# Risk factors for substance abuse in the waste management sector: A case study in the Johannesburg Metro

by

Esther Molebogeng Moloi

Mini-dissertation submitted in partial fulfilment of the requirements for the degree Master in Social Work (Employee Assistance Programmes)

in the

Department of Social Work and Criminology Faculty of Humanities at the University of Pretoria

Supervisor: Dr L.S. Geyer

August 2017

Pretoria

### DECLARATION OF ORIGINALITY UNIVERSITY OF PRETORIA

The Department of **Social work and Criminology** places great emphasis upon integrity and ethical conduct in the preparation of all written work submitted for academic evaluation.

While academic staff teach you about referencing techniques and how to avoid plagiarism, you too have a responsibility in this regard. If you are at any stage uncertain as to what is required, you should speak to your lecturer before any written work is submitted.

You are guilty of plagiarism if you copy something from another author's work (e.g. a book, an article or a website) without acknowledging the source and pass it off as your own. In effect you are stealing something that belongs to someone else. This is not only the case when you copy work word-for-word (verbatim), but also when you submit someone else's work in a slightly altered form (paraphrase) or use a line of argument without acknowledging it. You are not allowed to use work previously produced by another student. You are also not allowed to let anybody copy your work with the intention of passing if off as his/her work.

Students who commit plagiarism will not be given any credit for plagiarised work. The matter may also be referred to the Disciplinary Committee (Students) for a ruling. Plagiarism is regarded as a serious contravention of the University's rules and can lead to expulsion from the University.

The declaration which follows must accompany all written work submitted while you are a student of the Department of **Social work and Criminology**. No written work will be accepted unless the declaration has been completed and attached.

Full names of student:	Esther Molebogeng Moloi
Student number:	11300109
Topic of work:	Risk factors for substance abuse in the waste management sector: A case study in the Johannesburg Metro.

### Declaration

- 1. I understand what plagiarism is and am aware of the University's policy in this regard.
- I declare that this mini-dissertation (e.g. mini dissertation) is my own original work. Where other people's work has been used (either from a printed source, Internet or any other source), this has been properly acknowledged and referenced in accordance with departmental requirements.

- 3. I have not used work previously produced by another student or any other person to hand in as my own.
- 4. I have not allowed, and will not allow, anyone to copy my work with the intention of passing it off as his or her own work.

SIGNATURE

DATE 11 September 2017

### ACKNOWLEDGEMENTS

I would like to express my sincere gratitude to:

- God for giving me strength and courage to complete my studies amidst all challenges.
- My supervisor, Dr Stephen Geyer for his unwavering support, guidance, words of encouragement, constructive criticism, and motivation to remain focused on my work.
- My sons, Kgothatso and Koketso for their unconditional love and understanding for the time I spent on my studies. I love you lots.
- My family for their support. Special thanks to my sister, Carlo and cousin, Winny for their encouragement and being my pillar of strength.
- My partner for being an inspiration. Thank you for being a part of my life.
- Sorika de Swardt from ELIM Clinic for her guidance and assistance with acquiring material for my research.
- Peggy Ntsoane from ELIM Clinic for her willingness to always assist me when I needed help.
- PIKITUP for permitting me to conduct the study and for their financial support.
- Participants of this study for availing their time and cooperation, without which this endeavour would have not been realised.

### ABSTRACT

# Risk factors for substance abuse in the waste management sector: A case study in the Johannesburg metro

Researcher:	Ms Esther Molebogeng Moloi
Supervisor:	Dr Lourens Stephanus Geyer
Degree:	MSW (Employee Assistance Programmes)
Institution:	University of Pretoria

The goal of this study was to explore and describe the risk factors for substance abuse in the waste management sector within the Johannesburg metro. In order to achieve this goal, a qualitative research approach was adopted to explore and describe the views of employees from treatment<sup>1</sup> centres and supervisors, respectively.

Since the study was qualitative in nature, the collective case study design guided the study. Two types of data collection methods were used, namely semi-structured interviews for employees who were recently released from treatment centres and a focus group discussion with supervisors. Purposive sampling, guided by specific inclusions criteria, was considered the most appropriate to recruit two participant groups, namely ten employees who were from treatment centres and eight supervisors who represented middle management.

Two distinct interview schedules were developed and utilised for employees from treatment centres and supervisors, respectively. From the raw data obtained, data analysis was conducted using the thematic analysis process proposed by Braun and Clarke (2013). The trustworthiness of the data interpretation was confirmed through triangulation, peer de-briefing and transferability.

An analysis of two different sources of data, namely employees from drug treatment centres and supervisors, was undertaken to answer the two research questions, namely: (1) *"Based on the views of employees recently released from treatment centres what are the risk factors for substance abuse within the waste management sector in the Johannesburg metro?"* and (2) *"Based on the views of supervisors what are the risk factors for substance abuse within the waste management sector in the Johannesburg metro?" iv* 

<sup>&</sup>lt;sup>1</sup> In the context of this study the concept 'treatment centre' refers to an institution for the treatment of substance use disorders (*cf.* Act 70/2008).

The key findings of the study were that the waste management sector is associated with an array of risk factors encouraging the use of substances of abuse by its employees within the work environment. The following risk factors were identified: (1) working conditions exposing employees to physical, chemical and biological hazards. The dirtiness of the work creates

stigma among employees towards the type of job they are doing. (2) The nature of the job is physically demanding, fast paced and risky. (3) Physical and social availability due to proximity to alcohol and other drug suppliers, as well as community members giving alcohol to employee's onsite. (4) Inadequate supervision as it encourages employees to continue to work without the supervisors monitoring. (5) Lack of fear of the law/consequences due to employees knowing that policies are rarely implemented by supervisors. (6) Initiation to the use of substances of abuse which emanates particularly from family role models. (7) Employees use of alcohol and other drugs to relief stress and emotional distress caused by family problems, financial problems and work conflicts. (8) Peer–group pressure was equally highlighted as a risk factor for employee substance abuse. (9) Lack of regular support group meetings for those employees who are from treatment centres. (10) Drinking on duty has been normalised. (11) The system of male migrancy where employees still live together in hostels or informal settlements, sharing social interaction beyond the workplace, and modelling to each other to abuse alcohol or drugs.

Based on the key findings from both employees recently released from drug treatment centres and supervisors, recommendations were made for Employee Assistance Programmes services at PIKITUP, for the organisation itself, PIKITUP, and for policy changes at PIKITUP. Among the recommendations are that substance abuse awareness programmes should be put in place targeting particularly males in the middle age years (that is, 25 to 38 years), as they present a risk group. Furthermore, to provide recognition in the form of awards and incentives to employees who have gone for drug treatment to encourage them to maintain sobriety. Considering that the nature of the job is physically demanding and fast paced, the organisation should look into an assessment of the volume of work per day in relation to human resource allocated. This should be done with the intention to ease the burden of musculoskeletal disorders employees are prone to develop. The company cannot shut down all the liquor outlets because they are around the employees working environment, but the company should put measures in place that will prevent employees from engaging in alcohol and drugs within the work environment. Supervisors should take a stand and implement company policies and procedures to ensure that employees are aware of policies and are implemented. Recommendations for future research are also formulated.

۷

# Keywords:

Johannesburg Metropolitan Municipality

PIKITUP

**Risk factors** 

Substance

Substance abuse

Waste management sector

### TABLE OF CONTENTS

Declaration	i
Acknowledgements	
Abstract	iv
Key words	vi

### **CHAPTER 1: GENERAL INTRODUCTION**

1.1 Introduction	1
1.2 Theoretical framework	2
1.3 Rationale and problem statement	4
1.4 Goal and objectives of the study	5
1.5 Overview of research methodology	.5
1.6 Definitions of key concepts	7
1.7 Contents of the report	9

### CHAPTER 2

# LITERATURE REVIEW ON RISK FACTORS FOR SUBSTANCE ABUSE IN THE WASTE MANAGEMENT SECTOR

2.1Int	roduction	10
2.2 Ba	ackground of the waste management sector	10
2.3 G	lobal and local extent and impact of substance abuse	12
2.4 Hi	story of substance abuse in the workplace in South Africa	14
2.4.1	Mine workers	15
2.4.2	Farm workers	15
2.5	Risk factors for substance abuse	15
2.5.1	Organisational risk factors	16
		vii

2.5.1.1	Nature of work	16
2.5.1.2	Age and gender	17
2.5.1.3	Organisational culture and sub-culture	17
2.5.1.4	Physical and social availability	18
2.5.1.5	Limited supervision	18
2.5.1.6	Workplace alienation	19
2.5.1.7	Alcohol and drug policies	19
2.5.2	Social risk factors	19
2.5.2.1	Social norms	20
2.5.2.2	The influence of the community on alcohol use and abuse	20
2.5.2.3	Family influences	21
2.5.3	Intrapersonal risk factors	. 21
2.5.3.1	Rationale or motive for alcohol and drug abuse	22
2.6	Management of substance abuse through the EAP	22
2.6.1	Applicable legislation mandating the management of substance abuse.	24
2.6.2	EAPA Standards relevant to the management of substance abuse	27
2.7	Summary	31

### CHAPTER 3

# RESEARCH METHODS, EMPIRICAL FINDINGS AND INTERPRETATION

3.1	Introduction					33
-----	--------------	--	--	--	--	----

### SECTION A: RESEARCH METHODS

3.2 Research question	33
3.3 Research approach	.34
3.4 Type of research	.34
3.5 Research design	.34
3.6 Study population, sample procedures	.35
3.7 Data collection methods	.36
	viii

3.8 Data analysis	37
3.9 Trustworthiness	39
3.10 Pilot study	41
3.11 Ethical considerations	41
3.11.1 Avoidance of harm	41
3.11.2 Voluntary participation and informed consent	42
3.11.3 Violation of privacy/confidentiality/anonymity	42
3.11.4 Actions and competence of the researcher	42
3.12 Challenges and limitations	43

