

# Monday-morning hangovers

## ...or stress, alcohol and drug abuse in industry

**HOW CAN DRUG- AND ALCOHOL-TREATMENT PROFESSIONALS REACH OUT TO ORGANISATIONS SO THAT THEY CAN ADDRESS EMPLOYEE PROBLEMS TO EVERYONE'S BENEFIT – AND WHAT BASIC STEPS CAN BE IMPLEMENTED TO AVOID LITIGATION? CAROLE SPIERS HAS THE ANSWERS**

Anyone who has barely glanced at the quality press recently cannot have failed to notice the upsurge of activity in relation to stress-related issues – or the Cabinet Office report released in September which stated that £6.4 billion is lost from industry through sick days and premature death due to alcohol abuse.

Those of us working in stress management have long recognised the connection between stress and alcohol/drug abuse. These are 'coping mechanisms' which many people turn to as a first resort when they feel unable to cope with pressure. Given the prevalence of stress in the UK, alcohol misuse is a major issue affecting employers and employees – it impacts on the health, safety and welfare of staff, as well as on business productivity and profitability.

Some treatment organisations have started to address these issues directly with industry. What case can they make?

**GENERAL BACKGROUND.** People the world over turn to drink because they cannot deal with the particular stressors in their lives. Many, hoping that their problems will go away if they ignore them, try to 'lose themselves' in drink, and are often in denial that they have a problem.

The point of taking a drug – including alcohol – is to change how you feel. This in turn changes how you experience yourself and how you behave. So it is not hard to understand why individuals might be inclined to use drugs or alcohol in an attempt to combat the effects of stress, be it at work, in their home life, or both.

Stress affects people in three different ways: physically, emotionally and behaviourally. Initially, alcohol alleviates the symptoms of stress. But part of the physiological function of alcohol is to depress functioning on most levels; so performance goes down and, when sober, the drinker's anxiety goes up.

The would-be solution has not only exacerbated the original problem, but has caused a further and potentially more serious one.

Any problem around drugs and alcohol is likely to be multi-faceted. Why some people can manage their drug and alcohol intake and others cannot is complex but, broadly speaking, it will always involve the interrelationship of three factors: the individual, the drug and the environment – the 'eternal triangle'.

Not everyone who uses drugs or alcohol will have an identifiable dependency problem, nor will they necessarily be using them as a way of managing stress. So part of a manager's responsibility is to ensure that a proper investigation is undertaken to ascertain the severity and root of the problem. Well-considered, written drug and alcohol policies should, of course, be

in place already so that the organisation can help rather than punish the employee, as appropriate.

**THE WARNING SIGNS IN THE WORKPLACE.** Dealing with issues such as substance abuse is invariably made difficult by the often-hidden nature of the problem and the covert actions of the person(s) concerned. Most addicts are adept at concealing their addiction, and people can have a serious drink problem for years with only their social partner being aware of it – hence the hidden cost to the employer.

Persistent alcohol and drug abuse will inevitably impact on the employer through impaired performance. By definition, employees who are under the influence of drugs or alcohol, or are suffering the effects of the aftermath of having taken them, cannot perform to their full potential. SOME OF THE MORE OBVIOUS WARNING SIGNS WHICH CAN HELP TO ALERT EMPLOYERS TO POTENTIAL DRUG/ALCOHOL ABUSE AMONG STAFF INCLUDE:

- poor time keeping – for example, being consistently late for work in the morning or after lunch
- frequent and unauthorised leave, substantiated by increasingly fanciful tales
- regular absences on Mondays and/or Fridays
- unavailability to take calls during office hours
- smell of alcohol on the breath
- being obviously 'distracted' in the afternoons
- deterioration in personal appearance and hygiene
- giving implausible excuses for poor performance
- deteriorating quality and quantity of work, as a result of impaired intellectual functioning
- a breakdown in relations with colleagues due to mood swings, irritability, poor decision making, over-sensitivity or reaction to criticism
- pervasive low mood, indicative of depression
- attempts to borrow money, or suspicion of dishonesty
- other, more subtle changes of behaviour, which are difficult to identify but arouse suspicion that something is 'wrong'.

**WHAT SHOULD A MANAGER DO?** The task of the modern manager is not to attempt any prohibition of drugs or alcohol, as this would far exceed their role. S/he must instead find creative solutions which will eradicate the need in employees to turn to artificial stimulants or depressants in order to cope with the pressure and stress of the workplace. It is not easy.

THE MANAGER'S TASK CAN BE FACILITATED BY ANSWERING THE FOLLOWING:

1. Does the firm have an alcohol and drugs policy?
2. If not why not?
3. What are the specific concerns about the employee?
4. Do they transgress the agreed policy?
5. If they do, should it be deemed a matter of misconduct or sickness?

