responses will be verbal where others may be silent. The audible group will receive immediate feedback in terms of the correctness or incorrectness of their response. The non-verbal participants, through vicarious learning, receive reinforcement similar to that of the individual actually participating in the discussion (6, p. 8, 9). Therefore, all members of the group receive both the knowledge and values expressed by the participating members. Skinner wrote that, "the student who is paying attention to a lecture or text is reinforced when the words he hears or sees correspond to responses he has anticipated" (11, p. 157).

A brand of behaviorism employed by Skinner develops a rather different picture. Skinner claims that the internal processes postulated by contemporary information processing theories are irrelevant for analysis and unnecessary for the prediction of behavior (6, p. 38). In brief, he advocates accounting for learning on the basis of external events that act upon the learner, including the arrangement of contingencies for reinforcement (6, p. 38). Skinner provides for learning motivation through initial selection of a

preferred activity which becomes a reinforcer for the act to be acquired when set in a contingency sequence (6, p. 39). Following this, he emphasizes the element of feedback and its effect as a positive reinforcer to instruction.

Guthrie and Estes in their contiguity learning theory describe how verbal associations and chains may be learned in any type of teaching method simply as a result of the closeness of the stimuli in time and space. The theory, through drill activities such as those in individualized computer-assisted instruction, result in learning (6, p. 11).

In the respondent learning theory, developed by Pavlov and Watson, a previously ineffective stimulus, when it regularly and closely precedes an effective (unconditioned) one, is able to elicit a response similar to that elicited by the unconditioned stimulus and becomes a conditioned stimulus. For example, when working with small groups, the discussion leader's voice and facial expressions can often reveal his feelings and attitudes on a specific issue or subject. This issue becomes a conditioned stimulus because it can be regularly associated with the leader's like or dislike for it (6, p. 11).

Cognitive learning theorists do not place much importance on the response of students. They are primarily concerned with the organization of information and its meaningfulness (6, p. 12). They view concepts such as reinforcement and contiguity as factors that affect performance, but not necessarily the acquisition or learning of responses and

information. They are more interested that the learner understand and organize the ideas of the lecturer. These ideas identified as concepts, principles, evidence, logic, definitions, illustrations, instances, and the like that comprise the verbal message to be coded, stores, and retrieved (6, p. 12).

Cognitive theorist Jerome Bruner presents wide-ranging views, including ideas about the social and biological foundations of education and the cognitive development of children as well as the design of effective instruction (6, p. 40). Cognitive theorists claim that the learners can actually control their own attending, learning, and thinking behavior. Bruner acknowledges that intellectual skills constitute a substantial part of most school subjects to be learned, but that it is the strategies of learning and productive thinking that he considers worthy of greatest attention in instruction.

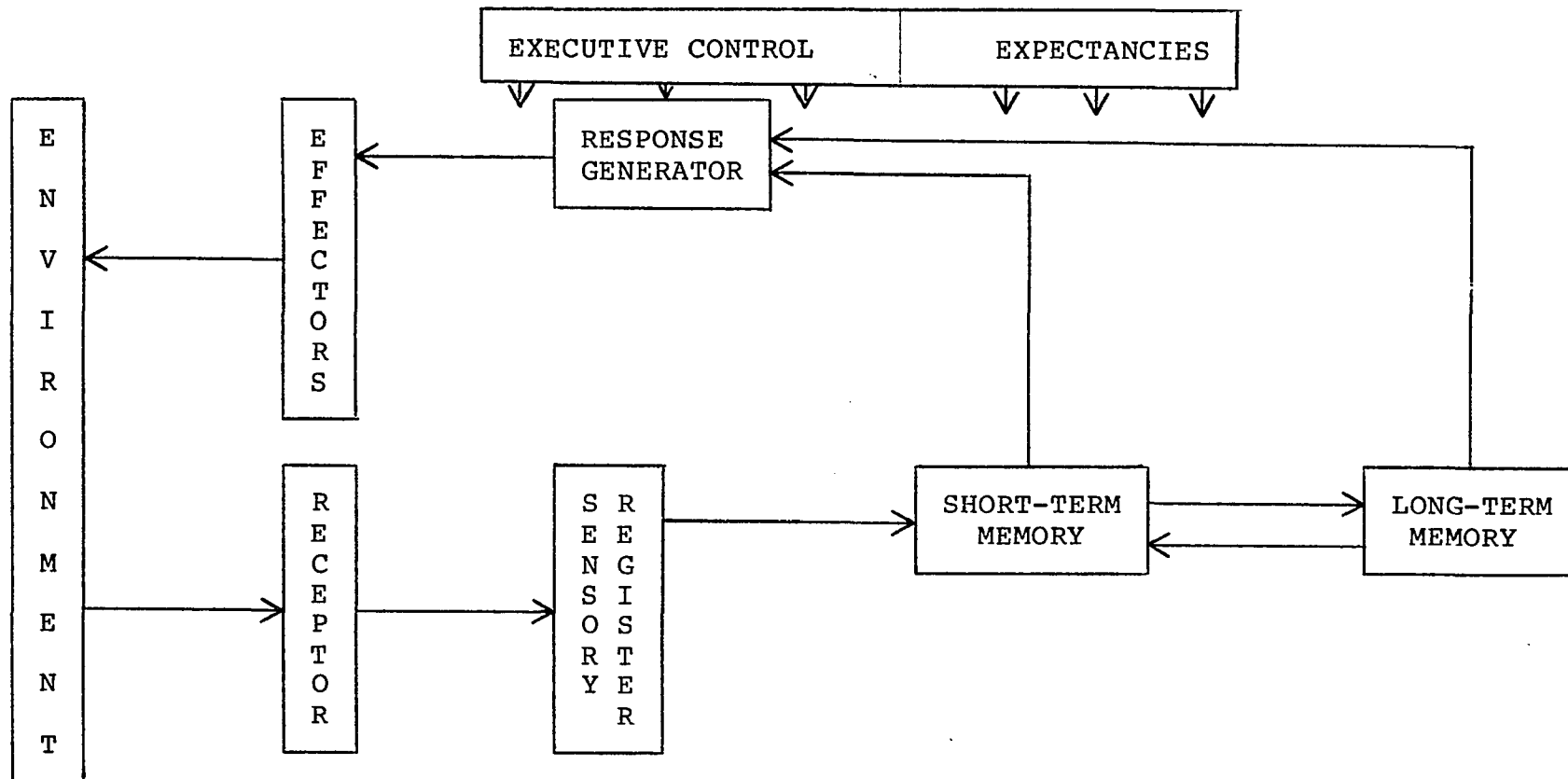
Another cognitive theorist, Ausubel, has postulated a rather complex set of internal mechanisms to account for learning. He feels that information to be learned must be: (a) selectively perceived; (b) meaningfully structured; (c) encoded by being subsumed within a previously learned cognitive structure; (d) differentiated within that structure for late retrieval; and (e) subjected to further consolidation and reconciliation to promote transfer (6, p. 39). Ausubel's theory is concerned with the presentation of instructional material, its stimulus, coding, and cueing.

Another variety of learning theory is that of a behaviorist type, presented by Clark Hull and Neal E. Miller. Hull accounts for learning in terms of postulated intervening variables affecting the strength of associations (6, p. 37). Miller suggests that an effective sequence of instruction in any medium includes provision for motivation, cue response, and reward (6, p. 38). He further proposes that instruction should bring out motivation in the learner and help him in determining relevant cues. And finally, the learner must be able to exhibit what he has learned and receive reinforcement as positive feedback for his achievement. Miller's theory complies with those of information processing theorists. Both theories begin with the element of attention, and conclude with performance and feedback.

Models of learning have been conceived so as to identify the structures and processes that must be considered in a rational explanation for learning (6, p. 22). The model is the initial state of a learning theory. It illustrates the process of flow of information. It begins with a stimulus input from the receptors enters the sensory register (a short-lived memory store), and then into short-term memory where it persists for about thirty seconds or less. The individual then codes the information for storage and transfers it into the long-term memory. When needed, the information is recalled and put into the short-term memory. At this point, its appropriateness is considered, resulting in a decision for further search, or for the generation of

FIGURE 1

A PROTOTYPE OF MODELS EMPLOYED BY CONTEMPORARY INFORMATION PROCESSING THEORIES
OF LEARNING AND MEMORY



From: Robert M. Gagné: Essentials of Learning for Instruction. Dryden Press, 1974.

responses that result in performance by activating the response generator (see Figure I). Parts of the model include motivation, attention, rehearsal, coding, search and retrieval, a general transfer of information, a response generator, and feedback (6, p. 23).

Learner models and theories involve a number of internal and external operations. The internal components of these operations come partly from the learner himself. These inputs are altered, modified, and enhanced in a number of ways, primarily by stimulation from the learner's external environment. The task of the teacher, however, is to arrange the conditions in the learner's environment so that the process of learning will be activated, supported, enhanced, and maintained (6, p. 42). The instructor should be aware of the power and influence he can provide upon the learning process.

Educational Philosophy

"First in importance is the conception of the problem of education" (7, p. 109). John Dewey made this statement during a discussion on his theory of education. He continued, "In substance, this problem is the harmonizing of individual traits with social ends and values" (7, p. 111).

The problem of relating each individual to a group is not new, however; Dewey viewed it as a problem that each generation would have to solve. He indicated that the

solution of a problem could be found after the problem has been well formulated. Therefore, each new generation would have the burden of both formulating the problem and finding its solution. Dewey saw that science and technology were creating severe changes in social life, that the great rapidity and ramifications of change were causing the educational problem of harmonizing individual traits with social ends and values to be increasingly difficult to meet (7, p. 112).

Concepts key to Dewey's philosophy are theories of experience, and his interrelationships of aims, interests, and intelligent action upon learning. He claims all education is occasioned by experience; however, not all experiences are genuinely educational. Only those experiences to which the individual reacts with an informed awareness of the problems and challenge of his environment are truly educational (8, p. 132).

Dewey distinguishes between two aspects of a learning experience: its impact, and its effect. The impact is the immediate sensation felt by the individual during and after the experience. It could be exciting, boring, agreeable, disagreeable, pleasurable, or painful. The effect is the essential element upon future experiences. It will determine the individual's interests in the present experience, his understanding and reaction toward it, and may better help him to understand and control future experiences (8, p. 134).

For effective learning to take place, according to Dewey, proper organization of the subject is critical. He continues by saying, "The curriculum must be planned with reference to essentials first and refinements later" (8, p. 134). However, what is essential will depend on the variables and constraints imposed. In addition, Dewey claims that subject matter, methods, and discipline are to be selected so as to maximize the active participation of the learner in the process of learning (8, p. 134).

