



HEALTH RESOURCES

Substance Abuse e-book



Considerations for employees and family members.

SUBSTANCE ABUSE

Use, Abuse, Addiction

Use:

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 agency as prescribed by a physician. Described below are 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 discontinued 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.

Abuse:

The use of a substance to modify or control mood or state of mind in a manner that is illegal or harmful to oneself or others 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
- Sexual behavior that increases the risk of HIV infection

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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SUBSTANCE ABUSE

Family and Coworker Impact



Enabling Defined:

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.

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.

Examples of Traps that Family Members and Coworkers May Fall Into:

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, 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?")

Tears – Falling apart and expressing remorse upon confrontation.



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SUBSTANCE ABUSE

If someone close. . .has a problem with alcohol or drugs

The person who has someone close who drinks too much or who uses other drugs has plenty of company. People experiencing alcohol and other drug problems often feel they hurt only themselves. That isn't true. They also hurt their families, friends, coworkers, employers, and others. Experience shows that for every person with an alcohol or other drug problem, at least four others are affected by their behavior. Here are some suggestions, which may be of use.

What To Do

- Try to remain calm and factually honest in speaking about their behavior and its day-to-day consequences.
- Let the person with the problem know that you are reading and learning about alcohol and other drug abuse, attending Al-Anon, Nar-Anon, Alateen, and other support groups.
- Discuss the situation with someone you trust -- someone from the clergy, a social worker, a counselor, a friend, or some individual who has experienced alcohol or other drug abuse personally or as a family member.
- Explain the nature of alcoholism and other drug addiction as an illness to the children in the family.
- Encourage new interests and participate in leisure time activities that the person enjoys. Encourage them to see old friends.
- Be patient and live one day at a time. Alcoholism and other drug addiction generally take a long time to develop, and recovery does not occur overnight. Try to accept setbacks and relapses with calmness and understanding.

What Not To Do

- Don't attempt to punish, threaten, bribe, or preach.
- Don't try to be a martyr. Avoid emotional appeals that may only increase feelings of guilt and the compulsion to drink or use other drugs.
- Don't allow yourself to cover up or make excuses for the alcoholic or drug addict or shield them from the realistic consequences of their behavior.
- Don't take over their responsibilities, leaving them with no sense of importance or dignity.
- Don't hide or dump bottles, throw out drugs, or shelter them from situations where alcohol is present.
- Don't argue with the person when they are impaired or high.
- Don't try to drink along with the problem drinker or take drugs with the drug abuser.
- Above all, don't feel guilty or responsible for another's behavior.
- Refuse to ride with anyone who's been drinking heavily or using other drugs.



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Confidentiality



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
- 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
- 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
- When an employee tells his/her supervisor something in confidence, supervisors are obligated to protect that disclosure

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
- There are clear limits on when and what information an EAP professional can share and with whom

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
- Revealing medical information to the insurance company in order to qualify for coverage under a benefits plan



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SUBSTANCE ABUSE

Attitude, Body and Mind



Cleaning Up Your Act

For a chemically dependent person, the first step towards recovery is recognizing that there is a problem. The second step is to quit using the chemical, whether it is alcohol or another drug. Unless the chemicals are gotten out of the way, the chemically dependent person never can know which problems in life are drug-related and which are not.

Body

Getting sober starts with the body. If you have been dependent on alcohol or drugs, your body has gotten used to that substance, and will take some time to adjust to sobriety. If you have been using alcohol, cocaine, depressants, or narcotics, it's best to have medical help, either from a treatment center or a doctor trained in chemical dependency issues. You can help your body adjust to sobriety by exercising, eating nutritious foods, and getting plenty of rest. Exercise produces **endorphins**, a natural body chemical which helps to relieve anxiety and increase positive feelings.

Mind

Becoming sober involves breaking old habits that contributed to chemical dependency, learning to solve problems that chemicals allowed you to ignore, and learning chemical-free ways to manage stress.

We recommend the following:

- Think about situations that “trigger” you to take your drug. If possible, avoid them.
- Think about the roles your friends play in your life. If some friends don't support you in sobriety, avoid their company and seek out new ones who will.
- Join a 12-step program such as Alcoholics or Cocaine Anonymous. The EAP can refer you to local groups which can help you maintain sobriety.

In chemical dependency, your drug controls a big piece of your life. In sobriety, you get your life back, and can begin the process of making it into the life you want.



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