

What We Know About Alcoholism in Industry

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FAR LESS is known about alcoholism as it affects on-the-job work experiences of the employee who is a problem drinker than is commonly believed. The cost of problem drinking employees to their employers, for example, has sometimes been described as an annual "billion dollar hangover." Significantly higher rates of on-the-job accidents and job absenteeism are attributed to the problem drinker as compared with the rates of nonalcoholic employees.

Evidence to back up these alleged work characteristics is nevertheless quite sparse. The simple truth is that what we do not know about the work experiences and behavior of problem drinking employees greatly exceeds what we do know (1).

There have been some scattered estimates in widely separated companies regarding the cost to the employer of problem drinkers. But these merely suggest that in some job situations such an employee is a costly personnel item while in others he is a relatively minor expense item. Furthermore, his work-related accidents have not been studied in any systematic fashion to discover whether his rate is any higher than that of nonalcoholic employees. Even absenteeism, about which most is assumed to be known, has not been effectively studied with

reference to such variables as job types, job status, and stage in the development of alcoholic disease.

Despite this general lack of substantial data about the work behavior of the employee with a drinking problem, some tentative descriptions of the work experiences of alcoholics can be made with a fair amount of confidence. Moreover, there is a slowly developing body of data that can be labeled "things we know less about" but concerning which some hunches are available, even though there are fewer data to back them up than those experiences we can describe tentatively. In short, we can classify what we know about the industrial aspects of alcoholism into data that give us some reasons to believe they are reliable, and data that are far less reliable, but which nevertheless provide us some basis for hunches.

The fact that early- and middle-stage alcoholics continue to work is the work characteristic on which we probably have the most substantial data. Of some 700 work histories of members of Alcoholics Anonymous I collected, only 4 members reported they did not work regularly during the middle phases of their alcoholism. There seems to be little doubt that the alcoholic works regularly while his malady is in its incipient and middle stages. Typically he continues on his job for years as the symptoms of compulsive drinking develop at a slow but steady pace. He gradually, almost imperceptibly, loses control of his drinking until he comes to the point where, once he begins to drink, he finds it almost impossible to stop voluntarily.

The symptoms of the early and middle stages

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that accompany this loss of control are not the dramatic ones of late-stage alcoholism which most people think of when they hear the term. Consequently, he is unrecognized as an alcoholic and continues to work actively at his job or profession even though he is well along the road to alcoholism. It is this unrecognized, covered-up employee with a drinking problem who constitutes an especially difficult personnel matter for management.

What are some of these early and middle symptoms (2)? Since the alcoholic drinks to experience a sense of physical and emotional well-being, he soon discovers he must drink a lot more than he did a few years before because it takes more liquor to get the same "glow." So he begins to drink everyone under the table, and his friends often observe how well he can "hold his liquor." Thus his consumption increases markedly. So do his periods of temporary amnesia. Dubbed "blackouts" or "pulling blacks," these are not periods of physical unconsciousness. They are drinking episodes during which the developing alcoholic appears to an observer much like any other relatively drunk person. The difference, however, is the inability of the early-stage alcoholic to remember what happened during the drinking episode. At first these blackouts are sporadic, but in a few years they become regular experiences.

During the early period he gains a good deal of prestige among drinking friends for these drinking exploits. His capacity to drink and his inability to remember what happened are often sources of group recognition for him; the feelings of well-being he gets from drinking are reinforced by group rewards. But gradually his drinking friends begin to think of him as different and he does, too. As a result, he develops a series of psychological symptoms.

He begins to hate himself for not having the willpower of others, and he finds in alcohol a temporary relaxation of this self-hate. But upon sobering up, he discovers the self-hate is still there, along with an energy-sapping hangover. So, unlike the nonalcoholic with a hangover, he turns to more alcohol in an effort to manage the twin agonies of emotional remorse and hangover pain. At the same time he begins an intense drive to refute the growing realization that he has a drinking problem.