"Anything which intelligence studies represents things in the part which they play in the carrying forward of activities of interest... This connection of an object and a topic with the promotion of an activity having a purpose is the first and last word of a genuine theory of learning" (9, p. 129). The concept of interest in the learning process serves as a major motivational aspect in Dewey's thinking. He conceptualizes interest as a link between a learner's present status and where the teacher hopes he or she will be. Interest and discipline are connected, not opposed, and discipline is the power to anticipate consequences, the fruit of mediated experience. To him, interest meant to be absorbed, engaged, or to care about. Interest was not simply unguided or a capricious impulse; it had its roots in the core of the person (10, p. 12).

Dewey also believed in the concept of aims in action learning. He felt that aims and intelligent action were interrelated with the net conclusion being that acting with

an aim is all one with acting intelligently. To practice these skills implies a mind, for mind is precisely intentional purposeful activity controlled by perception of facts and their relationships to one another (9, p. 103). Learning then is problem solving, or intelligent action in which the individual continually evaluates his experience in the light of its unforeseen and experienced consequences (10, p. 13). Dewey interrelates aims, interests, intelligent action, and experience into his philosophy of learning. Learning theory is an essential element in the development of meaningful programs. If applied properly to design, it can contribute significantly to the success of the program.

Up to this point theories and philosophies of learning have been reviewed as well as some discussion relating to the learner's internal environment. Learning is also influenced by the external environment. Too often the impact of the external environment is overlooked by educators. It is necessary to understand how every environmental factor can influence and affect the learning process. Many of the environmental factors can easily be overlooked because they are not directly related to learning. For example, researchers have found that the element of color has an effect on brain waves, heart rate, respiration, and other functions of the nervous system. This effect may stimulate likes and dislikes, and pleasant or unpleasant associations in the learner. Therefore, it is important to examine the environment to which the individual is exposed each day in terms of design and impact upon learning (12, p. 28).

The training environment should be designed so as to help the individual feel relaxed, leave problems and pressures somewhere else, and reprogram or set the individual's mind for learning. For effective learning to take place, it is necessary for the learner to maintain maximum concentration and interest in the program. The setting must be arranged to allow for a quiet, relaxed, informal exchange of knowledge and ideas.

Harold Proshansky, President of the Graduate School of City University, has identified a discipline he named environmental psychology (12, p. 28). He suggests that any environmental factor will have an effect on an individual's learning because it influences both attitudes and actions.

Bruner feels that in order to achieve maximum learning and goal objectives, it is necessary to consider both the setting and atmosphere (12, p. 30).

Short-term training programs are faced with a number of problems, not the least of which has to do with audience resistance; that is, resistance due to the nature of the subject, for example, alcohol or drug abuse. Because resistance can play a major role in the success or failure of the program, determining how to cope with it is on the mind of the planner. Another aspect that must be considered is the constraints connected with the program in terms of time and resource availability (charts, hand-outs, and teaching aids). Due to these restraints, short-term training programs frequently lack a formal session plan. The session plan is

like a map indicating time sequences and direction for the trainer (13, p. 32). He needs this plan in order to determine when to start the session, how to bypass obstacles to learning, when to "break", what behavioral warnings to heed, and how to accomplish objectives (13, p. 32). Without a rather precise plan, training objectives may never be clear.

Time constraints may contribute to an abnormal behavior among the learners who may feel restricted in terms of asking questions or participating. They are afraid to speak out or ask questions. In addition, there is little time for the development of an idea into maturity, and the practice of what is learned is placed too much on the participants.

Another consideration in short-term training is that these programs generally are not designed to meet the personal needs of adult learners as they might relate to training success. Exploring this could assist in the identification of a meaningful relationship between the learner's capabilities and training program outcomes (13, p. 32).

In reviewing the previous discussion on the importance of precise planning to maximize the learning potential, five essential factors must be taken into consideration. First is the program itself. It should encompass an identification of the subject matter to be discussed, the objectives of the program should be clearly stated, and the proper environmental mix should be established. The second factor involves the

communicator. It is essential that the communicator be an effective speaker and discussion leader. Third, we must have the proper administrative units. Here the program leader is concerned with having on hand the best pre-instructional aids he can use to be effective. Examples of these would include workbooks, place cards, hand-outs, films, or other visual aids. The fourth factor is the facility or setting that we choose as our place of learning. Here we are concerned with arranging the setting in a way that contributes to learning effectiveness. The fifth and final factor is the educational methodology; using appropriate learning theory for the group taking into consideration, for example, such factors as age, level of education, and professional experience.

Although short-term training may not, in all cases, be the most appropriate model, it can be effective if the planner is aware of possible shortcomings and plans to take these into consideration.

A variety of short-term training and instructional programs carried out in various settings have shown a great degree of success. For example, the mini-scale program conducted by Consolidated Edison of New York, is designed to expose employees to educational resources, in order to create better internal communications and improve skills. The length of each course given varies from one to thirty sessions, with each session lasting about thirty minutes. The format generally is fifteen minutes of straight lecture

followed by a question-and-answer session. The trainers are from within the organization, and they make excellent use of pre-instructional aids, primarily hand-outs and visual aids.

The results reported have been favorable. Attendance is never a problem and the program is presently active after three years (14, p. 75).

Another such program is being conducted at Long Island Jewish/Hillside Medical Center, through the sponsorship of their education department, a short-term training program called "Mini College". The Mini College consists of classes lasting one week for one hour over the lunch hour. During these five sessions, a variety of different subjects are covered, with each one geared towards the personal needs of adult learners. Prominent outside lecturers are brought in to encourage attendance and lend credibility to the program. The entire cost to the hospital is low. Materials or supplies utilized are purchased by the participants. It has been found that this program, in addition to meeting educational needs, has also increased attendance and morale at the hospital.

A third similar program which is conducted on a national level has been established by the National Institute on Alcohol Abuse and Alcoholism.

Because of estimates that three million of our ten million problem drinkers are employed in the nation's work force, the National Institute on Alcohol Abuse and Alcoholism, in 1971, initiated a program to assist states in acquiring

competent consultants to help them form alcohol treatment centers. Funding was provided, enabling states to employ two full-time consultants. The primary objectives were to provide these consultants with information which would enhance the effectiveness of alcohol programs, and increase their consulting and supervisory skills. To provide these necessary skills and information, the National Institute on Alcohol Abuse and Alcoholism conducted a three-week training session at Pinehurst, North Carolina in June of 1972, and a one-week session at six month intervals in San Francisco, San Antonio, and New Orleans (14, p. 78).

At the end of the three-week session at Pinehurst, forty-seven states were represented. At the one-week sessions, forty-nine states were represented. Participants were involved in a variety of activities, ranging from one-day field trips to half-day panels and one-hour lectures (14, p. 91).

A pre-/post-instrument was used to measure the understanding needed for the solution of alcohol problems. Post-test results, based on a 7-point scale, indicated that there was an increase from 3.4 to 5.0 by the end of the Pinehurst session. A similar increase was experienced at the San Francisco session, but only a slight increase at San Antonio and New Orleans. However, it was felt that the objectives of this short-term training were met. Further, feedback from participants indicated that the program initiated discussion groups which greatly enhanced learning (14, p. 82).

There is increasing evidence that short-term training, if conducted properly, can meet specific training goals. However, there are administrators who are reluctant to consider the value of such programs. They often feel that there is a significant difference between theory and practice, and so seldom support programs of this nature.

Learning which contributes to changes in attitude is difficult to achieve. It requires the use of various methodologies, such as confrontation learning, laboratory training, and sensory experiences. At this level of learning we are dealing with perceptions, past experiences, and values (13, p. 32).

Generally, training programs suffer from a number of shortcomings, such as changing attitudes. Most programs do very little to change the attitudes and views of the participants. Revising current attitudes will undoubtedly yield more effective outcomes. Another shortcoming is measurement and evaluation of the program. Management frequently feels that evaluation is a waste of time, but there is an obvious need for it. If the program has been deemed effective, the planner or trainer can justify the cost for its continuation or further development. In addition, the results obtained can be used to upgrade, replicate, or identify shortcomings.

Short-term training is not a new concept; however, with the incorporation of a planning and evaluation sequence it offers a great potential in a time when both monies and time are at a premium.

Programs like the Mini Scale program at Con Edison, the one at Long Island Jewish, the National Institute on Alcohol Abuse and Alcoholism program, and the one for school administrators all tend to indicate that short-term training can be effective when carefully planned for specific audiences.

Applying the Theory

The review of educational theories and the various short-term or mini-training programs disclosed that no one theory on particular design would be solely applicable to the program for administrators. Therefore, parts of theories and educational concepts were applied in formulating the Alcohol Training Program for School Administrators and Supervisors. The concept of observational learning, where a student observes a model, as discussed by Bandura, was incorporated. This was accomplished in a step-by-step fashion presenting new knowledge with regard to alcohol and demonstrating appropriate behavior in supervision. Bandura cites the disinhibitory effect whereby observers increase their performance when they observe models that have engaged in threatening or prohibited activities without consequences. This was utilized by allowing for the audience to internalize the importance of supervision in the mental health of teachers and through role playing to model this behavior.

Rohwer believes that clear-cut guidelines enhance the quality of training. This concept was applied through the following steps:

- (1) A questionnaire was used to explore the needs of eight school districts within the Huntington Township.
- (2) Using the conceptual learning and development model from the Wisconsin Research and Development Center and the thinking of Baker and Schutz, detailed prescriptions were planned for the development of instructional materials, starting with the formulation of the objectives and proceeding through verifying the quality of these materials after each program in the three-step design (15, p. 14-16).
- (3) The target districts for whom the materials are to be developed were visited and a series of meetings were planned with the Superintendent of Schools. Depending upon the districts' needs, other informational meetings were arranged with representatives from administration, the teaching staff, and unions to review and analyze the concepts in the instructional material.

The time factor, an important limitation in our planning, led to application of Bruner's theory that the teaching and learning of structure, rather than simply the

mastery of facts and techniques, is the center of the classic problem of transfer. As a result of this theory, the workshop took a practical approach to learning, since the participants have a limited exposure to the materials they are to learn.

As a final check list, Houle's model was followed as a guide to insure that the training model will provide a good and useful learning experience (16, p. 16):

- (1) Identify the problem and contextual situations.
- (2) Make a judgement about the appropriateness of possible education.
- (3) Develop a statement of objectives, including specific outcomes.
- (4) Design a suitable program:
 - (a) Format -- content and style of presentation
 - (b) Leadership -- who and by what criteria are leaders selected
 - (c) Methods
 - (d) Materials
 - (e) Awareness of All Concerned -- of the goals and procedures
 - (f) Evaluation -- what objectives, measured in what ways, using what data

- (5) Get administrative support:
 - (a) school district survey
 - (b) support of superintendents
 - (c) provide guidance to program leaders
 - (d) consider financial needs
- (6) Carry out learning activities, utilizing appropriate feedback at all stages of the model.
- (7) Attempt to measure the progress achieved at the various stages.
- (8) Make an appraisal of the whole project, including the sharing and diffusion of what was presented.

