

# Perceived Workplace Drug and Alcohol Problems

PHRMA Workplace Substance Abuse Survey  
of Portland Employers

Final Report: January 2005

Cynthia Mohr, Ph.D.  
Kristin Charles  
Donald Truxillo, Ph.D.  
Portland State University

### Background

The U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA) reports that 74% of current adult illicit drug users and 79.5% of heavy or binge drinkers work (Zhang, Huang, & Brittingham, 1999). Furthermore, results from the 2003 Workdrugfree Employer Survey indicate that in the state of Oregon, almost 60% of employers surveyed indicate that on-the-job substance abuse is a great concern, and an additional 20% report that it is of some concern (*2003 Workdrugfree Employer Survey*). These statistics suggest that workplace drug and alcohol use is an important issue for all organizations to consider.

Perhaps the most supported organizational outcomes of employee alcohol and drug use are withdrawal behaviors, including psychological and physical withdrawal (Lehman & Simpson, 1992), absenteeism (Normand, Salyards, & Mahoney, 1990), and turnover (Zhang et al., 1999). In one study, employees who tested positive for illicit drugs had an absenteeism rate 59.3% higher than employees who tested negative (Norman, Salyards, & Mahoney, 1990). Additionally, a national report conducted by SAMHSA found that workers who reported current illicit drug use were more likely than those who did not report illicit drug use to have worked for three or more employers, suggesting that illicit drug use is associated with increased turnover. There is mixed evidence that employee alcohol and drug use may be related to other organizational outcomes, such as poor job performance, lower contextual performance, accidents and injuries, and higher levels of counterproductive behavior (for a review see Frone, 2004).

Drug testing is a popular method used by organizations to reduce problems associated with employee drug use. A 1997 report indicates that between 1987 and 1997 there was a 59% increase in the number of member companies (mostly larger organizations) that use drug testing. Despite its widespread use, drug testing has some drawbacks, the most significant being employee reactions due to negative perceptions of fairness (Truxillo, Bauer, & Paronto, 2002). The major factor that determines employee acceptance of drug and alcohol testing is the safety-sensitivity of a job. Generally, people perceive drug testing as being more fair for safety sensitive positions (Tepper, 1994).

There is inconclusive evidence on whether employees who test positive for drugs actually differ in their job-related behaviors (Oginska, Pokorski, & Oginski, 1993). Some evidence suggests that drug testing policies may deter drug users. For example, individuals who use marijuana or cocaine at least once a week are more likely to work for companies without drug testing policies. Additionally, this relationship becomes stronger when the drug use is more recent and more frequent (Hoffman & Larison, 1999).

Employee Assistance Programs (EAPs) are other methods organizations use to reduce employee drug and alcohol use. Awareness of the EAP, support for the policy from the organization, and intolerance of substance use by co-workers all seem to moderate the relationship between prevalence of substance use and EAP utilization. However, employees who report problematic substance abuse may be less likely to use the EAP than other employees (Reynolds & Lehman, 2003). These results are problematic, since these individuals are the ones that most need the services. Substance abusers are more likely to use EAP programs if they are aware of the programs and if the programs are promoted by

the organization as a resource rather than a punitive tool (Reynolds & Lehman, 2003). Furthermore, all employees are more likely to use EAP programs if they perceive a greater sense of group cohesion and believed that the services were confidential (Reynolds & Lehman, 2003). These results suggest some actions employers can take to encourage employees to utilize their EAP services, including frequent reminders, supervisor awareness, and guarantees of confidentiality.

There are mixed results concerning the effectiveness of EAP programs (for a review see Arthur, 2000). EAP programs are often difficult to evaluate because there are internal pressures for success or weak methodology is used. Since EAP participation is often confidential, it is difficult to link it to job-related outcomes. Aspects of EAP programs that are essential for effective programs include commitment from top management, clearly written policies and procedures outlining the purpose and function of the EAP, co-operation with unions, supervisor training to identify problems, education and promotion of EAP programs for employees, resources spanning from the referral to follow up of each case, maintenance of records for evaluation, and coverage of EAP services as part of a benefits package (Arthur, 2000). Each of these can help to ensure that EAPs are accepted and utilized by employees, and hopefully will lead to the reduction of negative organizational outcomes related to drug and alcohol abuse.

