



Small Business Wellness Initiative– Choices in Health Promotion February 2017*

Small Business Wellness Initiative



CONTACT US












Contact Information

Program Developer Contact Information	Dissemination/Implementation Contact Information
Joel Bennett, Ph.D.	Joel Bennett, Ph.D.
President, Organizational Wellness & Learning Systems	President, Organizational Wellness & Learning Systems
3200 Riverfront, Suite 102, Fort Worth, Texas 76107	3200 Riverfront, Suite 102, Fort Worth, Texas 76107
817.921.4260	817.921.4260
learn@organizationalwellness.com	learn@organizationalwellness.com
www.organizationalwellness.com	www.organizationalwellness.com

*Note. This document is the original document reviewed through the NREPP system and registered into that system as part of the SAMHSA initiative to disseminate evidence-based programs



Outcome Summary*

Outcome	Evidence Rating
Alcohol Use and Disorders	 Promising
General Functioning and Well-Being	 Promising
Internalizing Problems	 Promising
Self-Concept	 Promising
Spiritual Health	 Promising
Physical Health Conditions and Symptoms	 Promising
Exercise and Nutrition	 Promising
Organizational Climate	 Ineffective
General Substance Use	 Ineffective
Coping	 Ineffective
Knowledge, Attitudes, and Beliefs about Substance Use	 Ineffective

Other Program Details

Program Type*	Implementation/Dissemination Materials
<input checked="" type="checkbox"/> Mental health promotion <input checked="" type="checkbox"/> Substance use disorder prevention	<input checked="" type="checkbox"/> Implementation materials available <input checked="" type="checkbox"/> Dissemination materials available

Demographics and Geography for Studies Reviewed

Age Category*	Gender*	Race/Ethnicity*	Geographical Setting	Delivery Setting*
<input type="checkbox"/> 0-5 <input type="checkbox"/> 6-12 <input type="checkbox"/> 13-17 <input checked="" type="checkbox"/> 18-25 <input checked="" type="checkbox"/> 26-55 <input type="checkbox"/> 55+ <input type="checkbox"/> Information not provided	<input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Information not provided	<input checked="" type="checkbox"/> American Indian/Alaska Native <input checked="" type="checkbox"/> Asian/Pacific Islander <input checked="" type="checkbox"/> Black <input checked="" type="checkbox"/> Hispanic <input checked="" type="checkbox"/> White <input checked="" type="checkbox"/> Other <input type="checkbox"/> Information not provided	<input type="checkbox"/> Urban <input type="checkbox"/> Suburban <input type="checkbox"/> Rural and/or frontier <input type="checkbox"/> Tribal <input type="checkbox"/> Non-US <input checked="" type="checkbox"/> Information not provided	<input type="checkbox"/> Correctional setting <input type="checkbox"/> Court <input type="checkbox"/> Home <input type="checkbox"/> Hospital/medical center <input type="checkbox"/> Mental health treatment center <input type="checkbox"/> Outpatient facility <input type="checkbox"/> Residential facility <input type="checkbox"/> School/classroom <input type="checkbox"/> Substance abuse treatment center <input type="checkbox"/> University <input checked="" type="checkbox"/> Workplace <input type="checkbox"/> Other (include computer/internet-based programs here, if they don't clearly fit elsewhere) <input type="checkbox"/> Information not provided

Additional Information

Special Populations (either target of program, or majority of population in one reviewed study)

- Co-occurring disorders
- Couples
- Families
- Homeless or runaway
- Immigrant/refugee
- In-home language use (other than English)
- Justice-involved adults
- Justice-involved youth
- Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) ITS (Intersexual)
- Low-income**
- Military or veteran
- Non-English speaking**
- Older adults
- Populations affected by Serious Mental Illness (SMI)
- Populations affected by Emotional Disturbance (ED)
- Suicidal
- Transition-aged youth
- Tribal or American Indian or Alaska Native
- Victims of trauma or violence
- Youth in or transitioning out of foster care