Generally speaking, much of Houle's outline was followed in the planning of the administrators' training program. For example, the planning took into consideration certain elements that were special to the group, such as: age of group members, their professional and educational backgrounds, and their job responsibilities. As a result of this, the educational theories that applied to mature groups were incorporated.

A seminar type meeting was chosen where the discussion leader provided expert information. Further, the situational presentation was used so that the participants would be able to analyze the individual or group action in a familiar frame

of reference. The speakers were encouraged to call attention to specific points in their discussion. It was hoped that the participants gained a common core of information, and with discussion and role playing, experienced a more practical approach to learning.

A description of the model helped show how components of educational theories were used in constructing the design (Appendix 1).

Program Design

The program was designed to begin with an informal coffee session to enable the speakers and the audience to get acquainted. All speakers were asked to attend the entire training session so that they would be part of the informal session and also be aware of the exact information given at each presentation. It was felt that this would add to greater continuity, prevent overlap, and insure that the content was in line with the program's overall objectives.

Following the coffee session, the chairman called the conference to order and asked that each participant complete the survey which was used as the pre-test instrument (Appendix 2, Chapter IV). The survey was administered before any details of the program were discussed so that responses would not be influenced by any statements or information dealing with content material.

The chairman then distributed programs to the participants and specifically went over the objectives of the conference and the materials to be covered during the session. It was at this point that the superintendent welcomed his administrators to the conference. These presentations varied from being dramatic in terms of a case history he had with an alcoholic to a brief explanation of the program.

With the stage set, the cognitive areas of the program proceeded. The initial presentation, "An Overview", intended to establish the need, was made by a professor of psychiatry with specific interests and training in alcohol and educational methodology. The purpose of this presentation was to point out the social, economic, mental, and physical problems alcoholism presents to the individual, the family, and to all segments of society. The format of the presentation highlighted the following areas:

- (1) Public Health Aspects of Alcoholism
- (2) Alcohol -- Crime and Accidents
- (3) Alcoholism -- The Disease Concept
- (4) Cost of Alcoholism -- To Society, The Individual, Business, and Industry

(5) Is Alcoholism a Problem in the Schools?

During the presentations, questions from the audience were limited due to time restrictions. However, questions concerning interpretation or clarification were immediately responded to.

The second lecturer, addressing the issue, "Alcoholism -- The Disease", was Co-Director of the Long Island Council on Alcoholism. He was an ordained priest, a recovered alcoholic, and a national expert on alcoholism. He has appeared on national television and has lectured on alcoholism in at least twenty-five states across the nation. His discussion was planned to provide an understanding of alcoholism as a disease, clarifying such issues as who is the alcoholic and how one progressed through the stages of alcoholism, identifying the signs and symptoms at each stage.

More specifically, this speaker covered the following areas:

- (1) Alcohol -- A Dangerous Chemical
- (2) The Effect of This Chemical as a Causative Agent in Both Physical and Psychological Dependence
- (3) The Medical Aspects of Alcohol

- (4) The Disease Concept as Identified by the American Medical Association, Women's Health Organization, and Others
- (5) The Stages of the Disease Alcoholism as Described by E. M. Jelinek

The next speaker, a principal of an elementary school and a graduate from a two-week intensive training program on alcoholism, presented, "Early Identification". The material presented was researched while she served as principal, and her findings published in a series of articles in nationwide journals. Her remarks were intended to make the administrators aware that some teachers as well as administrators may be alcoholic, that there are signs and symptoms of a drinking teacher, and that intervention can stop the progress of the disease. She elaborated in the following areas:

- (1) Identification of the Alcoholic Teacher
- (2) The Middle Stage Alcoholic -- Who Is He?
- (3) The Concept and Practice of Intervention
- (4) Teacher Training -- The Core of Prevention

At this point in the program a planned break was introduced. Obviously, it was concerned with audience comfort; however, it was hoped that participants would address personal and professional questions to the speakers in a more informal setting. Experience has shown that when issues in alcoholism are discussed, people have a tendency to question their own drinking habits as well as those of their friends, colleagues, and families. This proved to be true, as indicated by the nature of the questions asked by our participants during the break.

The final activity encompassing "Intervention and Counseling" was provided by an individual who is the Executive Officer of a medical facility designed to treat only cases of alcoholism. His experience in alcoholism ranges from counseling to administration. He is called upon by hospitals throughout the country for advice on the management and treatment of the alcoholic. His presentation was intended to help the manager or supervisor identify his role in dealing with the alcoholic and to illustrate how the union could be supportive of a planned alcohol program for employees.

His offerings fell into two categories. The first included issues concerning:

- (1) Intervention in Terms of the Stages of the Disease Process

- (2) The Role of the Supervisor with the Troubled or Alcoholic Employee
- (3) Management Functions
- (4) Union Functions

The second part of his presentation was set up as a role playing experience. Certain situations were created and individuals acted out how they would deal with the issues. For example, the case of a teacher with frequent absences and declining efficiency was presented. Emphasis was always placed on the role of the supervisor, emphasizing that the supervisor has a significant role in helping the alcoholic or other troubled employee with their problem. It was also pointed out that this role of identifying and dealing with this type of individual was part of the responsibilities of a supervisor, and that previous learned supervisory skills should be utilized in handling the suspected alcoholic employee.

Following the formal presentations and the role playing sessions, the speakers formed a panel to respond to questions from the audience. Actually, the panel served to summarize and reiterate the essential points covered during the conference. The post-test or survey was administered just prior to the close of the conference. The test was identical to the pre-test, which was given at the beginning of the conference.

The concluding remarks given by the moderator pointed out that a three-hour session could not make them experts in counseling, intervention, or alcoholism. However, if it helped to clarify their role as a supervisor, then a first major step was taken. A look into the future should reveal more training, the development of school policies, teacher education, and the development of a curriculum for students.

Before the participants left, a number of them were asked to respond to a series of questions concerning their opinions about the program. In each case, over twenty percent agreed to complete the opinion questionnaire.

Summary

Up to this point in our discussion, we have identified the problem of alcoholism, looking at it as it affects the various aspects of our social system. We have documented its effects on the individual, clarified its recognition as a full-fledged disease as defined by the American Medical Association, and established a need for educational programs to prevent and get into treatment alcohol abusers. Furthermore, we have narrowed our interests to occupational alcoholism, and even more specifically to programs concerned with the education and training of school administrators.

Following the identification of our target population, select learning theories, educational theories, and training programs were reviewed with the intent to utilize applicable

theories and designs in the formulation of an educational experience for administrators.

And finally, the training model was presented in terms of its objectives and how it went about meeting those objectives. The next area for discussion will be concerned with implementation. The three-step program will be reviewed and a discussion of the events at each conference will be reported.

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CHAPTER III

THE THREE-STEP IMPLEMENTATION

The program was developed using a formative design involving three phases. Phase I was the program conducted in the Elwood School District. This program was reviewed by the training team, revised as necessary, and then presented as Phase II in the South Huntington School District. Again, it was evaluated by the training team, and the final program, which was now Phase III, was presented in the Half Hollow Hills School District.

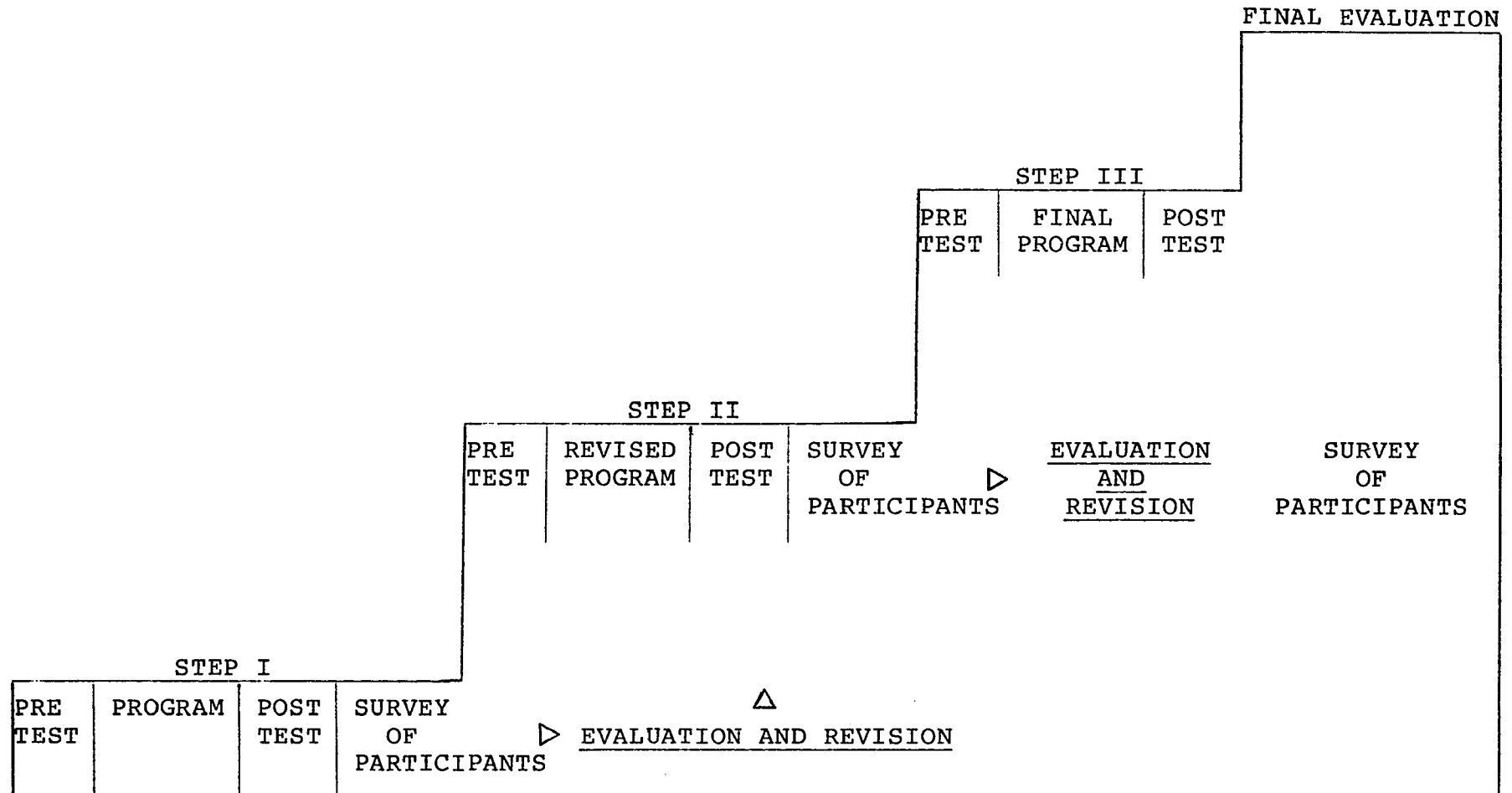
The three phases of the program were done so that the planners would be able to review each training session and make revisions, if necessary, before proceeding to the next phase. Through this design, the program could be improved before presenting it again, with the third and final presentation representing the refined program (Figure 2).

