

SUBSTANCES & SAFETY



DRUGS & ALCOHOL IN THE WORKPLACE



A D.I.N. PUBLICATION BY CHRISTINA DYE

THE PROBLEM

It's a serious problem in serious proportions.

From assembly line to executive suite, drug and alcohol use is now a fact of life in the American and Canadian workplace.

Some 6 million workers use drugs regularly on the job, according to the National Institute on Drug Abuse—a fact that speaks volumes of our failure to manage the problem.

It's an expensive fact, too.

The mishandled data entry here and the mislaid tool there add up. Estimates of accidents, absences, falling productivity, and rising insurance rates range up to \$100 billion each year.

Employees carry their share of the cost, too.

In a 1989 U.S. Postal Service study, drug-involved workers were found to miss more work (43 percent) and were more likely to be fired (40 percent) than non-using employees.

That's why we've developed this pamphlet: to point out the real dangers of drug and alcohol use on the job and to make some recommendations about where we should go from here.

Because the cost in dollars is staggering.

But in human terms—in accidents and injuries and wasted lives—it's simply unacceptable.

DEPRESSANTS

Drug use in the workplace usually keeps pace with substance use trends in other segments of society.

If a drug is used at all, it's used in the plant or office, and if it's a problem anywhere, it's a problem there.

So it shouldn't be surprising that drugs that depress, or slow down, the central nervous system often turn up on the job—sometimes with

Dose for dose, Valium is as dangerous on the road as alcohol.

disastrous consequences.

The depressant drug group includes alcohol, sleeping pills, and a galaxy of sedatives and tranquilizers, such as Valium™ and Ativan™.

Let's start with alcohol, since it's so widely used and since it offers such a clear example of how depressants affect performance.

Alcohol is a general central nervous system (CNS) depressant. It slows a variety of brain functions, from breathing and heartbeat to thinking skills. Effects vary by amount consumed and by other factors, including age, sex, and body size.

Perceptual skills, such as vision and hearing, aren't affected—at least not at low doses and not at first.

But the brain's ability to coordinate mental and physical activities is reduced even with small amounts, making alcohol particularly dangerous on the job.

Other depressants produce similar effects in similar ways.

In even small doses, sleeping pills and tranquilizers slow brain activity and impair thinking and judgment. A study of Valium and driving linked the drug to problems in speed control and concentration, even at normal doses.

In fact, dose for dose, Valium proved as dangerous on the road as alcohol.



Other effects add other problems.

Depressant-drug breakdown products can remain in the body for hours or days after use, slowing coordination and concentration, and reducing reasoning powers.

And since all depressants can cause dependence, the drugs pose even more long-term risks to health and well-being.

STIMULANTS

The stimulant drug group includes chemicals that speed up the brain and central nervous system. Included here are cocaine, amphetamines, and over-the-counter diet pills and stay-awake tablets. Stimulants reduce appetite and cause increased feelings of energy and alertness.

A reason stimulants are widely used in the workplace is tied to the belief that the drugs

sharpen attention and improve performance. However, positive effects on performance are short-lived and involve only simple tasks.

On the other hand, the drugs trigger changes that cancel any benefits of an energy boost, including:

- tension, irritability, and aggressiveness
- fatigue and dizziness
- impaired concentration and judgment

Like alcohol, cocaine and stimulants can increase risk-taking, making use particularly perilous on the road or around machinery.

Since the chemicals also mask the effects of alcohol and other drugs, users may overestimate their ability to drive or perform other hazardous activities.

And also like the depressants, stimulants can produce long-term dependence—and long-term problems for performance.

MARIJUANA

Still the most widely-used illegal drug, marijuana is also one of the most-often used drugs in the workplace.

A main reason for pot's visibility on the job is its "invisibility" everywhere else: It produces a brief intoxication with few physical signs of use. Most smokers think they can function normally—and unnoticed—under the influence of pot. But new research indicates this just isn't so.

Even at low doses, marijuana slows reasoning skills. Complex tasks, particularly those involving calculation or problem solving, are most affected, but pot also disrupts concentration and short-term memory.

Other effects include:

- attention problems
- slowed reflexes and reaction time
- poor peripheral vision and difficulty judging speed and distance

Pot's intoxicating effects typically fade within 1-4 hours, but impaired thinking and performance can last longer.

In a 1987 study at Stanford University, pilots given marijuana continued to perform poorly up to 24 hours later, even though they were unable to detect the drug's "hangover" effects.

▶ HELPING: WHAT WORKS

How best to respond to substance abuse problems in the workplace?