His excuses for drinking become exaggerated, often bizarre. He vigorously denies there is anything wrong, frequently going to work when in bad physical and emotional condition just to prove it. He often seeks out persons who "drink like I do" in an effort to find a congenial set of friends who will not increase his guilt about his drinking (3).

Efficiency Decline

These symptoms usually have a direct impact on his work efficiency. It seems to be quite clear that the hangover, the self-hate, the preoccupation with denying there is anything wrong, the loss of control that leads to continued drinking off the job until something outside himself intervenes to stop him, and the anxiety about getting alcoholic relief during the workday reduce substantially his ability to do his job.

This decline in efficiency has numerous facets. The problem drinker begins to procrastinate a great deal, to put off everything except absolutely essential tasks, to fulfill only the immediate requirements of his job. He compromises with quality, accepting second or third "best" because he is unable to concentrate on the details necessary to perform his job well (4). A "don't-care" attitude supports the work slowdown. Fatigue saps his energy, and consequently initiative is forgotten. He has a strong tendency to do his job any old way just to get it done. In short, he is content with a mediocre performance. Because he becomes very guilt-ridden about his poor work, typically, he tries to make up for it by spasmodic spurts of output or creativity during which he often does superior work (5). This serves as a sign to him that his work is still well done. Actually it is merely a short-lived increase in a general efficiency decline.

Fairly good data also indicate that problem drinkers are rather evenly distributed through all occupational groups as well as many types of businesses and industries (6). The old stereotype that visualized the unskilled, poorly educated "drunk" as the typical alcoholic is obviously wrong. Company after company has discovered well-developed problem drinkers among their managerial ranks, and the pro-

fessions appear to be proportionally represented in the alcoholic population. In short, it seems that alcoholic employees appear in substantial numbers in managerial, skilled, unskilled, semiskilled, service, clerical, and professional occupations. When the last stages of alcoholism are reached there is some tendency to gravitate toward the migratory, spot-labor jobs, but this is far from a general trend even at this stage.

The middle-stage alcoholics are apparently rather evenly distributed throughout the various types of American industries (7). Construction does not seem to have an unusually low or high number of them in comparison with agriculture or manufacturing. Transportation has substantial numbers, as do finance and service businesses. Government service, including the military, has its quota but, again, not in any unusual concentration.

In addition to this characteristic of dispersion throughout the work world, the middle-stage alcoholic is, in many respects, like any other employee (6). He cannot be distinguished by his length of service, marital status, or mode of residence. Although his drinking deviates from accepted limits, he is still part of established social and economic patterns of living.

The type appears to be lodged heavily among male employees in the ages from 35 to 50 years. Certainly female alcoholics exist, probably many more than are currently estimated, and many more women are in the labor force today than 20 or 30 years ago. There are still good grounds, however, for believing that industry will find more alcoholism among men than women. Even more certain is the characteristic that alcoholism is a disorder of the mature years at a time of maximum work expectancy. If it were spread evenly among workers of all age groups, its industrial impact would be far less. Concentrated as it is in the productive years of 35-50, it can impair a large number of workers at the point of their greatest work contribution.

Company Rehabilitation Efforts

Numerous prominent companies have recognized alcoholism as a health problem, issuing

personnel policies regarding it and setting up specific procedures to carry them out (8). Typically, the policy statements issued (a) indicate that the company regards alcoholism as a form of illness and intends to act accordingly; (b) explain how the company will aid in the rehabilitation of the alcoholic employee; and (c) set the limitations on this aid, that is, the point at which the company will cease to aid in the rehabilitation of such an employee and consider his discharge.

In implementing these policies, various personnel practices have been used. Sickness benefits, pension eligibility, leaves of absence, counseling and referral to outside treatment facilities, and supervisory training relative to the malady have all been offered in various company programs for rehabilitation. However, no one company has used all of these. Most of the programs operate in the belief that rehabilitation does not occur overnight and that recurrence of drinking can be expected. When the employee makes a sincere effort and his "slips" become infrequent, most companies with rehabilitation policies believe there is justification for continuing company aid.