The purpose of the survey described in this report was to determine the substance abuse-related concerns of Portland-area employers, the current level of substance abuse prevention ongoing in those companies, and perceptions of substance treatment and policy.

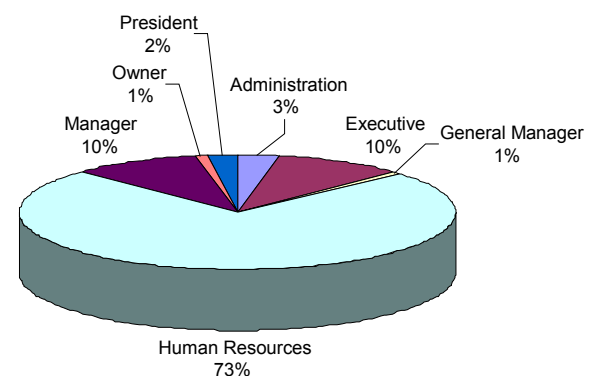
### Method

Each of the 965 members of the Portland Human Resources Management Association (PHRMA) received an email invitation to participate in a brief web-based survey of local employers' substance abuse-related concerns, nature of company policy and procedure, and perceptions of substance abuse treatment. Approximately 55 email addresses were invalid, resulting in a valid pool of 910 individuals. Following the initial email invitation, PHRMA members received two additional follow-up emails reminding them to complete the survey. In exchange for their participation, survey respondents were entered into a lottery to win 1 of 2 \$25 gift card prizes.

### Results

Sample Demographics. One hundred forty-one PHRMA members responded to the survey, providing a 15.5% response rate. Respondents were mostly women (78%) in human resources (73%). Other respondent job titles included Manager (10%), Executive (10%), Administration (3%), and Owner, President, or General Manager (4%). The number of full-time employees in respondent organizations ranged from 1-70,000, with a mean of 1765 (SD=6500). The number of part-time employees ranged from 0-18,000, with a mean of 449 (SD=1894).

Figure 1 - Position of Survey Respondents



Regarding industry of respondents, the largest percentage was from the service sector (22%), followed by manufacturing/production (19%) and public sector (12%). Healthcare and high-tech industries were represented by 8% and 9%, respectively, and 6% of respondents were from social services/nonprofits. Relatively few respondents represented the construction (4%), transportation (3%), hospitality (2%) or retail (2%) industries. The remaining respondent industries included utilities (4%), financial/insurance (4%), professional services (2%), distribution (2%), and advertising/sales or other (2%).

**Table 1 - Industries Represented by Survey Respondents**

Construction	4%
Healthcare	8%
High Tech	9%
Hospitality	2%
Manufacturing/Production	19%
Public Sector	12%
Retail	2%
Service	22%
Social Service/Nonprofit	6%
Transportation	3%

**Other**

Utilities	4%
Financial/Insurance	4%
Professional Service	2%
Distribution	2%
Advertising/Sales/other	2%

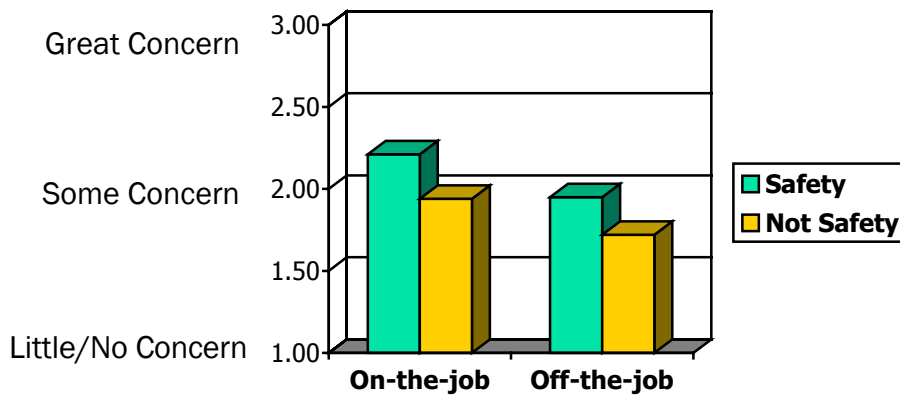
Because industries will vary significantly in the extent to which they have safety concerns for which substance use poses particular problems, we conducted some of the following analyses separately for safety-sensitive industries. The following industries were coded as safety-sensitive: Construction, Manufacturing/Production, Transportation, and Distribution. Altogether, 28% of the respondents represented safety-sensitive industries.