In order for us to understand fully the results of the training program, it is beneficial to review each of the individual programs in terms of format, environmental factors, attitudes, and group interaction and support.

Program I

The first program was conducted in the Elwood School District on March 22, 1977. Prior to our arrival, there was very little contact with the Superintendent of Schools or

FIGURE 2
FORMATIVE EVALUATION DESIGN



with any of his staff or faculty. Although he was asked to participate in the planning, he indicated that he and his staff were too involved in school activities to actively work with the planning team.

All of the participants and speakers arrived between 8:30 and 9:00 a.m. The coffee period served as an informal setting to allow participants and speakers to get acquainted. It further provided the presenters a few minutes to get their presentations organized. Unsuccessful attempts had been made to bring the speakers together prior to this date to coordinate presentations. However, due to conflicts in schedules, this was done by the Chairman through a visit or telephone conversation. Considering that this was the first in a series of three events, it was essential for the program personnel to be mutually informed. It was evident that evaluations of the program would be made to other school districts, and failure to motivate or stimulate this first group concerning their role with the troubled employee could have adverse effects on subsequent presentations.

The physical arrangements were entirely planned by the Superintendent. In this case, a classroom in one of the primary schools was used. All of the administrative staff were present, including one who was in charge of the cafeteria workers. Also present was the Regional Director of Occupational Alcohol Programs representing the New York State Division of Alcoholism. Members from the other involved school districts had been invited, but none attended.

The program began with the Chairman's administration of the pre-test and his introduction of the Superintendent, who welcomed the group and illustrated the need for this training by discussing a case history of an alcohol-related problem. He recognized the presenters as a panel of experts and turned the meeting over to the Chairman. The program proceeded on schedule, with stimulating discussions by the speakers and frequent questions and participation from the audience.

At the conclusion of the program, the Superintendent spoke glowingly of the program's accomplishments and of the informative presentations.

Before departing, the speakers who served as the Planning Committee met to discuss the program, review the pre- and post-tests and the opinion questionnaire, and suggest changes in the format, if any, before the Phase II program in the formative design. (This will be discussed in Chapter IV).

It seemed, in review of the morning's events, that the audience was not aware that the subject of alcoholism was going to be the theme of the training session. Considering that this program was the first of three, it was decided to try to bring together these administrators at a later date to critique our presentations and thus to determine where to place greater emphasis, and what additional support might help them when they try to implement programs.

The Chairman and a member of the committee subsequently met with the Superintendent and the administrators. Very little constructive help was received from this group, although it was unanimous that the training was meaningful and well directed. The Superintendent felt the program was extremely worthwhile and should be provided for all school systems. This positive feeling was transmitted through internal informal communications to the other school districts, reinforcing the training group's credibility.

Program II

On April 12, 1977, the second step was taken in the formative training program. Revised as suggested by the Planning Committee, the program was basically the same except for the provision of more time for role playing and a greater emphasis on treatment.

The South Huntington School District, which employs over 900 faculty and has over 15,000 students, is one of the largest in Suffolk County. The Superintendent did not want to be directly involved in the planning aspects of the training. In a meeting with him, the team found him to be extremely candid, knowledgeable, and having some exposure to the alcoholic employee in his district. Although he did not encourage the involvement of his administrators in any of the planning, he insisted on receiving a copy of the program prior to the training session. In advertising the session

to his administrators, he chose to list it as "Problems in Supervision" (Figure 3). He was in no way suspect of the quality of our program, and indicated that he had heard positive reports of the experience at the Elwood School District.

Although the team continually stressed the need for a room that was conducive to its training style, including movable chairs, blackboard, no distractions, and not too large for the audience, superintendents arbitrarily selected the facility. In South Huntington, the conference was held in the high school in a very large room, although the group consisted of about 25 persons. The room had graduated levels of seating and was arranged in a semi-circle with the area for speakers at the lowest level. The room had a tremendous capacity, but on one side sat the school administrators and off to another side sat three individuals who represented the union leadership.

Basically the same program format used at Elwood was employed. The Superintendent welcomed the group and presented an extremely dynamic and supportive speech concerned with the alcohol problem in the district. His introduction served to stimulate the audience and they seemed to hang on every word that followed.

Questions from the audience seemed to focus on the inability of administrators to deal with an alcoholic employee, and answers were provided through the role playing experience which emphasized supervision through job

March 14, 1977

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MEMO TO: Elementary and Secondary Staff

FROM: Mr. Connell

RE: Superintendent's Conference Day - Tuesday, April 12, 1977

Elementary Classroom Teachers

Teachers working through their building administrators, are to arrange parental appointments for Tuesday, April 12. Utilizing the time provided on the conference day, plus time reserved for conferences on the three early release days, it is expected that all parents will be provided with an opportunity to report for a conference this semester.

The building principals and individual teachers will exercise their best professional judgment in mutually determining the scheduling of conferences and required length of each conference.

Kindergarten teachers will meet at Beverly Hill (see Special Area Category below).

Secondary Classroom Teachers

The secondary program will once again concentrate on the educational aspects of curriculum.

Department meetings, by discipline, are to be structured on curriculum, viz., direction, goals, and evaluation of program. It is expected that principals, working through department chairmen, will provide direction for the program in each of the three secondary buildings.

Teachers' Hours: 8:30 a.m. - 12:30 p.m.

Special Area Teachers, K-12

Personnel in the following areas will meet at Walt Whitman High School at 8:30 a.m.

<u>Area</u>	<u>Room</u>	<u>Chairperson</u>
Art	Room 504	Mr. Schnur
Health(High School)	Room 116	Mr. Smudzinski
Librarians	North Library	Mr. McDonald
Music	North Band Room	Mr. Adriance
Physical Education	South Gym	Mr. Gugliotta
Reading, Elem. Psychologists, Kdgn. Teachers	Beverly Hill	Mr. Di Preta/Miss Gott
School Nurse Teachers	Room 216	Mrs. Clayton
Speech, Social Workers, Sec. Psychologists, CDL, Special Education	Room 212	Mrs. Jacques
Adm. and Supervisors (Problems in Supervision)	Forum	Mr. Connell

Teachers' Hours: 8:30 a.m. - 12:30 p.m.

performance rather than by confronting the individual's alcohol problem as such.

The Superintendent's concluding remarks showed his support for the program and concern for the troubled employee. He appeared to truly welcome this conference and gave every indication that it was just the start of a progression of workshops, so that the entire school district would understand the alcoholic's problems (Figure 4). The union representatives were supportive of the program's aims, and agreed to work on future programming.

In talking with this Superintendent two years after the program, it was found that he has been using some of the counseling techniques and indicates that his administrators feel more comfortable in dealing with the alcoholic employee. However, he has not initiated any additional training experiences nor has he developed a written alcohol policy as was suggested at the training conference.

The Planning Committee again met at the conclusion of this session and reviewed the pre-/post-test results and the opinion questionnaire to determine if changes should take place prior to the third and final step in the program. It was found that the participants were still answering question #3 incorrectly, and so those speakers covering that material were encouraged to increase their emphasis in that area. This slightly revised program was offered to the Half Hollow Hills School District.

SOUTH HUNTINGTON UNION FREE SCHOOL DISTRICT

31 WALT WHITMAN ROAD
HUNTINGTON STATION, N.Y. 11746

SUPERINTENDENT OF SCHOOLS
CHARLES A. CONNELL
516 421-5400

May 6, 1977

Figure 3

Mr. Stanley Zimering
Dept. of Psychiatry & Behavioral Science
State University of New York at Stony Brook
Nicolls Road
Stony Brook, N.Y. 11794

Dear Stan:

I am truly sorry that I have not addressed this letter to you sooner. (This is perhaps the busiest time of the year for us, but that does not excuse my bad manners.)

I would like to express the appreciation of our staff for the outstanding workshop on alcoholism which you co-sponsored at our Superintendent's Conference Day on April 12. The program was of great value to our supervisory/administrative staff and to the teachers' union representatives who participated in it. I have received many comments praising the substance and format of the presentations. You held our attention, and motivated us to plan a follow-up session in the fall -- a remarkable feat, considering the reluctance of any experienced staff to sit in discussions for several hours on a warm spring day!

Your program was an outstanding contribution to our staff development, and we thank you for helping us to initiate a very worthwhile project in our school district. We intend to use your workshop as a first step in attacking the problem of alcoholism within our staff, and we will encourage other school districts to make use of the program which you are sponsoring. Again, thank you for the service which you have rendered to the South Huntington School District.

Best personal regards.

Sincerely,



Charles A. Connell
Superintendent of Schools

CAC:mn

Program III

The Half Hollow Hills School District is the second largest in Suffolk County. It has about 870 teachers and administrators, and over 12,000 students.

The Half Hollow Hills program was in some ways different from the other two. For example, it was the only district that insisted on involving staff in the planning of the program. However, this staff was not briefed prior to meetings, changed from one meeting to the other, and was less than effective in moving the program toward completion. Further, it was the only school district that would not confirm a date for presentation and, as a matter of fact, waited for feedback from the other districts before moving ahead. Even when the date was confirmed, the entire process was different.

On June 28, 1977, the training team proceeded to the scheduled meeting place at the scheduled time. The training was to be given in a meeting room at the elementary school. As the team entered the room, which was well filled, the Superintendent was talking to the group. He seemed intent, serious, and somewhat annoyed. When he saw the team enter at the back, he stopped what he was saying and said something to the effect, "It's all yours". There was no chance to get set, to meet the participants, or to engage in preliminaries. The team did not have the opportunity to discuss with him an important change in the program, a replacement of a key

speaker. A few days before the scheduled program, the team had word that one of the speakers was hospitalized for a suspected heart attack. Although plans had been made for an emergency, a replacement with a speaker of this caliber would be impossible on such short notice. Further, his prognosis was such that it was possible that he might be able to attend. There was an alternate for each speaker; however, the replacement was not considered equal to the original speaker. The primary differences between the two were that the original speaker had "charisma" and knew what was wanted. The replacement, although knowledgeable, did not know what was wanted, was not part of the formative evaluation process, and was rather pedantic. Furthermore, there was not ample time to brief the replacement. It seemed as though he was speaking impromptu. His remarks did not produce the same impact as the scheduled speaker. Even the questions from the audience did not flow as they did in the previous conferences.

The Superintendent thanked the team for the program. He mentioned that this session was the first part of awareness of the role of the principal as a supervisor, and indicated that other similar programs would be forthcoming. He then proceeded to dismiss the group almost as abruptly as he did during his introduction.

The Planning Committee met for a short time to review what had happened. It was felt that this conference was unlike the others. It could not be determined whether it was

the end of the school year, the energy level of the administrators, the dynamics that existed before the arrival of the team, the fact that a strike had occurred, or the substitute speaker, but it was evident that something was amiss.

Looking over the pre- and post-tests, the team found that the post-test results did not appear to be much better than the pre-test results. This will be more fully explored in the analysis of the results.