Program Components*

Prevention/Promotion/Treatment:

- Academic skills enhancement
- Drug or alcohol education**
- Family support
- Media literacy or education
- Media campaign
- Parent management training**
- Social skills/life skills training**
- Stress management**
- Youth mentoring
- Other (Resilience, Mental Health Promotion, Wellness_**

Treatment:

- Behavior modification or management
- Case management
- Cognitive-behavioral treatment
- Crisis services
- Family counseling or therapy
- Group counseling or therapy
- Home visiting
- Individual counseling or therapy
- Medication management
- Motivational Interviewing
- Wraparound
- Other

Other:

- Community mobilization or advocacy**
- Diversion
- Occupational therapy
- Peer support**
- Re-entry
- Vocational or job training
- Other



Program Description*

The Small Business Wellness Initiative—Choices in Health Promotion (Choices) is a customizable, health-promotion program for small businesses in industries with employees known to be at high risk for substance use or mental health issues. This includes businesses with fewer than 500 employees in construction, transportation and materials moving, manufacturing, hospitality, and food service.

The program consists of a 4-hour, interactive, classroom-style training with presentations, videos, handouts, activities, and other resources. Training topics include stress management, healthy eating, time management, spiritual health, active lifestyle, tobacco use and smoking, parenting skills, and substance use prevention.

A needs assessment is conducted to identify the business's top priority areas. The needs assessment is a 1-to 2-hour, face-to-face interview with the business owner or other management staff and covers the following sections: 1) business description (introductory questions); 2) owner–employee relations; 3) policies and training; 4) insurance, workers compensation, and employee assistance programs (EAP); 5) alcohol and drug use; 6) health and productivity; 7) owner perception and stress; 8) time management; 9) owner perceptions of meaningful work; and 10) training preferences. Based on the results of the needs assessment, program material is selected from different topics, including safety and moderation; alcohol, tobacco, and drugs; team awareness; family connection; active lifestyle; healthy eating; time management and spiritual health; and managing stress. This selection of program material was developed, in part, from similar health promotion programs ([Team Awareness](#) and [Healthy Work Place](#)) focused on workplace wellness and substance use.

The selected program topics are then assembled into modules for a 4-hour training. In addition to the customized program material, every “Choices” program includes two elements: an introduction and a health-goal-setting process. The introduction explains the process by which the program material was selected, the topic areas, and includes a questionnaire to help trainers identify employees’ interest areas. After completing each training module, employees are asked to list personal health goals relating to the program material and steps they can take to achieve those goals.

Program Versions


No other versions of this program were identified.

Program Summary*

- This is a customizable, health-promotion program for small businesses (less than 500 employees) in industries with employees known to be at high risk for substance use or mental health issues.
- This program was rated **promising** for reducing alcohol use and disorders; for improving general functioning and well-being; for reducing internalizing problems; for improving self-concept; for improving spiritual health; for improving physical health conditions and symptoms; and for improving exercise and nutrition. This program was rated **ineffective** for improving organizational climate; for reducing general substance use; for improving coping; and for improving knowledge, attitudes, and beliefs about substance use.


Evaluation Findings by Outcome

Outcome #1: Alcohol Use and Disorders


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.01

Lower Confidence Limit*	-.09
Upper Confidence Limit*	.11
For Profile Text	
Program Effects Across All Studies*	This program is promising for reducing alcohol use and disorders. The review of the program yielded sufficient evidence of a favorable effect. Based on one study and three measures, the average effect size for alcohol use and disorders is .01 (95% CI: -.09, .11).
Key Study Findings*	At the 6-month posttest, a statistically significant reduction in job-related drinking incidents was found, with Choices participants less likely to report at least one job-related drinking incident in the past month, compared with control group participants. However, no statistically significant intervention effects were found for the number of days engaged in alcohol use or for having at least 1 day of heavy drinking in the past month.
Measures Used*	Bennett et al., (2003): Two items from Monitoring the Future Survey: 1) Alcohol Use (days of alcohol use in the past 30 days), and 2) Heavy Drinking or drinking to intoxication (at least 1 day of having over 5 drinks in the past 30 days); One scale developed for this study to assess job-related drinking incidents, which was dichotomized: a "1" reflected at least one job-related drinking incident in the past 30 days, and a "2" reflected no job-related drinking incidents
Additional Details	None provided.