**Concerns About Drug and Alcohol Use**

**General Concerns.** On average, respondents indicated “some concern” about on-the-job and off-the-job alcohol and drug use, with 30.5% indicating “great concern” about on-the-job use and 12.8% great concern about off-the-job use. Concern was stronger among safety-sensitive organizations (see Figure 2 below). Respondents were also asked to rate their concern about a range of specific drug-related issues, with levels of concern including 1 (Not an issue in my organization), 2 (Little or minimal concern), 3 (Some concern), and 4 (Of great concern). Of the specific issues posed, respondents indicated most concern about serving alcohol at company-sponsored events (Mean=2.35, SD=0.97) and the difficulty of hiring future drug-free employees (i.e., today’s students) (Mean=2.34, SD=0.87). Nearly 10% of respondents indicated that serving alcohol at company functions was “of great concern,” and 8% responded similarly regarding concerns about hiring future drug-free employees. On average, respondents indicated minimal to some concern about the increasing availability of medical marijuana cards (Mean=2.22, SD=0.93). Means for concern about hiring drug-free employees (Mean=2.19, SD=0.91) and supervisor reluctance to enforce drug policy (Mean=2.09, SD=0.90) were roughly comparable. Respondents indicated the least concern for keeping good employees who can’t pass a drug test (Mean=1.78, SD=0.82), with 44% indicating this was “Not an issue in my organization.” Other concerns identified by

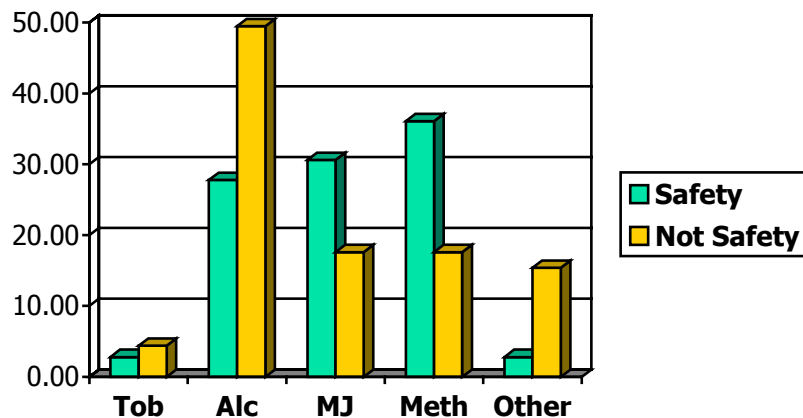
respondents included concerns about morale/negative reactions to drug testing and unfair selection for drug testing. Finally, concern about drug and alcohol issues was related to the extent of drug testing at the organization, such that the more extensive the drug testing, the less concern organizations show about these issues ( $r=.27, p < .01$ ). Additional information about drug testing is provided below (starting on p. 6)

Figure 2 – Mean concern about Drug and Alcohol Use



Organizational Priorities. Respondents were also asked to indicate which substance their organization was most concerned about. The majority selected alcohol (44%) as their top concern, followed by methamphetamine (22%). Eighteen percent of respondents indicated that marijuana was the greatest concern, and 5% selected tobacco. Fully 12% selected “other” and upon examination it seems that a majority simply couldn’t select among the options (7%), many stating that all illegal, performance- or judgment-impairing drugs were a concern. Another group of “other” respondents indicated concerns about prescription or pain medications. Two individuals reiterated no concern about substances. As revealed in Figure 3 below, respondents from safety sensitive organizations viewed the issue differently from those not in safety sensitive industries; instead of alcohol, methamphetamine, marijuana, and then alcohol were viewed as the most important substances (in that order).

Figure 3 - % of Respondents Indicating Which Substance was Most Concern



Perceived Problems Associated with Abuse. In terms of problems associated with drug and alcohol use, the vast majority of respondents identified absenteeism (94%), lost productivity (91%), and impaired judgment (87%). Attitude/relationships (85%) and safety (81%) problems were also associated with substance use by most respondents. However, relatively fewer respondents (54%) associated theft with substance use. In addition, 12% of respondents indicated “other” problems, which included ethical conduct both within the organization and also with customers/clients. Respondents also identified liability concerns and increased risk of loss or violence because of the substance using employee’s associations with others.

