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Responsible Alcohol Service Programs Evaluation Summary Report

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INTRODUCTION

Many persons drive after having been served alcohol in bars, clubs, restaurants, stadiums, or other public assembly facilities. Responsible alcohol service programs are designed to limit driving after drinking in these establishments through written policies, training of all service employees, promotion of food with beverages, elimination of promotions that encourage drinking, enforcement of State alcoholic beverage control regulations, promotion of alternative transportation, and offering of non-alcoholic beverages. The key objectives of these programs are to reduce the incidence of impaired driving by patrons en route to and from the facility, enhance safety within the facility, and reduce potential liability.

TEAM (Techniques for Effective Alcohol Management) is a responsible alcohol service program that was developed for public assembly facilities, initially sports facilities. It is a coalition of public and private organizations that promotes responsible alcohol service and works to reduce the incidence of drinking and driving. TEAM has developed a complete responsible alcohol management program to guide and assist facilities to assess their current alcohol policies and practices, develop new policies where needed, train employees, implement alcohol policies, and evaluate the results.

This report summarizes the results of an evaluation of TEAM programs operating in seven sports facilities.

OVERVIEW OF TEAM

History Of TEAM

The impetus for TEAM began with independent facilities that wanted to manage alcohol more effectively. After implementing various alcohol management techniques and becoming involved with drunk driving efforts in their communities, they turned to the National Highway Traffic Safety Administration (NHTSA) for assistance in developing a comprehensive alcohol management program that could be shared with other facilities. NHTSA undertook development of the program and formed a coalition of organizations from both the public and private sectors to provide assistance to public facility managers. The coalition has grown and today includes:

- o Allstate Insurance Company
- o CBS, Inc.
- o COMSAT Video Enterprises
- International Association of Auditorium Managers (IAAM)
- Major League Baseball
- o Mothers Against Drunk Driving
- Motor Vehicle Manufacturers Association
- National Association of Broadcasters
- National Association of Governor's Highway Safety Representatives
- National Basketball Association (NBA)
- o National Collegiate Athletic Association
- o National Football League
- National Hockey League
- o National Safety Council

A growing number of facilities are adopting TEAM, joining the more than 90 facilities in 38 states and 5 Canadian Provinces that implemented such programs through 1990. The implementation of TEAM at these facilities has allowed the program to impact huge audiences, as facility events often attract tens of thousands of spectators. Moreover, instituting programs at public assembly facilities presents an opportunity to develop responsible attitudes and behavior toward alcohol in many environments that traditionally have encouraged alcohol consumption.

TEAM Objectives

The main objectives of TEAM are to:

- o Promote responsible alcohol service;
- o Enhance safety and enjoyment of fans;
- Reduce potential liability; and
- Reduce alcohol-impaired driving.

In addition, increasing adoption of TEAM helps communicate a consistent message to the public about alcohol use and safe driving practices that may increase the effects of all similar efforts.

The Components of TEAM Facility Alcohol Management Programs

The TEAM Program at a facility consists of the following five components:

- <u>Assessment</u>: Identification and assessment of current policies and practices of alcohol management.
- Policy Formulation: Development of specific policies and procedures designed to prevent alcohol abuse which are then outlined in a written statement.
- TEAM Training: Training and educating all employees on alcohol issues (i.e. impaired driving, blood alcohol concentration, potential problem situations, etc.) to enable them to implement and enforce the developed policies.
- Policy Implementation: Implementation and public statement of policies to patrons.
- Evaluation: Systematic collection of information to assess the implementation and impact of TEAM.

TEAM Accomplishments

The following list illustrates the accomplishments that have been made in each of TEAM's three major areas of activity:

National/Local Public Awareness

The TEAM Public Awareness program supports national TEAM members and local affiliates by developing and distributing public information materials (print and broadcast) to promote traffic safety. National campaigns have been developed and delivered for Major League Baseball and the National Basketball Association. The total contribution in nationally donated air time since the TEAM program began in late 1985 is over \$10 million dollars. TEAM public service announcements have also been shown on local television and cable, and in stadiums and arenas, adding an inestimable amount of donated time and space to the program.

Facility Alcohol Management
TEAM's Facility Alcohol Management program has
been introduced into more than 90 facilities, in

38 States, 5 Canadian Provinces, and Australia. Most National Basketball Association arenas and all Major League Baseball Stadiums have completed TEAM assessment, policy development, and training. More than 25,000 employees have been trained.