# SECTION B: EMPIRICAL FINDINGS AND INTERPRETATION

3.13 Section B1: Employees from treatment centres	45
3.13.1 Biographical information	45
3.13.2Themes and sub-themes	51
3.14 Section B2: supervisors	69
3.14.1 Biographical profile of supervisors	69
3.14.2 Themes and sub-themes	71

## SECTION C: COMPARISON/TRIANGULATION OF RESEARCH FINDINGS

3.15 Agreements between employees from treatment centres and the	
supervisors	93
3.16 Disagreements between employees from treatment centres and	
supervisors	95
3.17 Summary	97

### **CHAPTER 4: CONCLUSIONS AND RECOMMENDATIONS**

4.1 Introduction	99
4.2 Research goal and objectives	99

4.3 Conclusions1	105
4.3.1 Conclusions: Employees from treatment centres1	105
4.3.2 Conclusions: Supervisors1	07
4.4 Recommendations1	08
4.4.1 PIKITUP1	108
4.4.2 Policy review at PIKITUP1	10
4.4.3 Employee Assistance Programmes (EAP) services at PIKITUP1	11
4.4.4 Future research1	11

REFERENCES	113

# LIST OF FIGURES

Figure 1: Age of participants: employees from treatment centres	45
Figure 2: Race	46
Figure 3: Home language	.47
Figure 4: Marital status	.48
Figure 5: Highest level of education completed	.49
Figure 6: Years of service in the company	.50
Figure 7: Designation	51
Figure 8: Age of participants: supervisors	70
Figure 9: Years of service as supervisor	71

### LIST OF TABLES

Table 1: Themes and sub-themes: Employees from treatment centres	52
Table 2: Themes and sub-themes: Supervisors	

## ADDENDA

Addendum A: Interview schedule for employees from treatment centres118	
Addendum B: Interview schedule for supervisors	х

Addendum C: Informed consent form for employees from treatment centres
Addendum D: Informed consent form for supervisors
Addendum E: Written permission to conduct the study from PIKITUP
Addendum F: Copy of ethical clearance from UP
Addendum G: Confirmation of Editing

#### **CHAPTER 1**

### **GENERAL INTRODUCTION**

### **1.1 Introduction**

Substance abuse among workers is not only directly detrimental to the health of employees and their families, but also places them at risk for various social and occupational hazards (Burnhams et al., 2014 in Harker Burnhams & Parry, 2015:496). Substance abuse also impacts on industry and exacts an enormous toll on human resources, productivity, and the economic state of companies and the country as a whole (Harker Burnhams, Dada, Linda, Myers & Parry, 2013). In South Africa, the combined total tangible and intangible costs of harmful alcohol use to the economy are enormous (Harker Burnhams & Parry, 2015:496). The phenomenon of workplace substance use and impairment may have more direct relevance for employers in terms of workplace safety and productivity than workforce substance use (Frone, 2012:1). Many aspects of the workplace today require alertness, accuracy and quick reflexes. An impairment to these qualities can cause serious accidents, and interfere with the accuracy and efficiency of work. The results thereof may be related to decreased productivity and low morale among workers who do not use substances at work. Additionally, substance abuse may lead to absenteeism, presenteeism, illness, stress-related effects, illegal activities at work, including a preoccupation with obtaining and using substances of abuse while at work (Frone, 2012:1).

Several researchers such as Lee, Kim and Hong (2015:133); Roche, Lee, Battams, Fischer, Cameron and McEntee (2015:137) and Barnes and Brown (2013:108) argue that the workplace can either encourage or discourage substance abuse and also note that abuse differs between occupational sectors. Some occupations are more prone to substance abuse problems than others. That is as a result of the characteristics of one's employment that play a significant role in the development and continuation of alcohol and other drug problems (Lee et al., 2015:133; Roche et al., 2015:137 and Barnes & Brown, 2013:108). Hence, efforts are needed to identify the organisational, environmental, psychological, social, and individual risk factors that encourage alcohol and drug use within the waste management sector. It is the identification and knowledge of those specific risk factors that assist in the development of interventions to reduce these occupational risk factors associated with substance abuse. Numerous studies have been conducted that mostly focused on binge drinking or risky alcohol use among specific occupational groups in the sectors of mining and agriculture, safety and security, education and health (Harker Burnhams & Parry, 2015:496). Nonetheless, in the waste management sector, no empirical studies were found on substance abuse or alcohol use internationally or locally to highlight the risk factors for substance abuse within this

particular sector. The following databases were consulted that bear reference to that: EBSCO Host, Business Source Complete, PsycARTICLES, PsycINFO, Social Work Abstracts and Humanities Source. However, studies were identified that highlight the hazardous working conditions found in the waste management sector. Some of these studies demonstrate how the industry has become prone to alcohol and other drugs, particularly as a result of the demography of the sector which is male-dominated, have younger workers, mostly blue–collar workers and indigenous employees (Roche et al., 2015:125).

Since it is evident that there is a paucity of studies conducted within the waste management sector, this study seeks to address this gap by exploring the risk factors for substance abuse within the waste management sector. The findings of the study could assist to develop interventions targeted at employees of organisations in the sector to reduce alcohol and drug use as a way of contributing towards the increase in productivity.

### **1.2 Theoretical framework**

The theoretical framework that underpinned this research is the social learning theory (SLT). SLT explains that individuals form expectancies about the effects of substance use through observation and due to the continuous interaction between behaviour and the environments that affect and control behaviour (Bandura, 1973:2). Initially, social norms are learnt. These social norms include when, where, and how other individuals use different substances of abuse and how the amount used depends on the situation. The formed expectancies lead individuals to formulate expectations for their own behaviour should they choose to use that substance (Weiten, 2014:483; Jung, 2010:30).

As a result of the expectations about their behaviour, individuals then form beliefs about their self-efficacy for substance use, that is; how well they will cope with the use of the substance. The said expectations can be reviewed and changed as the individuals have their first actual experience of using a substance of abuse (Jung, 2010:31). Within this context, affective states can influence the self–efficacy belief of the individual.

Behaviour is learnt in two ways - either through observation or direct experience. Learning through direct experience takes place as a result of reinforcement, which can either be positive or negative. The punishment or reward for a specific behaviour is learnt in order to determine the behaviour that will continue. Not all behaviour is learnt through direct experience as that would be highly dangerous in some situations. Behaviour can also be learnt from the example others set, which may be learnt deliberately, or not, but requires the learning individual to observe and recognise the behaviour that is being displayed (Bandura, 1973:5).

SLT can be linked to the context of the workplace with specific reference to the Waste Management Sector in that most adults spend a large portion of their time at work. Therefore, the workplace represents a major social context in which social norms, either descriptive or injunctive, about substance use can develop and be acquired (Frone & Brown, 2009:527). SLT emphasises that employees are exposed to fellow workmates whose behaviour they imitate (model on) and who are social reinforcers for use of the substance. Thus, the act of drinking and using drugs is seen as socially desirable by the group that the employee associates with.

The normative beliefs, drawn from SLT, posits that people will practice behaviours that they learn from observing others' verbal expressions and behaviours, if they are rewarded and if these behaviours are reinforced (Bandura, 1977 in Ames, Duke, Moore & Cunradi, 2009:131). The reward or reinforcement may be in the form of lack of negative consequences for using alcohol or drugs in the workplace. In addition, employees are more likely to engage in risk taking behaviour in a group than when alone. Thus, colleagues play an important role in risktaking behaviour by putting pressure on each other into engaging in that behaviour. Conformity plays an important role here in that employees might find themselves in situations where risky behaviours are taking place and might find it difficult to resist engaging in these behaviours (Varela & Pritchard, 2011:751). The younger workers are usually the most vulnerable as they are still finding their job identity and could be absorbed into the prevailing or existing social norms and organisational culture of the company through observation and modelling (Bennet, Camille, Patterson, Wiitala & Woo, 2006:487). Social norms can be highly influential in the waste management sector especially when considering the trend of male migrancy that encourages continued social interaction even beyond the workplace. The applicability of the theory could therefore assist in the interpretation of data.

In addition, due to the nature of the waste management environment that is physically and psychologically hazardous, employees may learn to cope with stress by watching how those they closely interact with deal with stressors by using negative coping skills such as alcohol and drug abuse. Linked to this is the knowledge that individuals with poor coping skills are often found to develop friendships that encourage substance abuse (Jung, 2010:31). In view of the theoretical assumptions presented above, expectancies around positive or negative consequences of work-related drinking or drug use, organisational culture and social norms, alcohol availability in and around the workplace, support from supervisors and limited supervision and motive for drinking and using drugs will be crucial for data analysis in this study (McCann & Harker Burnhams, 2011:56).

### **1.3 Rationale and problem statement**

The rationale for the study was to explore and describe the risk factors for substance abuse in the waste management sector as a sector that has received limited attention in as far as this topic is concerned. The following databases were consulted and they yielded no relevant studies conducted within the waste management sector: EBSCO Host, Business Source Complete, PsycARTICLES, PsycINFO, Social Work Abstracts and Humanities Source. Many researchers argue that characteristics of one's employment play a critical role in the development and/or continuation of alcohol and drug problems. As indicated above, the waste management sector is male-dominated by middle-aged blue collar, unskilled manual workers in a highly risky environment that is, physically demanding and stressful. These are the characteristics that have been identified as determinants of substance abuse in the workplace (Roche et al., 2015:137). Of major concern is the dearth of empirical research on this topic and where research has been undertaken, it has concentrated on sectors such as mining and agriculture, education, safety and security and health (Harker Burnhams & Parry, 2015:496).

