Alcohol Fact Sheet



Alcohol in the Workplace

rinking amongst U.S. workers threatens public safety and impairs job performance resulting in costly medical, social, and other problems affecting employees and employers alike. Productivity losses attributed to alcohol were estimated at \$150 billion for 2000.

Several factors contribute to problem drinking in the workplace. Employers are in a unique position to change some of these factors and to motivate employees in seeking help for alcohol problems.



Factors In Employee Drinking

rinking rates vary among occupations, but alcohol-related problems are not characteristic of any social segment, industry, or occupation.

Drinking is closely associated with the workplace culture and its acceptance of drinking, the workplace environment, the availability of alcohol, and a lack of workplace policies and their enforcement.

Workplace Culture. The culture of the workplace may either accept and encourage drinking or discourage and inhibit drinking. A workplace's tolerance of drinking is partly influenced by the gender mix of its workers.

Studies of male-dominated occupations have described heavy drinking cultures in which workers use drinking to build solidarity and show conformity to the group. Some male-dominated occupations therefore tend to have high rates of heavy drinking and alcohol-related problems.

Conversely, in predominantly female occupations both male and female employees are less likely to drink and less likely to have alcohol-related problems.

Workplace Environment. Work that is boring, stressful, or isolating can contribute to employees' drinking. Employee drinking has been associated with low job autonomy, lack of job complexity, lack of control over work conditions, boredom, sexual harassment, verbal and physical aggression, and disrespectful behavior.

Alcohol Availability. The availability and accessibility of alcohol may influence employee drinking.

For many people, alcohol is a problem. In addition, approximately 53 percent of men and women in the United States report that one or more of their close friends or a relative may have a drinking problem.

More than two-thirds of the workers surveyed at a large manufac-

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turing plant said it was "easy" or "very easy" to bring alcohol into the workplace, to drink at work stations, and to drink during breaks. Significantly, 24% reported drinking at work at least once during the year before the survey. In a survey of 6,540 employees at 16 worksites representing a

range of industries, 23 percent of upper-level managers had reported drinking during working hours in the previous month.

Limited Work Supervision, often a problem on evening shifts, has long been associated with employee alcohol problems. In one study, workers on evening shifts, in which supervision was reduced, were more likely than those on other shifts to report drinking at work.

Alcohol Policies. There is wide variation in the existence of alcohol policies, in employees' awareness of them, and in their enforcement in workplaces across the country.

Workers' knowledge that policies were rarely enforced seems to encourage drinking.

Researchers found that managers and supervisors in some manufacturing plants had little knowledge of the company's alcohol policies.

In certain situations, where supervisors were under constant pressure to keep production moving, they were motivated to discipline employees for drinking only if the drinking was compromising production or jeopardizing safety.

Effects of Employee Drinking

Alcohol-related job performance problems are caused not only by on-the-job drinking but also by heavy drinking outside of work. Studies have shown a positive relationship between the frequency of being "hungover" at work and the frequency of feeling sick at work, sleeping on the job, and having problems with job tasks or co-workers.

This hangover effect was demonstrated amongst pilots whose performance was tested in flight

simulators. Summary research found evidence of impairment 14 hours after pilots reached blood alcohol concentrations (BACs) of



between 0.10 percent and 0.12 percent. Further evidence reported that pilots were still significantly impaired a full 8 hours after reaching a BAC of 0.10 percent.

Drinking at work, problem drinking, and frequency of getting "drunk" in the past 30 days were positively associated with frequency of absenteeism, doing poor work, doing less work, and arguing with co-workers.

Preventing Alcohol Problems in the Workplace

ealth promotional programs offered in the workplace are helping reduce employees' alcohol-related problems. These sessions are designed to increase participants' awareness of the health risks related to stress and drinking.

Results of data from employees who completed pre-study and post-study evaluations of these types of programs showed after 6 months, 76 percent of the heaviest drinkers reportedly reduced their alcohol con-

sumption. Moderate drinkers also reduced their consumption, and participants reported changes in their attitudes toward drinking, drinking while driving, knowledge about problem drinking, and recognition of signs of a drinking problem.

Such programs are often a component of an Employee Assistance Program.

Alcohol addiction represents a challenge to treatment professionals. Alcoholics are more prone to relapse and are often the most difficult patients to treat effectively because of the many related health problems.

Managing Alcohol Problems in the Workplace

ne function of employee assistance programs (EAPs) is to identify and intervene early in employees' alcohol problems. EAPs may be provided by labor unions,



management (as part of the employee benefit package), or through union-management collaboration.

Employees are encouraged to seek EAP services for personal problems before they interfere with job performance, and confidential procedures are in place to facilitate this for the employee. Supervisors refer employees to an EAP program based on deteriorating job performance or related issues. Rimrock's EAP consultation ser-

vices are available to assist organizations in formulating an EAP program that meets the needs of Montana's small businesses.

Although the services offered can vary, Rimrock's EAP Program trains supervisors to recognize problems early and appropriately refer workers.

Our Treatment Program

A key element of Rimrock's treatment program is the active involvement of patients in the management of their own illness.

Empowerment is developed through the use of patient education, skills training and a strong emphasis on encouraging the individual patient to accept responsibility in managing their own condition. Along with the empowerment of our patients, we offer a treatment regimen which includes comprehensive clinical assessments, individualized treatment plans and services for the whole family.

Another important part of Rimrock's program is the emphasis we place on the integration of a broad spectrum of community, health and human

services for the benefit of the patient. This includes addressing a patient's physical, psychological, social

and economic needs, which improves the likelihood of a successful treatment experience.

Successful recovery principles in addiction treatment are characterized by the integration of personal, family, professional and other community resources toward the goal of enhancing the duration and quality of life of those we serve.



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For further information about treatment for Alcoholism, please call Barbara Hansen, Rimrock Foundation Admissions Supervisor at 1-800-227-3953 or 1-406-248-3175.

We're on the Web! www.rimrock.org

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