Although attempts were made to control certain aspects of the program design, such as the coffee period, the room arrangements, the flow of the events, and the speakers, circumstances beyond the control of the planners intervened to affect the program at one training site.

Program planners frequently assume that once the program is in order and individuals have agreed on major issues that things will flow smoothly. However, when one is dependent upon others for certain programmatic aspects, it should always be expected that a surprise may occur. Planning based on a theoretical model excludes the real world and human nature. Those two variables often make an ideal program plan a disaster in reality. Therefore, it is important for the planners to have as much control of the variables as possible. The problem arises, however, that time constraints and job pressures frequently necessitate involving others in order to get the job done, therefore losing some control. The answer probably lies somewhere in

a compromise where the planners share responsibilities with checks and controls to insure quality and consistency.

Obviously the styles of administrative practice, the environmental factors, and the flow of events all have an effect on the learning process. During the stages of implementation, there was a chance to observe how these variables impacted on the participants.

CHAPTER IV: APPROACH TO ASSESSING RESULTS

At this time in our discussion, we are concerned with the results of the formative evaluation which was conducted at three sites about a month apart.

The previous chapters were designed to show the need for the training program develop an educational rationale for the model, and then employ a three-step evaluation design implementing the model.

Before proceeding, it would be useful to briefly describe the process of formative evaluation as compared to summative evaluation, and show how this was used at each step.

Methods

The Formative Approach, also referred to as the process approach to evaluation, is an ongoing dynamic process where information is continuously added, organized systematically, and analyzed periodically (1). Formative evaluation provides a feedback mechanism for determining whether the program should be continued, changed, modified, or redirected in order to meet the objectives of the program. Using formative evaluation, different segments of the program may be analyzed, thus leading to revisions or corrections in areas that require strengthening or increased emphasis. It

can provide information that is potentially useful in sharpening and developing the program, rather than delaying evaluation until program termination, when any changes would be after the fact (2, p. 33).

The Summative, or outcome, approach to evaluation is used at the end of a program. It serves to evaluate the final product, and is an overall evaluation in that it relates to those purposes of evaluation involved in the formation of an overall decision: shall we buy the product or not? Shall we go on with it or not? It is summative in that it has an overall decisive function one way or another (3, p. 19).

Generally, formative evaluation approaches are considered in social action programs, where changes may be necessary in the ongoing process. Summative evaluation is most useful in determining program success upon termination, and in making decisions among various alternative programs.

The Design

The program which is to be evaluated is called the Alcohol Training Program for School Administrators and Supervisors. The stated objectives of this program are:

- (1) To make supervisors aware that alcoholism is a disease and it is treatable.
- (2) To make supervisors aware that effective supervision is the tool of intervention with the troubled employee.

Before getting into the specifics of analyzing the alcohol training program, it would be useful to review the internal and external factors that may affect our results. In terms of scope, this training program involved the supervisors of three school districts, each district participating separately in a presentation of the program. The districts to whom presentation of the alcohol training program was made were, in order, the Elwood School District, the South Huntington School District, and the Half Hollow Hills School District. There were a total of 15 participants in the Elwood program; 23 participants in the South Huntington program; and 38 participants in the Half Hollow Hills program. The time allotted for each of the three programs was one three-and-a-half hour morning session (for a schedule of the design of each program, see Appendix 1). The monies necessary for this program were not of significance -- both the time and participation of the speakers was donated, and the availability of a room in which to conduct the program was provided by the participating respective school districts. In terms of the goals and complexity of the program, the objectives have already been stated. The subjects, administrators for whom the program was intended, were similar in many ways. The program was designed specifically for supervisors in the selected school districts. Their educational and economic backgrounds were generally at the same level, and their interest in the program had been previously acknowledged. The level of interest which they

brought to the situation was perhaps greater than would be found in a random sample, since the material being presented had potential application in their professional life. It should also be mentioned that these groups of supervisors might be considered a captive audience, in that they were required by their respective districts to attend the program presentation.

There were actually two evaluative procedures used in the formative evaluation process applied to this program. The first was the use of a pre-test and post-test to determine knowledge change. The second was an opinion questionnaire given to about 20 percent of the participants to measure their feelings about the structure of the program. Each successive presentation of the program was followed by an evaluation and revision, if necessary, of the program format and content.

Several of Knutson's justifications for evaluation are applicable to this program. They include the following:

- (1) To demonstrate to others that the program is worthwhile.
- (2) To determine whether or not a program is moving in the right direction.
- (3) To determine whether the needs for which the program is designed are being satisfied.
- (4) To justify past or projected expenditures.
- (5) To support program expansion.
- (6) To satisfy someone who has demanded evidence of effect (2, p. 15, 16).

With these purposes in mind, as well as the stated objectives of the program and the limitations on the time and operating conditions, the best experimental design available for use was the One-Group Pre-Test/Post-Test Design, repeated for each of the three school districts. As discussed earlier, this design is often used in educational and social research. It is not a true or quasi-experimental design, as it does not have a control group and there are elements within this design that may jeopardize internal experimental validity. In this design, a pre-test is taken to measure the knowledge brought by the participants to the experimental situation and to serve as a comparison for evaluating the effectiveness of the program upon completion. In the Alcohol Training Program for School Supervisors, the pre-test and the post-test questions were the same. The test consisted of seven questions (see Appendix 2), including four true/false questions and three multiple-choice questions. The aim of these questions was to measure knowledge about alcoholism, treatment programs for alcoholism, and the supervisor's role in regard to alcoholism within the school and school staff.

Although the pre-experimental pre-test/post-test design may have several elements which may jeopardize internal validity, in this particular situation every effort was made to control these extraneous variables. Among these variables mentioned earlier which challenge the premise that the educational program was the sole reason for change in

attitude and knowledge is that of history (the non-random events occurring between the pre- and post-tests). The longer the time elapsed between the pre-test and the post-test, the more likely that other events may interfere with the results, thus jeopardizing internal validity. In this case there were only three-and-one-half hours between the pre- and post-tests, during which time the educational program was presented. There was relatively little chance for other events to creep in. Maturation (systematic natural changes) can be another variable that may jeopardize internal validity, but, as in the case of the previous variable, this was controlled by the fact that the time period for the program presentation was relatively short. Therefore, the time of growing older, bored, hungry, or tired is not likely to have effected the test results. An additional rival hypothesis used to explain change in knowledge or one affecting a program is that of testing itself, which may provide a stimulus to better performance, this being known as reactivity. In this case, the signing of one's name on the tests was completely voluntary, and relatively few people chose to identify themselves. There remains the chance that, because the pre-test and post-test were exactly the same, knowledge may have been retained from the first testing to the second, and the test may not have been a significant measure of knowledge actually accumulated. When testing with similar tests, there is a natural tendency for scores to increase slightly from one administering

session to another. However, as can be seen in the analysis of the test results which follow, the positive change in this case was too great to be attributed solely to chance or to testing itself.

As may be seen from the previous discussion, despite the inability to use a true or quasi-experimental design, a great deal of control was obtained in this pre-test/post-test design, and a reasonable amount of validity was insured.

Analysis of the test results of the pre- and post-tests in each of the three school district programs will be examined in terms not only of total scores, but of individual question results as well. The change in percentages in a positive or negative direction will be reviewed, and the results will also be examined through a test of significance to determine if the change may be attributed solely to the alcohol training program.

Before proceeding to the analysis of the data collected, it will be useful to provide an explanation of how the testing instruments were devised, and further, how the formative evaluation was achieved and used.

Instruments

There was a need to develop an instrument that would determine whether or not our program met its objectives. A search of the literature revealed that other testing instruments would not be applicable to our situation.

However, our Planning Committee, by virtue of their academic background and their many years of experience in the fields of alcohol and education, served as an expert committee to develop the instrument that would be appropriate for our needs. Each member of the group was asked to develop a set of questions that would attempt to measure the knowledge of participants as it related to our purposes. Following this exercise, the group convened to review and select the most relevant questions to serve as the basis for collecting data. As an outcome of this meeting, seven questions were chosen as a core, to be used as the pre- and post-test. These seven items were to be pre-tested by the Superintendents of the participating school districts. However, time schedules, meetings, and difficulties in arranging these interviews resulted in a review of the instrument by only one administrator.

The opinion questionnaire went through the same process in its development, with the same superintendent contributing to its development.

Prior to the implementation of the program, it was agreed that the expert committee would participate in the evaluation process during the three-step program. It was also decided that this group would meet following each training session so that a review of the data could take place and immediate change, where necessary, could occur. Another reason for the group to convene following the session was to eliminate any problems that might occur as a result of

the suggested changes. With all members present, it would avoid the problem of scheduling additional meetings and insure the involvement of the group and the coordination of the material to be presented. This system proved to be workable and an effective way to deal with the formative evaluation.

In order to understand the nature of the problems encountered, it is helpful to reiterate some key issues discussed under Implementation. The following review of the evaluation process will prove beneficial as we move to analyze our results. at the completion of the first training program, our group met and reviewed the pre- and post-tests and the opinion questionnaire. In addition to this review, a discussion took place centering around audience participation, content, process, and feelings in general. As a result of this meeting, several changes were suggested to improve the program in order to move our results closer to our objectives. For example, there was practically no change in the group's response to question #3 which stated, "The most effective means of treating the individual with an alcohol problem is:", the correct answer being "e. Medical profession and self-help group". Actually, the team thought that the material presented adequately covered that item. However, based on test results, there was a need to increase our efforts in that area. This was done by increasing treatment information in one speaker's presentation. Another aspect of the program caused additional concern. This was in the role playing

experience. The pre-test/post-test results and the opinion questionnaire did not indicate problems in this area; however, a few members of the committee felt the experience was too superficial and it was agreed to "beef it up" in two areas. The first was to allocate more time for the participants to get involved and, further, to provide, through the role playing experience, more realistic situations

A review of the opinion questionnaire reassured us that the program was moving in the right direction. There were a few comments concerning the length of time of the training. It was felt that more time would have been beneficial. This issue was discussed with the Superintendent for future planning.

With these changes, the program moved into its second presentation. As before, the committee convened at the conclusion of the conference and basically went through the same process as before. A review of the pre-/post-test results and the opinion questionnaire revealed once again that our audience was just not grasping the concept of treatment that was expressed in question #3. The opinion questionnaire once again was extremely supportive in all areas except for the facilities. The majority of the group raised issue with the room arrangements. This item was discussed with the superintendent to help in future conferences. In addition, this information was passed on to the next training site in hopes of securing better facilities.

At this time significant efforts were made to insure that our participants would obtain enough information to respond correctly to question #3 concerning treatment. Two speakers modified their presentations to overlap that specific area of treatment covered in question #3. In general, the committee was satisfied with the second training conference, and except for the change in reference to treatment, the same format was presented at the third and final conference.