Programs to reduce worksite chemical use come in all shapes and sizes. Which type works best depends on factors as individual as company size, severity of the problem, and management style. Among the most-used approaches:

■ **Urine Testing.** Despite the ballyhoo, only 3 percent of U.S. businesses tested workers for drugs in 1988, according to the Labor Department. Key problems: questions of accuracy and constitutionality, and the inability of tests to predict drug use on the job.

■ **Employee Assistance Programs.** Probably the best comprehensive approach to drug and alcohol abuse in the workplace, EAP's offer a range of services, from chemical dependency counseling and family services to treatment referrals and placement.

■ **Health Promotion Programs.** Quality-of-life services, from smoking cessation and stress management programs to nutrition and exercise counseling, seek to improve employee wellness overall, rather than limiting services to those with chemical problems.

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OTHER DRUGS

Other substances can pose other risks to worker safety and job performance.

A 1987 survey by the Bureau of National Affairs found that many managers blame legal drugs—prescription and over-the-counter medications—for on-the-job drug problems.

Common examples include cold and allergy remedies and antihistamines which cause drowsiness and slow reaction time.

Even caffeine, in large doses (in "stay awake" pills, diet aids, and coffee) can disrupt concentration and trigger nervousness.

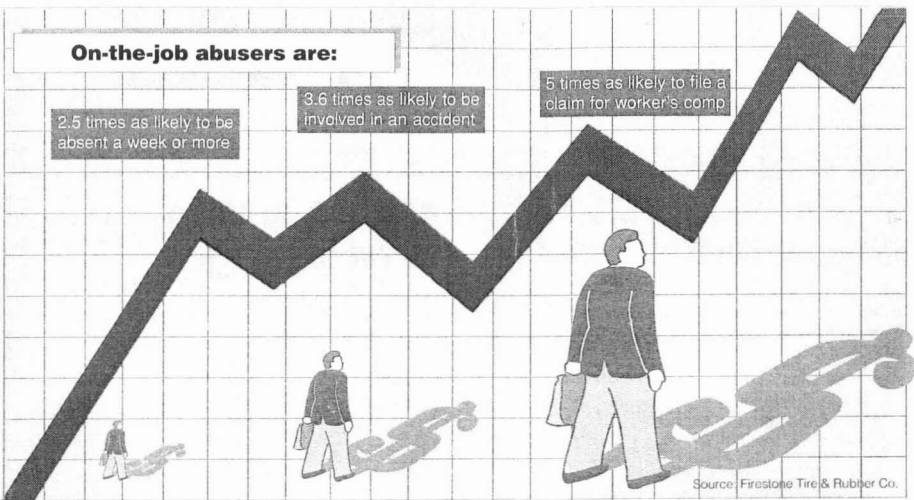
Smoking has been getting its share of attention lately, too, as more and more companies recognize it as a main cause of employee illness, accidents, and reduced productivity.

And they have numbers to back them up.

In fact, according to the BNA report, each smoker costs industry an average of \$300 in health care costs and accidents every year.

And industry studies show that smokers spend up to three hours a week in "smoking behaviors" (lighting, smoking, and handling cigarettes, emptying ashtrays, looking for matches, etc.), activities which distract from safety—and from the task at hand.

IMPAIRED WORKERS: THE COSTS ADD UP



The High Cost of Getting High on the Job: A recent study shows that chemically-impaired workers develop a number of health, safety, and performance problems.

RISKY BUSINESS

There are a dozen ways to deal with the problem of substance use in the workplace. But the best way is one that deals effectively with the *causes* of the problem.

On management's side, that includes quality-of-work issues such as alienation, boredom, and simple burn-out. On the employee's side, it comes down to plain old responsibility.

Workers need to remind themselves (or be reminded) of their duty to themselves, their co-workers, and their employers, not to work in an impaired state—*any* impaired state—whether caused by drugs, alcohol, sickness, or stress.

Employers, for their part, need to actively promote safety and sobriety in the workplace and provide services for impaired employees. Studies consistently show the success and cost-effectiveness of such programs. And common sense underscores the advantages of lower accident and absentee rates, decreased job turnover and training costs.

But to be effective, the changes need to come now. Because substance use is risky enough in the first place. In the workplace, it's a riskier business still.



Alcohol and Drug Programs
Ministry of Labour and Consumer Services
The Honourable Lyall Hanson, Minister

Need help with a problem? Or just more information? Call the confidential 24-hour TRY-line at 1-800-663-1441.

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