Community Coalitions

TEAM helped form local coalitions that use national TEAM support as a foundation for comprehensive local community traffic safety programs. Local TEAM Coalitions are now active in eight communities: Atlanta, Georgia; Detroit, Michigan; Southwest Athletic Conference, Dallas, Houston and San Antonio, Texas; San Francisco and Los Angeles County, California.

BACKGROUND OF THE PROJECT

Although TEAM has been implemented in stadiums and arenas across the country, little information is available concerning the effectiveness of the program. Facilities have often differed in the specific alcohol policies and procedures that they adopted when implementing TEAM. There is a strong need to evaluate TEAM to (1) determine which program features work effectively and which do not; and (2) identify where improvements can be made.

OBJECTIVES

This project's main objective was to assess the influence of TEAM on fan drinking behavior. In addition, the project sought to assess:

- Implementation of TEAM in facilities;
- o Patron awareness of program policies and activities in the facilities;
- Patron attitudes toward program policies and activities; and
- Employee ability and motivation to implement the program.

METHODS

The project sought to evaluate the effects of TEAM policies and activities on fans, rather than evaluate how well TEAM was implemented. Study sites, therefore, needed to have strong working TEAM programs. The timing of the data collection effort (Summer 1990) led to the targeting of baseball stadiums as evaluation sites. To obtain their participation, NHTSA and the contractor sought the assistance of Major League Baseball. The contractor made a presentation before officials of the Commissioner's Office, after which Major League Baseball agreed to support the study.

Major League Baseball then contacted facilities to solicit their participation. While certain criteria were specified for selection of sites, no attempt was made to draw a representative sample of all baseball facilities where TEAM programs existed. Eight facilities indicated that they would participate in the study. Major League Baseball provided the contractor with the names of contact people at each of these facilities. From this point on, the contractor worked directly with the facilities. Major League Baseball was not involved in any data collection or data analysis.

The contractor conducted case studies of the TEAM program in seven baseball facilities (the eighth was unable to participate because of time constraints). Four types of data were sought from each: (1) records of food and alcohol sales and of alcohol-related incidents; (2) written TEAM assessments and alcohol policies; (3) anecdotal information dealing with the history, implementation, and impact of TEAM; and (4) survey data from employees and fans. Most of the anecdotal information and written materials were collected during site visits to the seven facilities. A confidentiality agreement with Major League Baseball precludes identifying them. They therefore are designated as Facilities A, B, C, D, E, F, and G. Two facilities provided alcohol and food sales data, and three provided survey data.

Several important limitations to this study should be noted. These include the absence of control groups, the non-representativeness of the samples, and the heavy reliance on anecdotal information. In addition, several tasks originally envisioned as part of the project either could not be undertaken or were only partially achieved. For example, it was not possible to observe fan drinking behavior as part of this project. Furthermore, alcohol sales data and survey

data from fans and employees were not available from all the facilities, and facility incident records proved to be unusable.

FINDINGS

FINDINGS ACROSS SITES

When And Why Was TEAM Introduced At The Facilities?

All seven facilities implemented TEAM between 1987 and 1989. In six of the seven facilities, improvements in alcohol control policies had already begun one or more years before the introduction of TEAM. To some degree then, TEAM represented a continuation and expansion of an ongoing process in these facilities. Although some of the earlier changes were involuntary (e.g., in one instance a local ordinance was passed which banned fans from bringing alcohol to the stadium), most were voluntary. One factor which facilitated the implementation of TEAM was the fact that the concessionaires serving several of these facilities had already adopted some responsible serving practices for controlling alcohol abuse. For example, the concessionaire that served three of the study sites had initiated its own alcohol awareness program in 1985.

Respondents discussed reasons why TEAM was adopted. Those reasons can be grouped roughly into three categories:

- o Concern about liability arising from the behavior of intoxicated fans;
- Concern about negative public opinion, including a concern that the public might eventually recommend banning the sale of alcohol;
- Concern about the loss of patrons, especially families, due to rowdy behavior.

Management in all the facilities supported the adoption of TEAM. Only two sites indicated there was opposition by staff to the introduction of TEAM. In both cases, the opposition appeared to be part of a much broader reaction to the introduction of new managers and assistants who were determined to make major changes in facility operations. Resistance to TEAM in these facilities ended as the new management groups made personnel changes and succeeded in winning over staff.

