

ENABLING in the Workplace

Supervisor

- Ignoring job performance problems, hoping they will go away, or are temporary.
- Threatening disciplinary action without following through on such threats.
- Avoiding confrontation of employees who are considered friends.
- Avoiding confrontation because you are a heavy drinker like the employee needing referral.
- Accepting excuses for ongoing job performance problems.
- Accepting employee's request to avoid use of Quantum EAP in favor of other helping options.
- Ignoring the return of job performance problems after a Quantum EAP referral until they reach a intolerable level.
- Not acting to arrange a reasonable suspicion breath test when the odor of alcohol exists—accepting explanations (medicine, etc.) for it.
- Protecting the employee from personnel actions while increasing personal involvement to assist the employee.

Work/Organization Culture

- Transferring the employee to another division or department to “get rid of” the problem. Using transfers as disciplinary actions.
- Failing to take action when promised in response to performance problems.
- Alcohol/drug policy lacks effectiveness or encourages cover-up.
- Ignoring repeated complaints of coworkers affected by behavior of the alcoholic or addict.
- Failing to insist on compliance with Quantum EAP recommendations after firm-choice referrals that may have adverse actions held in abeyance.
- Ignoring behavior of executive level employees with obvious drinking problems or having an organization with the inability to intervene.
- Viewing employee as “indispensable” despite problems, perhaps because of job skills, knowledge, longevity with the organization, etc.

Coworker

- Accepting apologies and assurances for the temporary nature of problems.
- Failing to confront problems caused by absenteeism and tardiness.
- Doing the job of coworker. Feeling sorry for coworker. Caring and understanding “too much.”
- Failing to confront drinking practices for fear of losing a friend.
- Considering coworker a “functional alcoholic” who doesn't affect you (yet.)
- Protecting a coworker from management.
- Promising to confront coworker if problems gets worse, and then adapting to “worse”, and not confronting coworker.
- “Working around” the personality or drinking pattern of the alcoholic in order to have a functional relationship (i.e., anticipating mood swings, irritability in work interactions.)
- Loaning large amounts of money.

High Risk Jobs/Occupations

- High value placed on social activity with frequent use of alcohol, alcohol use at lunch, etc. (i.e., lawyers are more likely to drink at lunch than school teachers. High male demographic work groups with strong social ties consume more alcohol.)
- Official rest breaks that allow for alcohol use.
- Industries characterized by frequent opportunity to use alcohol (or drugs.) For example, organizations with higher rates of business travel, sales travel, evening work shifts with after-hours socializing with alcohol; isolated employees without direct supervision (i.e., non-office-like environments); exposure to served alcoholic beverages (airlines, hotel, restaurants); accessibility to addictive drugs - pharmaceutical, medical, and nursing occupations.
- Self-employed persons. (Frequent opportunity to tax susceptibility.)
- Alcohol/drug policy lacks effectiveness or fear encourages cover-up.

*A high risk industry or work culture unknowingly exposes at-risk employees (i.e. those who are genetically susceptible or employees in adaptive stages of alcoholism) to frequent use of alcohol and thereby contributes to increased occurrence rates of alcoholism or addictive disease. (Adapted from National Institute on Alcohol Abuse and Alcoholism)

This information is not intended to replace the medical advice of your doctor or healthcare provider. Talk to your health care provider or Quantum EAP at 1-877-747-1200 for advice about a personal concern or medical condition.

Call Quantum EAP at
1-877-747-1200.



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