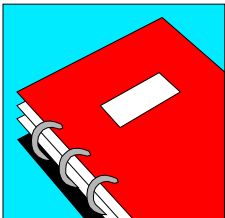


Substance Abuse in the Workplace

*Three Decades: Perspective
A New Century: Implications*

June 1, 1999



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Preface

1999 represents the 30th year that I have been involved with the subject of substance abuse in organizations. Throughout the years, what began as a very personal motivation became a professional career goal. Then it became an academic research goal, and now again, a personal and professional commitment. It started simply. While inside a large organization in 1969 and 1970, I was shocked to watch disciplinary action taken against young employees who were assigned boring, repetitive tasks. I struggled with why these young, intelligent employees would waste their minds by getting "stoned" every night, why they would report for work in highly important (although boring) positions unable to function effectively. I struggled equally with the inconsistencies in management practices. And I determined to work helping organizations manage employees in a way that would reduce the possibilities and effects of substance abuse.

After the 1986 study, one of the biggest changes to this research has been in the international area. In 1990, I was invited to participate in the 5th Annual European Employee Assistance Conference in Ireland. There was interest in how the U.S. has addressed substance abuse in the workplace versus how European communities were starting to attack the problem. Again in 1991, I was asked to deliver the opening address for the 6th European Employee Assistance Conference. During 1995 and 1996, I spent a significant amount of time working in South Africa and former Soviet Union countries, including Russia, Ukraine, Moldova, and Kazakhstan. While not in these countries to work directly in the area of substance abuse, I nonetheless had the opportunity to work closely with government and organizational leaders. I had the opportunity to teach and work alongside people from many different areas. The evidence of similarities to our workforce was obvious in many areas: working conditions in terms of how people were being treated and the implications for substance abuse in industry. The next decade needs to see serious effort focused on the substance abuse problem in emerging economies.

In the first studies, a major university provided significant funding for the project. For the 1986 and 1993 studies, the research has been supported by Human Resources Research, funded by Far Cliffs Consulting, because of a commitment to the continued development of this important data. For this project, Human Synergistics Incorporated provided significant support by supplying Organizational Culture Inventories as part of the survey. Their support made this project possible.

As in recent studies, my family, especially Erica, A.J. and Dan helped with the mailing. And, as these wonderful children get older, they help more and more with the data entry and processing of the information. A.J. became a significant partner in the production of the final report. As D.A.R.E. graduates they share a common caring about this issue that brings a fresh perspective to the analysis and presentation of these results.

*The report is dedicated to workers everywhere,
individuals who deserve to work in a drug-free workplace and
who deserve to work drug-free and enjoy the satisfaction of
productive employment and well-managed organization.*

JWS 6/1/99

Introduction

Over the years, the Human Resource profession has faced numerous challenges: economic, social, and organizational. Some of these have become crises – summoning fast and powerful responses that have been successful sometimes – failures other times. Hot new topics, the rage of consultants, articles, and product developers become standard policy, lists of advice, and a software program with all the answers. For some organizations, this level brings sophisticated commitment to minimizing or eliminating the problem. To others – too many it seems – the level of “problem maturity” seems to bring a complacency and acceptability of “tolerable losses.”

I see signs of this complacency and “tolerance of acceptable losses” in the results of this survey. The substance abuse problem gets no more – and no less attention than a myriad of other issues. And it’s tough to argue with that position. But the dilemma is not with the equal attention, given substance abuse versus..., say sexual harassment. The issue is that neither is getting enough attention, enough focus, enough resources.

There can be no acceptable level of sexual harassment, no acceptable level of bias, no acceptable level of substance abuse. Human resources must do everything it can, whatever it takes, to fight the problem to elimination – and then keep fighting.

Related to this issue of “tolerance & acceptability,” there is an issue of “integration versus isolation.” Talk to supervisors one day about sexual harassment, a week later about diversity, and a week later about substance abuse and you’re likely to have different perspectives on each issue. That’s OK. But they are equally likely to be three isolated presentations. The reality is that an organization’s success in dealing with any and all of these issues is related to some basic elements of organizational and management success.

A positive organizational culture will drive a successful substance abuse program – could even be a preventative factor. Strong management competencies, listening skills, giving clear information, and thinking clearly, will make it much easier to deal with diversity or sexual harassment or substance abuse – and will have an impact on prevention.

Fifteen, and even ten years ago, individuals would approach the issue of substance abuse with an “element of passion.” The passion might be “fear,” a real strong motivator twenty years ago, it might be “fight,” a good motivator in the 80’s move for a “drug-free workplace,” or it might be “reactionary” to the first incident of an employee stoned on a hallucinogen. Today almost every organization has adopted a 90’s “been there - done that” approach that puts diversity, sexual harassment, substance abuse, and other topics as programs that are simply part of Human Resources. Does this make a difference? No, in some companies. Yes, in most...

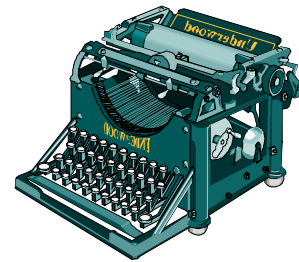
Substance abuse in organizations has become one of many organizational problems that are affecting productivity, costing organizations money - and costing individuals productive careers and lives. It is important to examine real organizational experiences, policies, and practices. Very few organizations have been able to escape the problem.

The results described in this study are based on 30 years of research. Surveys done at regular intervals in 1971, 1976, 1981, 1986, 1992 and 1998 have gathered data about organizations’ experience with substance abuse. Information about organization policies, procedures, and training efforts are examined. The report also contains a variety of typical situations involving substance abuse and testing. In these incidents, respondents provide insights into their management practices. This information is helpful to

any organization trying to define or improve its practices for dealing with employee substance abuse.

This report is organized into sections covering major findings, workplace drug use, history and background, policy and practice, management issues, trends, drug testing, and size issues. In addition, each major topic is divided into sections presenting the results of the survey, the interpretation of the results, and when appropriate, recommendations for action.

Most sections of this report contain a comparison of results to previous studies. In a few cases, because each study defined special issues that may not have been continued in later studies, original results from an earlier study are included. When this occurs, the sections are noted with the following “historical” icon:



Special Note

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Copies of the Major Findings section are also available from Human Resources Research and Far Cliffs Consulting.

Substance Abuse in the Workplace

1971 - 1999

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Major Findings

The last few years have had continued emphasis on positive management techniques and full employment. But with the positive news comes mixed results -- about substance abuse in the workplace. The sixth survey in a thirty year study of organizations reveals the following...

Workplace Substance Abuse Is Down - Maybe!

- 90% of organizations have had direct experience with employee substance abuse on the job. Experiences with alcohol remain steady, while experiences with cocaine, marijuana, heroin and barbiturates/amphetamines are down, some slightly, some dramatically.

The “Culture” of Organizations that Have Experienced Substance Abuse Is Different from the Culture Measured in “Excellent” Organizations and in Those that Have Stressed “Quality and Service.”

- In addition, the latest results support earlier research that showed organizations who have had less actual experience and those who believe that their experience is "less than 5 years ago" have scores significantly higher on positive management practices.

A Majority Feel the Substance Abuse Problem Is the Same or More Serious than Five Years Ago

- 81% of organizations feel that the alcohol and drug abuse problem within their own organizations is the same or more serious than it was five years ago. This is an increase, particularly in the “more serious” response from five years ago.

Testing Is the Favored Technique for Eliminating Drugs in the Work Force – Termination Follows Closely

- A significant movement, started ten years ago, toward testing and tougher penalties, particularly termination, continued and got stronger. Education remained in a distant fourth place as a strategy compared to the first place it held consistently until ten years ago.

Drug Testing Is Being Used in a Majority of Organizations

- 71% (up from 42% ten years ago - down slightly from five years ago) of the organizations are currently testing for drugs. Interestingly of those who don't test, very few are considering it while over half of those who didn't test five years ago were considering it.

Detection of Drug Use Is the Most Serious Problem for Most Organizations

- Detection of drug use has always been the most cited problem by the organizations in the data base. Determining the correct policy and obtaining accurate information continue to exchange second and third places recently – right now they're almost equal.

Respondents Feel the Drug Problem Will Get Worse in the Next Five Years

- 45% of the respondents feel the drug and alcohol problem will get worse in the next five years - a dramatic increase from only 20% five years ago. The optimism has disappeared, only 19% of the respondents, feel the problem will get better.

Policy and Procedure Are the Primary Focus of Most Training

- Respondents reported that 65% of organizational training efforts related to substance abuse focus on policy and procedure. But they believe this should be substantially less - with a much greater emphasis placed on education and prevention.

Reactions to Substance Abuse Are Quicker and Tougher

- While responses to specific incidents of substance abuse have changed dramatically over the years, some of the most significant changes in the responses have appeared in the last two surveys. Organizations responded again with quicker early referrals to employee assistance programs - followed by much quicker terminations. And there's a continued rise in terminations occurring on a first offense.

Recommendations

Throughout this report, a number of recommendations are made concerning drug use, policies, training, organizational culture, and management issues. The following are highlights of the major recommendations.

1. Organizations cannot afford to deal with substance abuse problems in a superficial, policy-driven fashion. It is a problem that is not going away, despite changes in experience. It is a problem that cuts across rules, policies, management practices, and organizational culture. Therefore, it is a problem that must be addressed from a strategic viewpoint that is consistent with broader strategic goals of the organization.
2. Based on the two most recent research projects conducted over the last ten years, there is ample evidence of link between substance abuse and management practices, and between substance abuse and organizational culture. Organizations today want to implement sweeping management initiatives, whether it is quality, customer service, teams, or re-engineering. Organizations will have to recognize that culture will have an impact on success. To the extent culture interacts with other factors to create substance abuse problems, it will have to address substance abuse issues from a broader perspective than "identify it, deal with it, and write it up".
3. Organizations must develop creative solutions to the problems of substance abuse and creative strategies for preventing substance abuse in the work force. This means new policies for intervention and treatment, new training programs, new programs for employee productivity and morale, and new programs for job and individual enrichment. An integrated (systems) approach that includes management style, organization culture, and employee assistance efforts must be considered. *(Note: this recommendation was first made as part of this research ten years ago -- it's been modified only slightly since then – I suspect it's going to continue to be made in the future.)*
4. Training is not the only element in an organization's effort to confront substance abuse. But its absence seriously hampers efforts for successful implementation of a policy or employee assistance programming. Organizations must increase training efforts. While most organizations recognize the importance of training, the emphasis it actually receives has declined.
5. There must be a more intense examination of the factors that might contribute to substance abuse in the workplace. The evidence on management strategies and organizational culture is too strong to ignore.

Workplace Drug Use

90% of the organizations responding to the survey reported that since 1992 they have had to deal directly with a workplace substance abuse problem. The question has always been worded very carefully. It asks specifically if the organization has had to "deal directly with." It makes a specific reference to "employee use on-the-job."