### Drug and Alcohol Policies

Organizational Drug Testing Practices. The next set of policy questions dealt with employers’ drug and alcohol policies. Results are summarized in Table 2. Of respondent organizations, 72% conduct drug or alcohol testing. Industries with the lowest levels of any drug testing included: high tech (58%), service sector (50%), social service/non-profit (50%), professional service (33%), and financial/insurance (20%). Safety sensitive organizations were significantly more likely than non-safety sensitive industries to conduct drug testing, however 10% reported they do not test. Of the organizations that do test, 85% test pre-hire (85% drug, 27% alcohol), 82% for cause (82% drug, 76% alcohol), 39% test randomly (39% drug, 24% alcohol), and 61% test post-accident (64% drug, 52% alcohol). Follow-up analyses of the industries reporting pre-testing of alcohol do not reveal any discernable patterns about the respondent or their organization (i.e., reports occur across many industries and respondent positions—including human resources professionals). Fourteen percent of organizations offer comprehensive policies covering pre-hire and random drug testing, and both drug and alcohol testing for cause and post-accident. For purposes of subsequent analyses, a measure of drug testing comprehensiveness was created, indicating the breadth of situations in which the organization conducted drug testing. Values range from 0 (no testing) to 6 (testing in all legal situations<sup>11</sup>). The sample average was 2.9 (SD=2.2).

Table 2 – Percentage of Organizations that Conduct Drug Testing

	<i>Total</i>	<i>Drug</i>	<i>Alcohol</i>
Pre-hire	62%	62%	19%
For Cause	60	60	55
Random	28	28	17
Post-Accident	45	46	38
No Testing	28	--	--

<sup>1</sup> Pre-test and random alcohol tests were considered illegal for purposes of the current report.

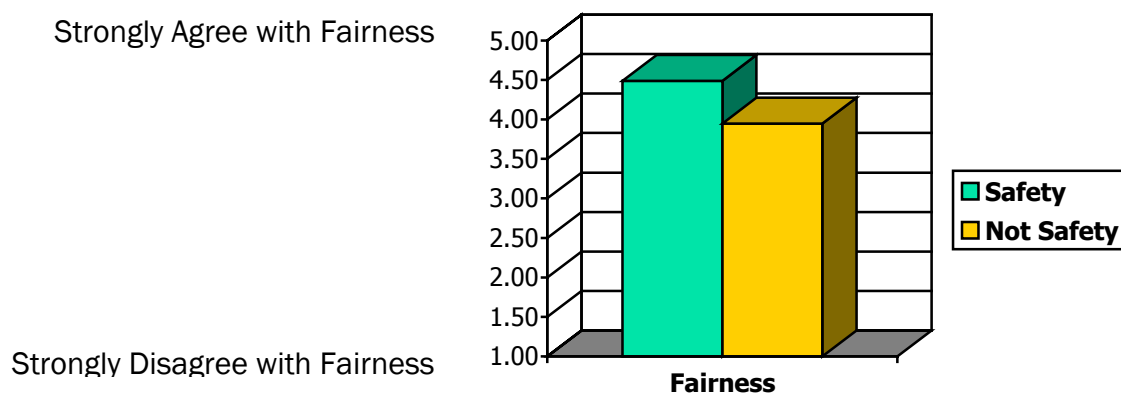
Organizational Drug and Alcohol Policies. Of respondent organizations, 90.8% reported some type of drug-free workplace policy, with 2% of respondents indicating “don’t know.” Respondents who indicated no such policy represented high tech, public sector, service sector, social service/non-profit, professional services, and financial/insurance industries. All of the safety sensitive organizations reported having a drug-free workplace policy. Of those organizations with policies, 98% cover alcohol and drugs, 29% cover tobacco, and 16% cover medical marijuana. Eight percent of policies cover all of the above.

Policy Dissemination. The majority of employees receive drug-free workplace policy information through a policy manual (93%). Other common modes of communication include employee orientation (71%) and having new employees read and sign the policy (68%). Other less common modes include e-mail communications or Internet page postings (32%), group meetings (23%), memo/notices (16%) and individual meetings (10%). Organizations that do not have a policy manual use some combination of: orientation, group meetings, e-mail/Internet communications or ask new employees to read and sign the policy.

