

COMPARING CHOICE AND QUESTIONNAIRE MEASURES OF THE ACCEPTABILITY OF A STAFF TRAINING PROCEDURE

Dennis H. Reid and Marsha B. Parsons

Western Carolina Center and the Carolina Behavior Analysis and Support Center, Ltd., Morganton, North Carolina

We compared questionnaire and choice measures of acceptability while evaluating effects of staff familiarity versus unfamiliarity with the system used to monitor performance during a training program. Staff members rated both monitoring formats equally favorably on the questionnaire, whereas when given a choice, they frequently chose the familiar format and never chose the unfamiliar format. These results suggest that traditional questionnaire evaluations may not be sufficiently sensitive measures of acceptability relative to choice measures.

DESCRIPTORS: acceptability, choice, staff training, organizational behavior management, questionnaires

Determining the acceptability of staff training procedures is an important component in organizational behavior management (OBM) research. Concern exists, however, over the utility of questionnaire measures of acceptability that are traditionally used in OBM research (Schwartz & Baer, 1991). This investigation compared questionnaire and choice measures of the acceptability of two common means of monitoring staff performance as part of training programs. Monitoring procedures are often disliked by staff (Reid, Parsons, & Green, 1989), and determining which procedures are most acceptable could facilitate the overall acceptability of staff training programs. The specific procedures evaluated were staff familiarity versus unfamiliarity with the system used to monitor performance. Although both monitoring approaches are used in OBM, evaluations of their relative acceptability have been lacking.

METHOD: *Setting and participants.* The investigation was conducted with 18 new direct-service staff members in a residential facility for people with developmental disabilities. Procedures were implemented as they received on-the-job monitoring and feedback regarding their client teaching skills following classroom training in how to teach people with disabilities (Parsons, Reid, & Green, 1993). Each staff member participated in one of four monthly training groups.

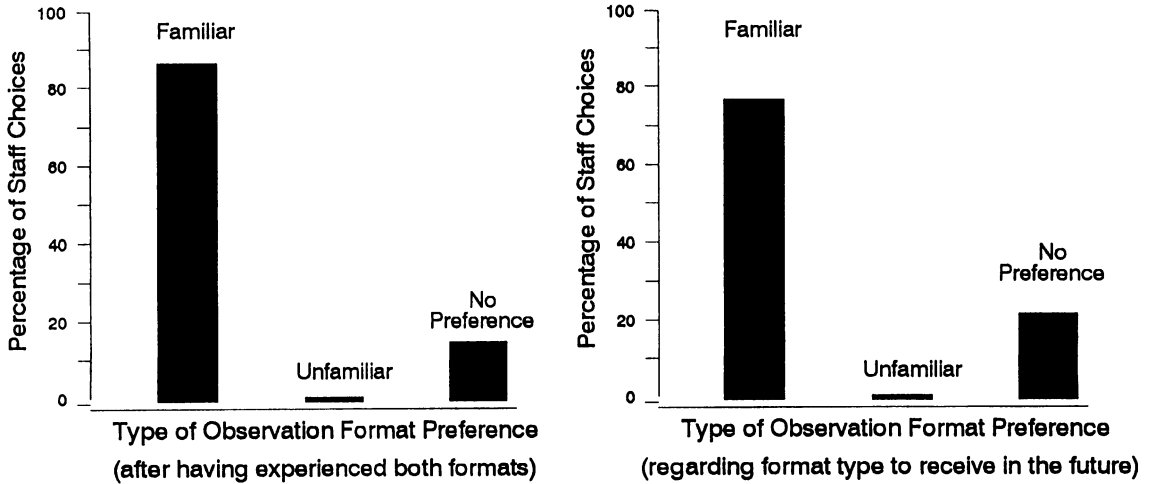
Dependent measures, experimental conditions, and design. One acceptability measure was response to a questionnaire asking how much staff liked or disliked observations of their behavior. The questionnaire was based on typical OBM acceptability questionnaires and consisted of a 7-point Likert scale with a response range from *disliked extremely* (1) to *liked extremely* (7). Additional measures involved asking staff members to choose which observation format was preferred after experiencing both formats and which format they preferred to receive in the future.

In the familiar condition, following classroom training in how to teach, staff members were familiarized with the observation system during a 30-min meeting. Trainees were given an observation form, and the instructor explained how the form should be completed. Trainees practiced using the observation form in a role-play situation. Following the meeting, on-the-job observations of client teaching sessions were conducted using a set protocol. In the unfamiliar/familiar condition, all procedures were the same as in the familiar condition except that before the first on-the-job observation, staff members did not participate in the familiarization meeting until after the first observation and before the second observation.

Staff members in the first three training groups were randomly assigned either to the familiar group ($n = 7$) or to the unfamiliar/familiar group ($n = 7$). Acceptability was compared between the two groups (familiar vs. unfamiliar) after the first observation and within the latter group (unfamiliar vs. familiar) across observations after the second observation. All staff members completed the questionnaire following each observation. After the second observation, staff members were asked their preference for future observations and those observations were conducted according to the expressed preference. Also, staff members in the unfamiliar/familiar group were asked their preference for the two approaches they had just experienced. Participants in the first three training groups were asked their preference for forthcoming observations after receiving the familiar format. Participants in the fourth monthly training group were unfamiliar with the format during the first observation; thus, they were asked their preference for the next observation after receiving the unfamiliar format. These participants were informed that the observation would be conducted in accordance with their expressed preference; subsequently, the observation was conducted accordingly.

RESULTS AND DISCUSSION: Questionnaire results indicated that after the first observation, both groups had similar reactions to the observations ($M = 6.57$ and 5.86 on the 7-point scale for the familiar and unfamiliar/familiar groups, respectively). After the unfamiliar/familiar group became familiar with the observation system, they continued to report high acceptance of the observations ($M = 6.14$). In contrast, when these participants were asked their preference after experiencing both procedures, 6 of the 7 staff members preferred the familiar process and 1 indicated no preference (see the figure). When all staff members were asked their preference for forthcoming observations, 14 of the 18 indicated that they would prefer to be familiar and 4 indicated no preference (see the figure).

Overall, these results suggest that the choice measures represented a more sensitive acceptability index than the questionnaire measure. All questionnaire results were similar regardless of whether staff members were familiar or unfamiliar with the monitoring, whereas they chose the familiar approach on at least 75% of all choice opportunities and never chose the unfamiliar strategy. Although additional research is needed to examine the generality of these results, the findings suggest that future acceptability evaluations should not rely solely on questionnaires, as has typically occurred in OBM research.



Relatedly, the results indicate that OBM procedures previously rated equally acceptable on questionnaires may not be equally preferred if staff members have control over (i.e., choose) the procedures in which they will participate.

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