An ideal wellness program should address the total health of the employee, physically, psychologically, and emotionally. Drug and alcohol abuse, inside and outside working hours, continues to be the number one negative factor in each of these areas.

Employee Benefit News

The 90% response is down slightly from 1992 when 96% of the organizations reported actual incidents of substance abuse within their organizations. More significant drops were reported for specific drugs. While the decline is slight -- and could even be explained by the reality that it couldn't keep going higher -- the significance of the first overall decline in 30 years cannot be ignored. The original 1971 data base included only 36% of the organizations reporting actual incidents. In the 1976 survey it increased to 50%. In 1981, it had jumped dramatically to 82%, then to 95% in 1986. Table 1 provides the specific breakdown on the substances most commonly confronted. Chart 1 provides a comparison of the data with the results of the previous studies.

Table 1
Actual Contact With Drug Use/abuse

	1981	1986	1992	1998
Alcohol	82%	95%	96%	90%
Marijuana	55%	73%	80%	59%
Cocaine	21%	58%	66%	40%
Barbiturates/Amphetamines	41%	59%	44%	41%
Other Drugs	31%	55%	43%	24%
Heroin	21%	40%	31%	14%

Alcohol continues to lead with 90% of the organizations having to deal with an actual situation of substance use or misuse on-the-job. While all other drug categories dropped significantly, the decrease was most notable for marijuana, cocaine, and heroin.

Drug users are costing American businesses \$25 billion a year. And those figures will continue to rise. The primary reason for this huge profit drain is cocaine. There are five million workers who use cocaine regularly and more than two million of these people are addicted to it.

It's much more difficult to spot a cocaine user as opposed to, say, an alcohol abuser. The changes are subtler and cocaine has no tell-tale smell. Although cocaine is physically addictive, it doesn't have withdrawal symptoms. Addicts themselves remark about how little others on the job knew about their addiction.

Personnel Manager's Letter

Fully 40% of 100 companies surveyed by the Institute for a Drug-Free Workplace have had a worker convicted of selling drugs at work. In an earlier poll of over 1,000 employees, 32% knew of the illegal selling of drugs at work; 8% had been offered drugs on the job.

Wall Street Journal

Management's Perception of the Problem

The survey asked respondents to compare their experiences and perceptions of substance abuse on-the-job to the previous five year period. Table 2 and Charts 2 & 3 show the responses to these questions. Responses have changed significantly. After a significant jump in the “less serious” response in 1992, the latest results show a shift to more organizations feeling that the problem is the same or more serious.

In each previous survey, I've concluded that these results indicate a need for continuing educational efforts concerning the scope and seriousness of substance abuse problems. The conclusion has become repetitive. **And now, with information that companies tend to focus more on policy and procedure than education, there is still a need for further education on the scope and nature of the substance abuse problem in organizations. Not only do employees need to be educated on the danger of substance abuse on-the-job, supervisors and managers must be educated on the broader scope of the problem in organizations.**

As always, the problem is frequently reported as more serious in other organizations.

Table 2
Perception of Substance Abuse Problem - Seriousness

In Own Organizations					
	1976	1981	1986	1992	<i>1998</i>
Less Serious than 5 Years Ago	29%	15%	2%	23%	<i>19%</i>
Same as 5 Years Ago	51%	55%	43%	40%	<i>36%</i>
More Serious than 5 Years Ago	20%	30%	55%	37%	<i>45%</i>
In Other Organizations					
	1976	1981	1986	1992	<i>1998</i>
Less Serious than 5 Years Ago	26%	9%	2%	2%	<i>6%</i>
Same as 5 Years Ago	40%	43%	25%	48%	<i>38%</i>
More Serious than 5 Years Ago	34%	48%	73%	50%	<i>56%</i>

The survey asked respondents to identify the single factor which in their professional opinion explains their perception of the substance abuse problem in their own organizations.

1998	1998	1998	1998
19% felt the problem was less serious than five years ago.		45% of the respondents felt the problem was more serious than five years ago.	
<i>Testing</i>		<i>Increased stress</i>	
<i>Policy</i>		<i>Increase in positive test results</i>	
<i>Aging of the workforce</i>		<i>Poor quality of entry level workers</i>	
<i>Better communication and training</i>		<i>Cultural changes: availability and acceptance of drugs</i>	
1992	1992	1992	1992
23% felt the problem was less serious than five years ago.		37% of the respondents felt the problem was more serious than five years ago.	
<i>Massive layoffs of younger workers.</i>		<i>Higher rates of absenteeism</i>	
<i>Average age of workforce is 52+ years</i>		<i>Number of tests for cause</i>	
<i>Positive results under testing program</i>		<i>Increased use on company property</i>	
<i>Random testing - immediate terminations</i>		<i>New hires are younger</i>	

These comments provide some key insights. Changes in the work force appeared as significant comments for the first time in 1992. References to the "younger hires" and "massive layoffs of young workers" contributed to either increases or decreases in the minds of the respondents. And changes in organization policies toward clearer expectations for a "drug-free workforce" and less tolerance of substance abuse in the workforce emerged as major themes in the responses.

Perception versus Reality

In 1998, fewer organizations reported actual experience with workplace substance abuse – but the perception is that the problem is more serious than five years earlier. Can this be explained?

The participants' reasons for classifying the problem as "more" or "less" serious than five years ago presents another important dilemma professionally. Every time this survey has been conducted there has been support for both sides of the issue: "it's getting worse," "it's getting

better,” “it’s the same.” The percentages in each category have changed over the years – often providing some key indicators of how organizations are dealing with the problem. Equally interesting, however, has been the number of times that similar if not identical reasons are given on both sides of the argument. The dilemma gets more interesting when the responses are combined with national socio-economic factors. Survey data have been inconsistent lately: drug use is down, drug use is up.

However, even the surveys showing a downward trend have failed to show either a consistent downward trend nor a maintenance of a low level. So drug use continues, company policies get tougher, more companies test – where have all the users gone? To smaller companies? To organizations that so desperately need staff that testing programs have been suspended?

When you look at the responses to this and previous surveys, you get a sense that there is a lot of “problem-shifting” – the problem moves from one company to another. Although significant declines show up in some categories this time, clearly the problem is not going away.

Conclusions and Recommendations

Substance abuse on-the-job is something which every organization is likely to have already faced. The fact that most organizations admit the experience may be important - and perhaps the source of some danger.

The decline in certain types of workplace substance abuse incidents is encouraging. In 1992, I had expressed the hope that incidents would be down. I was disappointed that they weren't. Testing and stricter policies did not seem to have much effect on slowing a growing trend. But now, perhaps, the testing and tougher policies, i.e. faster terminations, are having an effect.

The perception of the drug problem as the same or more serious than five years ago is clearly disturbing. We are living in an era where we know more about management, more about dealing with employee problems, and more about the nature of alcohol and drug problems.

The substance abuse problem in organizations is - overall - better than it was five years ago. And it is a critical problem, one that is costing organizations untold amounts of money in lost productivity, sales, morale, damaged goods, and most importantly, the loss of employees.

I have already expressed the concern that substance abuse is becoming just another managed problem in the workplace. In the 60's, 70's, and to some extent during the early 80's, workplace substance abuse was labeled a crisis. Much was written about solutions -- organizations struggled to develop approaches that would allow them to deal with the problem. Now, however, it looks like substance abuse in the workplace has become just another problem - among many - that human resource managers must address. Professional journals are filled with ads for testing programs, laboratories, and treatment facilities. Testing programs, on the surface, appear to address the issue before it becomes a problem -- for the employer. But the individual already has the problem. Treatment, training programs, and all the evidence about policies, serve only to deal with the problem after it arises. **And yet, the data supports that none of these efforts are having any significant effect on reducing the problem. They are simply giving organizations the means to deal with it when it occurs.**

If the problem is the same or more serious than five years ago, my recommendations in the area of substance abuse on-the-job are simple. **All organizations must admit to the problem and take steps necessary to deal with the problem. No organization can afford to ignore the problem or deal with it in a superficial way.** The problem must be attacked with the reality that **failure to curb the increasing levels of substance abuse will prove damaging to the health of any organization, damaging to an organization's efforts to improve customer service, or quality.**

A second recommendation was introduced in the 1986 survey -- and it's been the key message of the work I've presented to the European EAP community. **Organizations must develop creative, broader solutions to the problems of substance abuse. They must examine the substance abuse problem - not as a separate "personnel" problem - but as one which is as much related to organizational success as quality and organizational culture. And it is much more integrated with issues like recruiting, training, compensation, and management**

than some individuals and organizations have been willing to admit.

The evidence on organizational culture continues to support these findings. We must not think that the solution is testing alone. Decisions on incidents have become quicker and tougher – whether or not this is something that affects the substance abuse issue in broader ways is another issue that must be explored in more depth.

History and Background

Organizations in 1999 face a variety of social, financial, economic, and cultural problems. Employee needs continue to change. Diversity, "rightsizing," new initiatives for disability accommodation, and AIDS have all contributed to expanded demands on human resource managers and employee assistance professionals. And just as the need for great response rises, human resource departments and employee assistance programs have been asked to share the burden of "reorganizations" - and to implement quality programs of their own to measure the effectiveness of their services. New problems with the plateaued employee, the aging of the work force, and continued efforts to end employment discrimination have placed a new emphasis on human resources management. Economic pressures from international competition and U.S. economic policy have forced many organizations into major cost-cutting programs. Alcohol and other drugs remain one of the major areas of all employee assistance programs.

Yet in the 1990's, cutbacks have begun to affect employee assistance programs. And changes in insurance coverage have contributed to changes in the way organizations are responding to substance abuse problems.

Management's response to alcohol and other workplace substance abuse has changed over the years. Management experts and the press have given new attention to the substance abuse problem in organizations. Values in society have continued to change. Government programs have been adjusted. And every available piece of information says that the substance abuse problem in organizations continues to affect organizational effectiveness.

New approaches, including a government "war on drugs" have been tried. In 1986, there was little optimism about the potential success of this program. While everyone in management applauded then President Reagan's initiative, many wondered whether or not a "drug free workforce" was possible. 61% of the 1986 respondents felt that a drug free workforce had less than a 30% chance of success. Only 11% felt that it had better than a 70% chance. Many respondents felt it would be impossible. No one felt it was a sure thing -- or even 90% sure.

The Terminology Problem

Throughout this report various terms are used to describe the problems of substance abuse within organizations. It might be easier on the reader if a single term, substance abuse, could be used throughout the report. It would be a correct term because substance abuse, by definition, includes the abuse of alcohol. However, society in general and organizational policies do not allow for this simplification. If this report used the term substance abuse throughout, it would be interpreted by some readers as being concerned only with illegal drugs. On the other hand, the use of the term alcohol and drugs can offend those knowledgeable in the field who indeed recognize that drug abuse includes alcoholism.

