



Workplace Outcomes Related to Participation in the Flight Attendant Drug and Alcohol Program (FADAP): Annual Report

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Acknowledgements

Thank you to the Flight Attendant Drug and Alcohol Program (FADAP) for their interest in measuring outcomes using research methods regarding flight attendants their participation in the FADAP program.

A special thanks to Heather Healy, Deborah McCormick, and Bill White for their assistance with this project. And, thank you to all of the FADAP peers who worked to help us collect data and to the flight attendants who took the time to complete surveys related to their FADAP and recovery experiences.

Introduction and Background

- FADAP contracted with Dr. Jodi Jacobson Frey to help manage data collected through the outcomes measurement process and procedures
- Very little research has been conducted on outcome measures related to the workplace with flight attendants who complete treatment programs through FADAP or related programs

Evaluation Design

- Pre- and post-test survey design with flight attendants who complete treatment coordinated through FADAP
 - Posttest data collected 1 year after discharge from primary treatment program
 - New(ish) Survey: Post-Treatment Survey collected approximately 30 days after discharge (launched 2/28/2020)
- Additional data collected from the treatment provider
- All data is de-identified no way to link data to names or individual flight attendants

Surveys (paper & email)

- Form 1: Referral to Treatment form (completed by peer)
- Form 2: FA Initial Self Report form (completed by FA ~3 weeks into treatment)
- Form 3: Primary Treatment Summary form (completed by treatment provider)
- Form 3a: Post Treatment form (competed by FA about 30 days after discharge)
- Form 4: FA Follow-Up Self-Report (complete 1 year post discharge form primary treatment)

Specific Outcomes

Work Performance

- Attendance
- Customer service
- Rapport with coworkers & management
- Professionalism
- Presenteeism
- Engagement
- Overall performance

<u>Safety</u>

- Compliance with company & FAA policy
- Safety procedures
- Injury to self & others (actual & potential)
- Drug & alcohol use show up hungover, drink past cut-off time, etc.

Full FADAP Sample (as of May 31, 2022)

- 1117 unique cases
- 884 (79%) cases include treatment provider data (same percentage as 2021)
- Of the 889 possible FAs eligible for follow-up surveys on May 31, 2022, 243 returned surveys for an overall response rate of 27% (about the same on average as past few years)

Sample – Information from Form 1 (completed by peer; *n*=1023)

- 83% union referred; 12% self-referred
- 42% male; 58% female
- Average age was 49 years (range 24-81 years)
- 15% reported having drug or alcohol test violation at time of referral
- 99% referred to inpatient treatment
- Majority were in treatment for first or second time

Disciplinary Action (Form 2) (completed by FA – self-report; *n*=1117)

- Disciplinary action at time of referral (29% reported some action)
 - 16% facing written discipline / corrective action
 - 8% facing termination
 - 5% facing disciplinary suspension
 - 11% under investigation
 - 4% on a last chance agreement

*Note: FAs could check all that apply

Sample – Treatment Program Data (At least partially completed by treatment provider; n=884)

- Majority completed treatment: 86%
- Primarily treated for:
 - Alcohol and mental health = 51%
 - Alcohol, drugs, and mental health = 20%
 - Alcohol only = 14%
 - Drugs and mental health = 7%
 - Mental health only = 3%
 - Alcohol and drugs = 3%
 - Drugs only = 2%

81% involved a primary mental health diagnosis

DSM-5 Diagnostic Categories

- 95% treated for Drug and Addiction Disorders
- 45% treated for Depressive Disorders
- 37% treated for Anxiety Disorders
- 12% treated for Trauma and Stress Related Disorders
- 8% for Other Mental Health Disorders
- 4% for Bipolar Disorders

Sample – Treatment Program Data

- Social support participation = 68% yes
 - Majority who did <u>not</u> participate were because FA declined or family/friends were not available to participate.
- MAT offered (revised questions in 2020 so data below represents less cases)
 - 87 offered MAT and 62% wrote MAT into the treatment plan.
 - 81% agreed to take MAT

Treatment Engagement

Measured from 1 (Not at all engaged) to 5 (extremely engaged)

- Treatment provider's perspective = 4.0 (SD=.91)
- FA Initial = 4.5 (*SD*=.77)
- FA 12-Month Hindsight = 4.0 (*SD*=1.1)
- FA Current at Follow-Up = 3.9 (*SD*=1.2)

Engagement in treatment was sustained throughout recovery and return to work.

