Description

The workplace intervention utilized in the Yale Work and Family Stress Program is based on a tripartite conceptual model of adaptive coping behavior: attacking the problem, rethinking the problem, and managing the stress. The model is derived from Pearlin and Schooler’s (1978) hierarchy of coping mechanisms: 1) responses that change the situation; 2) responses that control the meaning of the stressful experience; and 3) responses that function more to control stress after it has emerged. The aim is to teach employees behavioral, social, and cognitive coping strategies to modify work and family risk and protective factors, given the relationship of these factors to psychological symptoms and substance use. The first component of the intervention focuses on teaching methods to employees aimed at eliminating or modifying the sources of stress so that continuing efforts to cope with a particular stressor are less needed. The second component teaches techniques that do not eliminate the stressor, but which help to modify cognitive and appraisal processes that lead to or exacerbate the experience of stress. The third component emphasizes stress management and minimizing the use of avoidance coping. Throughout, the focus is on the development and application of skills to meet demands encountered in work and family environments. The final session integrates the course material through the creation of participants’ own personal stress management plans.

Target Population

The target population for the program includes male and female employees, supervisors, EAP professionals, and mid- and upper-level managers in a wide range of private sector worksites including telecommunications, manufacturing, utilities, and service industries, as well as private, non-profit organizations.

How It Works

The aim of the intervention is to teach employees behavioral, social, and cognitive coping strategies to modify work and family risk and protective factors, given the relationship of these factors to psychological symptoms and substance use. The intervention consists of 16, 1½-hour sessions conducted at the workplace during regular work hours. Companies provide release time to facilitate consistent participation in the program. The first component focuses on teaching methods to employees aimed at eliminating or modifying the sources of stress so that continuing efforts to cope with a particular stressor are less needed. This part of the curriculum includes training on the identification and analysis of stressful situations and the use of effective problem-solving techniques. The second component is designed to help employees develop skills in managing stress, focusing on strategies to reduce the impact of stress on daily life. The final component emphasizes the development of a personal stress management plan, which includes setting goals and implementing strategies to reduce stress in both the workplace and personal life.
solving, effective communication, and their social networks. The second component teaches techniques to modify cognitive and appraisal processes. These approaches (e.g., cognitive restructuring) are particularly necessary for stressors that cannot be directly modified. The third component emphasizes stress management (e.g., relaxation techniques, exercise) and minimizing the use of avoidance coping (e.g., reinforcing alternatives to the use of alcohol to reduce tension, teaching refusal skills). The stress management techniques taught early on are practiced for a few minutes at the beginning of each subsequent session for reinforcement purposes. The final session integrates the course material through the creation of participants’ own personal stress management plans. Participants are to continue to utilize their plan following the completion of the intervention to extend and maintain positive program effects.

**Program Benefits**

Studies investigating the effectiveness of the intervention “Coping with Work and Family Stress: A Workplace Preventive Intervention” have demonstrated positive effects of the intervention on employees’ reported stressor levels, active and avoidance coping strategies, and psychological symptoms and substance use. As predicted, participants in the intervention as compared to those in control conditions, reported reductions in work and family stressors, increases in social support from supervisors and co-workers, enhanced use of active coping strategies, such as problem solving, cognitive restructuring, and social support coping, and decreased use of avoidance coping strategies. Correspondingly, participants in the intervention reported fewer psychological symptoms, less alcohol consumption, a decreased tendency to use alcohol to reduce tension, and less use of illicit substances. The results of careful investigation have provided support for the risk- and protective-factor model that guided the workplace intervention. The effects have now been demonstrated across a range of work settings and with employees who have diverse occupational and demographic characteristics.

**Funding**

National Institute on Drug Abuse: R01; 9/30/88-8/31/91; Total = $334,039; David L. Snow, Ph.D., Principal Investigator and Katherine Grady, Ph.D., Program Director.

National Institute on Alcohol Abuse and Alcoholism: R01; 7/1/92-6/30/96; Total = $444,740; David L. Snow, Ph.D., Principal Investigator and Katherine Grady, Ph.D., Program Director.

Connecticut Department of Mental Health and Addiction Services: Training Contract for knowledge dissemination of prevention theory, program design and implementation, and evaluation; 9/1/02-8/31/07; Total = $265,000; David L. Snow, Ph.D., Director and Susan Ottenheimer, LCSW, Project Director.