On the other hand, when reasonable aid does not produce or seem to prognosticate any basic change in the drinking pattern, most companies consider termination. Continued aid in rehabilitation under these conditions, they believe, is merely an unwitting support of abnormal drinking and is probably a hindrance rather than an aid to sobriety. Briefly, almost all companies with a treatment policy will, under certain circumstances, discharge an employee because of his drinking. A few companies exhaust all possibilities for every alcoholic, requiring special review before termination. This is especially true for longtime employees.

Extent and Cost to Industry

Data on the extent and cost of alcoholism in business and industry are far less reliable than data on efficiency decline and efforts at rehabilitation. There are grounds only for reasonable guesses. Estimates of the number of employed middle-stage alcoholics have been made in two ways: (a) by taking the estimated number of all alcoholics in the total population and making

an educated guess of the number who are regularly employed, and (b) by using the estimates made in specific companies as an indication of the number throughout industry. Both of these approaches are questionable at best; however, they provide us with a rough idea of the extent of the problem.

Estimates of the total number of alcoholics have come mainly from the Jellinek estimation formula (9), the intricacies of which I will not explain here. It is appropriate, however, to point out that numerous efforts to validate estimates made by the formula have shown considerable success. Thus, an independent survey of the number of alcoholics in a specific locality is compared with an estimation obtained with the formula. In numerous instances the two have agreed closely, leading to the tentative validation of the Jellinek estimations (10).

The chief difficulty with this procedure is that no one knows the accuracy of the independent survey against which the estimates were validated. The survey results may or may not correctly reflect the number of alcoholics in the area. Therefore, one set of questionable estimates may be validated against another set of equally questionable data.

On the other hand, the repeated close agreement between the appraisals made by the formula and independent assessment indicates that the Jellinek estimates are far more than conjecture. Apparently, there is a careful approximation in them that merits close attention. In 1955 the formula estimate was 4,500,000 incipient and full-blown alcoholics in the United States.

But how many of these are employed regularly in a definite job? Here the quest becomes very fuzzy. Most observers have played safe and said only half of these were actively employed. At the same time case histories of clinics and work histories of members of Alcoholics Anonymous suggest a substantially higher number in the employed category. But no one knows how to be more precise in any systematic fashion about the estimation.

The figure usually cited is 2 million, or approximately 3 percent of the Nation's labor force. But a particular company may have many more or many less than this percentage. Judging from studies in individual companies,

this figure can range from practically none to 10 percent (11,12).

But troubles in estimating really start when we try to appraise the costs of alcoholism to American industry and business as a whole. This appears to be not only an almost impossible task but also a gigantic one. When the vast array of factors, both tangible and intangible, affecting the value of an employee to his employer are considered, the difficulty of the task becomes obvious. And, when an effort is made to attach a dollar value to the way in which alcoholism reduces this value, any nationwide effort is extremely questionable. The best we can do is list the various cost factors that may be relevant to a particular company, leaving to the judgment of those who know the organization any actual estimation of dollar cost (13).

First, cost of reduced work efficiency is the most apparent factor. This can take many forms such as scrap, spoilage, errors in assembly and shipping, slowdown, fewer sales, increased rejects, and customer complaints. Executive and professional error adds another and even more costly dimension. Second, since many alcoholics appear to have a substantially higher absenteeism rate, they can be costly from this standpoint. Furthermore, companies make training investments in many employees which are lost if termination for alcoholism occurs, and replacing an employee can be expensive. The public relations impact of an alcoholic employee is also a potential cost item along with the sickness support the company may provide for the many related illnesses that accompany alcoholism.

Briefly, the only meaningful cost items come from specific companies who appraise alcoholic employees in specific jobs and attach a dollar value to their cases. This procedure has been attempted in a few instances, and the results suggest that in many situations problem drinkers are very costly to their employers, while in others the cost is relatively modest (14).