Globally, most of the working conditions in the waste management sector are risky, stressful and physically demanding (Lee et al., 2015:133; Roche et al., 2015:136) and requires a physically healthy, strong and mentally alert employee at all times. As a result, there is a growing interest in worker health and wellbeing with its impact on safety and productivity. This has led to an increasing acceptance of the employer's duty of care to ensure a safe and healthy workplace (Roche et al., 2015:125). It is therefore necessary to conduct an empirical study to determine the specific risk factors for substance abuse within the waste management sector that lead to the development or encouragement of substance abuse. Such a focus is required to inform policies and programmes to reduce identified risk factors for harmful workplace-related substance abuse to help the employer to meet the duty of care obligations under broader workplace health and safety policies. Such workplace policies could benefit both the workplace and the wider economy by increasing productivity, reducing absenteeism, and improving workers' wellbeing and retention (Lee et al., 2015:132; Roche et al., 2015:138).

In the case of this study, the problem statement is that the risk factors for substance abuse within the waste management sector are unknown, and should be investigated in order to identify and build knowledge of those factors that encourage substance abuse within PIKITUP. The findings could help guide the development of prevention and intervention strategies to assist PIKITUP Management in controlling substance abuse within the organisation, while some suggestions could also be useful for the waste management sector at large.

Due to the qualitative nature of the research, a **research question** was formulated as follows: "What are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?"

In order to answer the research question, the following two sub-questions need to be answered:

- a) Based on the views of employees recently released from drug treatment centres, what are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?
- b) Based on the views of management (in this instance supervisors), what are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?

### 1.4 Goal and objectives

The **goal** of the study is to explore and describe the risk factors for substance abuse in the waste management sector within the Johannesburg Metro.

In order to achieve the goal, the following research objectives had to be achieved.

- To contextualise EAP services for substance abuse in the workplace.
- To identify the risk factors for substance abuse among employees released from drug treatment centres, and supervisors in direct contact with the employees.
- To make recommendations for policy and prevention, treatment, monitoring and after care services to employees who abuse substances.

### 1.5 Overview of research methods

Based on the research topic, the most appropriate research approach for the study was the qualitative approach. This was informed by the purpose of the study which intended to explore and describe the risk factors for substance abuse in the waste management sector as a relatively unknown terrain (Fouché & Delport, 2011:66). The implementation of this study was applied in nature. Applied research is useful when looking to solve specific policy problems or at helping practitioners accomplish tasks in practice (Fouché & De Vos, 2011:95). Thus, the results gathered from this study, which evolves around understanding of the risk factors for substance abuse within a waste management sector, attempt to guide policy and programme development envisaged to improve service delivery.

Since the study is qualitative in nature, a case study design (more specifically the collective case study) was considered the most adequate research design as the researcher was interested in obtaining answers to the research questions, not only based on the opinion of one or two isolated cases, but rather the collective view of two groups of participants that is; employees who were from treatment centres and supervisors in middle management (Nieuwenhuis, 2010b:70).

The study population for this study was employees of PIKITUP Waste Management Company of the City of Johannesburg Municipality. As a qualitative study, purposive sampling was considered the most appropriate sampling technique to be followed as it enabled the researcher to ensure that a sample is composed of participants that have characteristics, representative or typical attributes of the population that best serve the purpose of the study (Strydom & Delport, 2011:392; Maree, 2007:79). Thus, the two samples selected namely, employees from treatment centres and supervisors, were able to provide valuable information that provided answers to the two distinct sub-questions.

As a collective case study design, two types of data collection methods were utilised, namely semi-structured interviews for employees who were recently released from treatment centres and a focus group discussion with supervisors. The semi-structured interview consisted of predetermined questions, however the interview was guided rather than dictated by the schedule (Greeff, 2011:352). Interviews were audio recorded to ensure accurate transcriptions of the interviews with the informed consent of each participant (Greeff, 2011:352). The focus group consisted of an interview schedule which enabled the researcher to gather the collective views of the group of participants instead of individuals in order to assist with facilitation (Greeff, 2011:361).

From the data obtained from both the semi-structured interviews and the focus group, data analysis was conducted using the thematic analysis process proposed by Braun and Clarke (2013). In order to ensure that the study is trustworthy, the researcher applied a number of criteria and steps applicable to qualitative research. To achieve credibility, the researcher managed the risk of research reactivity and bias by utilising triangulation, peer debriefing and transferability. Triangulation involves the use of two or more sources to achieve a comprehensive picture of a fixed point of reference (Lietz & Zayas, 2010:193). The researcher used a combination of individual interviews and focus group discussion to gather data from target sources. The researcher also consulted with colleagues and other professionals knowledgeable in the field of substance abuse, as well as with the research supervisor throughout the entire research process. Transferability is the last strategy utilised to increase trustworthiness. The study findings along with the suggestions that followed may be applicable

in and transferable to other waste management companies in other municipalities that provide similar services with comparable staff, resources and clientele. Thus, the findings of the study are deemed transferable, credible and contributing to the existing knowledge base in the discipline.

Before the empirical study was undertaken, its feasibility was ensured through, among others, ethical clearance from the Research Ethics Committee of the Faculty of Humanities at the University of Pretoria (see Addendum F) and permission was obtained from PIKITUP to conduct the study with their employees (see Addendum E).

For a more detailed discussion of the research methods and ethical considerations applicable to this study, see Chapter 3.

### 1.6 Definitions of key concepts

In this study, the following main concepts need to be uniformly interpreted:

### Substance

The *Blackwell Encyclopaedia of Social Work* (2004:337) and Schuckit (2000:4) define a substance as any drug taken through any route of administration that alters the mood, the level of perception, or brain functioning, irrespective of whether the substance is legal or not. This includes alcohol, tobacco, caffeine, inhalants and other solvents, prescribed medications, anabolic steroids, and the whole range of illegal drugs.

### • Substance abuse

Substance abuse refers to the use of substances wherein the "user fails to fulfil important obligations at work, school or home, has legal problems and social or interpersonal problems due to recurrent substance use or uses substances in hazardous situations" (Weish, 2006:436).

Substance abuse can be contrasted with substance dependence, which refers to problems that result from excessive use, and is marked by loss of control, intolerance, withdrawal, spending of much time on activities related to use of the substance, and continued use despite its harm (Weish, 2006:436). Dependence involves physiological processes while substance abuse reflects a complex interaction between the individual, the abused substance and society. Substance abuse is sometimes used as a synonym for drug abuse, drug addiction, and chemical dependency (National Institute on Alcohol Abuse and Alcoholism [NIAAA], 2014:2).

### • Risk factors

Snow, Swan and Wilton (2010:58) define risk factors as characteristics of both individuals and their environments that contribute to increased levels of psychological symptomatology and problem behaviours, such as alcohol and other drug abuse. Risk focused approaches to prevention aim to determine the factors that play an important role in the formation of a given problem and the processes through which they influence that problem. Those processes most likely involve interactions of the individual and environmental characteristics that have various levels of influence, depending on the developmental, situational and cultural contexts in which they occur (Snow et al., 2010:58).

### • Waste management

According to the National Environmental Management: Waste Act, No 59 of 2008, a "waste management activity" is any activity listed in Schedule 1 or published by notice in the *Gazette* under section 19, and includes;

- (a) the importation and exportation of waste;
- (b) the generation of waste, including the undertaking of any activity or process that is likely to result in the generation of waste:
- (c) the accumulation and storage of waste;
- (d) the collection and handling of waste;
- (e) the reduction, re-use, recycling and recovery of waste;
- (f) trading in waste;
- (g) the transportation of waste;
- (h) the transfer of waste;
- (i) the treatment of waste; and
- (j) the disposal of waste.

In this study, the waste management company refers to PIKITUP (SOC) which is a state owned company of the City of Johannesburg which provides waste management services to the residents of Johannesburg.

### • Sector

European Trade Union Institutes (ETUI) (2014) defines a sector as a distinct subset of a market, society, industry or economy, whose components share similar characteristics.

### 1.7 Contents of the research report

The remainder of the mini-dissertation comprises the following chapters:

# Chapter 2: Literature review on risk factors for substance abuse in the waste management sector

This chapter describes substance abuse in the workplace and the management thereof coupled with legislation guiding the workplace in as far as substance abuse is concerned. Risks related to substance abuse are discussed in the context of the workplace in detail.

### Chapter 3: Research methods, empirical findings and interpretation

In this chapter, the focus is on describing the research methods followed in this study, as well as analysing and interpreting the research data gathered during the study.

### **Chapter 4: Conclusions and recommendations**

In the final chapter, the achievement of the goal and objectives of the study is discussed, as well as the key findings of the research. Conclusions about the results and findings of the study are made and finally, recommendations for policy development, EAP services for substance abuse in the workplace as well as future research on risk factors for substance abuse in the waste management sector are provided.

# CHAPTER 2: LITERATURE REVIEW ON RISK FACTORS FOR SUBSTANCE ABUSE IN THE WASTE MANAGEMENT SECTOR

### 2.1 Introduction

The literature review of recent scholarly work on the risk factors for substance abuse within the workplace forms an integral part of this research. However, it is imperative for the discussion to be preceded by background information of the waste management sector and the extent of alcohol and drug problems within the workplace both locally and internationally. A discussion on the history of substance abuse in South African workplaces will give context of where the problem emanates from, with specific emphasis on the "dop" system. The discussion will be concluded by the employer's management of alcohol and drug problems with specific reference to the EAP, highlighting briefly important legislation relevant to the management of alcohol and drugs in the workplace, as well as the core technologies of EAP relevant to addressing risk factors for substance abuse, the above thus respond to one of the objectives: "to contextualise EAP services for substance abuse in the workplace".

