

# Fact Sheet

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## SUBSTANCE ABUSE PREVENTION IN THE WORKPLACE

***Substance abuse prevention and early intervention strategies and activities in the workplace and through paid for health care services may include:***

Drug-Free Workplace Program	Peer-to-Peer Program
Employee Assistance Program	Workers Compensation Program
Health Promotion/Wellness Program	Disability Program
Health Risk Assessments/Appraisal	Disease Management Services
Occupational Health and Safety Program	Compensation/Benefits Program (1)
Chemical Testing	

### ***Theory Behind Substance Abuse Prevention Programs***

Prevention programs seek to minimize the effects of factors theorized to support and encourage substance abuse in the workplace.

Factors in the workplace related to substance abuse problems are:

- Workplace culture,
- Social control,
- Alienation,
- Occupational stress, and
- Availability of drugs. (2)

Three groups of theories related to problem drinking are:

- Cultural theories that hypothesize that workplace culture supports or permits drinking on or off the job;
- Job design theories that hypothesize that certain jobs that are stressful or dehumanizing exacerbate or create drinking problems; and
- Psychosocial theories that hypothesize an individual who is predisposed for alcohol abuse selects jobs where alcohol abuse is least likely to be detected. (3)

A 1995 study of adults sampled from households in five U.S. cities revealed that individuals with jobs characterized by high levels of physical demands and low levels of skill discretion or high levels of physical demands and high decision authority were more likely to develop drug abuse/dependence syndromes. (4)

Because many workers who abuse alcohol or use illicit drugs come to work not necessarily using substances, but exhausted from their off-the-job drug and alcohol behaviors, prevention strategies should be expanded from substance abuse in the *workplace* to substance abuse in the *workforce*. (5)

### ***Effective Prevention Programs***

In a study of an alcohol reduction program, effects were demonstrated on alcohol consumption, motivation to reduce consumption, and problem consequences of drinking. No effects were found on health beliefs or self-efficacy to reduce drinking. The results suggest that alcohol consumption can be reduced among blue collar workers who participate in this type of worksite program. (6)

A substance abuse prevention program introduced by Ramada Corporation by means of its EAP resulted in a 50% reduction in absenteeism and an 82% reduction in accidents. (7)

## ***Prevention in the Workplace (Continued)***

### ***Drug Testing***

Studies show that in 1981, only 3% of the companies polled conducted drug tests. In 1991, it was estimated that more than 50% of major U.S. corporations have policies that include testing. (8)

Prevalence of testing programs is positively associated with workplace size, with most found in manufacturing companies and utilities. (9)

Based on a 1992 study of 342 medium to large (over 200 employees) work sites in Georgia, researchers found that 78% of work sites conduct some form of drug testing: (9)

70% of work sites conduct applicant testing.

18% conduct random testing.

The mean rate of positive test results at sites doing applicant testing was 6.6%.

The mean positive rate for reasonable cause tests of current employees was 33.8%, although the median was only 10%.

The mean rate of positive tests for random testing programs was 3.4%.

The majority (57%) of work sites allowed applicants who tested positive to reapply for employment after some time had elapsed (usually 6 months to 1 year).

A 1996 study of 96 employees coerced into treatment based on a positive urine screen for substance abuse and 161 employees who were self-referred revealed that the coerced group had significant but less severe substance abuse and other life problems than the self-referred group. After treatment, levels of improvement were similar in both coerced and self-referred groups. Workplace urine testing was thus effective in identifying individuals with less severe substance abuse problems who later showed substantial improvement in those problems. (10)

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