Apart from the above instances of relatively minor resistance by staff, spokespersons for the sites did not identify obstacles to the institution of TEAM. TEAM seemed

to fit well into a variety of settings and circumstances. In other words, stadium receptiveness to TEAM did not vary with factors such as stadium size, corporate structure, the laws concerning minimum drinking age and BAC limits for DWI, relationships with local enforcement agencies, and so on. Indeed, in one case, it was reported that there were no substantive difficulties encountered in transferring the TEAM program to a new stadium despite changes in staff, the concessionaire, and the physical surroundings. One spokesperson noted that the flexibility they were allowed by Major League Baseball in adapting TEAM to their situation facilitated its establishment.

How Was TEAM Training Conducted?

Overall, the sites showed a strong commitment to training staff in TEAM policies and procedures.

Only one stadium did not provide formal TEAM training (though alcohol servers at this facility were required to complete a widely used server training program). In five of the six remaining sites, most of the staff that interacted with patrons received training. In the sixth site, no training was conducted for the 1990 season because the only two rooms large enough were unavailable. In another, some staff were omitted because not all staff could be trained in one effort with the limited resources available (trainers and time). To increase participation in training, some sites (including the one that did not require TEAM training) offered incentives for participation, such as free tickets to games. Also, several sites that required training paid for the time their employees spent in it.

The facilities used a variety of approaches to address the typically high turnover rate among stadium staff. In two cases, all staff were retrained each season. In two others a modified "refresher" course was offered to returning employees, while new employees received the standard training. Three facilities provided training to staff hired during the season, and one of these plans to video tape the training program for this purpose. Finally, in at least five sites (including the site that provided no specific TEAM training), training was supplemented by the distribution of manuals and/or policy statements. Two of these sites produced pocket sized versions of policy manuals so they could be carried easily by staff.

Training in the facilities was extensive, reaching many different categories of staff. In general, all categories of staff who served alcohol or interacted face-to-face with fans received TEAM training (security, ushers, ticket sellers, ticket takers, concessionaire staff, parking lot attendants, local police assigned to the stadium, etc.). In some settings, however, certain categories of staff were not trained because the organization that had adopted TEAM had no direct control over them. One example was parking lot personnel working for a city or privately owned company.

The facilities differed in the types of trainers they used. Most had stadium personnel conduct the training, while a few used an outside trainer in combination with stadium personnel. Trainers had either been trained directly by NHTSA or by facility personnel who had been trained by NHTSA. The usual practice was to train different categories of staff together, but in some cases, concessionaire supervisors trained their staffs separately. Interviewees at two sites commented that combining staff was an extremely important aspect of training, because it provided people with an improved understanding of one another's responsibilities with respect to TEAM and other stadium activities.

The basic TEAM training curriculum and procedures developed by Major League Baseball and NHTSA were altered to serve the needs of the specific facilities. In one case, modifications were made so that TEAM training meshed with state training requirements. In others, information about alcohol issues was integrated into the job descriptions for each category of staff.

What Steps Were Taken To Communicate TEAM Messages To Fans?

One of the most striking features at the study sites was the pervasiveness of information about TEAM directed at fans. As Table 1 shows, messages about alcohol abuse were communicated by a variety of means, including: scoreboards, videoboards, public address systems, printed programs, signs, buttons worn by staff, tickets, and messages on cups containing alcoholic beverages.

The reader should keep in mind that the number of communications methods used may well be larger than presented here. Discussion with spokespersons from the teams was not structured, and some respondents may have neglected to mention all they were doing. This caveat also applies to the following section.

TABLE 1
MECHANISMS FOR COMMUNICATING MESSAGES ABOUT TEAM

•	STADIUM						
MEANS OF COMMUNICATION	A	В	С	D	E	F	G
Scoreboard/Videoboard	YES	YES	YES	YES	YES	YES	YES
Public address system	YES	YES	YES	YES	YES	YES	YES
Program	YES	YES		YES	YES	YES	YES
Signs	YES	YES	YES	YES	YES	YES	YES
Staff buttons/Pins	YES	YES	YES	YES	YES	YES	YES
Tickets				YES			
Beer & wine cooler cups		1					YES

What Alcohol Control Policies Have Been Adopted As A Part Of TEAM?

Perhaps the most critical question concerning TEAM is whether stadiums have adopted a variety of meaningful alcohol control policies. Table 2 shows this has occurred. The policies the stadiums adopted and implemented were their decision and not Major League Baseball or TEAM coalition directives.

Specifically, three sites prohibited tailgate parties involving use of alcohol. Of the four that didn't, two had no jurisdiction over parking areas. All seven prohibited fans from bringing alcohol into the facility and searched or screened fans for alcohol at the gates. Screening and searches were carried out regularly and in public view to make fans aware that they might be caught. In addition, signs and security personnel placed at entrances to most of the facilities warned fans that alcohol could not be brought into the stadium. All seven sites confiscated any alcohol not purchased at the stadium.