As previously discussed, the third conference was different in many ways from the first two. Starting with a change in program format to the substitution of a key speaker, this third program really never got off on the right track. Not only did participants do poorly with question #3, but their scores were consistently poorer as compared with the other two training sites.

The opinion questionnaire, however, pointed out that this group found the conference to be useful to the extent that they all indicated the program met their needs and that programs on alcohol would begin in their school district.

Although the evaluation committee felt this program to be the least effective in terms of the previous two, it was clear that the participants, in spite of the fact of lower overall improvement, thought the conference to be meaningful and useful.

Following is a review of the results of the three-step program made in order to make some determination of success

and to suggest changes that may improve future efforts in this area

Analysis

The first Alcohol Training Program for School Administrators and Supervisors was held for the Elwood School District on March 22, 1977. In this group, as in the subsequent groups, the number of participants taking the pre-test and post-test varied due to the need on the part of some participants to leave early, prior to completion of the whole program, as well as the inability of some members to be present for the pre-test. In the Elwood School District program, 15 supervisors took the pre-test, while 14 completed the post-test. Percentage values for the three sets of pre- and post-tests were calculated (see the pre-test/post-test questions in Appendix 2). Table 1 indicates the percentage of change for each of the seven questions. To understand the analysis of the data, it is important to know that pre-post data were collected. Because of anonymity, it was necessary to use group averages.

As may be seen from a review of the Elwood data, there was a marked increase in the overall score on the post-test (91.8 percent) in comparison to the pre-test score (70.5 percent), suggesting that the training program may have been responsible for this change. In fact, there was a rise in the scores on six of the seven questions, ranging from an

TABLE 1
SURVEY PERCENTAGE DATA

Question Number	ELWOOD 3/22/77		SOUTH HUNTINGTON 4/22/77		HALF HOLLOW HILLS 6/28/77	
	Pre- Test	Post- Test	Pre- Test	Post- Test	Pre- Test	Post- Test
1	86.7	100.0	100.0	100.0	89.5	100.0
2	60.0	100.0	42.9	78.3	55.3	91.4
3	73.3	64.3	85.7	87.0	68.4	57.1
4	53.3	100.0	47.6	87.0	71.1	62.9
5	86.7	100.0	71.4	95.7	89.5	85.7
6	73.3	100.0	85.7	87.0	65.8	94.3
7	60.0	100.0	28.6	91.3	71.1	97.1
1-7 Overall	70.5	91.8	66.0	89.4	72.9	84.1

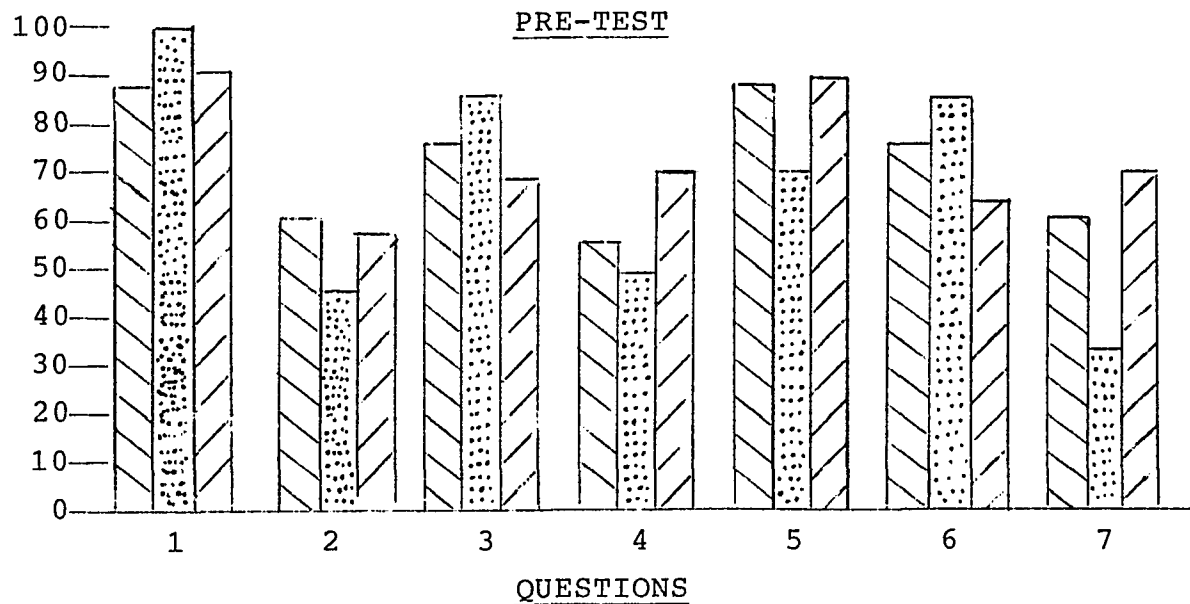
increase of 13.3 percent to one of 46.7 percent. For all six questions, the increase represented a rise to a perfect score. Interestingly, on question #3, the score decreased nine percentage points; however, this did not represent a significant decrease. Table 2 shows the percentage data analysis for each question within each school district. It shows the pre-test/post-test results and the difference between the two tests.

The test of significance employed in this analysis is called the Z-test for the differences in samples.* In this instance, the participants in the pre-test and post-test represent the two independent samples being considered (4, p. 145-147). This test may also be called a normal approximation to a difference of two binomials (5, p. 371-372). The null hypothesis in this situation would state that there is little or no difference in the results between the pre- and post-test results; in other words, the post-test results did not differ significantly from the pre-test results and participation in the training program had no significant impact. Of course, it is the hope of the project directors that this null hypothesis will be rejected and that the alternative statement, that the post-test results were

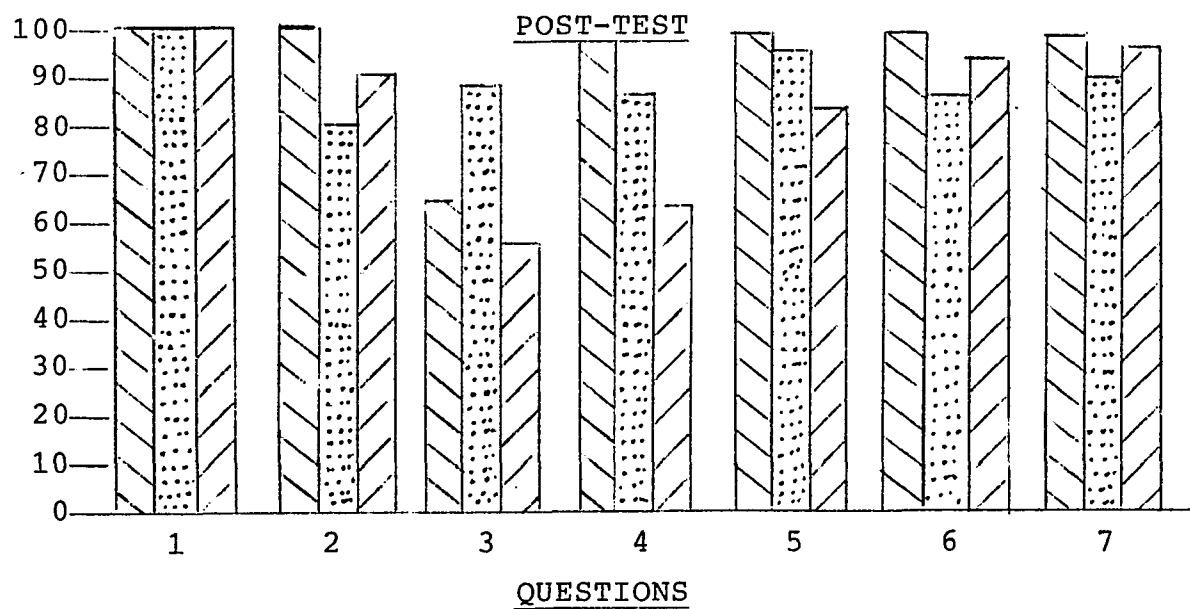
* These are dependent samples. However, because one-to-one comparison could not be made, data were analyzed as if they were two independent cross-sectional samples.

TABLE 2
PERCENTAGE HISTOGRAMS

Percent of Participants who Responded Correctly
by Question



* * * * *



* * * * *

KEY: GROUP 1 GROUP 2 GROUP 3
 Elwood South Huntington Half Hollow Hills

significantly greater than the pre-test results, will not be rejected. It is the intent of the researchers that there be no more than a 5 percent (0.05) risk of drawing an incorrect conclusion as to the results of this test. In this testing situation, equal numbers of participants did not take the pre- and post-tests, making use of the Z-test advantageous since it takes this discrepancy into consideration and weights the results accordingly.

According to the standard Z-table for two-tailed tests, a Z-value of 1.96 or greater would indicate significance at the 0.05 level, and a Z-value of 2.58 or greater would be significant at the 0.01 level (see Table 3 for significance test results).

The formula used to compute the value of Z is as follows:

$$Z = \frac{P_1 - P_2}{\sqrt{\bar{p}(1-\bar{p}) \left(\frac{1}{n_1} + \frac{1}{n_2} \right)}}$$

P_1 is the ratio of the number of correct responses to a given question divided by the number of persons responding (in the pre-test group)

P_2 is the same ratio for the post-test group

n_1 is the number of participants in the pre-test group

n_2 is the number of participants in the post-test group

$\bar{p}$ is the ratio of the number correct for that particular question on both the pre-test and post-test divided by the sum of those taking the pre-test and post-test ($n_1 + n_2$)

TABLE 3
Z-TEST SCORES REFLECTING SIGNIFICANT DIFFERENCES

QUESTION	ELWOOD	SOUTH HUNTINGTON	HALF HOLLOW HILLS
1	1.41	0.00	1.98
2	2.63	2.48	3.44
3	0.53	0.13	1.00
4	1.43	2.81	0.75
5	1.41	2.21	0.49
6	2.09	0.13	3.00
7	2.63	4.27	2.99
1-7 Overall	3.80	4.98	3.03

A Z-value of 1.96 or greater indicates significance at the 0.05 level.

A Z-value of 2.58 or greater indicates significance at the 0.01 level.

The results of the Z-test are determined by following through with the mathematical procedures, the sign (+ or -) being ignored. The results are presented in Table 3.

In terms of the Z-test, one can see that in the Elwood School District, the results on three of the seven questions (#2, #6, and #7) showed a significant change that may be a result of their participation in the alcohol training program. Questions #2 and #7 were not only significant at the 0.05 level, but also at the 0.01 level. An analysis of the overall test results showed that for the Elwood School District the training program was significant at the 0.01 level.

The training program for the Elwood supervisors also displayed a positive effect in terms of percentages, with an overall increase of greater than twenty percentage points. In addition, the overall program proved to be statistically significant, resulting in the rejection of the original hypothesis. There was one question -- #3 -- which showed a slight decrease in the number responding correctly from the pre- to post-test, although the change was not significant. The question dealt with a choice as to the most effective treatment program for alcoholism. It may be that we are so conditioned to treat disease such as alcoholism in a hospital by medical personnel that we cannot accept the concept of self-help, like Alcoholics Anonymous, as part of a treatment modality.