Post Treatment Survey (n=82)

- Employment Status
 - 29 employed & RTW; 32 employed & not yet RTW; 14 employed on med leave; 4 resigned, 1 retired, 5 were terminated
 *Note FAs could check more than one response
- Satisfaction with the Treatment Program (not FADAP)
 - 93% would recommend TX program (agree or strongly agree)
 - 88% would use TX center again (agree or strongly agree)
 - 92% were satisfied with TX center (agree or strongly agree)
 - 96% said helped me to abstain from AOD problem: (agree or strongly agree)
 - 95\$ said helped with overall emotional well-being (agree or strongly agree)
 - 32 comments and 78% were positive about treatment center

FADAP Satisfaction

Satisfaction questions were revised Feb 28, 2020

- 1. I would recommend the peer assistance program to another Flight Attendant.
- 2. If I needed help in the future, I would use the Flight Attendant peer assistance program again.
- 3. I am satisfied with the Flight Attendant peer assistance program.
- 4. Having access to a Flight Attendant peer assistance program made it possible for me to ask for help for my substance use problem.
- 5. Without the Flight Attendant peer assistance program, I would not have made it into treatment.

Work Engagement

Measured with a single item; used with other EAPs;

- "I am often eager to get to the work site to start the day" (1=strongly disagree to 5 = strongly agree)
- Initial = 3.8 (*SD*=1.0)
- Follow Up = 3.9 (*SD*=1.1)*

*No statistical difference (p=.391)

Presenteeism

Measured with 5-item scale to assess time spent at work, but not focused on work; scores range 5-25 & **lower** scores are better

- Initial = 10.6 (*SD*=4.8)
- Follow Up = 7.7 (*SD*=4.3)*

*Statistically significant decrease (*p*<.001)

Follow-Up Comparisons – Specific Outcomes Pre and Post Test (*Self Report; n=83-103)

Significant changes (*trends*) observed between pre-test and post-test questions (*p*=.001)

- Showing up for a flight hung-over
- On-duty performance
- Overall work performance (personal perspective)
- Not showing up for a trip due to AOD use

Additional significant changes observed between post-test 12 month and post-test (when pre- to post- 12 month were sig) (p=.001)

- Attendance
- Bidding flying schedule to have access to AOD
- Compliance with company policy
- Coworker rapport
- Customer service
- Compliance with FAA regulations
- Management rapport
- Professionalism
- Attention to safety duties
- Disregard for safety procedures

Lost Work Time & Direct Costs to the Workplace (n=75)

Pre-Test

- Alcohol & other drugs
 - Average hours = 10.9/month
 - Average cost = \$538/month
- Other reasons
 - Average hours = 7.2/month
 - Average cost = \$335/month
- Total
 - Average hours = 18/month
 - Average cost = \$847/month

Post-Test

- Alcohol & other drugs
 - Average hours = .48/month
 - Average cost = \$19/month
- Other reasons
 - Average hours = 2.2/month
 - Average cost = \$106/month
- Total
 - Average hours = 1.7/month*
 - Average cost = \$67/month*
- Statistically significant improvement (p<.001)
- Note, some FA pairs dropped out due to missing AOD post-test data so cannot just add up averages in totals

Next Steps

 Continue to review new treatment questions and satisfaction questions

 Discuss mid-year trends at next FADAP Advisory Board

Thank you!

For more information, please contact Dr. Jodi Jacobson Frey at <u>freyresearchllc@gmail.com</u>