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**Welcome** to this employee education session, brought to you by the U.S. Department of Labor’s Working Partners for an Alcohol- and Drug-Free Workplace Program.

***Notes & Disclaimers:***
DOL has developed this presentation to provide employers with a basic substance abuse awareness education tool for employees to be used as part of a drug-free workplace program. While it is intended to provide useful, general information, it does not provide all the necessary information about employee responsibilities under a specific organization’s drug-free workplace policy.

This training presentation is in the public domain. Therefore, please use it as you see fit – in part or in whole – with the understanding that you are expected to present it in a manner consistent with that in which it is intended.

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**We’ll be covering many important points during this presentation:**

* First, we’ll go over the objectives of this training.
* We’ll then provide an overview of our Drug-Free Workplace Policy and discuss the impact of substance abuse in the workplace.
* We’ll talk about ways that people use alcohol and other drugs and try to help you understand addiction by discussing the signs and symptoms of substance abuse.
* We’ll also discuss the role of family and coworkers;
* Available assistance;
* Confidentiality issues;
* And specific drugs of abuse.

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At the end of the training, employees should be familiar with our Drug-Free Workplace Policy and aware of the dangers of alcohol and drug abuse.

Employees should understand:

* The requirements of the Drug-Free Workplace Policy;
* The prevalence of alcohol and drug abuse and its impact on the workplace;
* How to recognize the link between poor performance and/or alcohol and drug abuse;
* The progression of the disease of addiction; and
* What types of assistance may be available.

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**The Drug-Free Workplace Policy accomplishes two major things:**

* It sends a clear message that use of alcohol and drugs in the workplace is prohibited; and
* It encourages employees who have problems with alcohol and other drugs to voluntarily seek help.

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**The policy exists to**:

* Protect the health and safety of all employees, customers and the public;
* Safeguard employer assets from theft and destruction;
* Protect trade secrets;
* Maintain product quality and company integrity and reputation; and
* To comply with the Drug-Free Workplace Act of 1988 or any other applicable federal, state or local laws.

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**The Drug-Free Workplace Policy answers the following questions:**

* What is the purpose of the policy and program?
* Who is covered by the policy?
* When does the policy apply?
* What behavior is prohibited?
* Are employees required to notify supervisors of drug-related convictions?
* Does the policy include searches? *(cont.)*

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* Does the program include drug testing?
* What are the consequences for violating the policy?
* Are there Return-to-Work Agreements?
* What type of assistance is available to employees needing help?
* How is employee confidentiality protected?
* Who is responsible for enforcing the policy?; and
* How is the policy communicated to employees?

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**Let’s talk about the impact of substance abuse in the workplace:**

**Employee Health** – People who abuse alcohol or other drugs tend to neglect nutrition, sleep and other basic health needs. Substance abuse depresses the immune system. Its impact on the workplace includes higher use of health benefits; increased use of sick time and higher absenteeism and tardiness.

**Productivity** – Employees who are substance abusers can be physically and mentally impaired while on the job. Substance abuse interferes with job satisfaction and the motivation to do a good job. It’s impact on the workplace includes reduced output; increased errors; lower quality of work and reduced customer satisfaction.

**Decision Making** – Individuals who abuse alcohol and/or other drugs often make poor decisions and have a distorted perception of their ability. Here, substance abuse’s impact on the workplace includes reduced innovation; reduced creativity; less competitiveness; and poor decisions, both daily and strategic.

**Safety** – Common effects of substance abuse include impaired vision, hearing and muscle coordination and low levels of attention, alertness and mental acuity. Its impact on the workplace includes increased accidents; and more workers’ compensation claims.

**Employee Morale** – The presence of an employee with drug and/or alcohol problems creates a strain on relationships between coworkers. Organizations that appear to condone substance abuse create the impression that they don’t care. Impact on the workplace includes higher turnover; lower quality; and reduced team effort.

**Security** – Employees with drug and/or alcohol problems often have financial difficulties, and employees who use illegal drugs may be engaging in illegal activities in the workplace. In this area, substance abuse’s impact on the workplace can include theft and law enforcement involvement.

Finally, substance abuse impacts **Organizational Image and Community Relations** –

Accidents, lawsuits and other incidents stemming from employee substance abuse problems may receive media attention and hurt an organization’s reputation in the community.

The impact on the workplace includes reduced trust and confidence; and reduced ability to attract high-quality employees.

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**There are various ways that people use alcohol and other drugs.**

The first is **“use,”** where alcohol and other drugs may be used in a socially accepted or medically authorized manner to modify or control mood or state of mind. Examples include having a drink with friends or taking an anti-anxiety agent as prescribed by a physician. This slide lists different ways that people use alcohol and other drugs without necessarily becoming addicted.