Outcome #2: General Functioning and Well-Being


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.06
Lower Confidence Limit*	-.06
Upper Confidence Limit*	.18
For Profile Text	
Program Effects Across All Studies*	This program is promising for improving general functioning and well-being. The review of the program yielded sufficient evidence of a favorable effect. Based on one study and two measures, the average effect size for general functioning and well-being is .06 (95% CI: -.06, .18).
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effect was found for the self-reported, work-to-family conflict (work stress affecting family life) or for self-reported, family-to-work conflict (family stress affecting work life).
Measures Used*	Bennett et al., (2003): Two, 4-item scales developed by Frone (2000): 1) Work-to-family conflict, and 2) Family-to-work conflict
Additional Details	None provided.

Outcome #3: Internalizing Problems


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.08
Lower Confidence Limit*	-.08

Upper Confidence Limit*	.25
For Profile Text	
Program Effects Across All Studies*	This program is promising for reducing internalizing problems. The review of the program yielded sufficient evidence of a favorable effect. Based on one study and one measure, the effect size for internalizing problems is .08 (95% CI: -.08, .25).
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effect was found for emotional health.
Measures Used*	Bennett et al., (2003): Perceived Wellness Survey–Emotional health subscale (6 items)
Additional Details	None provided.

Outcome #4: Self-Concept


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.10
Lower Confidence Limit*	-.07
Upper Confidence Limit*	.26
For Profile Text	
Program Effects Across All Studies*	This program is promising for improving self-concept. The review of the program yielded sufficient evidence of a favorable effect. Based on one study and one measure, the effect size for self-concept is .10 (95% CI: -.07, .26).
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effect was found for sense of job-related control or self-efficacy.
Measures Used*	Bennett et al., (2003): A 6-item scale developed by Cook, Back, McPherson, and Trudeau (2001) to measure job control
Additional Details	None provided.

Outcome #5: Spiritual Health


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.06
Lower Confidence Limit*	-.11
Upper Confidence Limit*	.22
For Profile Text	
Program Effects Across All Studies*	This program is promising for improving spiritual health. The review of the program yielded sufficient evidence of a favorable effect. Based on one study and one measure, the effect size for spiritual health is .06 (95% CI: -.11, .22).

Key Study Findings*	At the 6-month posttest, no statistically significant intervention effect was found for spiritual health.
Measures Used*	Bennett et al., (2003): Perceived Wellness Survey–Spiritual health subscale (6 items)
Additional Details	None provided.


Outcome #6: Physical Health Conditions and Symptoms

Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.13
Lower Confidence Limit*	-.03
Upper Confidence Limit*	.30
For Profile Text	
Program Effects Across All Studies*	<p>This program is promising for improving physical health conditions and symptoms. The review of the program yielded sufficient evidence of a favorable effect.</p> <p>Based on one study and one measure, the effect size for physical health conditions and symptoms is .13 (95% CI: -.03, .30).</p>
Key Study Findings*	Although Choices participants reported improvements in physical health, the difference between the Choices and control participants at the 6-month posttest was not statistically significant.
Measures Used*	Bennett et al., (2003): One, 8-item scale, developed by study authors
Additional Details	None provided.