Because this debate cannot be solved within the context of this survey, terms will be used to clarify that alcoholism is considered a form of drug abuse. While this adds several words to the text it will serve to emphasize that alcoholism is indeed substance abuse. And it will continue the educational efforts to make this information widespread.

For the sake of emphasis and clarity, a variety of terms will be used. Essentially, they mean the **abuse of any substance, legal or non-legal**, including the abuse of alcohol.

Survey Data Base

In 1971, the first survey in this data base was completed using information submitted by firms in the Midwest. The 1976 study contained the original data base and was expanded to include more national organizations and a sample of smaller organizations. The 1981 study included the original data base, the smaller organizations, and new respondents representing international organizations and organizations hiring primarily high school and college age employees. The 1986 and 1992 studies used updated versions of the 1981 survey base. Corrections were made to the original data base to reflect company mergers, acquisitions, and closings. While many companies were kept in the database, the goal was to create more of a benchmark of Human Resource practices. Therefore, for the current database, substantial changes were made. While many of the same organizations were included in the survey mailing, surveys were only mailed to Senior Professionals in Human Resources, certified HR professionals as designated by the Human Resource Certification Institute and the Society for Human Resource Management. 1000 surveys were mailed and a response rate of slightly over 10% generated the data for this report.

Policy and Practice

Twenty-seven years ago, there was a concern about organizations having policies and whether the policies included drugs other than alcohol. Now the concern is more focused on the type of policy organizations have implemented.

In 1998, all organizations have written policies on alcohol and other drugs. In 1981, 44% of the organizations did not have a written policy. In 1976, 55% of the organizations had no written policy. 100% of the organizations now have policies which cover all substances. Table 3 and Chart 4 show the responses to these questions.

It is only morally, ethically, and legally right to tell an employee a company's behavioral and performance expectations. Communication to and understanding by the employee is the key.
Employee Benefit News

Progress continues. The educational efforts to get organizations to formulate written policies has continued to have an effect -- **and finally it's hit 100%**. Every organization needs a written policy to effectively deal with substance abuse. Organizations which have developed a clear cut written policy have reported greater ease in dealing with substance abuse problems when they occur. Now that all organizations report having a policy, it will be interesting to track whether or not just having a policy will help – implementation issues may always have been more important.

Table 3
Policies on Substance Abuse

	1971	1976	1981	1986	1992	1998
Written Policy (Drugs and Alcohol)	35%	36%	50%	72%	92%	100%
Written Policy (Alcohol Only)	45%	10%	6%	6%	2%	0%
No Policy	20%	55%	44%	22%	6%	0%
Alcohol at Business Functions						81%
Alcohol at Company Social Functions						77%
Alcohol during Work Hours						91%

Policy Statements

Organizations receiving the survey are asked to submit a copy of their policy statement. In 30 years this has resulted in a large collection of different organizational policies. Many of these policy statements reflect the organization's philosophy toward substance abuse as well as the procedural steps that the organization will take to deal with substance abuse on the job. Policies have changed dramatically over the last thirty years, reflecting the broader trends of the surveys in how organizations are dealing with the substance abuse issue. In the '70's, policies became focused on the EAP model, in the late 80's policies started becoming tougher and focusing more on testing, in the 90's the toughness continues. At the same time changes continue to take place, changes that often reflect the managerial philosophy of a particular organization.

The use of illegal drugs, abuse of other controlled substances, including alcohol, on or off duty, is inconsistent with law-abiding behavior expected of all citizens. Employees who use illegal drugs or abuse other controlled substances tend to be less productive, less reliable, and prone to greater absenteeism, resulting in the potential for increased cost, delay and risk in the Company's business. Ultimately they threaten the Company's competitiveness.

Although pre-employment and random testing of employees for substance abuse is not consistent with our style, such practices may be exercised by some of our customers. Employees assigned to the projects of such customers are expected to undergo the required testing. Failure to submit to a request to undergo testing will be considered the same as positive test result, with the appropriate corrective action resulting.

Some policy statements broadened their coverage, looking beyond the employees of the organization to the customer or community at large.

Furthermore, employees have the right to work in a drug-free environment and to work with persons free of the effects of drugs. Employees who abuse drugs and/or alcohol are a danger to themselves and to other employees. In addition, drug and/or alcohol abuse inflicts a terrible toll on the nation's productive resources and the health and well-being of American workers and their families.

The City is concerned about the effects of the abuse of controlled substances upon the health and safety of its employees. The City recognizes that substance abuse, on or off duty, leads to increased accidents, injuries, illnesses and medical claims and can lead to deterioration of employees' health and adversely affect their family lives. Employees who abuse controlled substances are not only a danger to themselves, but to their fellow employees and the public as well. Medical costs incurred by employees with substance abuse problems place an unacceptable financial burden on health and benefit programs to the detriment of the public and other employees. Decreased productivity and employee morale, increased absenteeism and turnover can adversely affect the City's ability to serve the public.

While it started showing up in policy statements several years ago, the policies submitted with this survey showed even more concern about the use of alcohol on company business and even on the employee's own time during meal breaks.

...employees who choose to consume alcoholic beverages while on Company business or at Company-sponsored events are expected to limit consumption to assure that their performance and judgment are not impaired. Failure to do so may lead to disciplinary action, up to and including termination of employment.

This prohibition also includes the consumption of alcohol during meal breaks. Even though the meal break is the employee's private time, the consumption of alcohol during that period would mean that the employee would return to work with a mood-altering substance in his/her system and, therefore, be in violation of this policy. The singular exception to this policy will be for Corporate and institution-sponsored events where permission for the consumption of alcohol will be explicitly approved by the Chief Executive Officer.

And many policies recognized the importance of creating a drug-free environment and the rights of employees to work in a drug-free environment.

Chart 5 shows that the call for a drug-free workplace is promoted in a variety of ways and most organizations use multiple techniques. One survey participant provided an example of how the goal of a drug-free workplace is promoted during orientation and through the use of a "contract" with employees. A sample of this organization's contract is reproduced on page 31.

Drug Free Workplace

Principle

The illegal use of drugs is a national problem that seriously affects every American. Drug use not only has an effect on individual users and their families, but also presents dangers in the workplace.

...has a drug testing policy to ensure the safety of our employees and our customers.

is responsible for...

- following the Drug Free Workplace Act of 1988 by initiating an awareness program to educate employees about:
 - the dangers of drug abuse.
 - available drug counseling and employee assistance programs.
 - the penalties that may be imposed for drug abuse violations.
 - the drug-free workplace policy.

You are responsible for...

- obeying the laws regarding the use of alcohol and other drugs.
- keeping your work environment safe and drug-free.
- supporting your co-workers in their efforts to live a drug-free lifestyle.
- setting a positive example of living healthy and drug-free at home and at work.

For this company, in the entertainment industry with large numbers of customers visiting daily, this contract is introduced during new employee orientation and “ceremoniously” signed by the organization and the new employee.

The Company is therefore committed to maintaining a safe and healthy workplace free from the influence of drugs and/or alcohol. In addition, the Company will vigorously comply with the requirements of the Drug-Free Workplace Act of 1988 and, to the extent it deems applicable, the special Drug-Free Work Force rules promulgated by the United States Department of Defense, as well as applicable Department of Transportation guidelines.

Because the Company believes that the interests of its network of companies, its consumers, and its employees are best served by ensuring that the workplace remains free from abuse of alcohol and drugs, it is our policy to maintain a drug and alcohol free environment. The sale, distribution, use, or possession of illegal drugs or controlled substances or paraphernalia associated with illegal drug use on companies' premises or while conducting company business is prohibited. Consumption of alcoholic beverages on a company's premises is prohibited. Using or being under the influence of intoxicating beverages, marijuana, hallucinogens, or other illegal drugs or narcotics on a company's premises, while conducting company business, or operating a company-owned vehicle will subject you to disciplinary action up to and including discharge.

Some policies took a very strong stand against substance abuse. One went as far as listing all of the state and federal penalties associated with illegal possession and use - with a detailed listing of minimum and maximum sentences. Procedures were often detailed in the policy.

Violation of this policy is grounds for corrective action, including discharge. Any employee who needs assistance in dealing with a personal problem involving alcohol and/or illegal substance abuse is encouraged to participate in the firm's Employee Assistance Program. It is vital that assistance be sought early, prior to the point of discipline or termination. Identification or admission of a substance abuse problem will not be acceptable as a reason for avoiding corrective action.

One policy clearly identified the role of the supervisor in maintaining a drug-free environment, making very clear the supervisor's responsibility of identifying problems - and for participating in training.

The City shall develop a program of training to assist management in identifying substance abuse among employees. Such training will be directed towards helping management to recognize the conduct and behavior giving rise to a reasonable suspicion of substance abuse, to identify employees who need counseling and employee assistance programs, and to be aware of those employees who pose an immediate safety threat.

The supervisor or manager has an obligation to all employees to maintain a stable and safe work force. Therefore, when an employee is suspected of being under the influence of alcohol or drugs, the supervisor or manager should apply the following guidelines to the situation.

Establish a private place where you (supervisor or manager) and another member of management can talk with the employee in question.

The zero-tolerance policy is clear in the policy statements of many organizations. Although not every organization clearly labels its policy “zero-tolerance.” But the movement toward zero-tolerance is gaining strength. It has become a well known concept and is appearing in professional journals as a specific topic. In the May, 1999 issue of *Workforce*, an article was headlined with:

Zero tolerance is all the rage. But dealing with workplace problems requires more than rhetoric. It's about crafting an effective policy and putting all the pieces in place to make it work.

The article goes on to make several key points that are relevant to the results of this research:

Two companies with the same policy might deal with a problem in radically different ways. Zero tolerance is a concept that sounds straightforward and simple, but is inherently complex.

It's easy to state that you have a zero tolerance policy; it's another thing to really think through what it means.

Some argue that a zero tolerance policy without any teeth is worse than no policy at all. Not only can such an approach cause employees to blatantly dismiss rules and regulations, it can drive such behavior underground.

Too often, companies spend hundreds of thousands of dollars to create a policy, but do nothing to enact it or ensure that the mechanisms are in place to make it work.

Problems Encountered with Policies

One of the most important concerns of management in trying to effectively develop an organization policy on substance abuse are the problems that are encountered. Organizations were asked which problems *seriously* hampered their efforts in implementing a program. Responses to this question for 1976, 1981, 1986, 1992, and 1998 are shown in Table 4. Chart 6 highlights the 1986, 1992, and 1998 results. Detection of drugs was the biggest problem in all surveys although it has dropped significantly in both 1992 and 1998 - apparently due to the increased use of drug testing. Getting management interested and obtaining accurate information rose in the 1981 and 1986 surveys and have now dropped dramatically as major issues. And, because the substance abuse problem is changing in so many ways, new problems have surfaced. While many organizations provided examples of statements which came from both the company and the union, unions were also cited as one of the major problems in putting a program in place. Another respondent cited "Getting management to view alcohol as a drug - not to be used during business development" as a major problem.