Most sites restricted the sale and consumption of alcohol to designated areas. A typical restriction was that liquor could only be purchased and consumed in designated restaurants and clubhouses -- a fan could not, for example, carry a mixed drink into the stands. Six sites limited the number of beers (and sometimes other alcoholic beverages) that could be purchased at one time. Four of these placed the limit at two beers; two sites permitted four beers to be purchased (and one of these is contemplating reducing this to two beers per patron). All sites indicated they had reduced the size of beer containers (e.g., 16 to 12 ounces).

All five sites that vend alcohol in the stands discontinued sales before baseball games ended (e.g., after the seventh inning). Five of the stadiums discontinued beer sales in concession areas before games ended, and another will do so next season. All seven sites discontinued alcohol sales in areas where alcohol-related rowdy behavior occurred.

Alternative transportation programs for intoxicated patrons were offered at three sites. Two encouraged use of designated divers and also offered free taxi rides to intoxicated fans. Customer service booths at these facilities were used both to promote these programs and to sign up fans. The third site promoted use of designated drivers but did not offer free rides to fans. Two other facilities mentioned

TABLE 2 POLICIES FOR CONTROLLING ALCOHOL ABUSE

			SI	TADIU	лм		
POLICIES	A	В	С	D	E	F	G
Tailgate alcohol parties banned	YES	YES	YES	ИО	*	ио	*
Fans searched/screened for alcohol at gates	YES	YES	ŸES	YES	YES	YES	YES
Confiscate alcohol not purchased at the stadium	YES	YES	YES	YES	YES	YES	YES
Alcohol consumed only in designated areas	ио	YES	YES	YES	ИО	YES	YES
Number of beers that can be purchased at one time	4	No Lim	4	2	2	2	2
"Large" beer (ounces)	22	18	22	20	16	-	12
Reduced size of beer cups	YES	YES	YES	YES	YES	YES	YES
Inning after which vended beer sales stop:	7	7	7	5th	**.	**	8th
Inning after which beer concessions stop:	9th	9th	8th	8th	7th	7th	8th
Alcohol sales are stopped in areas where trouble occurs	YES	YES	YES	YES	YES	YES	YES
Designated Driver Program	YES	YES	МО	YES	ИО	NO	ИО
Offer free Taxis for intoxicated fans	YES	ИО	ио	YES	ио	ИО	ио

^{*} No jurisdiction over the parking areas. ** No vending is allowed in the stands.

transplans to adopt designated driver programs in the future. In addition, sites made efforts to arrange alternative portation for intoxicated fans who were ejected from the park (a ride from a sober friend, a taxi, telephone calls to parents of underaged drinkers, etc.). If these efforts failed, intoxicated fans were placed in protective police custody.

The sites also adopted other practices to minimize alcohol abuse, such as:

- o Most facilities screened fans entering the park for signs of intoxication. Intoxicated fans were denied admission, and fans whose behavior was suspect were identified and monitored by staff.
- o All facilities required that patrons attempting to purchase beer provide identification unless they appeared to be older than a specified age (which was several years older than the minimum drinking age). The most common cutoff point was 30 years, though it was 35 years in one facility and 25 years in another.
- o The size of the security force was varied according to anticipated demands of upcoming events. For example, the size was increased for games between traditional rivals, where more problems were expected.
- o Spokespersons at several sites mentioned that the location of potentially troublesome groups was noted so they could be monitored closely.

What Were The Requirements and Difficulties In Maintaining TEAM?

It was pointed out earlier that few problems were encountered in instituting TEAM. It also appears there were few problems in maintaining these programs. The only significant problem mentioned was the difficulty of motivating transient and low-paid staff to enforce TEAM policies, especially when they must confront boisterous and aggressive fans. The stadiums evolved many strategies for coping with this problem, including the following:

o As discussed previously, many staff were trained in TEAM policies. Typically, this training included specific information about how to intervene with fans (e.g., role playing), the rationale for the policies,

the responsibilities of employees to enforce policies, and other relevant skills (such as estimating a fan's level of intoxication).