### 2.2 Background of the waste management sector

"Globally, millions of tons of municipal solid waste are generated every day. As a result, municipal waste management constitutes one of the most crucial health and environmental issues facing managers globally" (Yoada, Chirawurah & Adongo, 2014:1). In South Africa, waste management is a right enshrined in the highest law of the country, namely Section 24 of the Constitution of the Republic of South Africa, 1996. As a result, municipal waste management entities or departments derive their mandate from the Constitution of the country (Pikitup, 2014). Internationally, waste management is equally provided by private waste operators who are in their nature profit driven. However, in South Africa unlike the municipal owned entities, private operators do not derive their mandate from the Constitution. Thus, the legislative framework in the form of National Environmental Management Act (NEMA) 108 of 1998 governs all waste management functions for both the public and private operators. It is a constitutional prerogative for municipal owned waste management entities to provide waste management services to communities.

According to the European Federation of Public Service Unions (EPSU), the waste industry is facing many changes due to globalisation and higher demand for waste re-use and recycling with the ultimate aim of completely eliminating solid waste (Zero Waste, 2014:2).

According to a study conducted among municipality workers in Egypt, the removal of municipal solid waste is a job associated with a variety of physical, chemical and biological hazards (El-

Wahab, Eassa, Lofti, El Masry, Shatat & Kotkat, 2014). A special report coordinated by Castillo (2014:1) reports that from collection to recycling, waste workers face many risks, such as repetitive movements and lifting heavy loads. Workers are mainly exposed to extreme temperatures, dust, dirt, and dangerous chemicals. Doorstep collecting can run up to 600 points, meaning 1200 bins per round. The workers in the waste management sector are exposed to more occupational health and safety hazards than workers in many other industries (El–Wahab et al., 2014). For instance, Alhaique (2014:23) indicates that in Italy, the National Work Accident and Occupational Disease Insurance Agency reported that between 2009 and 2011, an average of 133 street sweepers in 1000 had a work accident each year - five times more than all other sectors together. The most common accidents included slipping, being hit by a moving vehicle whilst collecting, and contact with harmful substances. Musculoskeletal disorders are taking a toll on workers in the waste management sector which reflects the risks of handling heavy loads and faster work paces (Castillo, 2014:15).

Solid waste workers are exposed to health hazards such as noise, extreme temperatures, dust and toxic products (Castillo, 2014:10; Health and Safety at Work Observatory, 2014:23). The study by EI-Wahab et al. (2014) delineated the health hazards that employees in the municipality are exposed to, such as contact with faeces in nappies or incontinence pads and blood in the sanitary pads used by women, domestic pets' excreta, waste produced from pens or hutches, poultry and fish shops, and dead animals' carcasses. Workers stated that they sometimes found dead human bodies, particularly new-borns thrown in the waste stream and bins, pins and used syringe needles, broken glass and other sharp items , dust, repugnant smell, sludge, debris, decayed matters remaining in vehicle hopper containers and sludge that sometimes contain worms (EI-Wahab et al, 2014).

The above literature further indicates that municipal waste management mostly attracts people from a low economic background with low educational levels. Across the country, this type of job is mainly and formally performed by male employees, typical to South Africa where the dominant pattern has been migration by single males who leave their families in villages, return there periodically and generally leave the city when jobs end through dismissal or old age. As a result, male migrancy in South Africa is loathed for causing chronic family instability and host of associated social ills (Fakier & Ehmke, 2014:8).

Despite the fact that no studies were found that indicate the problematic use of alcohol and other drugs within the waste management sector, the findings of several studies (Barnes & Brown, 2013:110; Harker Burnhams et al., 2014; Roche et al., 2015:125) highlight and correlate characteristics of employees in the waste management sector as discussed above. For instance, the mentioned studies confirm that employees employed in physically and

stressful positions as well as in safety-sensitive occupations, are more likely to have risky alcohol or drug use patterns. Similarly, a study by Roche et al. (2015) highlighted that maledominated industries have a high risk for alcohol use, which attest to the system of male migrancy that is dominant in the waste management sector as indicated above. Furthermore, blue collar workers are apparently the most vulnerable occupational group for problematic alcohol use (Swardt, 2015:2) which is one of the distinguishing employee characteristic in a waste management sector. Problematic drinking is regarded as a drinking behaviour that affects the individual's physical, psychological, social, academic, professional, legal, economical, spiritual dysfunction, family and personal relationship problems (Lee et al., 2015:132). These characteristics make employees vulnerable to substance abuse that warrants an investigation on those particular risks factors for alcohol and other drug problems. To understand the risk factors this particular occupational sector is vulnerable to, it is imperative to understand the extent and impact of substance abuse in the workplace locally and globally.

### 2.3 Global and local extent and impact of substance abuse

The USA Substance Abuse and Mental Health Services Administration (SAMHSA) (2011) reported that 10.2% of adults permanently employed and 11% of temporarily employed adults met the diagnostic criteria for a substance use disorder. This equates to over 14 million workers within the United States of America who were addicted to alcohol or a combination of alcohol and drugs.

The Global Status Report on Alcohol and Health (2014) indicated that, worldwide 6.2 litres of pure alcohol was consumed per person aged 15 years or older per day. Furthermore, globally, 3.3 million deaths are attributable to problematic alcohol use every year. This means that alcohol contributes to over 200 diseases particularly liver cirrhosis and cancers as well as injury-related health conditions (World Health Organization [WHO], 2014:46).

Mention should be made that, the new data on causal relationships between the harmful use of alcohol and clinical outcomes of infectious diseases such as tuberculosis, HIV and AIDS have negative implications for organisations and the economy (WHO, 2014:46).

In South Africa, it is estimated that at least 70% of employees who engage in problematic alcohol or drug use are in the active workforce with employers on average losing 86 working days a year due to such absences (Harker Burnhams, Parry, Laubscher & London, 2014:2). Research has shown that risky non-dependent drinkers, who may occasionally drink too much, are mostly responsible for work performance problems than alcohol dependent employees (National Council on Alcoholism and Drug Dependence [NCADD], 2014:1).

Furthermore, most binge drinking episodes occur amongst working-age adults over 25 years of age (Barnes & Brown, 2013:108), and remains high up until the age of 30 years (Bennet et al., 2006:486). Binge drinking is described as a single occasion of risky drinking, generally defined as more than four or five drinks in a row in the past 30 days (Barnes & Brown, 2013:109) Thus, the terms "risky and hazardous or harmful" drinking were used in the 1998 and 2003 South African Demographic and Health Survey (SADHS), respectively. Nevertheless, they were uniformly defined as drinking plus or minus five standard alcoholic drinks per day for males and less than four drinks per day for females (Ramsoomar & Morojele, 2012:610). Although moderate drinking is widely accepted as a means to relax and socialise and even beneficial to health, excessive alcohol abuse is often associated with ill health, crime, violence, road fatalities, and a variety of other adverse social and psychological outcomes (Legg, 2016:1).

In South Africa, alcohol and drug abuse are a major cause of mortality and are a risk factor for non-communicable diseases. "The 2010 analysis of 67 risk factors and risk factor clusters for death and disability found that alcohol was the fifth leading risk factor for death and disability globally, accounting for 5.5% of disability adjusted life years lost – up from eighth position in 1990" (Harker Burnhams, Dada, Linda, Myers & Parry, 2013:845). Problematic substance use by employed people potentially has negative implications for their health and subsequently exact substantial costs from individuals and their employers (Harker Burnhams et al., 2013:845).

Similarly, in terms of illicit drugs, the World Drug Report, 2015 (United Nations Office on Drugs and Crime [UNODC], 2015:1) estimated that almost a quarter of a billion people between the ages of 15 and 64 years used an illicit drug in 2013. Out of that estimate figure, 27 million or 0.7 percent of the population aged 15 to 64 are estimated to suffer from drug use problems, including drug use disorders and drug dependence (UNODC, 2015:1). According to the NCADD (2014:1), 70% of the estimated 14.8 million Americans who use illegal drugs are employed.

The UNODC (2015:57) further attested that there is a paucity of information on the drug use situation in Africa. However, the prevalence of cannabis use is estimated to be high at 7.2 percent of the population aged 15-64 years, compared with the global average of 3.9 percent. Noteworthy is the South African Community Epidemiology Network on Drug Use (SACENDU) (2015:1) update on people admitted at treatment centres, which reported cannabis as the most common substance of abuse in Gauteng, Kwa-Zulu Natal and the Northern Region (which is the Mpumalanga and Limpopo Provinces combined). Males in the age group 20 to 44 years

were the main users of cannabis. In Black African townships in South Africa, more participants used cannabis than cocaine and injection drugs. However, cannabis use was significantly higher in Black African townships as compared to a racially integrated township and urban residential neighbourhoods (Njuho & Davids, 2010:35). Additionally, a considerable abuse of over-the-counter and prescription medicines such as pain relievers, tranquillizers, cough mixtures (containing codeine), slimming tablets and solvents (especially glue) were also prevalent (Lakhanpal & Agnihotri, 2007:5). As indicated above, the abuse of substances differs from country to country, between ages, socio-economic backgrounds as well as between occupational sectors. The next section elaborates on the history of substance abuse in the workplace in South Africa.

### 2.4 History of substance abuse in the workplace in South Africa

It is useful to further posit the introduction of alcohol within the South African context particularly in the workplace in order to understand how the initial introduction of alcohol in the workplace contributed to the problem of substance abuse not only within the workplace, but also to communities as a result of policies of the apartheid regime. The two sectors to be delineated are the mine workers and the farm workers who hold or share almost similar characteristics with employees in the waste management sector.

### 2.4.1 Mine workers

Although there are few documented cases of employee substance abuse in the 1800's in South Africa, the history of workplace substance abuse can be traced back to mine workers during the apartheid regime in the 1960s. During this time, thousands of black males migrated to the outskirts of the inner cities as mine workers. These mine workers were subjected to horrendous working conditions, where little effort was made to ensure employee safety and death was commonplace (McCann & Harker Burnhams, 2011:55; Allen, 2006:9). In addition to this, the mine workers lived in very poor conditions away from their families who remained in the villages, in overcrowded all male hostels. It was not long before informal bars and brothels sprung up around these areas and a culture of boozing and risky sexual behaviour developed (Allen, 2006:9). Many of the mine workers resorted to alcohol and other available substances, such as cannabis in order to fill the void of living without their families, as well as attempting to cope with their tough living and working conditions (Allen, 2006:9). Despite the new political dispensation, the mining and farming industries are still a haven of poor social conditions such as poverty and ill-health, heightened by substance abuse (McCann & Harker Burnhams, 2011:55; Allen, 2006:9).

