

EFFECT OF JOB SKILLS TRAINING ON EMPLOYMENT AND JOB SEEKING BEHAVIORS IN A NATIVE AMERICAN SUBSTANCE ABUSE TREATMENT SAMPLE

M. P. Bogenschutz¹, D. Pallas², K. Foley², R. Daw², J. S. Tonigan¹, A. Forcehimes¹, R. Chavez¹, D. S. Svikis³

¹University of New Mexico Center on Alcoholism, Substance Abuse and Addictions (CASAA)

University of New Mexico, Albuquerque, NM

²The Na’Nizhoozhi Center Inc., Gallup, NM

³Virginia Commonwealth University, Richmond, VA

INTRODUCTION

Employment difficulties are common among individuals receiving substance abuse treatment, and employment is an important treatment outcome as well as a predictor of success in other areas such as decreasing problematic substance use. Unemployment problems are often particularly significant in Native American communities (Reynolds, Fisher, Estrada, & Trotter, 2000). To address this problem, the Southwest Node of the National Institute on Drug Abuse’s (NIDA’s) Clinical Trials Network (CTN) conducted a single-site adaptation of its national Job Seekers Workshop study (Svikis, P.I.) in a Native American treatment program, the Na’Nizhoozhi Center (NCI). The program targets skills needed to find and secure a job, as well as vocational goal setting and methods for locating available employment. Here we report primary results for employment outcomes.

METHODS

102 (80% men, mean age 36.31 years, 100% Native American) participants who were in residential treatment at NCI and currently unemployed or underemployed were randomized to (1) a three session, manualized program (Job seekers workshop, JSW, $n = 53$) or (2) a 40-minute Job Interviewing Video, JIV, $n = 49$). Treatment exposure was close to 100% because participants were in residential treatment. Extensive assessments were obtained at baseline and 1, 3, and 6 months, including the ASI-lite and a vocational survey. A high follow-up rate of 98% was maintained throughout the 6-month study. The *a priori* primary outcomes were rates of new employment, total work and training hours, and time to first employment, determined at the 3-month follow-up.

RESULTS

34.6% of participants in the JSW group reported having a new job at 3-month follow-up, compared with 29.8% in the JIV group (N.S., see Figure 1). Mean total work and training hours in the follow-up period were 42.83 hours in the JSW group vs. 46.04 hours in the JIV group (N.S., see Figure 2).

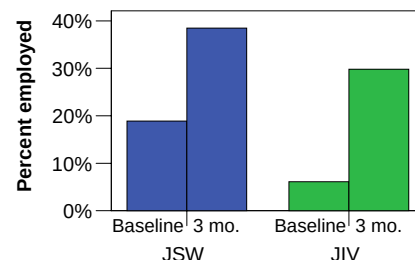


Figure 1. Employment status

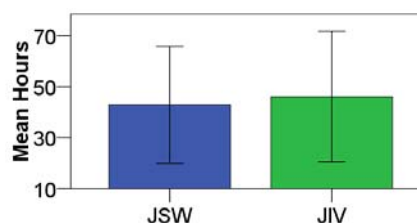


Figure 2. Mean total work and training hours at 3 months (95% CI)

Mean time to first employment was 78.90 (SD = 35.68) days in the JSW group and in the JIV group 77.75 (SD = 41.01) days (Figure 3).

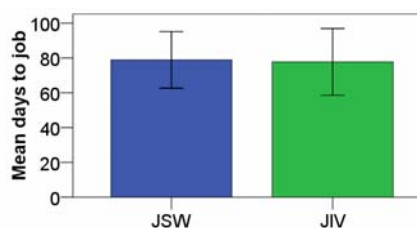


Figure 3. Mean days to job (95% CI)

There were no significant differences between groups in alcohol or drug use frequency at 3-month follow-up. Participant satisfaction was high and not significantly different between the two interventions.

DISCUSSION

The study was successfully implemented and the interventions were well received by all participants and program staff. Although both groups improved from baseline to the 3-month follow-up, no significant differences in the primary outcomes were detected between the JSW and JIV interventions.

The interventions did not produce significant changes in rates of employment, total work and training hours, or time to employment. One hypothesis was that the format of the intervention was not well-suited for individuals in residential treatment. However, these results parallel those found in the CTN 0020 main trial for participants in outpatient treatment, suggesting that the intervention was simply not effective, regardless of treatment setting.

An alternative explanation is that participant characteristics, such as prior treatment history, may have moderated treatment effects. Another possibility is that the timing of this intervention was not appropriate; that individuals were dealing with other concerns related to recovery during the early stages of residential treatment, and that a program focused on job-seeking skills would have been received more favorably later in recovery. Yet another explanation for the lack of efficacy is the lack of employment opportunities available within this community.

Given the lack of greater benefit, the 3-month data do not support the use of the more costly and time-consuming JSW intervention in this population and setting.

REFERENCES

Reynolds, G. L., Fisher, D. G., Estrada, A. L., & Trotter, R. (2000). Unemployment, drug use, and HIV risk among American Indian and Alaska Native drug users. *American Indian and Alaska Native Mental Health Research*, 9(1), 17-32.

ACKNOWLEDGEMENTS

This research was supported in part by NIDA’s Clinical Trials Network.

We are grateful for the support of the Navajo Nation Human Research and Review Board.