- Several facilities held regular meetings among supervisory staff to identify enforcement problems, to fine tune procedures, and to motivate compliance
- o Interviewees at most sites mentioned that the consequences of failing to carry out TEAM policies (e.g., suspension or dismissal) should be clearly spelled out and enforced.
- o Interviewees also noted the importance of clear messages by management that supervisors would not overturn staff enforcement decisions. That is, staff were supported for such actions as refusing admission to an intoxicated fan, refusing to sell alcoholic beverages, and ejecting a fan from the facility.
- Several respondents remarked on the value of close supervision of staff. For example, special spotters were used to monitor compliance with alcohol serving procedures.
- All the facilities developed mechanisms by which the staff could obtain help and assistance (e.g., by supervisors, security, and police) when faced with a difficult and potentially dangerous situation.

What Was Reported About The Impact Of TEAM?

Management at all seven stadiums were enthusiastic about their involvement in TEAM. Without exception, they believed that the TEAM program had contributed to a reduction in alcohol problems at their stadium and that their participation in TEAM was worthwhile. No comments were made about TEAM having negative effects.

Statements about the impact of TEAM included the following:

Most sites reported that alcohol-related incidents with fans had declined as a result of TEAM. In several of these sites, the decline in incidents was reflected by a drop in ejections of fans from games. However, one site reported an increase in ejections of fans. The increase in ejections was attributed to a change in policy: fans with contraband liquor were now ejected, whereas prior to TEAM, contraband alcohol was simply confiscated.

- The spokesperson at one site commented that fans who used to boo police regularly when they intervened to deal with problem behavior now often cheer when police eject a boisterous patron.
- Three sites reported that the amount of contraband alcohol had declined.
- o One site reported that better training had resulted in a doubling of the number of fraudulent licenses confiscated by servers.
- o One site reported a decline in the number of citations for "serving infractions" by the local regulatory agency.
- Spokespersons for six sites reported declines in alcohol sales.
- o One spokesperson commented that the alcohol control policies helped the staff identify and stop problems before they escalated into major incidents.

Another important change mentioned at several sites was a marked improvement in relations among staff performing different functions (ushers, security, etc.). Joint TEAM training gave staff a better appreciation of how their actions concerning alcohol policies affected one another. Some staff also felt that joint training had a broader impact -- that it improved staff relations beyond the enforcement of TEAM policies.

What Changes In TEAM Did Site Personnel Recommend?

On the whole, there was little criticism concerning TEAM. Most recommendations for improvement concerned some aspect of training. Interviewees at one site suggested that a pocket-sized TEAM manual be developed (presumably by Major League Baseball) so staff could easily refer to it during the season. As mentioned, two sites developed pocket manuals on their own. Another site suggested that NHTSA send a representative to TEAM training sessions in order to help convey the national importance of TEAM. Most comments concerned the quality of video tapes used in training to portray how staff should approach problem situations with fans. Three sites indicated these materials were not realistic. It was suggested that new video tapes be

prepared and be pre-tested with stadium staff to ensure they more accurately reflect problem situations.

ALCOHOL SALES RECORDS

Alcohol sales data were provided by two facilities. Because of the sensitive nature of sales data, facilities were invited to disguise their records so as to conceal information about absolute levels of sales and revenues. One facility provided its data in the form of relative sales per capita for the period 1985 through 1990; the second facility provided sales figures as a percentage of total revenues during the period 1988 through 1990. Both provided sales information on beer, food, and non-alcoholic beverages. In addition, the second facility included a category of "Other" that refers to all other concession sales, such as souvenirs.

Figures 1 and 2 chart the sales data. The dominant trend in these graphs is consistent both within each facility and between the two facilities: relative beer sales decreased throughout the period for which data were available. At the same time, relative sales of food, non-alcoholic beverages, and other concession items increased.

The data from the two facilities are not directly comparable because they used different bases for computing percentages. Thus, it is difficult to compare the magnitudes of the decreases in beer sales. When the difference in length of time periods is taken into account, relative beer sales per capita fell 11% in the first stadium from 1988 to 1990. Beer sales as a percentage of total revenues decreased 7% in the second stadium during the same time period.

Overall, the 29% drop in the first stadium's beer sales per capita from 1985 to 1990 is a dramatic trend. Other facilities also reported noticeable declines in beer sales but were unwilling to provide specifics.

The Role Of TEAM Versus Earlier Efforts To Control Alcohol

For both facilities, it is difficult to separate out effects due to the establishment of a TEAM program from effects of earlier alcohol management efforts. Nevertheless, it is interesting to note that the single biggest yearly decrease in alcohol sales per capita at the first stadium (a 10% decline from 1987 to 1988) occurred at precisely the time when the TEAM program was introduced.