Table 4
Serious Problems in Program Development

(1 = Not a Serious Problem -- 10 = Serious Problem)

	1976	1981	1986	1992	1998
Detection of Use	5.7	7.0	5.9	5.1	5.7
Determining Correct Policy	3.3	1.7	4.0	4.0	3.1
Obtaining Accurate Information	3.7	4.0	4.9	3.0	3.2
Getting Management Interested	2.0	3.4	4.0	2.5	2.7
Facilities for Rehabilitation Programs	1.1	1.2	2.4	2.5	2.2
Getting a Good Counselor	1.1	1.3	2.1	2.2	2.2
Conflicting Opinions on Medical Effects	2.2	1.3	2.8	1.9	1.5

Management Incidents

In the next major section of the survey, respondents were given a set of situations involving different substances. The situations are very short and provide only basic information. In each case, respondents were instructed to identify the action they would take in accordance with their organization's policies and/or their freedom to deal with such problems.

You have just been informed that a significant loss (\$, time, etc.) has occurred because of an employee's inability to perform his/her job. The inability is caused by the employee being under the influence of..

*Marijuana
Alcohol
Cocaine/Crack*

You have just been notified that an employee is under the influence of some drug, however no direct loss has been suffered. What would your reaction be?

*Marijuana
Alcohol
Cocaine/Crack*

Tables 5 and 6 and Charts 7 - 10 provide the responses from the 1986, 1992 and 1998 survey results. In the case of a significant loss, the most common response was to refer the person to an employee assistance program. In the 1986 results, termination after the second offense increased by at least 20% in some categories, followed by another 15 - 20% increase in 1992, and another 5% in 1998.

The responses to these incidents show that management's reaction to these incidents has changed over the years. Policies are clearly less geared to treatment through employee assistance programs or outside referrals than in earlier studies. From 1981 to 1986, there was a drop in terminations for both the first and second offense. In 1992, there was a significant increase in terminations for both the first and second offense. Particularly when a significant loss is involved, the respondents terminated 80 - 85% of the employees on either the first or second offense. This increase in toughness has continued with the latest results.

Table 5
Management Incidents - Significant Loss

You have just been informed that a significant loss (\$, time, etc.) has occurred because of an employee's inability to perform his/her job. The inability was caused by the employee being under the influence of...

	Ignore	Warn	Refer to Program	Terminate	Inform Police	Other
1998 Results	First Offense					
Marijuana	0%	33%	67%	35%	6%	10%
Alcohol	0%	39%	72%	28%	3%	11%
Cocaine	0%	31%	66%	38%	6%	10%
1998 Results	Second Offense					
Marijuana	0%	2%	10%	78%	5%	3%
Alcohol	0%	4%	16%	76%	2%	4%
Cocaine	0%	2%	10%	77%	5%	3%
1992 Results	First Offense					
Marijuana	0%	43%	78%	29%	8%	16%
Alcohol	0%	49%	84%	22%	8%	16%
Cocaine	0%	41%	76%	33%	14%	16%
1992 Results	Second Offense					
Marijuana	0%	17%	37%	76%	4%	2%
Alcohol	0%	21%	43%	70%	2%	6%
Cocaine	0%	18%	36%	76%	11%	2%
1986 Results	First Offense					
Marijuana	0%	47%	74%	24%	9%	5%
Alcohol	0%	53%	82%	16%	4%	6%
Cocaine	0%	44%	78%	24%	11%	6%
1986 Results	Second Offense					
Marijuana	0%	18%	55%	55%	8%	12%
Alcohol	0%	20%	56%	56%	4%	12%
Cocaine	0%	20%	53%	59%	8%	12%

Table 6
Management Incidents - No Direct Loss

You have just been notified that an employee is under the influence of some drug, however no direct loss has been suffered. What would your reaction be?

	Ignore	Warn	Refer to Program	Terminate	Inform Police	Other
1998 Results	First Offense					
Marijuana	0%	45%	68%	18%	2%	15%
Alcohol	0%	48%	69%	13%	1%	16%
Cocaine	0%	42%	65%	20%	3%	15%
1998 Results	Second Offense					
Marijuana	0%	5%	18%	74%	3%	3%
Alcohol	0%	7%	25%	71%	1%	4%
Cocaine	0%	5%	18%	73%	3%	3%
1992 Results	First Offense					
Marijuana	0%	48%	85%	8%	2%	15%
Alcohol	0%	50%	85%	6%	2%	15%
Cocaine	0%	44%	85%	10%	8%	15%
1992 Results	Second Offense					
Marijuana	0%	17%	43%	68%	2%	2%
Alcohol	0%	19%	47%	64%	0%	4%
Cocaine	0%	17%	38%	70%	6%	2%
1986 Results	First Offense					
Marijuana	4%	44%	72%	13%	6%	15%
Alcohol	4%	47%	76%	7%	4%	14%
Cocaine	4%	39%	74%	15%	6%	13%
1986 Results	Second Offense					
Marijuana	4%	15%	50%	42%	6%	19%
Alcohol	4%	17%	53%	42%	2%	19%
Cocaine	4%	16%	47%	45%	6%	20%



One Organization's Response

In every survey, there are usually one or two responses that stand out -- because of some additional detail to those questions that solicit comments. In the 1992 survey one response stood out because it clearly exemplified the movement toward firmer policies, tougher procedures, and a clear -- strongly stated -- opinion on the nature of the substance abuse problem.

The organization was medium-sized, between 500 - 2000 employees. It had actual experience dealing with most of the specific drugs listed in the survey. It had a written policy that covered both alcohol and other drugs. The responses to the management incidents were very revealing:

Incident #1

You have just been informed that a significant loss (\$, time, etc.) has occurred because of an employee's inability to perform his/her job. The inability was caused by the employee being under the influence of... (Marijuana, Alcohol, or Cocaine/Crack)

The organization's response to this incident was clear: "terminate for the first offense." This was clearly emphasized by checking "terminate" for the second offense, but adding the comment: "There will be no second offense."

Incident #2

You have just been notified that an employee is under the influence of some drug, however no direct loss has been suffered. What would your reaction be? (Marijuana, Alcohol, Cocaine/Crack)

For this "no direct loss" incident, the organization's position was slightly different. In this case, the first offense merited a "refer to the EAP" and the second offense was clearly a "terminate."

And while this respondent felt, even with the strong stand taken in this organization, that the substance abuse problem in the workplace "would get worse" in the next five years, the comment provided made it very clear how this response fit it.

*Drugs will become more accessible and probably cheaper. Unless the law and employers get real tough, it will get worse. **But, it won't get worse in my workplace. It will get better here.** (Emphasis added)*

Conclusions and Recommendations

The number of organizations which now have written policies is one sign of progress - but the changing tone of the policies is a question that might be debated. Most organizations seem to have a written policy, which is necessary. The problem is too complex to leave it to any type of informal policy.

There is a continued emphasis on policy and procedural approaches to the substance abuse problem. It is definitely appropriate for some organizations to have very strict policies. Some justifiably terminate an employee on a first incident of substance use. But right now, **organizations are only part of the cause and they are only part of the solution.** When an organization hires large numbers of individuals who have come out of school systems and families where alcohol and drug use are allowed, organizations cannot be expected to solve the problem overnight. As one respondent in the survey said, drugs are society's problem.

In the last few years there has been an increase in the number and type of educational resources available in the area of substance abuse. New training programs and videos have been appearing regularly. **But the topic of "training and substance abuse" has received very little attention.** Very few of the latest training technologies, for example simulations or computer based materials, are available. **New training materials are necessary to prepare supervisors and managers for dealing effectively with substance abuse problems.**

Organizations must develop creative strategies for preventing substance abuse in the work force. This means new policies for intervention and treatment, new training programs, new programs for employee productivity and morale, and new programs for job and individual enrichment. An integrated approach that includes management style, organization culture, and employee assistance efforts must be considered.

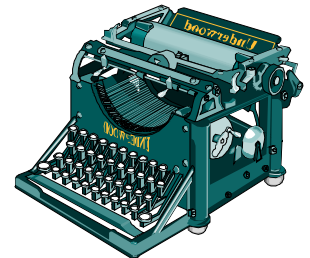
Management Issues

The problems of workplace substance abuse are going to have to be fought with as many resources as possible. Organizations face a difficult task, working to deal with the many factors of earlier decisions, outside influences, and their own organizational culture and management practices. What organizations do must coordinate and add to what societies in general do to combat the drug problem. Employee Assistance Programs must take a strong, proactive stance - a leadership role - in these efforts. The leadership role will involve establishing the vision, getting the support of people throughout the organization, and working toward strategies that will have a clear impact on results for the organization.

Our research has always included an interest in the relationship between drug abuse experience and management practices. Not just limited to policies, one of the first issues became the link between policy and practice.

In this section, we will start by re-introducing two pieces of research from previous surveys, research that was not included in this survey, and a policy/practice discussion that has been explored in other presentations. These segments are:

- **Consistency with Policy and Practice**
- **Substance Abuse and Management “Excellence”**
- **Substance Abuse and Education/Training**



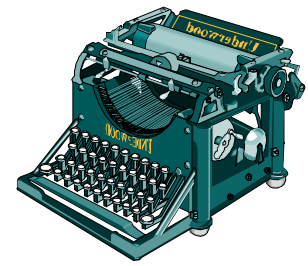
Then we will examine an area that has been in the survey since 1988:

- **Training for Substance Abuse: Is/Should Be**

And finally, we will examine two new areas of the research:

- **Management Strategies and Substance Abuse**
- **Organizational Culture and Substance Abuse**

Consistency



As early as 1976, this research identified a problem that many organizations failed to recognize. Years later, the problem still exists and, in fact, becomes a very difficult paradox for many organizations. The following paragraphs contain an examination of this issue – first published in 1976.

Most organizations formulate policy putting together the basic elements of concern, treatment, and responsibility for both the employee and the organization. The policy promotes and provides for referral to an employee assistance program for an employee struggling with a substance abuse problem. By itself, it is a policy which all organizations could adopt. However, there is something that organizations have often overlooked when they have formulated substance abuse policies. There has been a significant failure to properly coordinate substance abuse policies with other policies and rules within an organization. Some of the organizations with a policy based on these points have work rules. They state that an employee found in possession of, or under the influence of any drug is subject to immediate dismissal. These offenses are grouped with others as the most serious in an organization.

There is nothing wrong with establishing organization rules which allow for immediate dismissal for certain incidents. A progressive disciplinary approach provides for classification of offenses so all cases are handled fairly. *This differentiation makes substance abuse when admitted voluntarily a disease covered by medical and health insurance. But it is an offense punishable by immediate dismissal when discovered by the firm.* This is effective for neither the organization nor the individual. It may in fact destroy both the intent and the success of the policy itself. A major stumbling block in the treatment of alcoholism and other substance abuse is getting the employee to admit to the problem. With these inconsistencies between policy and work rules, it is little wonder that organizations report little progress. Employees are being fired for first incidents of alcoholism and other substance abuse.