Outcome #7: Exercise and Nutrition


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input checked="" type="checkbox"/> Promising <input type="checkbox"/> Ineffective
Effect Size*	.06
Lower Confidence Limit*	-.06
Upper Confidence Limit*	.18
For Profile Text	
Program Effects Across All Studies*	<p>This program is promising for improving exercise and nutrition. The review of the program yielded sufficient evidence of a favorable effect.</p> <p>Based on one study and two measures, the average effect size for exercise and nutrition is .06 (95% CI: -.06, .18).</p>
Key Study Findings*	Although Choices participants reported improvements in eating patterns and exercise habits, the difference between the intervention and control participants at the 6-month posttest was not statistically significant.
Measures Used*	Bennett et al., (2003): Two, 3-item measures of eating patterns and healthy exercise habits, used in a previous study (Cook, Back, McPherson, & Trudeau, 2001)
Additional Details	None provided.

Outcome #8: Organizational Climate


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective

	<input type="checkbox"/> Promising <input checked="" type="checkbox"/> Ineffective
Effect Size*	.02
Lower Confidence Limit*	-.04
Upper Confidence Limit*	.08
For Profile Text	
Program Effects Across All Studies*	<p>This program is ineffective for improving organizational climate. The review of the program yielded sufficient evidence of a negligible effect.</p> <p>Based on one study and seven measures, the average effect size for organizational climate is .02 (95% CI: -.04, .08).</p>
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effects were found for the following measures of organizational climate: 1) organizational wellness (flexible policies around family life and personal issues), 2) group cohesion (trust and cooperation among group members), 3) hectic workplace, 4) privacy regulation (how well coworkers keep things private), 5) safety climate, 6) perceived stigma (about having a drinking problem), and 7) stress perceptions (perceptions of stress on the job).
Measures Used*	Bennett et al., (2003): Two, 4-item scales (Perceived Stigma and Privacy Regulation) and one, 8-item scale (Organizational Wellness) used in a previous study; Two scales developed for this study: 1) Stress Perceptions (5 items), and 2) Hectic Workplace (4 items); Measure of psychological climate (Jones & James, 1979) to assess group cohesion; Measure of safety climate used by Zohar (2000)
Additional Details	None provided.

Outcome #9: General Substance Use


Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input type="checkbox"/> Promising <input checked="" type="checkbox"/> Ineffective
Effect Size*	-.06
Lower Confidence Limit*	-.22
Upper Confidence Limit*	.11
For Profile Text	
Program Effects Across All Studies*	<p>This program is ineffective for reducing general substance use. The review of the program yielded sufficient evidence of a negligible effect.</p> <p>Based on one study and one measure, the effect size for general substance use is -.06 (95% CI: -.22, .11).</p>
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effect was found for the use of illegal drugs in the past 30 days.
Measures Used*	Bennett et al., (2003): One item from Monitoring the Future Survey to assess the use of illegal drugs in the past 30 days
Additional Details	None provided.

Outcome #10: Coping

Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input type="checkbox"/> Promising <input checked="" type="checkbox"/> Ineffective
Effect Size*	-.04

Lower Confidence Limit*	-.12
Upper Confidence Limit*	.04
For Profile Text	
Program Effects Across All Studies*	This program is ineffective for improving coping. The review of the program yielded sufficient evidence of a negligible effect. Based on one study and four measures, the average effect size for coping is -.04 (95% CI: -.12, .04).
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effects were found for the following negative coping behaviors: 1) unwinding with alcohol, 2) unwinding with over-the-counter medications, 3) unwinding with drugs, and 4) unwinding with tobacco.
Measures Used*	Bennett et al., (2003): Four scales developed for this study (each 2 items) to assess the use of substances to unwind: 1) Unwinding with Alcohol, 2) Unwinding with Over-the-Counter Meds, 3) Unwinding with Drugs, and 4) Unwinding with Tobacco
Additional Details	None provided.