Perceived Fairness of Organization’s Drug and Alcohol Policies

Respondents were asked to rate the extent to which they agreed with a set of statements regarding the fairness of their organization’s policies. Items were rated on a scale of 1 (strongly disagree that policy/procedure is fair) to 5 (strongly agree that policy/procedure is fair). On average, employees agreed with the fairness of those policies (Mean=4.09, SD=1.02, based on the 4-item scale,  $\alpha=.94$ ). Perceived fairness of drug policy was correlated with the comprehensiveness of the organization’s drug testing ( $r=.30, p < .01$ ), but not with the comprehensiveness of their drug/alcohol policy ( $r=.14, p > .05$ ). Interestingly, comprehensiveness of the organization’s drug/alcohol policy and drug/alcohol testing were positively related ( $r=.28, p < .01$ ). Respondents from safety sensitive organizations viewed their policy as significantly more fair than their counterparts.

Figure 4 – Perceived Fairness of Drug-free Workplace Policies



Employer Provided Drug/Alcohol Resources

The majority of organizations surveyed (76.6%) has some form of EAP and provide access to group health insurance to all employees (78.7%). An additional 20.6% offer group health coverage to some employees; 1% does not provide any group health coverage. Eighty-four percent of group health policies cover substance abuse, 76% cover inpatient treatment,

80% cover outpatient treatment, and 40% cover tobacco cessation. Interestingly, eleven percent of respondents indicated that they don't know what the policy covers.

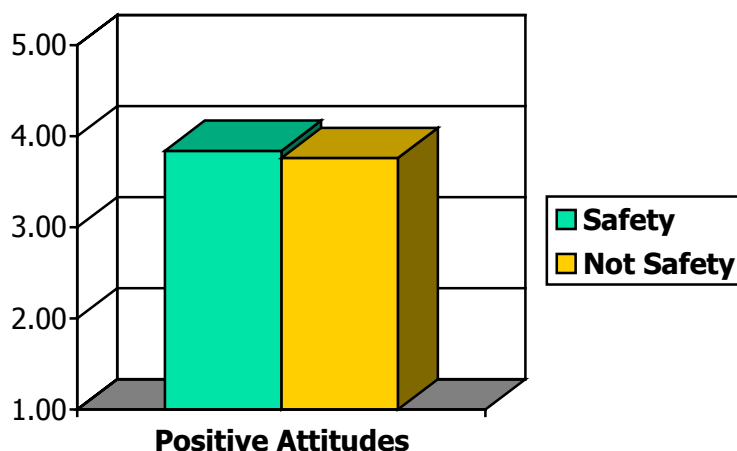
#### Employer-provided Treatment

Approximately 47% (N=66) of respondents were aware of a situation in which one or more employees had been through a drug or alcohol treatment program in the last 12 months. Respondents were then asked to consider the most recent case. The majority (56%) were not personally involved in the referral process. Yet, they were able to report that in 18 cases (27%) the employee entered an inpatient program; 39 (59%) entered an outpatient program, and 1 (2%) entered a DUI Diversion program. For 7 of those cases (11%), the respondent did not know what type of program their employee entered and in an additional 3 cases, the respondent did not provide any information. A majority of respondents (67%) reported that they and/or the EAP received a progress report regarding the employee's compliance and progress from the treatment provider. In the majority of cases, the employee returned to work (94%) and the respondent was satisfied with the employee's performance (76%). The length of time the employee was gone from work ranged from 1-12 months, with a mean of 4.08 months (SD=3.3).

#### Reactions to Drug/alcohol Treatment and Recovering Workers

To assess the favorability of attitudes toward substance abuse treatment and recovering workers, we asked respondents a set of 9 questions, in which respondents indicated extent of agreement or disagreement on a scale ranging from 1 (strongly disagree) to 5 (strongly agree). The items formed a reliable indicator of favorability, with a resulting mean indicating high favorability (Mean=4.2, SD=.9); results were similar across safety-sensitive and other organizations (see Figure 5 below). Respondents largely agreed or strongly agreed that drug/alcohol treatment was beneficial and effective. More specifically, 89% agreed or strongly agreed that offering drug/alcohol treatment is a good business practice. A majority of respondents rated that drug/alcohol treatment was cost-effective (60%) and that people who get treatment for drug or alcohol abuse are helped by it (70%). Mean rated cost-effectiveness was 3.8 (SD=1.0), and mean helpfulness was 3.9 (SD=.9). Similarly, 59% of respondents either agreed or strongly agreed that drug and alcohol treatment programs were effective (Mean=3.6, SD=.9). Finally, 75% of respondents also agreed or strongly agreed that for most of the jobs in their organization, impaired performance could create a danger of safety hazard, or severe economic problem (Mean=4.0, SD=1.1).