But organizations can easily remove this stumbling block to success. Change drug possession or influence from a disciplinary action which calls for immediate dismissal to a less serious action for a first offense. This would then provide the opportunity for the employee to enter the treatment system of the organization. And it still provides the organization with the right to dismiss the employee if he is unwilling to accept the treatment offered. The policy would then be consistent with the rules of the organization. And a more coordinated effort would be possible in facing the problems of substance abuse.

Retrospective Commentary

The issue is no longer as clear – or simple as it was in 1976. At that time, organizations did not have policies anywhere near as quick and tough as the policies they have today. And there was a general trend to implement EAP's, change the philosophy of treatment for the drug user, and in principle at least, provide the employee with an opportunity to hold on to his or her job.

In 1999, as this research has clearly documented, reactions to workplace incidents of substance abuse have gotten tougher and faster. Terminations for first offenses have risen dramatically since 1976 – terminations for second offenses have almost become automatic. Organizations are dealing with substance abuse in the workplace with a testing-based, tough-minded management style. Zero tolerance policies have become common if not consistent.

Work rules, efforts promoting a drug-free workplace, the dramatic rise of pre-employment drug testing have all contributed to a very different workplace environment. EAP's have struggled to maintain their role in many organizations – even if you consider the changes in insurance and funding for many EAP efforts.

In 1976, I often recommended the changes above to make work rules consistent with an EAP policy. From the standpoint of employee support, it makes for a strong argument. But in today's competitive environment, the argument supporting a tough, drug-free workplace is a powerful argument. The employee right to work in a drug-free, safe workplace exceeds the rights of an individual using drugs.

The paradox created by these positions is only complicated by the need for supervisors and managers to be able to focus on performance – not drugs.

Another Organization's Response

In the overall scenario of quicker and tougher reactions documented by this research, one organization's policy managed to achieve the consistency of an EAP policy and the toughness of a "last chance" In this organization, an employee determined to be under the influence is provided a "Return to Work Contract" and a "Last Chance Agreement."

Return to Work Contract Letter

The company has assisted many employees with various chemical dependencies. In return the company expects from you:

- To follow the direction of your Employee Assistance Counselor
- To perform your job function as outlined by your superiors
- To follow Company policy as outlined in our employee handbook
- To be subject to random drug testing with no warning

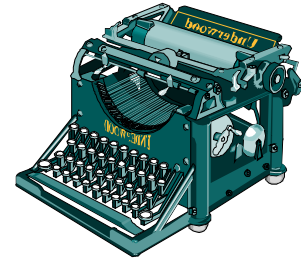
You are placed on formal probation for a period of six months. As a result of this action, you may not participate in the job posting program for a period of one year from the date of this letter, and your bonus, if one is awarded this year, will be reduced by one half.

Failure to comply with any of the above conditions will result in immediate termination.

Last Chance Agreement

1. Must successfully pass a drug screen before he/she can return to work in any position.
2. Must agree to establish contact with EAP and maintain such contact until it is indicated by the EAP that further contacts are unnecessary.
3. Must sign all necessary release forms for transmitting information within the treatment team.
4. Must follow all recommendations of the treatment team.
5. Must agree to submit to periodic unannounced drug/alcohol screens to occur at employer's discretion for the next year.
6. Must agree to make a sincere effort to recover from chemical abuse and successfully complete drug/alcohol rehabilitation treatment.
7. Agree that participation in a treatment program is not in lieu of disciplinary procedures and nor preferential treatment will be given to you.
8. Understand that it is against company policy to bring controlled substances or alcohol on the company premises or to report to work under the influence of a controlled substance or alcohol. Further incidents of this nature, including subsequent positive drug and/or alcohol test, will result in discharge.
9. Upon the next occurrence of your inability to perform your job duties at an acceptable level, including reporting to work under the influence and/or excessive absenteeism, your employment will be terminated.
10. Failure to immediately report and supply a drug/alcohol test specimen or tampering with the test specimen, as well as failure to cooperate with medical/laboratory staff who administer the drug test will result in termination.
11. Failure to comply with the Last Chance Agreement and the company's substance abuse policies, or the intent of these documents will result in termination.

Substance Abuse and Management Excellence



In his 1988 publication, *Thriving on Chaos*, management guru Tom Peters laid out prescriptions for well-managed companies in the 90's. While he hasn't said much about drug abuse in organizations, he's made some powerful, direct statements:

The best tool for recognizing drug problems remains the eyeballs of concerned and in-touch supervisors and peers. Use these, and then provide counseling and help as needed...

***Tom Peters, "Drug Testing Kills Productivity"
On Achieving Excellence***

With the permission of The Tom Peters Group, the 1992 Substance Abuse Survey included selected questions from The Excellence Audit, a computer-based survey tool based on excellence principles. In an additional exploration of the topic, the survey wanted to continue the study of the issues related to performance and substance abuse. Twenty questions, like the following, were included in the survey.

Leadership -- at all levels -- practice management by wandering around. Being stuck in the office is a "no-no" in our company.

To what extent is your company doing this?

Little extent 1 2 3 4 5 Great extent

In twelve of twenty questions from The Excellence Audit, a positive relationship existed between a perception of "less of a problem" or to lack of actual experience in the last five years. Table 7 and Charts 11 - 12 highlight these results.

Table 7
Excellence Factors with Experience and Perception

Excellence Factors from "Thriving on Chaos"	Problem Is Less Serious	Less Direct Experience
<p>We make it a point to insure that individuals and teams are recognized for their contributions and involved in decisions.</p>	<p align="center">■</p>	
<p>Skill development for everyone is an obsession here.</p>	<p align="center">■</p>	
<p>Around here, we see the role of middle manager as one of the facilitator and "functional boundary smasher."</p>	<p align="center">■</p>	
<p>Middle management's prime job is to support self-managing teams -- that is, to make sure the teams are well-trained and equipped.</p>	<p align="center">■</p>	
<p>We pay constant attention to housekeeping; spotless offices, plants, stores, distribution centers; clean restrooms, etc.</p>		<p align="center">□</p>
<p>We seriously seek to "dehumble" the entire organizations. That means getting rid of policies and practices which demean.</p>	<p align="center">■</p>	
<p>We strongly believe in leadership by examples. Top leaders consciously strive to live our vision and values in all actions.</p>		<p align="center">□</p>
<p>Leadership -- at all levels -- practice management by wandering around. Being stuck in the office is a "no-no" in our company.</p>	<p align="center">■</p>	<p align="center">□</p>
<p>We insist that top managers participate in a large share of our training programs, especially programs for front-line people.</p>		<p align="center">□</p>
<p>Managers -- at all levels -- practice "listening by wandering around."</p>	<p align="center">■</p>	<p align="center">□</p>
<p>Our managers set high standards, which they live, transmit, and uniformly demand.</p>	<p align="center">■</p>	<p align="center">□</p>
<p>Our managers have "let go" of authority in a way that inspires employees to take true and vigorous responsibility.</p>	<p align="center">■</p>	

Education/Training

Overall, more than two-thirds of all organizations say they have formal policies regarding substance abuse, but only about one-quarter conduct or sponsor training programs on identifying or dealing with substance abusers in their work forces.

Dale Feuer, "Workplace Issues," Training

The topic of "training and substance abuse" has received very little attention. New training materials are necessary to prepare supervisors and managers for dealing effectively with substance abuse problems.

Jim Schreier, "Substance Abuse in Organizations, 1971 - 1986, Realities, Trends, Reactions"

Training is not the only element in an organization's effort to confront substance abuse. But its absence seriously hampers efforts for successful implementation of a policy or employee assistance programming. Organizations must increase training efforts. And there is a corresponding need for new training materials for substance abuse programs.

Drug education and training programs have proven to be extremely valuable and effective considering the percentage of America's workforce faced, daily, with the opportunity to use and abuse controlled substances.

Employee Benefit News

Organizations are not going to combat the problems of substance abuse effectively unless they take a broad, integrated approach. Organizations that have avoided (or successfully decreased) problems of substance abuse have done so with policy, organizational culture, qualified supervisory and management personnel, and training on both substance abuse and management issues. .

65% of the responding organizations have formal employee assistance programs. Only 26.7% provide training related to employee use of alcohol or other substances.

The majority of training conducted focuses on policy and procedures with the least training focused on confronting/counseling and legal issues.

Training programs on substance abuse are not integrated well with other management training efforts. Nor are examples of substance abuse problems common in regular management training activities.

The Focus of Substance Abuse Training

Both the 1988 Training survey and the surveys conducted in 1992 and 1998 sought the opinion of respondents on what the focus of their programs was versus what they thought it should be.

Respondents identified company policy/procedure as the number one role of current training efforts, followed by education/information and prevention. However, they identified education/information as the number one role that substance abuse training should take. This was followed by a much greater role for prevention and a significantly smaller role for company policy/procedure. Table 8 and Chart 13 summarize the responses to this question.

Table 8
Role of Training for Substance Abuse

What It Is				What It Should Be		
1988	1992	1998		1988	1992	1998
34%	22%	23%	Education/Information	39%	36%	38%
19%	20%	22%	Prevention	31%	33%	29%
47%	58%	65%	Company Policy/Procedures	30%	31%	33%

Attitudes Toward Substance Abuse Training

Is substance abuse as a training topic going to be the saving factor in the "war against substance abuse?" Or is it poor substitute for tougher policies and testing programs? Or is it really dealing with issues of employee development and change? These are tough questions and even tougher for training professionals to answer. But these questions, and others, were asked in the final section of the special 1988 survey. A majority of respondents felt that:

Substance abuse training can make a valuable contribution to effective management.

Very often the people who need training aren't taking part.

Substance abuse training is not about methods; it is about changing and learning to cope with change.

The question is: With so much clarity on "what should be," why isn't it?

Management Strategies

The 1990's have been a golden era of management theories, gurus, and initiatives. From quality to excellence, to change, to teams, to re-engineering, many different strategies have been developed and implemented to make organizations successful. The efforts have been debated, modified, dropped, and re-invented. Do any of these strategies have an effect on the substance abuse issue? Have any organizations successfully implementing some of these initiatives experienced effects on their incidence of substance abuse?

These are questions that have gone to the heart of this research in recent years, exploring not just the policies and practices of organizations, but the relationships between the many variables and management practices. In this survey, the issue of organizational culture was included. In addition, the survey set out to collect some information about relationships between management strategies and substance abuse in the workplace. Four of the thirteen strategies scored in the top five on all three factors measured: use, effect, and potential. Table 9 and Charts 14 & 15 report on these preliminary results.