**Experimentation** – Out of curiosity and/or at the urging of peers, individuals may try drinking or using drugs illegally. If the illegal drug use is not repeated, or discontinues after a short time, such experimentation may not be problematic. Likewise, deciding to drink alcoholic beverages after early experimentation is not problematic for most adults.

**Social/Recreational** – Drinking alcoholic beverages is permitted in American society, and some excessive use may even be condoned. If use doesn’t cause problems for the user, or those around him/her, most people would consider such use to be social or recreational. Some use marijuana in a similar manner – only in certain social or recreational situations and without immediate adverse consequences. However, marijuana use is illegal, except in a few states.

**As a Stress Reliever** – Many people use alcohol or other drugs to help them cope with pressure or stress. If this type of use is infrequent and doesn’t create more stress or difficulties for the user, or those around him/her, it may not lead to addiction, but alcoholism and drug addiction often begin with relief drinking.

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**Another form is “Abuse.”** Whenthe use of a substance to modify or control mood or state of mind is in a manner that is illegal or harmful to oneself or others, it is considered problematic use, or abuse. Examples of potential consequences of harmful use are:

* Accidents or injuries;
* Blackouts;
* Legal problems;
* Poor job performance;
* Family problems; and
* Sexual behavior that increases the risk of HIV infection.

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**Finally, there is “Addiction.”** A number of individuals occasionally use or abuse alcohol or drugs without becoming addicted, but for many, abuse continues despite repeated attempts to return to more social or controlled use and leads to addiction. Addiction is the irresistible compulsion to use alcohol and drugs despite adverse consequences. It is characterized by repeated failures to control use, increased tolerance and increased disruption in the family.

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Unfortunately, it is not possible to tell early on whose use may lead to abuse and/or addiction. For one in ten people, abuse leads to addiction.

**Addiction to alcohol and other drugs is:**

**Chronic** – Once you have developed an addiction, you will always have to deal with it. You may manage to stop using alcohol or other drugs for significant periods of time, but for most, the disease doesn’t disappear but rather goes into remission. Should you attempt to resume ‘normal’ use, you will rapidly return to addictive, out of control use and abuse.

**Progressive** – Addiction gets worse over time. With some drugs, the decline is rapid; with others, like alcohol, it can be more gradual, but it does get worse. Alcohol and other drugs cause a biochemical change in the nervous system that can persist even after the substance leaves the blood. Repeated use causes progressive damage.

**Primary** – Addiction is not just a symptom of some underlying psychological problem, a developmental stage or a reaction to stress. Once your use of alcohol or drugs has become an addiction, the addiction itself needs to be medically treated as a primary illness.

**Terminal** – Addiction to alcohol and/or other drugs often leads to disease and possibly death.

**Characterized by Denial** – One of the most disturbing and confusing aspects of addiction is that it is characterized by denial. The user denies that his/her use is out of control or that it is causing any problems at home or work. The user often seems to be the last to know that his/her life is out of control. There are effective strategies employed by professionals for helping to break through this denial, which must be overcome before treatment can take place.

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***It’s important to know that addiction is a family disease:***

Some people with a history of substance abuse in their family are more susceptible to developing problems with addiction. Children of alcoholics or addicts are three times as likely to develop problems. If both parents are addicts or alcoholics, the risk increases to five times as great. This is due to heredity as well as learned behavior. It is important for parents to realize that children learn much more from watching their behavior than listening to their advice.

***Prior abuse of alcohol and other drugs has a great impact on developing future problems:***

A pattern of abuse develops and can lead to addiction and psychological reliance on drugs and/or alcohol. This can be a slow progression for some and a rapid decline for others. Research demonstrates that the later in life an individual first drinks alcohol or uses other drugs, the less likely he or she will be to progress to problem use.

***Other contributing factors:***

Some people abuse alcohol and drugs as part of a self-destructive lifestyle. Other people start to use substances to seek relief from depression or crisis in their lives. Although some fortunate individuals never develop serious problems and use diminishes or ceases once the precipitating events change, others develop a serious problem before they even realize it.

Slide 14Abuse of alcohol and other drugs affects people emotionally, behaviorally and physically.

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**Emotional Effects Include**:

* Aggression;
* Burnout;
* Anxiety;
* Depression;
* Paranoia; and
* Denial.

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**Behavioral Effects Include**:

* Slow reaction time;
* Impaired coordination;
* Slowed or slurred speech;
* Irritability;
* Excessive talking;
* Inability to sit still;
* Limited attention span; and
* Poor motivation and lack of energy.

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**And Physical Effects Include**:

* Weight loss;
* Sweating;
* Chills; and the
* Smell of alcohol.

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**Families and coworkers can have a significant impact on substance use and abuse.**

One way is through **“enabling”** – an action that someone takes to protect the person with the problem from the consequences of his or her actions. Unfortunately, enabling actually helps the person to NOT deal with his or her problem.