**6. What are the criteria for deciding if the matter should be treated as misconduct or sickness?**

The more complex questions are **4** and **5**. It is generally agreed that, before any decision can be made as to the most appropriate way to deal with a problem, as much information as possible needs to be gained in order to have a workable understanding of it.

If, for example, 'Jim' is noted to come in on most Monday mornings with a hangover which makes him irritable and underproductive compared to his more usual behaviour, it might be he has neither a drink nor a stress problem, but is paying the price for drinking too much the night before. If, however, it transpires that Jim always spends a distressing and exhausting Sunday looking after his severely disabled child, finds the job he has on Monday mornings pressurising, and that this worsened by working with a bullying colleague, then a different complexion will need to be put on his Monday morning hangover. At the least, there are grounds for the employer to improve conditions in the workplace and offer counselling in an attempt to help Jim address his personal difficulties and find new ways of dealing with painful situations. It is generally agreed that, when issues of dependency or personal difficulty are intrinsic to the problem, viewing the individual as being in need of help and support is the most constructive way forward for all concerned, even if this means having sickness leave. If, on the other hand there are no mediating factors, and a drugs and alcohol policy is in place and being contravened, a warning should be given, followed by a more serious disciplinary procedure, if appropriate. The most serious cases – usually placing person(s) in danger – can necessitate a charge of gross misconduct, sometimes leading to instant dismissal.

**WHAT CAN EMPLOYERS DO?** Employees, as well as employers, have a duty to address any alcohol or drug-related problems they might have, and there are a number of options available to employers. The most basic factor is to consider is the workplace culture. If it can be construed in any way that drinking to excess or

inappropriately is condoned, however subtly, this not only undermines any message to the contrary, but also compromises any possible litigation with regard to unfair dismissal. **FOR EVERYONE'S BENEFIT, EMPLOYERS SHOULD:**

- make information freely available to all staff members on problems likely to occur if drugs or alcohol are taken to excess; give information on how to access appropriate help
- make open communication a priority in the office culture; encourage staff to share work-related problems in a climate of support, not bottle them up for fear of being seen as not coping or as a complainer
- provide training to help managers recognise the signs and symptoms of drug and alcohol problems
- Work out a procedure for when people have been

identified as having a problem; this gives managers confidence, as they will be reluctant to address problems if they do not have resources to deal with them

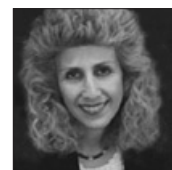
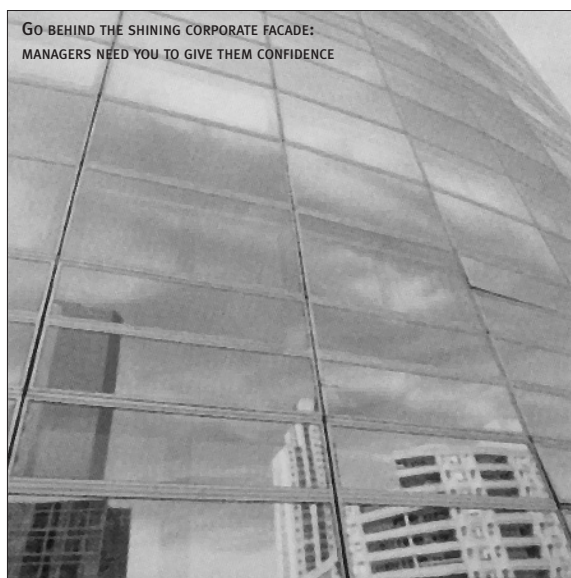
- Use Employee Assistance Programmes as a confidential counselling service; usually, six sessions are paid for by the employer – this is enough in most cases to clarify the problem and plan a solution, or for a referral to be made to another more suitable agency for long-term counselling or specialist drug/alcohol support.

Much as we would like

them to, alcohol and drug-related problems will not go away without positive intervention. Both can threaten organisational performance, and companies are increasingly having to come to terms with the extent to which their actions might contribute to their employees' problems – and hence their own.

That is not to say that the onus is exclusively on employers to act. Employees, too, must accept their responsibilities, and work together with their employers to try to resolve the difficulties they are experiencing.

In purely practical terms, however, it is unrealistic to expect employees to do so unless they are in a work environment which encourages such openness – and rewards it rather than punishing it.



Carole Spiers MIHE MISMA is author of *Tolley's Managing Stress In The Workplace*, published this year (ISBN 07545 1269X, [www.lexisnexis.co.uk](http://www.lexisnexis.co.uk)) and is managing director of the Carole Spiers Group, which specialises in stress management and corporate wellbeing ([www.carolespiersgroup.com](http://www.carolespiersgroup.com))

Suggested reading: *Mental Health & Stress In The Workplace: a guide for employers*, by Health & Safety Executive, HSE Books (1996) ISBN 0-11-321893-1.