



HIGH-LIGHT



ALCOHOL AND DRUG NEWS BRIEF FOR EMPLOYERS

JUNE 2001

SANCA (WC) AT YOUR SERVICE

By way of introduction

Thank you for taking time to browse through the first edition of our quarterly news brief to employers in the Western Cape ! The South African National Council on Alcoholism and Drug Dependency (Western Cape) is a registered welfare organization specializing in assessment, counseling and educational services on substance abuse and dependency to all communities in the Western Cape.

It is difficult enough for treatment and prevention agencies to keep up with the ever changing face of alcohol and drug abuse - to the occupational health professional this must pose an even more daunting task, considering the droves of socio – medico issues which find their way through the clinic doors. Employers and organized labor has historically always been our most powerful allies in intervening with the substance abusing employee. For this reason it makes sense that we do our part in informing those in strategic positions about developments in this field.

The National Drug Awareness Week has again placed the spotlight on information and education and children and youth remain prime target groups for a variety of preventative programmes. Naturally it makes sense to plant the seeds of sound decision making in impressionable minds as early as possible. But what about the thousands of parents and working young adults whose risky drinking patterns directly impact on those who rely so heavily on them ? Misconceptions and half truths about drinking and dependency abound amongst these groups. If not in the workplace, where will these perceptions be challenged ?

In this issue we wish to share with you some of the popular misconceptions which we have gleaned over literally hundreds of employee education sessions. Take a good look at them – if some of these are also prevalent amongst your senior management, maybe it's time we talk !

Tertius Cronje
Manager : Industrial Consultation Service

SOME COMMONLY HELD BELIEFS AND MISCONCEPTIONS ON ALCOHOL/DEPENDENCY AMONGST EMPLOYEES

- 1 **Employees notion of what constitutes a drink is often radically different to what is commonly believed**
Amongst large sections of employees, the notion of a drink (or unit of alcohol) is often ill defined. Especially amongst the poorer sections of the community where a culture of social drinking differs significantly from what is regarded as acceptable in middle class society, a drink is often not perceived as a **quantifiable unit** such as a tot, but rather as an **event** (ie, drinking session).
- 2 **Employees generally believe that black coffee, cold showers and strenuous exercise will sober them up rapidly**
Workers simply do not know that although these remedies may help them to feel more sober as a result of a rise in blood sugar levels and the effects of caffeine or adrenalin, alcohol has not really left their system. My guess is that on a daily basis , a vast number of workers make it past the gate, no thanks to sober habits but with the assistance of these commonly held beliefs !
- 3 **One can only be considered an alcoholic if one drinks daily or at least every weekend.**
The potential crippling effects of such a misleading statement is quite obvious : As long as you don't drink in this way, you're ok.
- 4 **An employees BAC (Blood alcohol level) should be within the legal limit**
This notion can be expected to flourish where the Company does not have a well defined policy and procedure towards this issue. The regulations of the OHSACT does not stipulate any cut-off level



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but implicitly requires zero levels of any mindaltering substance. What some employees have difficulty in comprehending is this : " Why should a person who may legally drive to work in peak hour traffic with a blood alcohol level of 0,04 be regarded as unsafe to work ?"

4 **An employee may not be instructed to leave the workplace if there is no proof (blood or breath test) of intoxication.**

The basis for this unfortunate misnomer lies quite ironically in yet another one, ie that being sent home makes you guilty of the charge ! Employees and supervisors alike are not always aware of the fact that the OHSACT is primarily concerned with workplace safety and not with the notion of guilt per se.

5 **Supervisors use breathalyzing to victimize workers.**

This may not necessarily be untrue and may indeed be the case where Management fails to properly formulate and communicate a well designed policy. The statutory sanction which lie against the employer for allowing intoxication at work is not always explained to workers who sees the Supervisors actions as intentionally demeaning.

6 **The body rapidly gets rid of dagga**

It is surprising how many regular dagga using employees still equate the elimination rate of dagga with that of alcohol. As a fat soluble substance dagga can linger in the body for days or even weeks after just one joint.

7 **Unless the person wants help there is little one can do.**

During information sessions one often hears that the person should " come to his senses" before he can be assisted and workers relate many personal experiences which attests to the fact that the actions of substance abusers are often tolerated indefinitely because they "would not listen." Workers need to know what constructive intervention is and whose responsibility it is to initiate it.

It is the accumulative effect of these and other misnomers which contribute significantly to problems at work as well as at home. Collectively they thrive in the absence of the facts and they continue to shape behaviors and attitudes which impact so negatively on general productivity , interpersonal relationships as well as the relationship between Management and organized labor.

SANCA'S ROLE IN INDUSTRY

SANCA provides the following services to industry :

Assessment and counseling

Apart from providing ongoing, onsite services to employers by agreement, we do assessments of employer initiated referrals. After assessment, a report is submitted to the employer (with the consent of the employee) together with a recommended course of treatment

Employee education programmes

We offer 2 hour employee educational modules on alcohol and drugs. These sessions convey factual information on the long and short term effects, the process of dependency, legal aspects and assistance in a participatory manner.

Supervisor/Management Training

This is a four hour (morning) module and focuses on alcohol's effects on occupational safety, recognizing the early symptoms of substandard performance, the statutory obligations on employees/ employer, role-playing constructive intervention and the various modes of assistance.

Development of policy /procedure

SANCA can provide hands-on guidance in tailoring a policy document and outlining the procedures regarding referral for assessment, costing, discipline and alcohol or drug testing

For more detailed information about these or any other SANCA service, contact :

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