### 2.4.2 Farm workers

Along with the mine workers, another employee group that was also documented to have a major substance use problem was the farm workers. This was mainly perpetuated by the 'dop' system (or, "tot" system) which had families (mostly Black and Coloured) living in farming communities which institutionalised alcohol consumption as a condition of service (Jacobs & Jacobs, 2013:1). Instead of being paid money for their labour, farm workers were given beverages, often cheap wine and this practice is still common (Evans, 2015:3). Farmers could thus get rid of their low quality wine, which had little economic value by getting workers to become addicted to drinking (Jacobs & Jacobs, 2013:1). The "dop" system was a widespread system and particularly popular in the Western Cape Province of South Africa on the wine farms (Evans, 2015:3; Parry, 2013:5). Although farm workers were not subjected to hours working under ground like the miners, their working and living conditions were no better. Absolute poverty plagued these workers and the farm owners used alcohol to pacify workers and avoid paying them with money. Alcohol was usually supplied at the end of the working day or at the end of the week in later times (Parry, 2013:5).

During the same period, it was also not unusual for farm workers to operate heavy machinery under the influence of alcohol. Workplace injuries were common; however, workers were not entitled to medical care or disability compensations (Evans, 2015:3). Concerned employees generally experienced ill health due to excessive alcohol abuse. Currently, although the "dop" system has been outlawed, some employers still give employees alcohol as part of their payment and as extra employee perks. The problems associated with this culture result in farm workers often spending large proportions of their wages on alcohol (Evans, 2015:3; Parry, 2013:5). The legacy of the system perpetuates and is potentially a major contributing factor behind alcohol–related problems, especially in provinces such as the Western and Northern Cape (Parry, 2013:5). Due to the above situation, consideration should therefore be given to factors within specific sectors that contribute to substance abuse as it has been indicated that substance abuse differs between sectors.

### 2.5 Risk factors for substance abuse

Several researchers (Lee et al. 2015; Roche et al. 2015; Harker Burnhams et al. 2013) argue that a host of factors contribute to the levels of substance abuse by employees within a work setting. Some of the factors mentioned include the age and gender of employees, the nature of their work, stress experienced in the workplace and the organisational culture of the

company, just to mention a few. These studies indicate that particular subgroups of the working population have higher prevalence of substance abuse, including males, young workers, blue collar workers and indigenous employees (Roche et al., 2015:125). It is therefore imperative to develop a better understanding of how the workplace influences employee substance use (Frone, 2008:199), as well as to investigate risk factors within the waste management sector that contribute to employee alcohol or drug use in particular (Barnes & Brown, 2013:108).

In order to identify and understand the risk factors, aspects such as the organisational, environmental and psychological characteristics that play a role in the development and/or continuation of alcohol and drug problems in the waste management sector need to be delineated.

### 2.5.1 Organisational risk factors

Organisational factors that may contribute to the initiation of or encourage the existent problem of substance abuse are discussed below.

### 2.5.1.1 Nature of work

According to Barnes and Brown (2013:108), blue collar workers are more likely to resort to substance abuse due to the nature of their work. Blue collar workers often do the "dirty work" in organisations, often working longer hours, under strenuous shifts, in return for little pay and often little respect and recognition by white collar employees and society at large. These workers are often excluded from corporate events such as socials and retreats and become isolated from their white collar colleagues. Since most employed adults spend the bulk of their working time in the work environment, this degree of alienation can be particularly difficult to cope with. Financial difficulties, little job satisfaction and low levels of employee morale can result from the negative workplace factors that have been discussed previously. For these workers, using substances of abuse, such as alcohol, may be their way of coping with their reality (Roche et al., 2015:125).

Binge or risky drinking may be caused by work-related mechanisms like job stress and working in physically demanding and hazardous occupations (Barnes & Brown, 2013:108). The waste management sector is physically demanding and highly risky as indicated in earlier discussions. The stress of work itself may also impact on all job levels. The sector is characterised by time pressures, for instance collecting refuse within specific time frames, including unusual work hours, such as shift work or excessive working hours, and dirtiness or heaviness of work as some of the significant risk factors for substance abuse (Barnes &

Brown, 2013:108). Due to the nature of the work that is physically demanding, as well as the history of the recruitment policies, gender played a very important role in previous recruitment strategies, some of which are still applicable. Age has equally been identified as a risk factor for substance abuse and both factors (age and gender) are discussed below.

### 2.5.1.2 Age and gender

According to SACENDU (2016:13), of all the people that were in treatment centres around Gauteng Province in the period January to June 2015, 86% were male, while only 18% were female. This indicates that substance abuse is more common to a point where more males are able to attend treatment centres than females, probably due to stigma that still exist in society that prevents females from accessing treatment centres. Another fact that was identified by the SACENDU (2016:16) report was that the highest percentage of people referred for drug and alcohol rehabilitation in Gauteng was between the ages 20-24 years and 25-29 years, respectively. It is therefore essential to note that the majority of South Africa's work force falls within this age bracket. In terms of the number of referrals, Johannesburg was the highest with 68%, followed by Pretoria with 13%. Because the sector is male dominated due to it being physically demanding, the employees end up sharing norms, values and traditions that govern the organisation. The shared norms, values and traditions regarded as organisational culture are important risk factors in determining the use of substances within the organisation.

### 2.5.1.3 Organisational culture and sub-cultures

Although there is no set definition of organisational culture, Ravasi and Schults (2006:437) define organisational culture as "a set of shared mental assumptions that guide interpretation and action in organizations by defining appropriate behaviour in various situations." These could also be viewed as a set of norms, values and traditions that govern an organisation. Organisational culture is often formed over a period of time and may alter over time since it is a social construct. A healthy organisational culture, where there is good management and healthy norms and values can result in a well aligned organisation, where employees have high levels of motivation and function at an optimal level. Bad organisational culture on the other hand often results in low employee morale, a feeling of detachment and generally poor overall performance (Ravasi & Schults, 2006:438).

According to Berry, Pidd, Roche and Harrison (2007:1400), workers' consumption patterns may be shaped by the prevailing workplace culture. Thus, normative beliefs and expectancies

concerning substance use are informed by the culture that places high social value on drinking and using drugs onsite and during leisure hours (Ames et al., 2009:144). As a result, there are pre-established traditions for socialising, reducing boredom, and alleviating stress. The various cultures of substance use among employees at work reflect the cultures in the community at large. Therefore, before the corporate causes of the problem can be addressed, employee attitudes towards alcohol and drugs should be addressed (McCann & Burnhams, 2011:56).

It is worth mentioning that corporate culture is often made up of sub-cultures within the company such as ethnic, political or union sub-culture, which speak to the union sub-culture prevalent in the waste management industry. The most vulnerable groups are particularly the new employees seeking recognition and apprentices modelling their behaviour on the artisans they wish to emulate, through observational learning (McCann & Burnham, 2011:57; Bennet et al., 2006). It is the above shared sub-cultures that make it easy for employees to bring and use substances within the work environment or alternatively to obtain substances whilst performing their duties in the communities. Physical and social availability therefore becomes the next focus of our discussion.

### 2.5.1.4 Physical and social availability of substances

Roche et al. (2015:125), McCann and Harker Burnhams (2011:56), Ames et al. (2009:143) and Bennet et al. (2006:486), agree that the availability of alcohol is a well-known risk factor for higher drinking rates, as well as other forms of drug use in the general population and has been found to be an important factor in organisational settings. High physical, and particularly social availability of alcohol or drugs within the workplace shapes workplace norms regarding consumption (Ames et al., 2009:143). More than two-thirds of the 984 workers surveyed at a large manufacturing plant in the USA civilian workforce said it was "easy" or "very easy" to bring alcohol into the workplace, to drink at work stations and to drink during breaks. Therefore, restricting workers' access to alcohol may reduce their drinking behaviour (McCann & Burnhams, 2011:60; NIAAA, 2004:278 ). Coupled with physical and social availability of substances is limited supervision which makes it difficult for supervisors to monitor employees on an eight hour period they need to be supervised.

### 2.5.1.5 Limited supervision

Limited supervision may be due to employees spending most of their working time outside the physical premises (McCann & Harker Burnhams, 2011:58). For instance, employees in the waste management sector spend most of their working time outside in the streets collecting

refuse, picking up litter and sweeping the streets. Thus, the work tends to expose them to operating in isolated places.

### 2.5.1.6 Workplace alienation

Roche et al. (2015:125) and the NIAAA [sa] indicated that work that is repetitive tends to be boring and isolating and can contribute to employees drinking and abusing drugs. This may be relevant to the waste management sector, particularly for employees assigned to street sweeping who have to do repetitive work, alone all the time. Of all the reasons given for substance abuse, it is imperative to know and understand the company's alcohol and drug policy.

### 2.5.1.7 Alcohol and drug policies

According to Neate, Kotze, Nkomo and Birch (2008), in many industries in South Africa, the employer is usually not considered to have complied with his/her legal obligations in relation to the Occupational Health and Safety Act 85 of 1993 unless the employer implements policies and procedures to address the risks associated with substance abuse in the workplace. A company can implement a substance abuse policy but individuals can sabotage its impact unless they feel they are participants in the policy and stand to benefit from it (McCann & Harker Burnhams, 2011:59). According to NIAAA (2004), researchers have found that most managers and supervisors in one large manufacturing plant had little knowledge of the company's alcohol and drug policy. In addition, due to constant pressure to keep production moving at all times, supervisors were only encouraged to discipline employees for using alcohol and drugs only if the use was compromising production or being a safety risk. As a result, workers' knowledge that policies were never or rarely enforced seemed to encourage problematic use of substances in the workplace. Often, the problematic use emanates among others, from the social interactions that exist between employees of a particular workplace, as discussed under the social risk factors below.