**Program Materials**

**Selected Publications**


**Selected Presentations**


**Dissemination Materials**


**Program Developers**

**David L. Snow, Ph.D.**, Professor of Psychology in Psychiatry, Child Study Center, and Epidemiology & Public Health, Yale University School of Medicine. Dr. Snow also is the Director of the Division of Prevention and Community Research and The Consultation Center, Department of Psychiatry. He has extensive experience in the design and evaluation of preventive interventions in community settings (especially the workplace and schools) and in research aimed at identifying key risk and protective factors predictive of psychological symptoms and problem behaviors. His workplace research has involved the use of rigorous experimental designs to assess intervention effectiveness across multiple settings and with diverse employee populations. In addition, Dr. Snow has conducted research examining the precursors, correlates, and outcomes of intimate partner violence among both male and female populations, and has undertaken the evaluation of interventions to prevent family violence. Finally, Dr. Snow has special interests in the protective and stress-mediating effects of coping and social support, methodological and ethical issues in prevention research, service system development, and technical assistance and organizational consultation.

**Susan Ottenheimer, LCSW**, is Assistant Clinical Professor in the Department of Psychiatry, Yale University School of Medicine. She is the Director of the Adult and Elderly Program at The Consultation Center, Project Director for the Yale Coping with Work and Family Stress Program, and a member of the Division of Prevention and Community Research, Department of Psychiatry. Ms. Ottenheimer has extensive experience providing organization development and technical assistance consultation, serving as a senior consultant and lead trainer in the development and implementation of preventive interventions particularly in the workplace, and extensive experience in the behavioral health field. She has designed and implemented a wide array of preventive and community-based programs for adults at-risk for psychiatric disorders, substance abuse, and/or homelessness. She has special interests in service system development aimed at facilitating access to needed services, minimizing duplication of effort and promoting inter-agency collaboration and coordination.

**Katherine Grady, Ph.D.**, Organization Consultant in private practice and an Associate Clinical Professor of Psychology in Psychiatry at Yale University. Dr. Grady was Director of Organization Development and Adult Programs at The Consultation Center from 1979 to 1998 and was Program Director for the Yale Work and Family Stress Program. As Program Director, she worked collaboratively with Dr. Snow in developing the curriculum and overseeing the implementation of the Work and Family Stress program in company sites. A licensed psychologist for over 20 years, Dr. Grady is also the chief assessor and trainer for the Center for
Creative Leadership Programs conducted by Rensselaer at Hartford. In this role, she is involved in the comprehensive assessment and development of senior executives. In addition, she is a Senior Associate with Lansberg, Gersick and Associates, a family business consulting firm.

**Program Dissemination**

**Introductory**

Ongoing training through Statewide Prevention Training Program funded by the Connecticut Department of Mental Health and Addiction Services of EAP professionals, supervisors, and managers regarding research findings supporting the effectiveness of the program and methods for implementation in the workplace.

Connecticut Chapter of the Employee Assistance Professional Association, June 10, 2004

**Facilitator Trainings Conducted**

- Southwest Counseling Services, Rock Springs, WY (14 Program Professionals), September 15-16, 2011
- Human Resource and Employee Assistance Program Professionals (2 participants – West Virginia) Yale University, New Haven, Connecticut, July 21 – 22, 2011
- Human Resource and Employee Assistance Program Professionals (2 participants – Illinois, New Jersey) Yale University, New Haven, Connecticut, March 10-11, 2011
- Strategic Community Services, Inc., Lanham, Maryland (14 Program Professionals), December 17-18, 2010
- SCAN, Inc., Laredo, Texas (3 Professional Peer Leaders), December 2-3, 2010
- New Jersey Prevention Network, Lakewood, New Jersey (12 Program Professionals), November 3-5, 2010
- Human Resource and Employee Assistance Program Professionals (4 participants – Connecticut, West Virginia) Yale University, New Haven, Connecticut, October 28-29, 2010
- Geminus Corporation, East Chicago, Indiana (6 Program Professionals), October 8-9, 2010
- School of Medicine, University of California-Irvine, Orange, California (10 Faculty), September 16-18, 2010
- Human Resource and Employee Assistance Program Professionals (5 participants – Connecticut, Massachusetts, New York, Pennsylvania, Washington, DC) Yale University, New Haven, Connecticut, April 8-9, 2010
- Lea County DWI Program, Hobbs, New Mexico (26 Program Professionals), February 25-27, 2010
- Strategic Community Services, Inc., Lanham, Maryland (10 Program Professionals), December 10-12, 2009
- Genesis Therapy Center, Oak Forest, Illinois (6 Program Professionals), December 4-5, 2009
- Human Resource and Employee Assistance Program Professionals (6 participants – California, Colorado, Massachusetts, New York, Wisconsin) Yale University, New Haven, Connecticut, October 1-2, 2009
- NASA, Cleveland, Ohio (16 Program Professionals), July 13-15, 2009
- Human Resource and Employee Assistance Program Professionals (5 participants – Canada, Georgia, New York) Yale University, New Haven, Connecticut, June 4-5, 2009
- New Jersey Prevention Network, Spring Lake, New Jersey (32 Program Professionals), May 6-8, 2009
- Strategic Community Services, Inc., Lanham, Maryland (10 Program Professionals), February 5-7, 2009.
Human Resource and Employee Assistance Program Professionals (6 participants – Connecticut, New York, Oregon, Rhode Island, and Virginia) Yale University, New Haven, Connecticut, December 11-12, 2008