Figure 1
Relative Sales Per Capita for
Beer, Non-Alcoholic Beverages and Food
(Data Provided By One Facility)

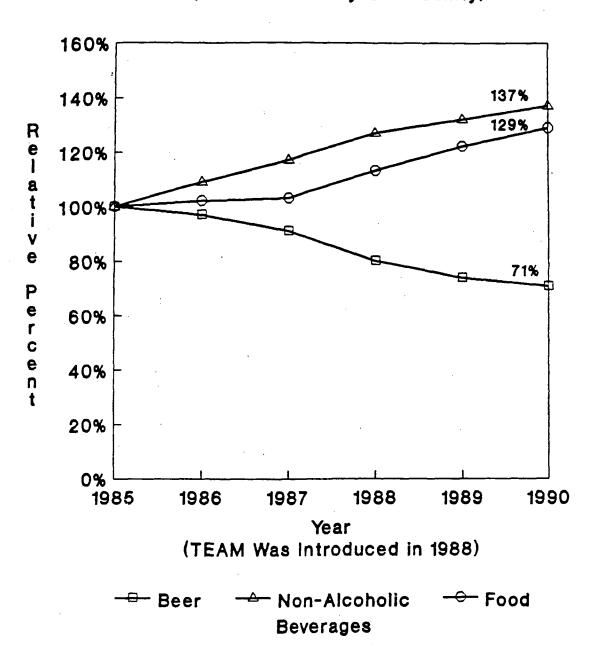
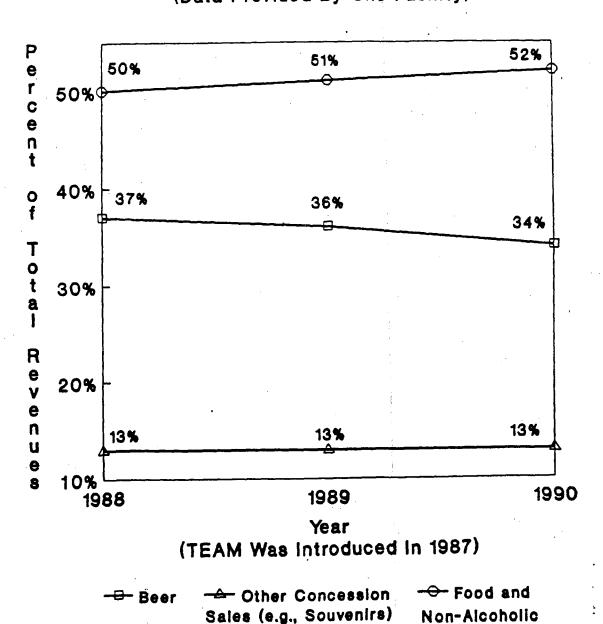


Figure 2
Alcohol and Other Sales as a
Percentage of Total Revenues
(Data Provided By One Facility)



Beverages

Changes In Fans Versus Changing Fans

There are two ways (which are not mutually exclusive) that alcohol sales could have decreased at the facilities: (1) the same fans have continued attending games but have decreased their consumption of alcohol, and (2) different fans are attending games — fewer drinkers and/or heavy drinkers and more abstainers and/or light drinkers. Facility alcohol policies may have influenced both these factors. The policies discourage heavy drinkers from attending games while encouraging families, and they put barriers in the way of fans wanting to become intoxicated.

At least one piece of the puzzle is clear: a number of fans surveyed at three facilities reported having reduced their purchases of alcoholic beverages at the stadium (for more detail, see the section on Fan Surveys). At the same time, virtually no fans reported that they had increased their purchases of alcoholic beverages. Therefore, at least some of the decrease in alcohol sales seems due to changes in fan drinking behavior.

The same fan surveys showed large percentages of fans reporting that they did not drink alcoholic beverages. Perhaps some past drinkers have become abstainers, or more atstainers are now attending games. Without additional data, there is no way to ascertain this.

Food, Non-Alcoholic Beverages, And Other Sales

Figures 1 and 2 show that relative sales of food, nonalcoholic beverages, and other concession items increased during the same period that alcohol sales declined. While these increases are good news for the facilities, respondents emphasized that no other items can make up for the revenues lost from beer sales. Alcohol is a much higher profit item than anything else currently sold at the facilities.

Some facilities have experimented with efforts to find substitutes for lost alcohol sales. For example, one organization introduced concessions specializing in various ethnic and health foods. However, none of these endeavors proved lucrative, and most have been economic failures.