Table 9
Management Strategies and Substance Abuse

Strategy	Use	Effect (1-5)	Potential (1-5)
Total Quality Management	.47	3.2	3.3
Self Directed Work Teams	.29	3.1	3.4
Increased Teamwork	.74	3.2	3.8
Re-engineering	.33	2.7	2.6
Employee Empowerment	.58	3.2	3.5
Change Management Strategies	.50	2.9	3.5
Performance Management	.59	3.3	3.8
Pre-employment Psychological Testing	.18	2.9	2.9
Diversity Training	.30	2.7	2.8
Conflict Management Programs	.44	3.2	3.4
Stress Management Training	.50	3.2	3.7
Zero-tolerance Drug Policies	.63	4.0	4.2
Fitness for Duty Examinations	.43	3.6	3.6

Organization Culture

Organization culture, the elusive and very popular topic of an organization's values and driving forces, is another key issue. To what extent does an organization's culture, its management practices, its policies and procedures, contribute to employee substance abuse? The debate can rage forever on whether particular types of substance abuse are hereditary, or a person's own decision, or caused by reactions to life events. But it is clear, in some cases, that organizations with unhealthy working conditions, or high stress jobs, are likely to experience more - and more serious - cases of substance abuse.

Organization culture, for purposes of this research, will be based on the concepts of culture measured by the Organizational Culture Inventory - published by Human Synergetics. This idea of culture, based on *behavioral norms*, describes the behaviors that all members understand are expected of them if they are to “fit in” and “survive” within their organizations.

As a component of culture, behavioral norms are shaped by the commonly shared assumptions, beliefs, and values of organizational members (consistent with an ideational view) and lead to the general patterns of work-related behaviors and attitudes that may be observed. These behavioral norms guide the way in which members approach their work and interact with one another. (Organizational Culture Inventory, Interpretation and Development Guide, Human Synergetics International)

The Organizational Culture Inventory focuses on the behavioral patterns that members believe are required to “fit in” or “meet expectations” within their organization. The twelve norms, shown on page 57, are organized into three general clusters that distinguish between Constructive, Passive/Defensive, and Aggressive/Defensive Cultures.

Constructive Cultures, in which members are encouraged to interact with people and approach tasks in ways that will help them to meet their higher-order satisfaction needs (includes Achievement, Self-Actualizing, Humanistic-Encouraging, and Affiliative norms).

Passive/Defensive Cultures, in which members believe they must interact with people in ways that will not threaten their own security (includes Approval, Conventional, Dependent, and Avoidance norms).

Aggressive/Defensive Cultures, in which members are expected to approach tasks in forceful ways to protect their status and security (includes Oppositional, Power, Competitive, and Perfectionistic norms). (Organizational Culture Inventory, Interpretation and Development Guide, Human Synergetics International)

The use of the Organizational Culture Inventory as a component in the research on substance abuse in the workplace was prompted by a number of factors. First of all, since early in the 1990's, work with organizational culture has become an important part of our consulting activity. We have conducted organizational culture audits for both profit and non-profit organizations in manufacturing, health care, entertainment, hospitality, health/fitness, and religious charities. Second, in the 1992 research, we explored the relationship between workplace substance abuse and the principles from *In Search of Excellence* (discussed earlier). Third, research using the Organizational Culture Inventory showed that a clear relationship existed between culture factors and excellent organizations. The preliminary research of this project was a natural direction to continue exploring the relationship between workplace substance abuse and organizational issues.

On pages 60 and 61, Charts 16 - 19 show the Organizational Culture profile for organizations based on their experiences with workplace substance abuse. The first two charts compare these results with the profile of organizations which scored high on the original characteristics of excellence as measured by Tom Peters and Bob Waterman. The second set of charts shows the relationship between the results of organizations with “drug use experience” and independent measures of quality and service. In both cases, the results are clear: distinctive differences between the constructive styles and both the passive/defensive and aggressive/defensive styles.

This very preliminary examination shows a broad but very clear difference in organizational culture profiles. The preliminary results of this investigation show a culture of strong approval, avoidance, and conventional styles, all of which have been shown independently to have a negative impact on quality and service. On the positive side, scores are below average on all dimensions, most notably on achievement and self-actualization.

In this preliminary examination of culture, an exploration of very broad trends was designed. Ultimately much more detailed profiling would need to be researched. There are difficulties. Most organizations have experienced some incidence of workplace substance abuse. This research has not attempted to get to more detailed information – much of which is difficult if not impossible to obtain. But granting the preliminary nature of this research, the questions appear very clear:

- ***Is there a relationship between workplace substance abuse and an organization that emphasizes “avoiding conflict” or “hoping that problems that will take care of themselves” (Avoidance norms)?***
- ***Is there a relationship between workplace substance abuse and organization that does not “accept and share responsibility” or “believes that individual effort is important” (Achievement norms)?***

Pro-Active Role

Substance abuse in organizations is no longer a human resource problem that can be tucked away with the personnel department, or the employee health program, or the employee assistance program. The issues of productivity, participation, and excellence are being discussed at the highest levels of organizational strategic planning and management.

Organizations are making daily decisions about drug testing, management training, and changes in organizational culture. In some cases these changes are being made without the input of employee assistance experts. Similarly EAP professionals may be lacking the comprehensive level of competency the HR field or Organizational Development fields possess. The fields do not exist in the vacuum as shown in Charts 20 - 23. Perhaps there is some overlap with the EAP field and more importantly, there should be a much strong overlap with EAP, HR, and Organizational Development.

But the reality of today is that the level of mutual vision, the consistency in strategies, is often overlooked. The new testing program, the new supervisory training program, or the new two year plan to change the organization's culture, is introduced. And some employee assistance programs find themselves lacking input into areas that might significantly affect organization or EAP philosophies and ways of operating. The result is minimal success – if any – and much less success than might be possible if there were greater cooperation.

Trends

The problems, solutions, and organization programs dealing with substance abuse are subject to rapidly changing social and legal forces. John Naisbitt, who provides all organization leaders with insight into the future with "Megatrends" and other publications about the future, also gives insight into the future for substance abuse. Naisbitt tells us "the nature of work is changing -- and neither employers nor employees will ever be the same."

James Champy, in "Reengineering Management" says that "Everyone must change. The change will go deeper than technique. It touches not merely what managers do, but who they are. Not just their sense of the task, but their sense of themselves. Not just what they know, but how they think. Not just their way of seeing the world, but their way of living in the world."

Managers know that work is changing -- that the values of employees change regularly as new generations arrive in the work force. Several respondents to this survey commented about the factors that have caused the substance abuse problem to be worse now than it was five years ago.

In light of predictions and concerns, survey participants were asked to respond to a variety of questions about trends and opinions on substance abuse issues.

General Approaches

The survey identified eight general alternatives as approaches that could be taken in eliminating drugs from organizations. Respondents were asked to rate the seven alternatives based on the order they would have impact on the problem. Table 10 and Chart 24 show the results of the ranking.

Table 10
General Approaches for Eliminating Drugs

(1 = Not Effective -- 5 = Very Effective)

	1986	1992	<i>1998</i>
Drug Testing	3.6	4.1	4.2
Termination	2.4	3.9	4.0
Treatment	3.5	3.6	3.3
Management/Supervisory Skills	N/A	3.6	3.5
Increased Discipline	2.7	3.5	3.1
Education	4.2	3.4	3.4
Increased Penalties	2.2	3.2	2.6
Management Style	2.5	3.0	3.2

The ranking for factors is consistent with the majority of approaches taken by organizations today -- and the popularity of drug testing. What is most interesting are the changes that have taken place over the last ten years – and from some of the data gathered in the first years of the survey.

The Future

According to the information provided by the respondents to this survey, the substance abuse problem in organizations is generally better now than it was five years ago. But the perception of the problem is both that it worse today that it was and that it is going to get worse in the next five years. Despite increased knowledge about the problem, more resources, and the widespread implementation of formal programs, the picture does not look optimistic. In 1981, the majority of survey respondents, 57%, felt that the problem would be the same or greater five years from then. They were right. In 1986, survey respondents took a more positive view, with 67% saying it would remain stable or get better. That didn't happen. In 1992, the optimism shifted slightly but overall it continued, with 76% saying there would be no change or things would get better. And this time, they were right. Now, in 1998, the optimism abruptly ended, 45%, up from 20% just five years earlier now feel that the problem will get worse in the next five years. Only 38% believe that the problem will remain stable or get better. The results are summarized in Table 11 and Chart 25.

It's this group, the teenagers of today, who will keep this problem of drugs in the workplace alive into the 1990's.

Personnel Manager's Letter

The most interesting thing about these findings is the continuing inconsistency between reported reality and the view of the future. It's rarely moved in the direction of the predictions. Maybe that's good news. Now that the optimism of a few years ago is gone, maybe there will be a bigger drop in five years. It is also important – I think – to note the large jump in “no opinion.” It appears that is consistent with the “normalization” of the drug problem issue discussed earlier.

Table 11
Substance Abuse Five Years From Now

	1981	1986	1992	1998
No Change	41%	14%	33%	19%
Will Get Worse	37%	30%	20%	45%
Will Get Better	16%	52%	43%	19%
No Opinion	6%	4%	4%	15%

19% thought that substance abuse in the workplace will get better in the next five years.

Change in law, more aggressive approaches in industry, society.

Because of internal program.

Drug screening will not allow them to cover up drug habit.

Drug testing used more widely.

Education and EAP will effectively intervene.

Better education, awareness and treatment/penalties.

Our pre-employment drug testing policy is only a few years old. Over time, we expect it to have an increasingly positive effect. In addition, society is becoming less tolerant of drunk drivers, etc.

Education on the effects of substance abuse in the workplace.

More education with uniform discipline for violations.

With increased focus on problems and less government interference in company's enforcement policy. Also, recognition of problems by peers in workplace.

43% thought that substance abuse in the workplace will get worse in the next five years.

You hear a lot more about it. Drugs & alcohol are more accessible.

The workplace cannot do it all - the problem must be addressed within family units, schools, educational institutions and community first.

Drugs will become more accessible and probably cheaper.

Unless the law and employers get real tough, it will get worse.

The drugs make the people think they can beat the system.

Worse because of manager and supervisor drug/alcohol use. Limited treatment success for cocaine.

Conclusions and Recommendations

In the 1986 study, there were a few results which I didn't believe represented the reality of the substance abuse problem in organizations. One of these was the large number of organizations who felt that the substance abuse problem in organizations was going to get better in the next five years. I believed then that "**The substance abuse problem in organizations may stabilize in the next five years, it may be the same, but it will not be better.**" And it appears from the results of that study that this skepticism was appropriate. In 1992, I again did not believe the optimism – although I wanted to believe the tougher approaches would have an effect. This time I was wrong and the incident rates dropped significantly in 1998. But now in 1998, the optimism has disappeared and I choose to believe the pessimism is justified. We'll find out soon. While a higher number of respondents feel the problem is less than five years ago, the actual experience of organizations showed continued increases in some areas. And much of the optimism of the last survey for the next five years has disappeared.