Human Resource and Employee Assistance Program Professionals (4 participants – Colorado, Massachusetts, Nevada, and New York) Yale University, New Haven, Connecticut, October 2-3, 2008

Human Resource and Employee Assistance Program Professionals (5 participants – Georgia, Louisiana, Missouri, New Jersey, and New York) Yale University, New Haven, Connecticut, June 5-6, 2008

Anesthesiology Department, University of California-Irvine, Orange, California (10 Anesthesiologists), May 15-16, 2008

Human Resource and Employee Assistance Program Professionals (6 participants – Alabama, Connecticut, Maryland, Massachusetts, and New York) Yale University, New Haven, Connecticut, March 6-7, 2008

SCAN, Inc., Laredo, Texas (10 Professional Peer Leaders), December 6-7, 2007


Human Resource and Employee Assistance Program Professionals (4 participants – Connecticut, Maryland, New Jersey, and New York) Yale University, New Haven, Connecticut, September 27-28, 2007

Human Resource and Employee Assistance Program Professionals (4 participants – Georgia, Michigan, and New Mexico) Yale University, New Haven, Connecticut, June 7-8, 2007

Human Resource and Employee Assistance Program Professionals (8 participants – Alabama, Colorado, Connecticut, Maryland, and New Hampshire) Yale University, New Haven, Connecticut, March 1-2, 2007

Human Resource and Employee Assistance Program Professionals (5 participants – Connecticut, Florida, Massachusetts, New York, and Vermont) Yale University, New Haven, Connecticut, December 7-8, 2006

Human Resource and Employee Assistance Program Professionals (10 participants – Connecticut, Maryland, Michigan, New York, Pennsylvania, and Vermont) Yale University, New Haven, Connecticut, September 28-29, 2006

Human Resource and Employee Assistance Program Professionals (7 participants – California, Connecticut, Massachusetts, New York, and Rhode Island) Yale University, New Haven, Connecticut, May 18-19, 2006


Human Resource and Employee Assistance Program Professionals (12 participants – Colorado, Connecticut, Maine, New York, and Vermont) Yale University, New Haven, Connecticut, November 17-18, 2005

Long Beach Island Community Center, Inc., Brant Beach, New Jersey (9 Human Resource, Employee Assistance Program, and Mental Health Professionals), October 27-28, 2005

Douglas & Associates and the Center of Gender and Development Studies, The University of West Indies, St. Augustine, Trinidad, British West Indies (23 Human Resource, Employee Assistance Program, and Mental Health Professionals), October 12-14, 2005

Connecticut Department of Mental Health and Addiction Services Statewide Prevention Conference, Rocky Hill, Connecticut (10 Behavioral Health Professionals and Prevention Specialists), May 13, 2005

Human Resource and Employee Assistance Program Professionals (5 participants - California, Maine, Massachusetts, North Carolina, and Rhode Island) Yale University, New Haven, Connecticut, April 28-29, 2005

New Jersey Department of Health Services, Princeton, New Jersey (17 Behavioral Health Professionals and Prevention Specialists), April 12-13 and June 6, 2005 (New Jersey Department of Health Services funded prevention programs: Prevention Plus of Burlington County, Inc. and the Somerset Council on Alcoholism and Drug Dependence)

Pima Prevention Partnership, Tucson, Arizona (23 Mental Health Professionals and Prevention Specialists), March 2-4, 2005 (CSAP-funded Youth to Work research project)
• Human Resource and Employee Assistance Program Professionals (8 participants - Connecticut), Yale University, New Haven, Connecticut, February 3-4, 2005

• Douglas & Associates and the Center of Gender and Development Studies, The University of West Indies, St. Augustine, Trinidad, British West Indies (31 Human Resource, Employee Assistance Program, and Mental Health Professionals), October 6-8, 2004

• Training Institute, Wisconsin State Prevention Conference, Wisconsin Rapids, Wisconsin (12 Prevention Specialists), August 9-11, 2004

• Family Service, Inc., Lawrence, Massachusetts (2 Prevention Specialists), July 19-20, 2004 (CSAP-funded program and evaluation)

Summary

The Yale Work and Family Stress Program has developed an effective intervention entitled: **Coping with Work and Family Stress: A Workplace Preventive Intervention.** This intervention represents a science-based approach that focuses on increasing employees’ abilities to use effective coping strategies and social support to reduce stress and to minimize the use of maladaptive coping strategies. These changes in individual’s ability to adapt to ongoing work and family stressors have been shown to reduce risk for depression, anxiety, and somatic complaints, as well as alcohol and other substance use. These improvements in employee health are likely associated with decreased absenteeism, decreased use of medical services, and increased productivity.