RESULTS OF STADIUM EMPLOYEE SURVEY

Stadiums A, E, and G administered surveys to their employees. The results should be viewed as "suggestive" given the limitations of the sampling -- employees were selected largely on the basis of convenience and no effort was made to obtain a representative sample. Unfortunately, there is no way to determine the extent to which the respondents are representative of all employees working at the three stadiums. On the other hand, the results are consistent across the stadiums. The consistency of findings from the surveys is an indication that the samples may be fairly representative. If the samples are biased, they would have to be biased in the same way at each stadium in order to produce such consistent results.

Employees' TEAM Training

Table 3 reports employee's experience with alcohol management training. The stadiums appear to have been successful in training large numbers of their employees. Specifically, 93% of the respondents in Stadiums A and G and 87% of those in Stadium E reported that they had received TEAM training. These percentages are particularly high given the large turnover among some staff.

Two other findings reflect the thoroughness of training. First, nearly all respondents reported that they had read their stadium's alcohol policies. Second, discussion of alcohol policies was not confined to the TEAM training sessions. The vast majority of employees reported that their supervisors discussed the implementation of alcohol policies.

Perhaps the most important finding is that nearly all surveyed employees agreed with their stadium's alcohol policies. Employees' attitudes and beliefs regarding alcohol policies are crucial to the effective implementation of TEAM. Without the full cooperation of staff, it is almost impossible for TEAM to have a significant impact on fans.

Employee Experiences with an Intoxicated Patron

Employees were asked if they ever "had to deal with a patron who had too much to drink?" Table 4 shows that roughly three quarters of the employees surveyed in each facility had to deal with such a patron.

TABLE 3
EMPLOYEE TRAINING

	A	STADIUM E	G
SAMPLE SIZE	82	62	126
RECEIVED TEAM TRAINING NO Yes	7 %	13%	. 7%
	93%	87%	93%
READ STADIUM'S ALCOHOL POLICIES: NO Yes	0% 100%	7% 93%	6% 94%
SUPERVISOR DISCUSSED ALCOHOL POLICIES: No Yes	4%	12%	6%
	96%	88%	94%
AGREEMENT WITH ALCOHOL POLICIES: No Yes	3%	3%	5%
	97%	.97%	95%

TABLE 4

EXPERIENCES OF STADIUM EMPLOYEES WHO HAVE DEALT WITH AN INTOXICATED PATRON

	A	STADIUM E	G
SAMPLE SIZE	82	62	126
Employees who had been confronted with an intoxicated patron	70%	7.9%	72%
Employees who had been confronted with an intoxicated patron (subsample size)	57	49	91
Had to seek guidance from supervisor: No Yes	49% 51%	70% 30%	65% 35%
Effective in deal- ing with problem: No Yes	28 988	6% 94%	4% 96%
Had to seek guidance from supervisor (subsample size)	29	15	32
Got good back-up from supervisor: No Yes	3% 97%	6% 94%	4% 96%

Table 4 also shows that almost all employees who dealt with an intoxicated patron felt they were effective in dealing with the problem. This finding is consistent with the hypothesis that TEAM training is effective in preparing employees to deal with intoxicated patrons.

Another finding reflects on management support of staff in implementing TEAM policies. An overwhelming majority of surveyed employees who sought help from their supervisor in handling intoxicated patrons stated that they received "good back-up."

RESULTS OF STADIUM FAN SURVEY

Fan surveys were administered at the same three facilities as the employee surveys. The cautionary note expressed with regard to the results of the employee surveys applies equally to those from the fan surveys -- the results should be viewed as "suggestive" given the limitations of the sampling.

Stadium Alcohol Policies

Large majorities of the fans surveyed at each facility claimed awareness of at least some alcohol policies at the stadium, with the percent who were aware ranging from 69% in Stadium G to 80% in Stadium A and 90% in Stadium E.

Table 5 shows that nearly 90% of surveyed fans who claimed awareness of stadium alcohol policies knew that bringing alcohol into the stadium was prohibited. Evidently, the guards posted at stadium gates, the searches for alcohol conducted by those guards, and other measures had an impact on fans.

Large percentages of surveyed fans knew that the facility stopped selling alcohol before the end of the game. Similarly large percentages indicated that no alcohol is sold to anyone under 21 years of age.

All three facilities have policies forbidding admission of intoxicated fans. However, as Table 5 shows, this policy apparently was not fully communicated to fans.