Figure 5 –Favorability Toward Substance Abuse Treatment and Recovering Workers



Responses to questions regarding the extent to which respondents would hire individuals with drug or alcohol problems in their history were highly similar to responses concerning efficacy of drug/alcohol treatment. Only 10% of respondents reported that they would not hire someone with a history of substance abuse that was currently clean. Similarly, 13% reported they did not think the hiring manager at their organization would hire someone with a history of substance abuse. In response to the question of whether individuals with a prior history of substance abuse were a bad risk of performance problems, approximately 26% reported disagreement or strong disagreement, 55% were neutral, and 18% reported agreement or strong agreement (Mean=2.9, SD=.8).

### Conclusions or Recommendations

- ❑ A relatively large percentage of respondents said that on or off the job alcohol and drug use was of “little or no concern.” Very few were worried about keeping employees who couldn’t pass a drug test. Although this could indicate that organizations believe that their policies and drug testing procedures are sufficient, there may also be organizations that do not fully appreciate the significance of the problem.
- ❑ The drug respondents were most concerned with was alcohol; yet, among safety-sensitive organizations, methamphetamine and marijuana are larger concerns. The greatest drug-related concern issues were the serving of alcohol at company functions and hiring future drug-free employees. A sizeable group also expressed concern about the increasing availability of medical marijuana cards.
- ❑ Most organizations in the sample had instituted drug/alcohol testing and offered EAPs, many of which covered substance abuse treatment. An even greater percentage had a drug free policy. Thus, some companies have a stated policy that they are not necessarily enforcing with drug testing. A respectable percentage of respondents reported that their organization conducted pre-hire and random alcohol testing, which depending on the circumstances could violate state law; such responses could also indicate a lack of awareness of their organization’s drug testing practices. Most respondents thought their drug testing policy was fair and believed in the effectiveness of drug/alcohol treatment. Further, although respondents were concerned about hiring drug-free employees and the majority tested pre-hire, few reported reluctance to hire someone with a history of substance abuse who was currently clean. Almost half of respondents reported knowledge of employees using drug/alcohol treatment programs, the majority of which were outpatient treatment. The satisfaction rate with employee performance after treatment was high. The vast majority of reported cases resulted in a favorable outcome, with the employee returning to work and performing satisfactorily.
- ❑ To conclude, the importance of conducting research on drugfree workplace policies and procedures was supported, revealing critical points for potential educational workshops and also areas where additional information is still needed. In general, more data are needed, particularly from representative samples that draw evenly from state and local organizations. Especially needed in future research work is a greater percentage of respondents from safety-sensitive industries.

### Acknowledgements

We gratefully acknowledge the contributions of the following individuals to this project:

- Mimi Bushman, Chris O'Neill and Workdrugfree
- Jerry Gjesvold, Jerry Schmidt and Serenity Lane
- PHRMA Drugfree Workplace SIG members, notably Jana Wolfgang and Theresa Ius
- Dawn Jansen, Lori Boone and Sandi Wegrzyn from PHRMA, along with PHRMA members