### 2.5.2 Social risk factors

Social risk factors have to do with relationships or interactions that exist or occur between persons which can contribute to the abuse of substances in the workplace (NIAAA, 2004). The three most relevant factors for this study include the following: social norms, influence of community of origin and familial influences.

### 2.5.2.1 Social norms

Berry et al. (2007:1408) indicate that social networks involving drinking after work can promote a workplace culture that can influence workers' consumption patterns away from the workplace. Ames et al. (2009) (in Frone & Brown, 2009:527) used a random sample of manufacturing workers in the United States of America (USA) in the district of Columbia and found that "descriptive and injunctive workplace alcohol norms were each positively related to drinking at work and descriptive workplace alcohol norms but not injunctive workplace alcohol norms were positively related to drinking before work." Conversely, Frone and Brown (2009:527) found that in the USA in the District of Columbia, "workplace descriptive cannabis norms were positively related to overall cannabis use but workplace descriptive alcohol norms were not related to overall alcohol use." Thus, the above findings show that social interaction at work potentially leads to the development of social norms which normalise the use of substances at work. Furthermore, it is the said social norms that potentially enhance the frequency with which co-workers drink with colleagues in the workplace.

Bennet et al. (2006:490) further propose that drinking norms affect young workers more as they are more prone to peer pressure as newcomers into work or early careers. As a result, they may use social interactions as a way to unwind from work-stress spill over. Conversely, a study conducted among male-dominated industries in Australia found "largely middle-aged workers to be at greater risk of alcohol–related problems due to social norms than their younger counterparts. In contrast to general workforce studies that have found risky drinking behaviours concentrated among younger workers, heavy drinking among workers in male-dominated industries tended to be greater among the middle–aged workers" (Roche et al., 2015:137). The identification of these different risk factors across various age groups has important conclusions that can be drawn for workplace interventions. Such findings may guide interventions and policies to be specifically tailored for at risk target groups. The influence of communities where the employees come from or reside plays a particularly important role that should not be overlooked in determining interventions. How the community influence encourages or discourages substance abuse is discussed in the following section.

### 2.5.2.2 The influence of the community on alcohol use and abuse

The local community' attitudes towards alcohol consumption and abuse has a direct bearing on how alcohol is perceived, used and misused in the workplace. If the community has a thriving culture of substance abuse, it is very likely that the businesses within that community will display a high acceptance of alcohol at work (McCann & Harker Burnhams, 2011:72). The various cultures of substance use among employees at work reflect the cultures in the community at large. Therefore, before the corporate causes of the problem can be addressed, employee attitudes towards alcohol and drugs should be addressed (McCann & Burnhams, 2011:56). The attitudes which in turn emanate from the norms and values learnt from the families is also important to discuss.

### 2.5.2.3 Family influences

Family role models play an essential part in determining an individual's development of substance dependence or not, with parents drinking and even smoking habits being modelled by children. In particular, the stability of family life at the age of onset of drinking is an important family or social risk factor (Huurre, Lintonen, Kaprio, Pelkonen, Marttunen & Aro, 2009:126). Not only does the family or earlier interactions expose individuals to alcohol and drugs but the family teaches approval for the use of those substances (Varela & Pritchard, 2011:751). For instance, in South Africa, family structure particularly in the waste management sector is often disturbed by the economic situation where fathers leave their homes to go to cities and fend for their families leaving all the responsibilities of raising children with their wives. With that, children grow up missing their fathers as positive role models to influence their lives positively. They fall into a trap of succumbing to peer pressure and the use of substances due to lack of parental supervision. Conversely, whilst at work those fathers live in communal structures in hostels or informal settlements where there is an absence of positive recreational activities and their only source of recreation end up being drinking or using drugs. Even though workplace culture is fairly distinct from the culture of the wider community, the values an individual gains within the family unit interact with workplace norms and values concerning the use of alcohol or drugs (McCann & Harker Burnhams, 2011:53). These norms and values may translate into intrapersonal risk factors that may either encourage or discourage substance abuse behaviour within the workplace.

### 2.5.3 Intrapersonal risk factors

The Oxford Dictionary (2012) defines intrapersonal as "taking place or existing within the mind." In other words, intrapersonal risk factors refer to factors existing or occurring within the individuals' self or mind. The rationale or motive for using and abusing substances is discussed in the following section as one of the most common risk factors to explain the abuse of substances.

### 2.5.3.1 Rationale or motive for alcohol and drug abuse

In a study conducted in the USA Navy, participants' rationale for engaging in excessive drinking were shaped by cultural norms that equate the use of substances with stress relief, and they perceived drinking as a mechanism for social bonding (Ames et al., 2009). Similarly, Lee et al. (2015:133) referred to the drinking and drugging motives that essentially mean that employees engage in problematic alcohol and drug use with the expectation to relieve stress, enhance social reward, to avoid social rejection or enhancement of a positive mood or to cope with negative emotions. Results in a similar study indicated that drinking to reduce or avoid negative emotions was greater among problem drinkers than normal drinkers, and coping motives increased the risk of problem drinking (Lee et al., 2015:135). It was reported that drinking to cope with stress could reduce stress levels; however, it can lead to problem drinking and cause health problems such as hypertension and stroke. Thus, Lee et al. (2015:136) suggest that a healthy means of relieving stress be provided for at risk workers particularly the male workers.

Due to the above and considering that employees spend most of their time at work, the workplace becomes the ideal place to address substance-related problems in order to reduce its negative impact on employee health and on the organisation. As a result, employers saw it essential to assist those employees affected by substance abuse by establishing Employee Assistance Programmes (EAP), as well as to improve health and safety of all employees, customers and the public. EAPs help employees who have or may develop social, behavioural or health problems that could affect productivity or the safety of the employee or other employees (NCADD, 2014:2). As such, they are without question the most effective way to address alcohol and drug problems in the workplace (NCADD, 2014:2).

### 2.6 Management of substance abuse through the EAP

There are several definitions of Employee Assistance Programmes (EAP) by different authors and occupational structures. In this study, the researcher refers to a definition by Merrick, Volpe-Vartanian, Horgan and McCann (2012:1) who define EAPs as "workplace–based programmes designed to address substance use and other problems that negatively affect employees' well-being or job performance."

EAPs began as occupational alcohol programmes and have evolved into more comprehensive resources that provide broad-brush programmes that address a wide spectrum of services

that include, referrals for substance abuse, legal or financial counselling and child/older persons care, conducting mental health educational sessions at the worksite, as well as assessment, referral, and brief interventions for behavioural health conditions (Azzone, McCann, Levy Merrick, Hiatt, Hodgkin & Horgan, 2009:345). Today, over 75% of USA employers provide EAP services to their employees and often employees' family members (Jacobson & Sacco, 2012:468). Prior to the implementation of EAP programmes, employees who presented with substance abuse problems were dismissed from employment, resulting in more social problems based on economic challenges, such as poverty and unemployment (Swardt, 2015:2). The introduction of EAPs have observed a shift in the way such employees' substance abuse problems are addressed to the benefit of both the employee and the organisation (Merrick et al., 2012; McCann & Harker Burnhams, 2011:284). The EAPs are restorative, preventative and not punitive in nature. Consequently, over the last decade, organisations have adopted a more holistic method for maintaining and improving employees' health through the encompassing of Employee Wellness Programmes within the ambit of EAPs (Azzone et al., 2009:345). The above shift is said to be beneficial in minimising stigma associated with substance abuse (Jacobson & Sacco, 2012:469; McCann & Burnhams, 2011:285; Azzone et al., 2009).

In terms of Standards Committee of the EAPA–SA (2010:12), EAPs provide education, confidential screening and assessment, short-term counselling and referral with follow up. In the United States of America, the average EAP utilisation rates for face-to-face counselling range from 3.5% to 5% per year when compared with 1.5% to 2.5% of all employees seeking help from the EAP with alcohol and drug problems. The number is far less when considering the prevalence of substance abuse in the workplace. Research suggests that integrating brief screening measures for alcohol and drug use into the EAP intake and assessment procedures may improve the identifying rate of problematic alcohol and drug behaviour (Jacobson & Sacco, 2012:469).

Through the different referral methods, employees may be referred by supervisors for poor job performance related to substance abuse which is regarded as formal referral. Alternatively, they may refer themselves through a self-referral method which is one of the ultimate goal for the success of EAPs (Jacobson & Sacco, 2012:469; McCann & Harker Burnhams, 2011:285). Moreover, the success of EAPs is largely determined by the supervisor who is the key person in the entire process. It is the supervisor who has to put up with the absenteeism, errors, personal problems and deteriorating job performance of the substance abuser (McCann & Harker Burnhams, 2011:286). Hence, it is crucial for supervisors to be well conversant with the company's alcohol and drug policies, if available, in order to address alcohol and drug related problems in a procedural manner. It is only the development of alcohol and drug

policies that will improve the management of substance abuse within any workplace that should guide all the interventions in a fair and equal manner. Thus, EAPs play a pivotal role by intervening at the organisational level through policy development to improve the work environment in order to enhance job performance (Merrick et al., 2012:2). The above alcohol and drug policies should be developed from legislation that are applicable and guide the management of substance abuse in the workplace, which forms part of the next discussion.