The second Alcohol Training Program for Administrators and Supervisors was held in the South Huntington School District on April 12, 1977. There were 21 participants in the pre-test and 23 who took the post-test. The additional two participants were too late in arriving to take the pre-test. The program schedule was the same as that found in Appendix 1, with the same speakers presenting the program. Formative evaluation techniques were used in an attempt to strengthen areas found deficient in the first running of the program in Elwood. The South Huntington School District displayed a slightly lower pre-test score than did the Elwood School District; however, the total percentage increase in score was greater by three percentage points in the South Huntington program. Responses on three of the pre-test questions were below 50 percent correct; yet there was an improvement on all questions in the post-test. The increases ranged from slightly more than 1 percent to over a 62 percent increase (on question #7). One may refer to Table 2 for a graphic representation of the percentage data.

In terms of the Z-test of significant differences (Table 3), the results of the South Huntington group, as with the Elwood group, showed the overall program to be significant at the 0.01 level. The degree of change in response on four of the seven alcohol survey questions (#2, #4, #5, and #7) proved significant by the Z-test at least at the 0.05 level, and two questions (#4 and #7) showed significance at the 0.01 confidence level. These results

indicate once again that the training program was meeting its objectives, as measured by the survey questions.

The final running of the alcohol supervision program was held in the Half Hollow Hills Central School District on June 28, 1977. This program had the largest number of participants, with 38 people taking the pre-test and 35 taking the post-test. As in the other presentations, this one was to have had the same speakers as participants at the meeting. Unfortunately, due to the illness of one speaker, a replacement had to be chosen. The substitute speaker was not as familiar with the program and had not had the benefit of the formative evaluation process to aid him in his program development.

The Half Hollow Hills total group pre-test score was the highest of all the pre-test group scores by slightly more than two percentage points. However, the percentage of increase on the Half Hollow Hills district post-test score was only about half that shown by the two previous groups. The Half Hollow Hills district evidenced increases on four of the seven questions, but there was a decrease on the other three questions. The decrease found on the post-test questions (#3, #4, and #5) ranged from 3.8 percent to 11.3 percent (see Table 2). The material involved in the question areas that showed a decrease was that covered by the replacement speaker.

The Z-test results for the Half Hollow Hills program (see Table 3) indicate that four of the seven questions (#1,

#2, #6, and #7) met the criterion for rejecting the null hypothesis, at least at the 0.05 level, and of these, three were significant at the 0.01 level as well. The total test result for all seven questions combined was also greater than the 2.58 necessary for significance at the 0.01 level.

In summary, the data gathered from all three district programs -- Elwood, South Huntington, and Half Hollow Hills -- showed overall increases in the post-test scores over the pre-test scores within each group. Question #1 on the survey was the only one on which all three districts had a perfect score on the post-test. This test had to do with the recognition of alcoholism as a progressive disease. Question #3 seemed to be the most difficult question on the survey. The number of correct responses to this question on the post-test showed a decrease in two out of the three districts. It required that a choice be made as to the most effective treatment for alcoholism. In terms of significance, the total score of each of the individual school districts on the Z-test showed that the alcohol training program was significant, indicating a high degree of success. Application of the Z-test to the combined overall test scores achieved by all three districts showed that the program was significant at the 0.01 level. From this statistical analysis, one can see that the two stated objectives -- to make supervisors aware that alcoholism is a disease and is treatable, and to make supervisors aware that effective supervision is the tool of intervention with the

troubled employee -- were effectively met by the training program.

In addition to the pre-test/post-test survey, an opinion questionnaire, to determine how the participants felt about the program, was randomly administered to about 20 percent of the individuals in each district program (see Appendix 3). A summary of the responses to the opinion questionnaire is given in Table 4.

In response to question #1, "What did you like best about the program?", well over the majority responding chose the two categories of quality of presentation and content. On question #2 concerned with what they liked least about the program, overall responses were spread quite evenly, with the exception of the South Huntington district, where 60 percent of the responses were very negative regarding the room accommodations for the meeting. The responses to question #3 concerning possible program changes showed a wide range of responses with no definite trends. Question #4, "Did the program meet your needs?", showed a very positive response in each of the groups, with affirmative answers ranging from 80 to 100 percent. In response to the final question asked, "Do you think as a result of this program, school programs will begin?", there was 100 percent concurrence in the belief that a school program would be instituted to provide training for supervision and aid for the troubled employee with alcohol problems.

TABLE 4
OPINION QUESTIONNAIRE
(Percentage Values)

RESPONSE	ELWOOD	SOUTH HUNTINGTON	HALF HOLLOW HILLS	ALL
QUESTION 1. WHAT DID YOU LIKE BEST ABOUT THE PROGRAM?				
Quality of presentation	50.0	20.0	50.0	42.9
Content	25.0	40.0	37.5	33.3
Speakers	25.0	20.0	12.5	19.0
All		20.0		4.8
QUESTION 2. WHAT DID YOU LIKE LEAST ABOUT THE PROGRAM?				
Room	12.5	60.0	25.0	14.3
No follow-up	37.5	20.0	12.5	14.3
Length of time	37.5	20.0	25.0	23.8
Lack of treatment	12.5		37.5	19.0
Nothing	37.5	20.0	25.0	28.6
QUESTION 3. HOW WOULD YOU HAVE CHANGED THE PROGRAM?				
Expand to include other groups	12.5	20.0	12.5	14.3
Alter length of time	12.5	20.0		9.5
Make into series		20.0	25.0	14.3
More participation	12.5	20.0	37.5	23.8
Nothing	62.5	20.0	25.0	38.1
QUESTION 4. DID THE PROGRAM MEET YOUR NEEDS?				
Yes	100.0	80.0	100.0	95.2
No		20.0		4.8

TABLE 4 (continued)

RESPONSE	ELWOOD	SOUTH HUNTINGTON	HALF HOLLOW HILLS	ALL
QUESTION 5. DO YOU THINK AS A RESULT OF THIS PROGRAM SCHOOL PROGRAMS WILL BEGIN?				
Yes	100.0	100.0	100.0	100.0
No				

The use of the formative approach to evaluation and program development is a relatively new concept. Formative approaches to program growth and development can be used in long-term programs which need feedback as to how the program is progressing, and can be used to insure program effectiveness by allowing for the reshaping of the program to meet its goals and objectives despite time and social changes. Formative evaluation is particularly effective in developing short-term programs such as the alcohol training program just discussed. The benefit of being able to evaluate a program as it is progressing and to utilize information on program effectiveness, including strengths and weaknesses, quickly and accurately, is enormous. Due to the time element inherent in a short-term program design, the sooner one can determine and incorporate the most effective elements into the program, the better the final outcome one can expect.

In this instance, the benefits derived from formative evaluation can best be seen when considering the first and second phases of the alcohol training program. One should not be confused by the fact that the first group, the Elwood School District, had the highest overall post-test score. This group also demonstrated a higher pre-test score than the second group, the South Huntington School District. It is the magnitude of change between the pre-test and post-test scores which is of concern. The South Huntington group had the larger positive change, showing a 23.4 percent

improvement between pre-test and post-test scores, as compared with the Elwood group, which showed a 21.3 percent improvement. The Z-test results for the South Huntington group indicated that the training program was the significant reason for improvement of scores on four questions, while the Elwood group showed improvement attributable to the program exposure on only three questions. The final running of the program, at Half Hollow Hills School District, is a bit deceptive in its results concerning the effectiveness of the formative evaluation approach on program development. In this presentation of a program, a replacement speaker was employed due to the illness of one of the regular lecturers. The replacement lecturer did not have the preparatory time nor benefit of experience from the two previous program presentations with which to adequately prepare his segment of the material. Consequently, the overall results from this program did not show as impressive a change as the two previous programs. In fact, the segment of the program dealt with by the substitute lecturer actually showed a slightly decreased score from pre- to post-tests as measured by questions #3, #4, and #5. In regard to the four remaining questions in the survey, all showed the training program to be the significant cause for the improvement of scores.

Summary

In summation, an analysis has been made of a short-term training program on the subject of alcoholism awareness and the troubled employee in the schools, designed for the training of school supervisors and administrators. The pre-experimental research design used in this program was described, enumerating its strengths and weaknesses. The results of the program have been analyzed, using a survey of seven questions (presented in a pre-test/post-test format) to measure the effectiveness of the program design in meeting the stated objectives, and an opinion questionnaire to determine if the program met the needs of the participants. The formative approach to evaluation was utilized in the development and improvement of the three program trials which were conducted. One can conclude from the data presented that the program was highly successful in meeting and accomplishing its two stated objectives:

- (1) To make supervisors aware that alcoholism is a disease and it is treatable.
- (2) To make supervisors aware that effective supervision is the tool of intervention with the troubled employee.

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CHAPTER V:
CONCLUSIONS AND RECOMMENDATIONS

Review

The National Institute on Alcohol Abuse and Alcoholism indicates that \$25 billion is paid by industry and workers each year as a result of lost time, medical expenses, impaired job efficiency, and accidents; and that over 240,000 of the 4.5 to 5 million alcoholic workers in this country are employed by the United States Government.

The National Clearinghouse for Alcohol Information reported in 1976 on occupational alcoholism programs in this country. In this report, three major categories were identified, and over 75 programs described. These programs fell primarily into employee, military, and veterans programs. Nowhere in the document did they refer to or mention programs concerned with school systems or training for school personnel and administrators.

However, reports from school districts around the country support the need for alcohol programs. For example, a principal in Minnesota commented, "We believe that 90 percent of our drug and chemical dependency problems in adults and students are related to alcohol. We also believe that one out of every five people are harmfully dependent or are receiving pain in their lives because of alcohol. I believe that in our staff here at the high school between 10

and 15 percent are chemically dependent. Further, in our work throughout the state of Minnesota, I believe these figures are minimal and accurate." He further comments, "Since September 1, 1975 and September 1, 1977, we have sent to long-term treatment roughly 115 students, 31 parents, and 15 staff members or their spouses for treatment of chemical dependency".

The need for programs in the school district around the country is clear. A survey involving nine school districts in Suffolk County, New York, in 1976, supported the findings of the Minnesota principal. As a result of this survey, three of these school districts agreed to participate in alcohol training programs for their administrators. The program, through mini-training sessions, hoped to show school administrators and supervisors that they have a role in the early detection of an alcoholic teacher or employee.

Experience with the alcoholic has provided an understanding of the disease process. It is known that if the disease is allowed to progress, it will eventually destroy the individual physically, emotionally, financially, and spiritually. Intervention or early detection can help create a situation that forces the alcoholic to seek help somewhere during this progressive disease, and certainly before he is beyond help. This, in essence, is what remedial action is. In other words, it serves to identify the school employee who has a problem during the early or middle stages of the disease, and enables referral to a qualified treatment program.