## References

- Market Decisions Corporation. (2003). *2003 Workdrugfree Employer Survey*. Retrieved November 18, 2004, from <http://www.workdrugfree.org/contentMenus/2003EmployerSurveyrptMDC.pdf>
- Arthur, A. R. (2000). Employee assistance programmes: The emperor's new cloths of stress management? *British Journal of Guidance and Counseling*, *28*, 549-559.
- Frone, M. R. (2004). Alcohol, drugs, and workplace safety outcomes: A view from a general model of employee substance use and productivity. In J. Barling & M. R. Frone (Eds.), *The Psychology of Workplace Safety* (pp. 127-156). Washington D. C.: American Psychological Association.
- Hoffman, J. P., & Larison, C. L. (1999). Worker drug use and workplace drug-testing programs: results from the 1994 national household survey on drug abuse. *Contemporary Drug Problems*, *26*, 331-354.
- Lehman, W. E. K., & Simpson, D. D. (1992). Employee substance use and on-the-job behaviors. *Journal of Applied Psychology*, *77*, 309-321.
- Normand, J., Salyards, S. D., & Mahoney, J. J. (1990). An evaluation of preemployment drug testing. *Journal of Applied Psychology*, *75*, 629-639.
- Oginska, H., Pokorski, J., & Oginski, A. (1993). Gender, aging, and shiftwork intolerance. *Ergonomics*, *36*, 161-168.
- Reynolds, G. S., & Lehman, W. E. K. (2003). Levels of substance use and willingness to use employee assistance programs. *The Journal of Behavioral Health and Services Research*, *30*, 238-248.
- Tepper, B. (1994). Investigation of general and program specific attitudes toward corporate drug testing policies. *Journal of Applied Psychology*, *79*, 392-401.

Truxillo, D. M., Bauer, T. N., & Paronto, M. E. (2002). Reactions to organizational alcohol testing and treatment programs. *Journal of Business & Psychology, 17*, 31-45.

Zhang, Z., Huang, L. X., & Brittingham, A. M. (1999). *Worker Drug Use and Workplace Policies and Programs: Results from the 1994 and 1997 National Household Survey on Drug Abuse* (No. SAMHSA Analytic Series: A-11). Rockville, M.D.: SAMHSA.

## Appendix A: PHRMA Workplace Substance Abuse Survey

---

Dear Potential Research Participant,

You are invited to take part in this study about substance abuse policies in your workplace. This survey will take approximately five minutes of your time.

### **Why?**

- We are interested in your opinions about drug and alcohol testing policies, perceptions of substance abuse treatment, and organizational concerns about substance abuse.
- Results from this study may be used by the PHRMA Drugfree Workplace Special Interest Group to develop workshops around these issues.
- These results will also provide much-needed data that would benefit researchers, policy makers and organizations.

### **What's involved?**

- You will be asked to complete a short online survey that should take about 5 minutes.
- In exchange, we offer you the opportunity to be entered in a lottery to win one of two \$25 gift cards. To be included, all you need to do is follow the instructions at the end of the survey (which will bring you to a new WebPage). Please note that we will not be able to link your name or personal information with your survey responses.
- You do not have to take part in this study, and participation is voluntary and for research purposes only.
- Your individual responses will not be included in any reporting.
- Your participation will not affect your employment status.
- You may discontinue participation in the study at any time. If you feel uncomfortable answering any question, you may skip it.
- Because we can't link your name and personal information to your survey answers, your responses are anonymous.

### **Any questions?**

If you have any concerns or questions about this study, please contact the Chair of the Human Subjects Research Review Committee, Office of Research and Sponsored Projects, 111 Cramer Hall, Portland State University, Portland, Oregon, 97207, (503) 725-4288. You may also contact Dr. Mohr at (503) 725-3981 or [cdmohr@pdx.edu](mailto:cdmohr@pdx.edu).

With sincere thanks, Dr. Cynthia Mohr

I don't accept

To what extent is on-the-job alcohol or other drug use a concern in your organization?

- Great concern
- Some concern
- Little or no concern

To what extent is off-the-job alcohol or other drug use a concern in your organization?

- Great concern
- Some concern
- Little or no concern

What problems, if any, do you feel may be associated with employee alcohol or other drug use? (Please check all that apply.)

- Absenteeism/tardiness
- Lost productivity/performance
- Safety/injury to self or others
- Impaired judgment/attention to detail
- Attitude/relationships
- Theft
- Other (please specify)

If you selected other please specify:

Does your organization conduct drug or alcohol testing? (please check all that apply.)

- Pre-hire
- For cause
- Random
- Post accident
- No testing

What types of substance abusing testing does your organization utilize? (please check all that apply.)

	Drugs	Alcohol
Pre-hire	<input type="checkbox"/>	<input type="checkbox"/>
For cause	<input type="checkbox"/>	<input type="checkbox"/>
Random	<input type="checkbox"/>	<input type="checkbox"/>
Post-accident	<input type="checkbox"/>	<input type="checkbox"/>

To what extent do you agree with each of the following statements:

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
The drug/alcohol policies at my organization are fair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My organization chooses employees for drug/alcohol testing in a consistent manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My organization uses the results of drug/alcohol tests in a consistent manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People get a fair outcome as a result of our drug/alcohol-testing program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does your company have a drug-free workplace policy about drugs, alcohol, and/or tobacco?