Outcome #11: Knowledge, Attitudes, and Beliefs about Substance Use

Outcome Tags	
Evidence Rating* 	<input type="checkbox"/> Effective <input type="checkbox"/> Promising <input checked="" type="checkbox"/> Ineffective
Effect Size*	.02
Lower Confidence Limit*	-.04
Upper Confidence Limit*	.08
For Profile Text	
Program Effects Across All Studies*	This program is ineffective for improving knowledge, attitudes, and beliefs about substance use. The review of the program yielded sufficient evidence of a possibly harmful effect. Based on one study and two measures, the average effect size for knowledge, attitudes, and beliefs about substance use is .02 (95% CI: -.04, .08).
Key Study Findings*	At the 6-month posttest, no statistically significant intervention effects were found for participants' willingness to seek counseling for depression, stress, or substance use or for participants' willingness to refer others to seek professional help.
Measures Used*	Bennett et al., (2003): Two scales derived from a previous study: 1) Help-Seeking Attitude: Self (3 items), and 2) Helping Seeking Attitude: Other (5 items)
Additional Details	None provided.

Study Evaluation Methodology

Study 1: Bennett et al., (2003)

Study Tag	
Study Design Tag*	<input checked="" type="checkbox"/> RCT, well-executed <input type="checkbox"/> QED with intact groups/Compromised RCT <input type="checkbox"/> QED without intact group
For Profile Text	
Study Design Narrative*	Forty small businesses, identified from lists compiled from Dun and Bradstreet, were recruited to participate in the Small Business Wellness Initiative (SBWI). These businesses were randomly assigned to one of three conditions: 1) Choices for Health Promotion (CHP),

	2) Team Awareness–Small Business (TASB), or 3) a no-training control condition. The comparison of interest was between the CHP and the control groups.
Sample Description*	<p>The study sample included 1355 employees, ages 18 to 50 and older, from 45 small businesses. Just over one half of the sample was white (53%), followed by Hispanic (27%), black (16%), and other (4%). The sample was 56% male, and only 17% had completed college. Of the total sample, most were aged 41 to 50 (31%), followed by 51 and older (27%), 31 to 40 (24%), and 30 and younger (18%). Current alcohol use was reported among 44% of the sample, and 11% reported drinking on 11 or more days in the past month.</p> <p>The sample size for the CHP and control groups at baseline included 691 employees (332 in CHP and 259 in control). The proportion of males in the CHP and control groups was 60% and 44% respectively; and the percent white was 69% and 53% respectively. In each group, the proportion of participants over age 41 was more than 50% (55% and 51%, respectively).</p> <p>Statistically significant baseline differences were found among the three conditions; however, baseline differences between the CHP and control groups were not tested.</p>

References

Studies Reviewed*
Bennett, J. B., Patterson, C., Sledz, R., Klimback, E. M., Berish, J. E., & Cook, R. (2003). <i>Small Business Wellness Initiative research report</i> . Fort Worth, TX: Organizational Wellness & Learning Systems.
Supplemental and Cited Documents
Bennett, J.B., Patterson, C.P., Sledz, R., Klimback, E.M., Berish, J.E., & Cook, R. (2006). <i>Part 1. Executive summary: Small Business Wellness Initiative final research report</i> [Technical report to the Center for Substance Abuse Prevention for Grant Completion (SP09416)].
Patterson, C. R., Bennett, J. B., & Wiitala, W. L. (2005). Healthy and unhealthy stress unwinding: Promoting health in small businesses. <i>Journal of Business and Psychology, 20</i> (2), 221–247.
Other Studies
Bennett, J. B., Patterson, C. R., Wiitala, W. L., & Woo, A. (2006). Social risks for at-risk drinking in young workers: Application of work-life border theory. <i>Journal of Drug Issues, 36</i> (3), 485–513.
Reynolds, G. S., & Bennett, J. B. (2015). A cluster randomized trial of alcohol prevention in small businesses: A cascade model of help seeking and risk reduction. <i>American Journal of Health Promotion, 29</i> (3), 182–91.