To do this, the program, as a sequence of events, was given to supervisors and administrators to improve their knowledge concerning alcohol and alcoholism, and to encourage them to practice the principles of good supervision.

The evaluation of the program was formative in nature, concerned with outcome data. Through a three-step process of evaluation, we were able to diagnose areas of inadequacy and make revisions where necessary. The evaluation was based on two objectives, which were:

- (1) To make supervisors aware that alcoholism is a disease and it is treatable.
- (2) To make supervisors aware that effective supervision is the tool of intervention with the troubled employee.

To determine program accomplishments, a pre-/post-test was administered to participants. In addition, an opinion questionnaire was used with 15 to 20 percent of the participants to gain insight in reference to:

- (1) What they liked best about the program.
- (2) What they liked least about the program.
- (3) If the program met their needs and, if not, what they would suggest.

The results, in general, indicated substantial gains in knowledge and a greater acceptance of their role and responsibilities with the troubled employee.

Conclusions

There seems to be very little doubt that alcohol has become the drug of choice in our society. It is a public health problem, a problem affecting youth, women, business, and industry. It touches all of us in some way or another: the professional, such as the teacher, the physician, the nurse, the social worker, and many others, all trying to cope with the pressures and stresses of everyday living.

For many individuals, professional advancement and growth are presently limited. This condition is a result of our lagging economy. Promotions are becoming rare, choices of jobs limited, forcing many individuals to remain at jobs that no longer interest them or offer the financial rewards required in their life. This disinterest frequently causes an individual's job performance to fall, and he may resort to alcohol or some other form of deviant behavior to mask these anxieties.

The training program for administrators attempted to make supervisors aware that alcohol use and abuse may be a symptom of another problem, and to help them utilize their supervisory skills in moving this troubled employee into qualified treatment facilities.

In spite of the issues that were previously identified, such as problems with the union, difficulties with the school districts, poor facilities, changes in the program, loss of a key speaker, and indecisive school superintendents, the

outcomes of the program were rather significant. They were significant in a statistical way, showing impressive changes in the participants' responses to the pre-test and post-test questions. But perhaps more importantly, empirical evidence gained through discussions with the Planning Committee following each conference and at the conclusion of the three-step program indicated a high degree of growth in the groups exposed to the program. This was identified by the nature of the issues raised by the administrators early in the program as compared to those raised later, particularly during the role playing session. For example, early in each conference we experienced a tremendous amount of insecurity, fear, and hesitancy by the supervisors concerning their role with the alcoholic employee. Certain issues emerged such as supervisor/teacher friendships, identification of the early alcoholic, and the apparent inability of the administrator to act as a counselor in his role as a supervisor. However, as the program proceeded, many of the administrators found that friendship meant early identification and getting their colleague and friend with an alcohol problem under care. They also learned that they did not have to confront the employee with the problem of alcoholism, but could effectively perform their job and help these individuals through observation and evaluation of job performance through student and faculty evaluations, lateness, frequent absences, and other job-related issues used in determining the employee's effectiveness. The

administrator learned it was job performance rather than alcohol that he should address when confronting an employee suspect of having an alcohol problem.

It also became clear as the program progressed that the level of knowledge concerning alcohol was improving. This could be identified by the kinds and quality of questions that emerged as the speakers lectured.

An issue that never emerged but seemed to exist was the administrator's subtle concern regarding his own drinking habits. How could he confront a peer, a friend, a colleague, about his alcohol problem when he was questioning his own drinking practices? This internal conflict seemed to pass as more information was presented concerning the disease alcoholism, heavy drinking, and social drinking. It became clear that as the program progressed, the administrators became more confident in their role as a supervisor and in their ability to deal with the alcoholic employee.

This leads to the question, "Can a three-and-a-half hour training experience make an impact on a group of Long Island school administrators?" Based on our experience, the answer would have to be in the affirmative. The results are clear: there were cognitive changes, and perhaps some in the affective domain as suggested recently by one of the school superintendents who claimed that many of his administrators since the training program were dealing more effectively with the troubled employee, and that as a result of his exposure to the program he feels more comfortable with these employees sent to him.

If the follow-up of the program were taken one step further into the future, examination of outcomes, particularly in terms of practice and the development of an alcohol policy statement, we would have been given a better idea of its long-range achievements.

Finally, in conclusion, one may agree that there are some limitations to short-term training. More information, more role playing, and more time for assimilation would perhaps have increased the administrators knowledge and skills in supervising the problem teacher. However, because of circumstances beyond the planners' control, the development of a longer training interval was impossible. Time constraints for planners are not unique. Decisions concerning validity, effectiveness, and outcomes are the responsibility of the planner. In this particular case, the decision was made to implement a program within the limitations placed upon it by the participating school districts. The outcome tends to support the notion that, under certain circumstances, short-term training programs will work.

As a result of the experience gained in the planning and implementation of the three-phase program, certain issues affecting the organization, management, and quality of the program emerged. These issues are brought forward in terms of recommendations to assist those who may be interested in replicating this program.

Recommendations

- (1) In planning the program both the participants and the planners should take an active role in setting objectives, selecting speakers, and determining criteria for success.
- (2) That the Superintendent communicate to the School Board, the teachers, and the union the nature and purposes of the training in order to prevent opposition, interference, and misinformation, particularly in a sensitive area such as alcoholism. If this is done, then the program can be advertised for what it is and not under a disguise.
- (3) That program presenters meet as a group prior to the conference day to coordinate presentations and to determine if the process and the material covered will satisfy program objectives.
- (4) The responsibilities of the Superintendent should be clarified and put into writing to avoid such issues as poor facilities, starting time of sessions, and other similar details that contribute to the success of a conference.
- (5) There should be more involvement of the participants in designing and testing the instruments to be used in collecting the data and in the evaluation process itself.
- (6) The testing instrument, if used as a pre-test and post-test, should be answered anonymously; however, it should be coded to enable the evaluator to compare individual change as well as group change.
- (7) Selected program participants should be involved in the stages of formative evaluation and participate in program modification, if necessary.
- (8) To provide more outcome information, a six-month follow-up and a one-year follow-up should be conducted to determine the long-range effects of the training program on practice, policy development, and the need for further training.

- (9) That all arrangements, in terms of specific responsibilities of the individuals involved as speakers, planners, coordinators, and other participants, be put in writing and not left to verbal misinterpretations.
- (10) That there be a monetary charge to each school district. This charge may serve to encourage more participation by the school districts and provide monies to develop a more formidable printed program as well as provide reimbursement for travel and, where needed, an honorarium for speakers.
- (11) That immediately following each training conference, a meeting be set up with the superintendent and his representatives to discuss future programs in terms of additional training for administrators, teacher training, curriculum for students, and public education.
- (12) That board members, teachers, and parent representatives be invited to the conference. The involvement of these groups will tend to allay any fears concerning a "witch hunt" or public concern because an alcohol training program is being conducted for their administrators. Further, this group can then be used to plan teacher programs, student programs, and programs in the community.
- (13) That news releases be distributed to the area media describing the design and purposes of the program. Making public a training event such as this is a progressive step in the schools. Further, it may encourage other school districts to become involved.
- (14) In planning educational programs, consideration should be given to the background of participants. For example, the level of education, age, and professional experiences are factors to be considered. The educational theory employed in the program design should take these factors into account in meeting educational objectives.
- (15) Training programs should be based on educational theory that considers the learning abilities of the participants, and aids planners in the development of appropriate activities for learning to occur. A program based on educational theory stands a better chance for success.

Training and educational activities are an integral part in professional life. Professionals are frequently called upon to develop educational activities and training for their respective agencies. It is hoped that the experience described here will help the educator realize the value of short-term training and how it can be used effectively under certain conditions.

The recommendations discussed are intended to assist the individual who is planning a blueprint for action.

APPENDICES

APPENDIX 1

PROGRAM SCHEDULE

Problems in Supervision -- The Troubled Employee

HILLS ELEMENTARY SCHOOL - - - - - JUNE 28, 1977
 HALF HOLLOW HILLS CENTRAL SCHOOL DISTRICT 8:30 to 12:30

PROGRAM CHAIRMAN: Stanley Zimering
 Associate Professor
 Dept. of Psychiatry & Behavioral Science
 State University of New York/Stony Brook

OBJECTIVES: (1) To make supervisors aware that alcoholism
 is a disease and it is treatable.
 (2) To make supervisors aware that effective
 supervision is the tool of intervention
 with the troubled employee.

8:30- 9:00	<u>Coffee</u>
9:00- 9:10	<u>Survey</u>
9:10- 9:20	<u>Welcome</u> Mr. Coleman R. Lyons, Superintendent
9:20- 9:30	<u>Overview</u> Stanley Zimering, Associate Professor
9:30-10:30	<u>Alcohol -- The Disease</u> Peter Sweisgood, Asst. Executive Director Long Island Council on Alcoholism
10:30-10:45	<u>Early Identification</u> Marianne McCreery SUNY Alcohol Institute
10:45-10:55	<u>BREAK</u>
10:55-12:00	<u>Intervention and Counseling, Theory and Practice</u> Stuart Paul, Director Alcoholism Services Brunswick Hospital Center
12:00-12:15	<u>Panel Discussion and Questions</u>
12:15-12:20	<u>Post-Survey</u>
12:20-12:30	<u>Concluding Remarks</u>

APPENDIX 2

ALCOHOL SURVEY
PRE and POST

NAME _____
(optional)

Please select the most correct statement by circling the answer.

- (1) Alcoholism is a disease that is progressive in nature, like cancer and diabetes.
 - a. True
 - b. False
- (2) We know heroin is an addictive drug. Which of the following best expresses your feeling about alcohol?
 - a. It is an addictive drug.
 - b. It may be habit forming.
 - c. Serves as a central nervous system stimulant.
 - d. It is much safer to use than marijuana.
- (3) The most effective means of treating the individual with an alcohol problem is:
 - a. psychiatry.
 - b. group encounter by the family.
 - c. in a hospital.
 - d. Alanon.
 - e. medical profession and self-help group.
- (4) In terms of the alcoholic, the supervisor's role is very limited.
 - a. True
 - b. False
- (5) The alcoholic must reach "rock bottom" before he will accept help.
 - a. True
 - b. False
- (6) The middle stage alcoholic exhibits recognizable signs and symptoms.
 - a. True
 - b. False
- (7) In which way can the supervisor best identify the problem drinker in the early stages?
 - a. Alcohol on the breath.
 - b. Slurring of speech, loss of coordination.
 - c. Practice of good supervision.
 - d. Providing emotional and moral support.

APPENDIX 3

OPINION QUESTIONNAIRE

Problems in Supervision -- The Troubled Employee

- (1) What did you like BEST about the program?
- (2) What did you like LEAST about the program?
- (3) How would you have changed the program?
- (4) Did the program meet your needs? If not, what would you suggest?
- (5) Do you think as a result of this program, school programs will begin?
YES: What steps should be taken?

NO: What are the obstacles?

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