Other results shown in Table 5 reflect differing policies among the three facilities. For example, only Stadium A

TABLE 5 STADIUM POLICIES THAT FANS KNEW ABOUT

		÷	
		STADIUM	•
	A	E	G
SAMPLE SIZE	86	393	182
Fans who reported being aware of any stadium alcohol policies	80%	90%	69%
Fans aware of <u>any</u> stadium alcohol policies			
(subsample size):	n=69	n=352	n=126
Fans can't bring alcohol to games	84%	89%	88%
Stop selling alcohol after 7th inning	81%	94%	*
No alcohol sales to anyone under 21	87%	86%	**
No admittance to intoxicated fans	25%	34%	50%
Free non-alcoholic beverages for desig- nated drivers	49%	8%	8%
Call a cab if you want or need one	45%	24%	14%
Don't sell alcohol	38	3%	4%
Special room to sober up	18	18	2%
Free coffee	9%	58	6%

^{*} Stops selling alcohol after the 8th inning. ** Legal drinking age is 19.

offers free non-alcoholic beverages for designated drivers and also calls a cab for intoxicated patrons when necessary to prevent them from driving.

Another item, not shown in Table 5, asked fans if they were part of a group using a designated driver. A larger percentage (28%) of respondents surveyed at Stadium A, which advertised its designated driver program, reported being part of such a group compared to fans surveyed at Stadiums E and G (20% and 21%), which did not offer the program. The similarity of the percentages among all facilities may reflect the extent to which the concept of using designated drivers has become broadly known and accepted. Some fans used designated drivers without being reminded or asked by the facility.

Finally, three policies not in effect at any of the facilities were included on the fan survey. As shown at the bottom of Table 5, fans were largely able to distinguish between the nonexistent policies and the actual ones.

Changes in Purchases of Alcohol

Perhaps the most dramatic findings of the fan surveys involve reported drinking practices of fans who usually purchase mixed drinks, beer, or wine at the facility. As shown in Table 6, large percentages of fans who indicated that they usually drink alcohol at the facility reported decreasing their consumption of alcohol there. Furthermore, almost none of the surveyed fans who usually drink alcohol at the facility reported increasing their consumption of alcohol there.

It is not possible to determine from these surveys the extent to which the decreases in consumption of alcohol can be attributed to stadium alcohol policies and how much simply reflects changes in society at large. Nevertheless, the evidence points to a reduction in alcohol consumption at these facilities.

TABLE 6

CHANGES IN DRINKING PRACTICES OF FANS
WHO USUALLY DRINK ALCOHOL AT THE FACILITY

	STADIUM				
CHANGES	A	E	G		
SAMPLE SIZE (Only fans who usually drink alcohol at		!			
the facility)	n=38	n=129	. n=80		
Decreased	47%	36%	33%		
Don't Drink*	5%	10%	1%		
Increased	3%	18	4%		
No Change	45%	53%	63%		

^{*} Reported on a previous item that they usually buy either "mixed drinks," "beer," or "wine" at the facility.

CONCLUSIONS AND RECOMMENDATIONS

CONCLUSIONS

Keeping in mind that this study has important limitations, the available evidence supports four broad conclusions:

- 1. TEAM was relatively easy to implement and was successfully adapted in the variety of settings represented in this study.
- 2. TEAM has been adopted in spirit and actively implemented in each of the seven study sites.
- 3. TEAM appears to have contributed to a decline in alcohol consumption and alcohol-related problem behavior among fans.
- 4. TEAM seems to have produced several general improvements in facilities, including positive changes in the environment that are likely to attract more families, and better relations among different categories of staff.

RECOMMENDATIONS

There is much continuing interest in evaluating the effectiveness of TEAM, both among facilities and organizations currently involved with the program as well as among prospective newcomers. Facilities clearly want to know the progress they are making in dealing with their alcohol problems. Fortunately, individual facilities can do much to monitor this progress by collecting on a regular basis such information as:

- o Survey data from employees;
- o Survey data from fans;
- o Records of problem incidents;
- Alcohol sales data; and
- o Food and non-alcoholic beverage sales data.

Such information can be tracked over time to assess TEAM's continuing impact on the facility, to identify problems, and to pinpoint areas for change.

In a broader sense, there is a need for more information on effective implementation and maintenance of TEAM. While this study has provided important details in these areas, this research was largely exploratory in nature. Future research should be designed to address the limitations of the present study and confirm its results. That is, efforts should be made to utilize comparison groups, to collect data which will permit pre- versus post-TEAM comparisons, to choose representative sites, and to collect more objective data (sales data, surveys, incident logs, observations, etc.) to complement anecdotal information.