Resources for Dissemination and Implementation

Implementation/Training and Technical Assistance Information

The Small Business Wellness Initiative–Choices in Health Promotion (Choices) was created in 2002. According to the program supplier, 37 small businesses have implemented some aspect of the program. Sites that are still implementing the program include the Illinois Chamber of Commerce; Intersect, Inc. in Anderson, Indiana; and the Guam Behavioral Health and Wellness Center. Those delivering the program should have experience leading small groups and a familiarity with workplace health promotion and health services (e.g., employee assistance programs). The ideal number of participants for the training is between 8 and 20 employees and supervisors, with a maximum of 25. Trainings are typically held in convenient work locations such as break rooms, meeting rooms, or cafeterias.

Prior to delivering Choices, the program supplier requires that implementers seek consultation services for planning, customization, and training purposes. These services are available on request from the program supplier for a fee. In addition, several resources are required to introduce the program structure. These include two implementation guides,

which are available for free from the program supplier: 1) *Replication Manual Small Business Wellness Initiative*, and 2) *Working Well*. Both guides provide background on program development, planning, customization, training, and instructions for implementation. Individuals implementing Choices are required to review the overview training, *Tying it all Together*, which is available for free from the program supplier. Another optional training, *How it Works*, is available for free from the program supplier. Fidelity outlines are required to implement the Choices program material and are available for free from the program supplier.

The needs assessment, employee surveys, and customized slides for program delivery are available on request from the program supplier for a fee. Some materials, including training slides and surveys, are also available in Spanish. Additional optional resources on health topics and wellness efforts are available on request from the program supplier.

Dissemination Information

The program supplier offers several resources for dissemination information on the Small Business Wellness Initiative: Choices in Health Promotion (Choices). The Small Business Wellness Initiative website provides free information on several programs, including Choices and other health and wellness resources. Customizable overview posters, recruiting forms, informational brochures, and other resources explaining the program are available from the program supplier for a fee.

Summary Table of RFDI Materials

Description of item	Required or optional	Cost	Where obtained (e.g., URL, from program supplier)
Implementation Information			
Consulting Services, for administrators and trainers, available by request	Required	Varies	Contact program supplier: Joel Bennett learn@organizationalwellness.com
Implementation Guide: Replication Manual Small Business Wellness Initiative, for administrators, PDF available by request	Required	Free	Contact program supplier
Implementation Guide: Working Well, for administrators, PDF available by request	Required	Varies	Contact program supplier
Overview Training: Tying it all Together, for trainers, PDF available by request	Required	Free	Contact program supplier
Overview Training Presentation: How it Works, for trainers, available by request	Optional	Free	Contact program supplier
Fidelity Outline: Choices Outlines for Fidelity, for trainers, PDF available by request	Required	Free	Contact program supplier
Needs Assessment, for administrators, PDF available by request	Required	Varies	Contact program supplier
Choices Employee Survey, for participants, PDF available by request, also available in Spanish	Required	Varies	Contact program supplier
Customized Slides for Program Delivery, for trainer, available by request, also available in Spanish	Required	Varies	Contact program supplier
Resources on Health Topics, for public, available by request	Optional	Free	Contact program supplier
Dissemination Information			

Small Business Wellness Initiative website, for public	Optional	Free	http://sbwi.org/
Overview poster, for public, available by request	Optional	Varies	Contact program supplier: Joel Bennett learn@organizationalwellness.com
Recruiting Interest Form, for public, available by request	Optional	Varies	Contact program supplier
Recruiting Risk Card, for public, available by request	Optional	Varies	Contact program supplier
Informational Brochure, for public, available by request	Optional	Varies	Contact program supplier
Outreach Presentation, for public, available by request	Optional	Varies	Contact program supplier
Program Matrix, for public, available by request	Optional	Varies	Contact program supplier

*Date profile completed:3/6/17