# 2.6.1 Applicable legislation mandating the management of substance abuse in in the workplace

"Intoxicated or impaired employees are a danger to themselves and to others. An employee inebriated usually exhibits slower reaction times, poor eye-hand coordination, increased risk-taking behaviour and a reduced decision making ability. (McCann & Harker Burnhams, 2011:70). Consequently, productivity suffers in organisations where alcohol and drug abuse problems exist. For instance, in a factory setting, this loss can be measured in terms of delays in production, poorer quality control, an increased incidence of machine breakdown, incorrect order processing, and so on (McCann & Harker Burnhams, 2011:71).

It is due to the above hazards created by alcohol and drug abuse that legislation were put in place to manage and control the use of such substances in the workplace. Applicable legislation are briefly discussed below:

### • The Occupational Health and Safety Act 85 of 1993

The Act prohibits the use of both licit and illicit substances in the workplace to ensure a safe working environment for all employees. In addition, the Act clearly states in section 8(1) that "every employer shall provide and maintain, as far as is reasonably practicable, a working environment that is safe and without risk to the health of his employees." It is the existence of this stringent legislation against substance abuse that allows for organisations to have considerable influence over their employees? work-related behaviour, which makes the workplace the ideal locus for interventions.

### • The South African Labour Relations Act 66 of 1995

The Act protects employees with substance abuse problems from outright dismissal. Section 10(3) of the Code of Good Practice requires employers to investigate the cause of an employee's incapacity due to substance abuse or dependency and offer appropriate counselling and rehabilitation before resorting to dismissal (Swardt, 2015:2; McCann & Harker

Burnhams, 2011:277). Research has demonstrated that alcohol and drug treatment pays for itself in reduced healthcare costs that start as soon as people begin recovery (Swardt, 2015:2; McCann & Harker Burnhams, 2011:277). Employers with successful EAPs and Drug Free Workplace Policies report improvements in morale and productivity and decreases in absenteeism, accidents, downtime, turnover and theft in their organisations (NCADD, 2014).

# • National Road Traffic Act 93 of 1996

In section 65 of this Act, no person shall drive on a public road or occupy the drivers' seat or exceed the legal limit of blood alcohol concentration of:

- 0, 02% BAC (0,10mg/I Breath AC) for professional drivers
- 0, 05% BAC (0,25mg/l Breath AC) for private drivers.

The Act further states in section 65(1), (2) and (5) that persons found guilty of an offence shall have their licenses and permits suspended for a minimum period of:

- six months for their first offence, or
- five years for the second offence, or
- ten years for a third or subsequent offence.

# • The Employment Equity Act 55 of 1998

According to section 7(1) and (2) of the Act, it is illegal to medically test an employee. Testing is allowed in the case of certain medical facts and in the case of certain job responsibilities. It may be necessary to test employees in order to provide an alcohol and drug-free workplace and to protect the employer, employee and public from alcohol and other drug-related accidents that may happen.

# • The Compensation for Occupational Injuries and Diseases Act 130 of 1993

According to Section 22(3) a, b and (4) of the Act, if an employee has shown serious and wilful misconduct by being intoxicated, they cannot claim compensation from their employer to cover damages if there is a workplace accident. An employer is therefore responsible for maintaining an alcohol and other drug-free workplace.

According to Neate et al. (2008:230), in many industries in South Africa, the employer is not considered to have complied with his/her legal obligations in relation to the Occupational Health and Safety Act unless they implement policies and procedures to address the risks

associated with substance abuse in the workplace. As a point in case, the PIKITUP Substance Abuse Policy is discussed to outline such a policy within the waste management sector.

### • PIKITUP Substance Abuse Policy and Procedure

PIKITUP has a substance abuse policy and procedure which was approved by the executive committee and the Board in 2009. According to the policy, the safety, health and well-being of all employees and the public is paramount. Hence, the organisation has adopted a zero tolerance to substance abuse. Having said that, the company assists where possible in the treatment of those who have substance abuse problems. (PIKITUP substance abuse policy, 2009).

## • Identification of intoxication

Identification of intoxication is the initial step of the process of managing substance abuse within the organisation. In terms of the policy, identification involves observation by a supervisor, manager or shop steward, of any behaviours that would provide reasonable and sufficient grounds to believe that the person is under the influence of substances.

The second identification is done through breathalyser testing for alcohol. According to the policy, breathalyser testing should be done among all employees, contractors and visitors. However, the testing is at the moment focused on safety sensitive job specifications such as drivers. The security department is the custodian of the testing programme; hence, breathalyser testing is conducted by security officers. Other types of drugs such as multidrug testing are identifiable during the periodic medical surveillance programme that takes place annually as a legislative requirement. In this case, testing is conducted by the Occupational Health Nurse Practitioners.

## • Counselling and rehabilitation

PIKITUP recognises substance abuse, involving alcohol and/or other drugs as a treatable condition. Rehabilitation covers a wide range of treatment options. Depending on the nature and severity of the problem, it may range from counselling sessions to in-patient treatment. The policy states that employees who have been placed in a treatment programme will not be victimised and where the employee is treated at a treatment centre, the matter will be treated as strictly confidential. Time off to a treatment centre is regarded as special leave and an employee is allowed only one relapse. The costs of the treatment are covered by the employee's medical aid which is compulsory and subsidised by the company. In case the

medical aid does not cover full treatment costs, the company assists by paying for such treatment.

While the policy and procedure is holistic, there are challenges pertaining to the impact that it has in reducing substance abuse within the organisation. Employees identified with substance abuse problems are referred and proper interventions are implemented through either internal or external intervention. Nevertheless, the rate of relapse is very high. Extrapolations from previous EAPs statistics for the period between July 2015 and June 2016 indicate that three out of every five employees sent for substance abuse treatment, relapse. Which thus supports the importance of this study to explore the specific and unique risk factors for substance abuse within a waste management company.

The following discussion will describe EAPA standards relevant to the management of substance abuse.

## 2.6.2 EAPA standards relevant to the management of substance abuse

EAPs deliver comprehensive quality services in dealing with substance abuse to three target groups, the organisational management/supervisory structures, worker organisations/unions and employees and their family members (Standards Committee of the EAPA-SA, 2010:1). The following discussion is focused on the Standards of Employee Assistance Programme in South Africa (EAPA-SA) pertinent to management of substance abuse within the organisation (Standards Committee of the EAPA – SA, 2010). EAPA standards are classified into clinical and non-clinical services. For the purpose of this discussion, the researcher will focus on the following clinical services: Assessment, Referral, Short-term intervention, case monitoring and evaluation, after care and re-integration. Non-clinical services will focus on preventative services and EAP Training (Standards Committee of the EAPA – SA, 2010:15).

## 2.6.2.1 Clinical services

The discussion on clinical services begins with assessment followed by referral, short-term intervention, case monitoring and evaluation, after care and re-integration.

#### Assessment

According to EAPA-SA Standards, EAP professionals should utilise assessment to identify, document and evaluate clients' strengths, difficulties and needs, in order to lay down an

intervention plan. Secondly, to identify problems embedded within the organisation affecting the client to ensure a timely and appropriate intervention and increase the likelihood of increased job performance and employee well-being. Competently conducted assessments will enhance the credibility of the EAP in the organisation. Referral to an alternative resource outside of the EAP setting should be considered particularly for employees with a substance use disorder when long-term psychotherapy is required (Standards Committee of the EAPA – SA, 2010:12).

### • Referral

Clients should be referred to an appropriate resource according to the unique needs revealed by the assessment. The goal of referral is to match the individual who has an identified problem with a cost effective and appropriate level of care. The objective is to ensure that clients gain access to appropriate resources and levels of care (Standards Committee of the EAPA–SA, 2010:13). This standard is particularly relevant in the sense that most employees who have been identified and referred for a substance related problem need referral to external service providers (e.g. treatment centres) upon assessment. The EAP should clarify referral procedures with outside resources to which clients are referred and follow up on the progress and outcome of such referrals (Standards Committee of the EAPA–SA, 2010:13).

## • Short-term intervention

The Standards Committee of the EAPA–SA, (2010:13) stipulates that the nature of the workplace context offers the ideal opportunity for time-limited intervention. Hence, short-term intervention is considered cost- effective for the benefit of both the client and the organisation. However, with regard to substance related referrals, short-term intervention is more effective and appropriate for employees still in the stage of abuse rather than dependence due to the short-term nature of the intervention. Referral to an alternative resource outside of the EAP setting should be considered for employees already with a substance use disorder (dependent) whereby long-term psychotherapy is required (Standards Committee of the EAPA–SA, 2010:13).

## Case monitoring and evaluation

The goal of case monitoring and evaluation is to ensure quality and cost-effective treatment from resources. The main objective of this standard is for EAP professionals to maintain regular contact with clients and the service provider during the intervention period to ensure that the goal and objectives of the intervention plan are being met. The EAP professional is also liable to give feedback of the intervention to the referring manager/supervisor (Standards Committee of the EAPA–SA, 2010:14). All records should be safely kept in the client's EAP record for verification and evaluation. It is absolutely important to routinely monitor all referred cases for one year after intervention, and for a minimum of two years for substance dependency or other addiction cases. An EAP professional should contract with an outside service provider, in this case from treatment centres or private practice service providers, to submit, at agreed intervals, written reports on the progress of a referred employee (Standards Committee of the EAPA–SA, 2010:14).

#### • Aftercare and reintegration

According to Standards Committee of the EAPA–SA (2010:14), the goal of aftercare and reintegration is to ensure the re-integration and continued well-being of referred employees after the intervention. The objective is to monitor the intervention outcomes after the re-entry of an employee who has undergone treatment to assist the employee in re-integration/readjustment into the workplace following intervention to assist the referred employee to maintain the intervention outcomes.