Absenteeism and On-the-Job Accidents

Again, we do not have very much specific information about absenteeism and on-the-job accidents of alcoholics. There are data indicating that, in general, the absenteeism rate of

a company's problem drinkers is significantly higher than that of nonalcoholic workers (15,16). Beyond this we have only hunches. However, these suspicions are interesting.

Some grounds exist for believing that "no-report" absenteeism and "partial" absenteeism characterize a developing drinking problem in an employee (17). Failure to report his inability to be on the job is often a symptom of the middle-stage alcoholic that distinguishes him from the average absentee. In the early stages, a member of his family may report his absence. But as his problem worsens, his absences will occur without advance notice from anyone. Often he comes to the job only to leave before the day is over (18). He realizes he cannot get through the day without a drink, so he leaves. This behavior is most likely in unskilled and semiskilled work which operates on a definite schedule and under close supervision.

There is also some exploratory evidence regarding absenteeism among high-status as contrasted to low-status problem drinkers (19). Alcoholic executives, engineers, lawyers, doctors, and other high-status workers apparently have substantially less actual absenteeism than do low-status alcoholics on semiskilled and unskilled jobs. High-status inebriates, however, seem to have a great deal of "on-the-job absenteeism," that is, they come to work when they feel bad from their drinking behavior, but for all practical purposes are "absent." They put in an appearance but merely go through the motions of doing their jobs. Low-status problem drinkers tend to have large amounts of actual "stay-away absenteeism."

Various motivations and work situations seem to account for this difference. The high-status alcoholics, despite their disorder, were motivated to go to work by a sense of responsibility, a desire to deny there was anything wrong, and as a way to reduce their guilt about excessive drinking. The motivations to go to work anyway were reinforced by the fact that once at work, they could get a drink rather easily when they wanted one. They have freedom from close supervision, freedom of schedule, and freedom to move around. Low-status workers did not express these motiva-

tions nor enjoy these job freedoms, so their actual absenteeism was consequently higher.

Far more contrary to popular belief are notions about the job accidents of the problem drinker. The belief that his accident rate must be higher than that of other workers is widespread. Yet what meager evidence there is suggests no such sharp difference (17,20). Reasons for this evidence to the contrary are numerous. Many jobs involve little exposure to accidents, and safety engineering has removed the dangers from many more. Problem drinkers, scattered throughout all occupational levels, have their share of the safe jobs. Also, the repetitive nature of many jobs and the routine to which an experienced employee reduces his work are a protection to the problem drinker.

Furthermore, an overcautious attitude is part of the problem drinker's defense mechanism. He seems to be overly cautious of job hazards and thus minimizes the chance of accidents. The problem drinker has a keen awareness of alcohol's effect on him and develops a routine for handling it. Finally, two factors act to reduce his actual exposure to accidents. On many days when he believes he is likely to have an accident he resorts to absenteeism; it is impossible for him to have an accident on the job if he isn't there. And, in some instances, fellow workers or a supervisor will see to it that a problem drinker is put on a safe job until he is in better shape to handle a job that exposes him to accidents.

Summary

Although evidence is rather meager, we know the problem drinker is a definite personnel problem for employers. Even though he is only in the middle stages of his malady, not a full-blown, chronic alcoholic, his work efficiency is materially damaged, and often he can be a definite financial liability. Alcoholism in industry is a disorder of the mature years, the time of maximum work expectancy.

Conservative estimates of the number of employees who are alcoholics center around 2 million, and there seems to be good evidence that they are present in substantial numbers in all occupational and industrial groups.

Something is being done for this type of employee. Numerous companies have a definite rehabilitation policy with specific procedures for implementing it. Most companies with a policy concerning treatment will, under certain circumstances, discharge an employee because of his drinking.

The inebriate with a high-status job has more "on-the-job absenteeism" than the low-status worker. There is little evidence that the accident rate for the problem drinker is higher than that of other workers.

A start has been made on developing more accurate data about such work experiences as accidents, absenteeism, and coverup. In short, what we know about the industrial aspects of alcoholism is slowly increasing. Soon we may be able to describe the job aspects of alcoholism more accurately.

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