Many of the survey respondents attributed their feelings about the substance abuse problem getting better to the increased use of drug testing. And drug testing in the survey is now the top ranked approach which respondents say will have an impact on the problem.

Testing as an option for dealing with incidents, like accidents, is perfectly acceptable as part of an organization's strategy.

Continued emphasis must be given to education. The substance abuse problem in organizations will be solved by increased educational efforts, better management techniques, and improved treatment models. But the approach must be preventative in nature, not punitive. And **there must be a more intense examination of the factors in the workplace that might contribute to substance abuse in the workplace.** There are some clear links between workplace factors and stress -- it doesn't take much to suggest that the link may also exist between stress and substance abuse in the workplace. There won't be consistent improvements until we know more about these issues.

Drug Testing

It is clear from the issues and trends sections that testing is on the minds of most people involved in substance abuse efforts. Drug testing is also a special subject in itself, one that deserves special attention. Although it is becoming a part of the “substance abuse landscape in most organizations, it is still important to collect information on exactly who is testing, what types of testing are being done, how it is being done, and what types of policies and procedures are being developed for drug testing efforts.

Who's Testing -- Or Thinking About It – Or Thought About It

U. S. office workers favor mandatory drug testing in the workplace to a much greater extent than do workers in other countries. Survey findings indicated that almost three quarters of U.S. office workers favor mandatory pre-employment drug testing, while less than a majority favor this program in both Canada and the European Economic Community (EEC).

Personnel Journal

71% - up from 42% in 1986 and down only slightly from 78% in 1992 -- of the responding organizations are currently testing some employees for illegal substances. Only 9% of the remaining organizations are currently considering drug testing and 3% of the remaining organizations will implement drug testing within the next year. The results do not seem very surprising but there are, in fact, some interesting results here.

Testing for drugs appears to have “topped out” or peaked at about 70%+ with very few organizations in a decision-making or implementation mode. It looks like a little over 2/3's will test – something less than 1/3 will not. Table 12 and Chart 26 shows the current status of drug testing in responding organizations.

When the hospital asked employees to evaluate its own drug testing policy, it found that an incredible 98% said "yes" to testing. Workers were asked for their input and educated about the policy.

Personnel Forum

Table 12
Drug Testing Practices and Status

	1986		1992		1998	
Currently Testing	42%		78%		71%	
Not Currently Testing	58%		22%		29%	
Have Tested in the Past		9%		17%		2%
Not Being Considered at All		41%		33%		17%
Currently Being Considered		38%		42%		9%
Implement in the Next Year		9%		25%		3%

The subtle changes in testing practices were a surprise. Given the increase in organizations considering testing in 1992, the percentage of organizations actually testing should have risen again in 1998. Is there any evidence as to why the testing has apparently “topped out?”

It appears, based on a closer look at the results, that there is a strong relationship between the scope of an organization’s substance abuse problem and the organization’s testing policy. 100% of the organizations with a wide variety of substance abuse incidents – they have had to deal with most types of incidents on-the-job – test employees. Those organizations with a narrower range of experiences do not test at the same rate. Chart 27 shows the relationship between breadth of experience, experience with all types of incidents, versus testing policy.

Testing Policy

Some significant shifts occurred in organizational testing policies. Organizations that are currently testing for drugs were asked to identify their testing policy. Specifically they were asked to identify the types of testing situations that are being used. Table 13 and Chart 28 present the current practices of the responding organizations. The most significant shift occurred in the percentage of organizations no longer pre-screening all candidates and the corresponding shift in pre-hire screening of selected candidates. Incident-based testing, often after an on-the-job accident, is the most popular type of testing.

Table 13
Drug Testing Policies

	1986	1992	1998
Incident-Based Testing, i.e., After an Accident	72%	79%	68%
Pre-Hire Screening of All Candidates	69%	72%	31%
Pre-Hire Screening of Selected Candidates	28%	26%	39%
Random Testing of Selected Employees	10%	17%	31%
Random Testing of All Employees	3%	15%	15%

Drug use among workers in the Midwest is outpacing that among workers in California. Drug testing in the Midwest is turning up 9 percent positives, while tests at West Coast laboratories reported 7 percent positives.

SmithKline Beecham

Drug Testing Incidents

The final section of the drug testing section asked respondents what action they would take in three different situations. The first was a prospective employee who failed a drug test, the second was an existing employee who failed a drug test, and the third was an existing employee testing positive and denying any drug involvement.

In the case of a prospective employee passing all basic job selection criteria and failing a drug test, the majority of the respondents, 93% (up from 85% in 1992), would reject the applicant and communicate the reason. Only 6% would reject the candidate and not communicate the reason. These results are summarized in Table 14 and Chart 29.

Table 14
Prospective Employee Fails Drug Test

If a prospective employee has passed all basic job selection criteria, and fails a drug test, your action would be:

- Reject candidate and communicate reason.*
- Reject candidate without communicating test results.*
- Hire candidate under condition of treatment referral.*
- Hire candidate with no action other than a warning.*

	1986	1992	1998
Reject Candidate and Communicate Reason	65%	85%	93%
Reject Candidate without Communicating Reason	18%	9%	6%
Hire Candidate with No Action other than a Warning	10%	0%	0%
Hire Candidate under Condition of Treatment Referral	6%	6%	1%

The second incident involved an existing employee. In this case, another major shift occurred. 31% would terminate, compared to only 10% in 1992. Only half of respondents, 50% (down from 85%), referred the person to the organization's employee assistance program. The results are summarized in Table 15.

Table 15
Existing Employee Fails Drug Test

If an existing employee tests positive for drugs, what action would you take?

	1986	1992	1998
Immediate Termination	4%	10%	31%
Referral to EAP (Treatment)	64%	85%	50%
Warning	0%	31%	2%

The final incident involved an existing employee testing positive for drugs and denying ever taking the drug indicated. In this case, for the first time since we started asking the question, the most popular response was “same as without the denial,” which in the environment portrayed by the survey results means an increasing percentage of organizations “terminating.” Many took action that would be the same whether or not there was a denial. And several asked the employee to take a retest. The results are summarized in Table 16.

Table 16
Employee Fails Test And Denies Result

If an existing employee tests positive for drugs, and denies ever taking the drug indicated, what action would you take?

	1986	1992	1998
Same as Without Denial	12%	30%	35%
An Automatic Re-Test	12%	21%	27%
A Second More Expensive Test	32%	19%	20%
Referral to an EAP for Evaluation	16%	43%	20%
Some Type of Appeal Process	2%	21%	11%

Reasons for Drug Testing

Drug testing has been initiated in most organizations for multiple reasons -- the least of which is as a response to a specific organizational problem. The combination of the overall national problem of substance abuse in the workplace, prevention, and a management decision seems to provide the more powerful motivation. Table 17 and Chart 30 present the results.

Table 17
Reasons For Drug Testing

	1992	1998
Management Decision	63%	53%
Response to Specific Organization Problem	26%	19%
Response to Overall National Problem	43%	24%
Required by Industry/National Regulation	37%	38%
Preventative	61%	57%

In a HR News (Society for Human Resources) article in August of 1991, several components of a successful drug testing program were outlined. These steps were outlined as "keys to success" after an introduction which stated:

When a drug/alcohol testing policy is introduced it's not the formulation of the policy, but rather the implementation, that is the key to success. A well-written, comprehensive policy is an opportunity to address a majority of the issues that concern employees.

In order to assess employees' concerns about implementing a drug/alcohol testing program a survey should be done at the earliest opportunity, before taking steps to establish a formal policy.

HR News

Conclusions and Recommendations

Drug testing is a complicated issue. There are questions related to its effectiveness, legality, and place in an organization's management strategy. It is beyond the scope of this report to examine or discuss the specific legal issues. Drug testing is growing in popularity. The survey finds 71% - down slightly from 78% in 1992, up significantly from 42% in 1986 - of the responding organizations are testing. As a part of a strategy to deal with on-the-job accidents or behavioral incidents, it is an appropriate diagnostic tool. As part of a selection strategy, it must be used with extreme caution. A recent AMA study also showed that a number of companies, like those in this survey, do not re-test for employees testing positive.

More troubling is the finding that 28 percent of the companies surveyed said they would immediately fire an employee who tested positive for drugs.

Testing is a reaction to increased drug use - and to regulatory requirements in many industries where drug testing is required. Five years ago, it was a reaction to the increased use of cocaine. **One of the questions that must be answered is whether or not drug testing fits the organization's culture and management style.** If drug testing does not fit with an organization's style, it may damage the morale of drug-free employees even though it may prevent drug use among other employees or potential hires. In one very successful organization, which prides itself on its relationships with its employees and its positive management approach, I had the opportunity to discuss the issue of drug testing. The organization has less of a substance abuse problem than most organizations its size, and **feels no need to initiate a drug testing program**, because of its positive treatment of employees. Drug testing is used in a very limited way – only when it is required by regulation. In one specific response to the current survey, a comment was included:

“No we don't test – it doesn't fit our style.”

Drug testing appears a reality for most organizations. Communicate this reality in a way consistent with the organization's management style and organization culture – even if it is difficult. It may be the key to a successful testing program that is widely supported by employees.

Organization Size Issues

The survey data were analyzed based on the size of the organization, based on number of employees.

Size and Workplace Substance Abuse

The 1998 results are generally consistent with those found in earlier studies. Generally speaking, smaller organizations have been able to avoid the problem for some drug categories. In most drug categories, the rate of direct contact rose with organization size. In larger organizations, those with more than 2000 employees, incidence of direct contact with drugs on-the-job was higher for almost all substances. This information is presented in detail in Table 18 and Chart 31.

Table 18
Workplace Substance Abuse and Organization Size

	Number of Employees			
	Overall	1 - 500	501 - 2000	2001 +
	1992	1992	1992	1992
Alcohol	96%	90%	91%	100%
Marijuana	80%	60%	91%	88%
Barbiturates/Amphetamines	44%	0%	20%	73%
Heroin	31%	0%	0%	54%
Cocaine	66%	50%	36%	87%
	1998	1998	1998	1998
Alcohol	88%	80%	100%	100%
Marijuana	59%	49%	67%	100%
Barbiturates/Amphetamines	41%	19%	64%	83%
Heroin	14%	7%	18%	50%
Cocaine	40%	25%	54%	83%

Size and Perception of Substance Abuse Problem

Smaller and larger organizations feel the substance abuse problem in their own organizations is the same as it was five years ago to a greater extent than medium-sized organizations. Smaller organizations feel the substance abuse problem is less serious in their own organization and in other organizations than both medium-sized and larger organizations. This information is presented in Table 19.