**Examples of enabling include:**

**Covering Up** – Providing alibis, making excuses or even doing an impaired worker’s work rather than confronting the issue that he/she is not meeting his/her expectations.

**Rationalizing** – Developing reasons why the person’s continued substance abuse or behavior is understandable or acceptable.

**Withdrawing/Avoiding** – Avoiding contact with the person with the problem.

**Blaming** – Blaming yourself for the person’s continued substance abuse or getting angry at the individual for not trying hard enough to control his/her use or to get help.

**Controlling** – Trying to take responsibility for the person by throwing out his/her drugs, cutting off the supply or trying to minimize the impact by moving him/her to a less important job; and

**Threatening** – Saying that you will take action (ceasing to cover up, taking formal disciplinary action) if the employee doesn’t control his/her use, but not following through.

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Further, there are many traps that family members and coworkers may fall into. They include:

**Sympathy** – Trying to get you involved in his/her personal problems.

**Excuses** – Having increasingly improbable explanations for everything that happens.

**Apology** – Being very sorry and promising to change. (“It won’t happen again.”)

**Diversions**– Trying to get you to talk about other issues in life or in the workplace.

**Innocence** – Claiming he/she is not the cause of the problems you observe, but rather the victim. (“It isn’t true.” “I didn’t know.” “Everyone is against me.”)

**Anger** – Showing physically intimidating behavior, and blaming others. (“It’s your fault.”)

**Pity** – Using emotional blackmail to elicit your sympathy and guilt. (“You know what I’m going through. How can you do this to me now?”); and

**Tears** – Falling apart and expressing remorse upon confrontation.

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**When it comes to assistance, there are several important things to remember:**

* First, difficulty performing on the job can sometimes be caused by unrecognized personal problems – including addiction to alcohol and other drugs;
* Help is available;
* Although a supervisor may suspect that an employee’s performance is poor because of underlying personal problems, it is up to the employee to decide whether or not that is the case; (*cont.)*

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* Further, it is an employee’s responsibility to decide whether or not to seek help;
* Addiction is treatable and reversible; and
* An employee’s decision to seek help is a private one and will not be made public.

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***Some companies offer EAP (or Employee Assistance Program) services to their employees.***

* An EAP can help employees decide what to do if they have a problem with alcohol or other drugs.
* An EAP also can help an employee decide what to do if someone in his/her family or workgroup has a problem.
* Note that conversations with an EAP are confidential.

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***If EAP services are not available, employees can turn to the following for help:***

* Community hotlines;
* Self-help groups such as Alcoholics Anonymous, Narcotics Anonymous, Al-Anon, etc.;
* Community mental health centers;
* Private therapists or counselors; and
* Addiction treatment centers.

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**Confidentially is a core principle of EAP services. Employees need to know that:**

* Problems will not be made public;
* Conversations with an EAP professional – or other referral agent – are private and will be protected; and
* All information related to performance issues will be maintained in his/her personnel file.
* Information about any referral to treatment, however, will be kept separately.

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* Information about treatment for addiction or mental illness is not a matter of public record and cannot be shared without a release signed by the employee.
* If an employee chooses to tell coworkers about his/her private concerns, that is his/her decision.
* Finally, when an employee tells his/her supervisor something in confidence, supervisors are obligated to protect that disclosure.

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***If EAP services are available, employees are also assured that:***

* EAP records are separate from personnel records and can be accessed only with a signed release from the employee;
* EAP professionals are bound by a code of ethics to protect the confidentiality of the employees and family members that they serve; and
* There are clear limits on when and what information an EAP professional can share and with whom.

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**However, there are some limits on confidentiality that may require:**

* Disclosure of child abuse, elder abuse and serious threats of homicide or suicide as dictated by state law;
* Reporting participation in an EAP to the referring supervisor;
* Reporting the results of assessment and evaluation following a positive drug test;
* Verifying medical information to authorize release time or satisfy fitness-for-duty concerns as specified in company policy; and
* Revealing medical information to the insurance company in order to qualify for coverage under a benefits plan.

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All drugs, including alcohol, chemically alter the mind and body. As a result, use of drugs and/or alcohol can impair motor skills, hinder judgment, distort perception, decrease reaction time and interfere with other skills necessary to do a job safely and efficiently.

Specific drugs of abuse include those listed on this slide, and all have their own set of signs and symptoms.

***Please review the Specific Drugs of Abuse handout that accompanies this presentation for more in-depth information about each of the drugs on this slide.***

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**To conclude**, I hope this presentation has shed some light on the impact of drug and alcohol abuse on the workplace, the value of drug-free workplace programs, and where employees struggling with substance problems can turn for help.

Remember, additional information on drug-free workplaces is available on the U.S. Department of Labor’s Working Partners for an Alcohol- and Drug-Free Workplace program Web site. www.dol.gov/workingpartners