- Yes
- No
- Don't know

Which of the following does the policy cover? (check all that apply.)

- Alcohol
- Drugs
- Tobacco
- Medical Marijuana

How do employees get drug-free workplace policy information? (Please check all that apply.)

- Policy manual
- New employees read policy and sign
- Orientation

- Individual meetings
- Group meetings
- Memo/notice
- Email Communications/Internet Page

Do supervisors receive formal training for intervening with employee drug/alcohol-related performance problems?

- Yes
- No

Do your employees have access to any kind of formal Employee Assistance Program?

- Yes
- No

What proportion of your employees have access to group health insurance?

- All
- Some
- None

Which of the following does it cover? (please check all that apply).

- Substance abuse
- Inpatient treatment
- Outpatient treatment
- Tobacco Cessation
- Don't know

To what extent are the following issues of concern to your business?

	Of great concern	Of some concern	Not an issue in my organization	Of little concern	Of minimal concern
Difficulty of hiring new drug-free employees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Difficulty of hiring future drug-free employees (i.e., today's students)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
How to keep good employees who can't pass a drug test	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Increasing availability of medical marijuana cards to current and future employees	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Serving alcohol at company-sponsored functions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supervisor reluctance to enforce substance abuse policy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (please list in comments field):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional comments:

Which of the following is your organization MOST concerned about?

- Tobacco
- Alcohol
- Marijuana
- Methamphetamine
- Other (please specify)

If you selected other please specify:

Do you know if any of your employees have been through a treatment program for alcohol or other drug dependencies during the past 12 months?

- Yes
- No

Thinking about the most recent case, what type of program did the employee enter?

- Inpatient/Residential Treatment
- Outpatient Treatment
- DUII Diversion Education
- Don't Know

Thinking about the most recent case...

	Yes	No
Were you and/or the EAP provided regular reports regarding the employee's compliance and progress from the treatment provider?	<input type="checkbox"/>	<input type="checkbox"/>
Were you personally involved in the referral process?	<input type="checkbox"/>	<input type="checkbox"/>
Did your employee return to work after treatment?	<input type="checkbox"/>	<input type="checkbox"/>
Are you satisfied with your employee's post-treatment job performance?	<input type="checkbox"/>	<input type="checkbox"/>

Thinking about the most recent case, how long was the employee gone from work as a result of treatment?

weeks

To what extent do you agree with each of the following statements:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Offering drug/alcohol treatment is a good business practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offering drug/alcohol treatment is cost-effective.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol/drug treatment programs can help people stop substance abuse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who get treatment for drug/alcohol abuse are helped by it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug/alcohol treatment programs are effective.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For most of the jobs in our organization, impaired performance could create a danger or safety hazard, or severe economic problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would hire a job applicant who had a history of substance abuse but who was currently "clean".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The hiring manager(s) in my organization would hire a qualified person with a prior history of substance abuse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with a prior history of substance abuse are a bad risk in terms of performance problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Can you name any provider you might consider for drug/alcohol treatment?

The following questions will be used for statistical purposes only.

Please indicate the approximate number of full-time employees at your company:

Please indicate the approximate number of part time employees at your company:

Please select the category that best matches your industry:

- Service
- Retail
- Social Services/Non-Profit
- Timber
- Healthcare
- Transportation
- Construction
- Manufacturing/Production
- Hospitality
- Public Sector
- High Tech
- Other (please specify)

If you selected other please specify:

How would you *best* describe your current position with your employer?

- President
- Owner
- Executive
- Manager
- Human Resources
- General Manager

- Administration
- Safety
- Other (please specify)

If you selected other please specify:

What is your gender?

- Male
- Female

How did you hear about this survey?

- PHRMA
- Other

Thank you for completing the survey. We would like to offer you the chance to win one of two \$25 gift cards. When you submit your survey, you will be directed to a lottery entry form. Please fill out your name and e-mail address. The information you provide on this form will not be linked to your responses on the survey. Thank you again for your participation.