Table 19
Perception of On-the-Job Substance Abuse

	Number of Employees			
	Overall	1 - 500	501 - 2000	2001 +
	1992	1992	1992	1992
IN OWN ORGANIZATION				
Less Serious	23%	44%	22%	12%
Same	40%	33%	27%	48%
More Serious	37%	23%	54%	40%
	1998	1998	1998	1998
Less Serious	19%	16%	25%	12%
Same	35%	38%	38%	12%
More Serious	46%	46%	38%	75%
IN OTHER ORGANIZATIONS	1992	1992	1992	1992
Less Serious	2%	10%	0%	0%
Same	48%	40%	30%	52%
More Serious	50%	50%	70%	48%
	1998	1998	1998	1998
Less Serious	6%	7%	3%	12%
Same	39%	38%	47%	13%
More Serious	55%	55%	50%	75%

Size and Policies

Historically, organizations with between 1 and 500 employees were less likely to have policies than larger organizations. It is positive to note that a much larger percentage of smaller organizations started having policies as early as ten years ago. Now all organizations, regardless of size, appear to have policies. These results are portrayed in Table 20 and Chart 32.

Table 20
Policy And Organization Size

	Number of Employees			
	Overall	1 - 500	501 - 2000	2001 +
	1992	1992	1992	1992
Drugs (including Alcohol)	92%	80%	91%	96%
Alcohol at Business Functions				
Alcohol at Social Functions				
	<i>1998</i>	<i>1998</i>	<i>1998</i>	<i>1998</i>
Drugs (including Alcohol)	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>
Alcohol at Business Functions	<i>42%</i>	<i>46%</i>	<i>31%</i>	<i>62%</i>
Alcohol at Social Functions	<i>32%</i>	<i>35%</i>	<i>22%</i>	<i>62%</i>

With all organizations having policies, possibly due to the survey going to SHRM member organizations, the size difference shifts to looking at how many organizations have developed policies about alcohol use at business and organization-sponsored social functions.

Size and Serious Problems

One of the more important subjects discussed in the policy section of this report has always been the problems that organizations face as they attempt to develop an effective program. When the responses to this question are examined based on the size of the organizations, it can be seen that all size organizations face the same problems. Smaller organizations reported more difficulty in determining policy and detection of drug use than both medium and large organizations. Interestingly, large organizations report a greater problem in finding facilities and getting management interested, possibly reflecting both the changing dynamics of health care coverage and the “normalization” of the problem discussed earlier. The comparative results are summarized in Table 21. The rating scale used was 0 (no problem) to 10 (major problem).

Table 21
Size and Serious Problems in Program Development

(1 = Not Serious -- 10 = Very Serious)

	Number of Employees			
	Overall	1 - 500	501 - 2000	2001 +
	1992	1992	1992	1992
Detection of drug use	5.1	3.5	7.3	4.5
Obtaining information	3.0	2.9	3.5	2.7
Determining policy	4.0	4.6	3.9	4.4
Getting management interested	2.5	1.6	2.1	3.0
Conflicting opinions	1.9	.3	1.8	2.6
Rehabilitation facilities	2.5	3.2	1.9	2.4
Getting a good counselor	2.2	2.4	1.6	2.4
	1998	1998	1998	1998
Detection of drug use	5.7	6.3	5.3	4.6
Obtaining information	3.2	3.9	2.9	2.1
Determining policy	3.1	3.5	3.0	2.2
Getting management interested	2.7	2.8	2.4	3.8
Conflicting opinions	1.5	1.9	1.3	.6
Rehabilitation facilities	2.2	2.2	1.9	3.6
Getting a good counselor	2.2	2.2	2.1	2.8

Issues and Trends

The data were analyzed to examine how the different size organizations perceived the general approaches that might be taken to eliminate drugs from the work force. There were some significant differences, based on size, on the ranking of approaches that can be taken to eliminate drugs. Five years ago, smaller organizations placed a much greater emphasis on drug testing, increased discipline, and termination than both medium and large organizations. In this survey, the results flipped on these factors -- with larger organizations now placing a greater emphasis on testing, discipline, and termination. It is important to note that these changes are consistent with changes noted earlier on testing policies. The results are compared in Table 22 and Chart 33.

Table 22
Size And General Approaches For Eliminating Drugs
 (1 = Not Effective -- 5 = Very Effective)

	Number of Employees			
	Overall	1 - 500	501 - 2000	2001 +
	1992	1992	1992	1992
Education	3.4	3.2	3.4	3.4
Drug Testing	4.1	4.8	3.9	3.8
Treatment	3.6	3.2	4.2	3.4
Increased Discipline	3.5	3.6	3.5	3.5
Management Style	3.0	3.0	2.6	3.0
Termination	3.9	4.6	4.0	3.7
Increased Penalties	3.2	3.5	3.6	3.0
Management/Supervisory Skills	3.6	3.1	3.5	3.8
	<i>1998</i>	<i>1998</i>	<i>1998</i>	<i>1998</i>
Education	<i>3.4</i>	<i>3.3</i>	<i>3.5</i>	<i>3.6</i>
Drug Testing	<i>4.2</i>	<i>4.0</i>	<i>4.4</i>	<i>4.9</i>
Treatment	<i>3.3</i>	<i>3.3</i>	<i>3.3</i>	<i>4.0</i>
Increased Discipline	<i>3.1</i>	<i>2.9</i>	<i>3.3</i>	<i>3.4</i>
Management Style	<i>3.2</i>	<i>3.3</i>	<i>3.1</i>	<i>3.6</i>
Termination	<i>4.0</i>	<i>3.8</i>	<i>4.1</i>	<i>4.3</i>
Increased Penalties	<i>2.6</i>	<i>2.7</i>	<i>2.4</i>	<i>2.9</i>
Management/Supervisory Skills	<i>3.5</i>	<i>3.4</i>	<i>3.6</i>	<i>3.7</i>

Focus of Training

Medium-sized organizations place a much lesser emphasis on policy and procedure in training than either prevention or education. And they would like to see this change more dramatically to a focus on more education. Smaller and larger organizations seemed to have shifted even more toward policy even though it is not the way they want it. The results are shown in Table 23.

Table 23
Focus of Training Compared to Size

	Is Now			
	Overall	1-500	501 - 2000	2001 +
	1992			
Education	22%	20%	14%	28%
Prevention	20%	28%	13%	22%
Policy/Procedure	58%	52%	73%	50%
	<i>1998</i>			
Education	<i>24%</i>	<i>21%</i>	<i>26%</i>	<i>26%</i>
Prevention	<i>22%</i>	<i>22%</i>	<i>22%</i>	<i>20%</i>
Policy/Procedures	<i>68%</i>	<i>72%</i>	<i>57%</i>	<i>64%</i>
	Should be			
	Overall	1-500	501 - 2000	2000 +
	1992			
Education	39%	22%	38%	35%
Prevention	31%	31%	30%	29%
Policy/Procedure	30%	47%	32%	36%
	<i>1998</i>			
Education	<i>38%</i>	<i>39%</i>	<i>38%</i>	<i>30%</i>
Prevention	<i>29%</i>	<i>32%</i>	<i>26%</i>	<i>27%</i>
Policy/Procedure	<i>37%</i>	<i>38%</i>	<i>35%</i>	<i>43%</i>

Size and the Future

The perception that the problem will get worse in the next five years is a perception based primarily on the responses of small and medium organizations. The larger organizations expressed a stronger feeling that the problem will get better in the next five years. Opinions have changed more in this survey than in any previous study. The comparative results are shown in Table 24.

Table 24
Size And Substance Abuse Five Years From Now

	Number of Employees							
	Overall		1 - 500		501 - 2000		2001 +	
	1992	<i>1998</i>	1992	<i>1998</i>	1992	<i>1998</i>	1992	<i>1998</i>
No Change	33%	<i>20%</i>	30%	<i>21%</i>	18%	<i>19%</i>	40%	<i>12%</i>
Will Get Worse	20%	<i>46%</i>	30%	<i>46%</i>	36%	<i>50%</i>	12%	<i>25%</i>
Will Get Better	43%	<i>20%</i>	30%	<i>20%</i>	46%	<i>16%</i>	44%	<i>37%</i>

Size and Drug Testing

Finally, the data were analyzed on the question concerning drug testing. Drug testing is currently being performed more by large and medium organizations than the smaller ones. The results are compared in Table 25.

Table 25
Size And Drug Testing

	Number of Employees							
	Overall		1 - 500		501 - 2000		2001 +	
	1992	<i>1998</i>	1992	<i>1998</i>	1992	<i>1998</i>	1992	<i>1998</i>
Yes	78%	<i>71%</i>	70%	<i>58%</i>	55%	<i>88%</i>	88%	<i>100%</i>
No	22%	<i>29%</i>	30%	<i>42%</i>	45%	<i>12%</i>	22%	<i>0%</i>

Conclusions and Recommendations

Organizations face different types of problems in dealing with workplace substance abuse based on the industry, the product or service involved, and the size of the organization. Larger organizations face a greater probability of substance abuse and they can more easily commit resources to preventive and treatment programs. Smaller organizations often find it more necessary to have strict policies because they do not have the resources in people or money to compensate for the lost productivity of a particular employee. What stands out in this survey, much more than any previous survey over 30 years, is the variety of responses and the changes in the dynamics of the problem based on organizational size. While it stands out, it is not surprising. It simply reflects the growing complexity of the work environment and the continued need for better information on the relationships between some of these complex variables.

The Study Author

James W. Schreier, Ph.D., SPHR is the founder of Far Cliffs Consulting. In addition to the Ph.D., he holds lifetime accreditation as a Senior Professional in Human Resources.

Dr. Schreier has been researching the problems of alcohol and drug abuse in organizations for 30 years. He has conducted major national surveys of company experiences, problems, and policies in 1971, 1976, 1981, 1986, 1992, and 1998. Dr. Schreier has spoken throughout the United States and in Europe about various aspects of the drug abuse problem in organizations and education. Dr. Schreier has appeared on numerous radio and television talk shows to discuss the drug abuse problem in organizations. He has published extensively on the problem and has participated in national efforts, including the 1986 "Controlling Substance Abuse" report, published by The Conference Board. The results of this on-going research have been published in Training and Development Journal, Personnel, Psychology Today, EAP Digest, John Naisbitt's Trend Letter, and numerous other professional publications.

In 1990, Dr. Schreier presented at the 5th Annual European Employee Assistance Conference in Ireland. In 1991, he was asked to return to make the opening address at the 6th Annual European Employee Assistance Conference.

Far Cliffs Consulting is a management consulting organization, dedicated to improving both individual and organizational performance.

Human Resources Research, a special division of Far Cliffs Consulting, regularly conducts research projects into critical human resource and management issues. Current projects include the on-going, thirty year study of substance abuse in the workplace, research into the ethical issues of recruitment, selection, and job-hunting practices, and an examination of management and training practices related to compulsive gambling.