The Standards Committee of the EAPA–SA (2010:14), goes further to elaborate that, by providing on-going aftercare services, the EAP demonstrates a commitment to maintaining the intervention outcomes and, by implication, the well-being of the organisation and its employees. Documentation of aftercare and re-integration activities assists to evaluate the effectiveness of the EAP service. The organisation's EAP policy should guide aftercare and re-integration procedures and determine what constitutes the closure of a case. Follow-up should be conducted regularly with the referring manager/supervisor after the employee's reentry to the mainstream to determine whether the intervention has had the desired effect on the employee's well-being and job performance. It is imperative for the EAP professional to validate or verify the impact of the intervention by documenting the impressions of the employee, family members, the referring supervisor, the union representatives and the service provider (Standards Committee of the EAPA–SA, 2010:14).

At regular intervals, an EAP professional should routinely contact the supervisor after a supervisory referral, as outlined by the policy, to enquire about the employee's job performance, as well as every client within a set period of time following intervention to close the case, if appropriate. Where necessary the EAP professional must make recommendations to supervisors regarding job adjustments, in line with the organisation's Human Resources

policy (Standards Committee of the EAPA–SA, 2010:15). Following the clinical services, to be discussed next is non-clinical services.

## 2.6.2.2 Non-clinical services

The following non-clinical services will be discussed on the basis of EAP training, marketing, networking and monitoring, and evaluation.

• EAP Training

According to Standards Committee of the EAPA–SA (2010:15), the EAP will use training as an intervention strategy. The goal is to provide training that enhances employee and organisational resilience; provide targeted interventions in response to commonly identified trends and business risks; build and strengthen individual and organisational skills and competencies to equip supervisors, management and labour representatives to fulfil their functional roles in terms of access, support and utilisation of the EAPA–SA, 2010:15).

EAP training is relevant to supervisors and unions as the key stakeholders in ensuring the success of the EAP. Supervisors should be educated in identifying and referring employees with a substance abuse problem and know the policies and procedures of dealing with them appropriately. Thus, the EAP training should not be a once off event but should be a continuous effort.

## • Marketing

As indicated in the Standards Committee of the EAPA–SA (2010:15), the work organisation should be well versed with the services of the EAP with regards to substance abuse, such that referrals can be made by supervisors, unions, family members, and the employees themselves through self-referrals. Outreach of the services should emphasise important principles of the EAP, such as confidentiality, respect, neutrality and voluntary participation. These principles should encourage employees' participation in the programme. Substance abuse is characterised by stigma and denial and without all the above principles guaranteed, there will be resistance to utilise the service.

## • Networking

The goal of networking is to enhance the knowledge, skills and attitude of EAP practitioners and to ensure that they are aware of new technologies in EAP service delivery for new and effective intervention methods. This standard is more appropriate to substance abuse referrals to treatment centres either on an in or out- patient basis. The EAPs should develop a database of external service providers for referral purposes. Additionally, relationships with internal stakeholders to mitigate those risk factors for substance abuse should be strengthened. Stakeholders such as the Human Resources, Employee Relations, Organisational Development, Safety, Legal and Operations are relevant for influencing positive change.

### • Monitoring and evaluation

In accordance with the Standards Committee of the EAPA–SA (2010:18), the monitoring and evaluation standard emphasises the essential role played by EAP professionals within an organisation, and it underscores the benefits generated from such EAP Programmes. "The EAP is in a unique position to monitor the progress of referrals and adherence to accepted standards of practice, hence providing follow-up services demonstrates a commitment to the well-being of EAP clients and the organisation" (Standards Committee of the EAPA–SA, 2010:26).

Monitoring and evaluation of the programme will be on its effectiveness, based on the number of employees treated, those that had to be referred for specialist treatment and care and are rehabilitated; and those that had to be released from their duties as a result of failed treatment. The cost effectiveness of the programme will also be evaluated from time to time.

Monitoring and evaluation should be conducted on a continuous basis to assess the impact of the services provided to the organisation.

## 2.7 SUMMARY

The above discussion has highlighted that the costs of substance abuse in the workplace are enormous both locally and globally. Prior discussions have also demonstrated how substance abuse differs across sectors with certain industries being more susceptible to alcohol and drug abuse than others. A particular emphasis was on the waste management sector which has been presented as a high risk sector for substance abuse due to the fact that it is maledominated, has a system of male migrancy, employees are mainly blue collar workers, the type of work is physically demanding and that the working conditions are high risk. The history of substance abuse in South African workplaces was discussed to give a background of where the problem emanates from with a specific reference to the "dop" system. The risk factors for substance abuse were delineated by classifying them into organisational, social/interpersonal and intrapersonal factors. The discussion was followed by how employers manage substance abuse in the workplace, particularly with the focus on EAP, which is aimed to address substance abuse problems and other personal problems affecting employees' performance. Relevant legislation guiding and prescribing management of substance abuse in the workplace summed up the discussion on the note that companies should comply with legislations that have been put in place to ensure the health and safety of employees with problems including co-workers and the public.

The chapter was concluded by a discussion on EAPA-SA Standards relevant to management of substance abuse in the workplace, which included assessment, referral, short-term intervention, case monitoring and evaluation, after care and reintegration, EAP training, marketing, networking and monitoring and evaluation.

In Chapter 3, the focus is on the research methods adopted for the study, the research findings and the interpretation thereof.

# **CHAPTER 3**

# **RESEARCH METHODS, EMPIRICAL FINDINGS AND INTERPRETATION**

## 3.1 Introduction

The aim of this research was to explore and describe the risk factors for substance abuse in the waste management sector within the Johannesburg Metro, Gauteng province. The focus of this chapter is specifically on the following research objective, namely: to identify the risk factors for substance abuse among employees released from drug treatment centres, and the supervisors in direct contact with the employees.

Subsequently, this chapter presents an overview of the research methods, which were utilised to undertake this empirical study (see Section A). The focus will be on the research question, research approach, the type of research, research design, methods of data collection, data analysis and trustworthiness of the qualitative data collected, as well as the ethical considerations. Before the research findings and interpretation are presented in Section B, the researcher will highlight the challenges and limitations of the present study.

# SECTION A: RESEARCH METHODS

## 3.2 Research question

Researchers need to formulate research questions to guide them in their studies (Fouché & De Vos, 2011: 308). Due to the fact that this particular research is qualitative in nature, the approach often uses research questions (De Vos, Schulze & Patel, 2005:5. The study was guided by the following research question and sub-questions:

**Research question:** "What are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?"

In order to fully answer research question, the following **sub-questions** were also formulated:

- "Based on the views of employees recently released from drug treatment centres, what are the risk factors for substance abuse within the waste management sector in the Johannesburg metro?"
- "Based on the views of management (in this instance supervisors), what are the risk factors for substance abuse within the waste management sector in the Johannesburg metro?"

# 3.3 Research approach

Based on the research topic, the appropriate research approach which guided this study was the qualitative research approach. This was informed by its purpose which was to explore and describe the risk factors for substance abuse in the waste management sector as a relatively unknown terrain (Fouché & Delport, 2011:66). The study adopted an exploratory and descriptive research purpose. The exploratory research purpose afforded the researcher an opportunity to collect data and develop a deeper understanding of a previously unexplored concept (Fouché & De Vos, 2011:95), as the risk factors for substance abuse in a waste management sector, specifically in Johannesburg Metro, are not yet known. The descriptive purpose of this research aimed to examine the reasons why the observed patterns exist and what they imply (Babbie, 2014:95). In other words, it described those risk factors for substance abuse that have been explored to give them meaning.

# 3.4 Type of research

This study is applied in nature as the researcher's primary aim was to find a solution to a specific problem as is usually the case in applied social sciences, such as Social Work. Applied research is useful when seeking to solve specific policy problems or helping practitioners accomplish tasks in practice (Fouché & De Vos, 2011:95). In this study, it is the lack of knowledge about those risk factors for substance abuse in a waste management sector that needed to be addressed through targeted policy and programme development envisaged to improve service delivery.

## 3.5 Research design

The research design used in the study was a case study design. More specifically, the collective case study was considered the most appropriate research design for this study as the researcher was interested in obtaining answers to the research question, and subquestions, from the collective view of two groups of people rather than based on the views of one or two isolated cases (Nieuwenhuis, 2010b:70). Employees who were from drug treatment centres narrated their own direct experiences of risks for substance abuse while supervisors gave a perspective on their day to day challenges with the employees they supervised with substance abuse problems. The groups were chosen to compare and contrast the different risk factors for substance abuse in the waste management sector so that the research question, and two sub-questions, could be comprehensively answered (Mark, 1996 in Fouché & Schurink, 2011:322).

#### 3.6 Study population and sampling procedures

The study population for this research was employees of PIKITUP Waste Management Company of the City of Johannesburg Municipality. At the time of the study, PIKITUP had a workforce of 4500 employees in total operating in 12 different depots in the Johannesburg Metro. As this study is a qualitative study, non-probability sampling techniques were used (Neuman, 2012:149). Purposive sampling which is often used in exploratory research, was considered the most relevant sampling technique to be followed in this study as it enabled the researcher to ensure that a sample is composed of participants that have characteristics that best serve the purposes of the study (Strydom & Delport, 2011:392; Maree, 2007:79). Thus, the two samples selected namely, employees from drug treatment centres and supervisors, were able to provide valuable information that gave answers to the two distinct research questions.

The researcher was guided by specific criteria in the recruitment of the participants, as purposive sampling is guided by parameters that guide the researcher (Strydom & Delport, 2011:392). For this study, two participant groups, ten employees who were from drug treatment centres and eight supervisors were recruited by means of purposive sampling.

#### Recruitment criteria were as follows:

<u>Employees from Drug Treatment centres</u>: Ten employees with a substance abuse problem who were referred to an external in-house drug treatment at any treatment centre in Johannesburg were recruited through EAP Professionals. PIKITUP has three EAP Professionals in total including the researcher, with each assigned to four depots. As a result the researcher requested the two EAP professionals to each have individual information sessions with five of their clients who had been to a treatment centre. The two EAP professionals informed employees about the purpose of the research and determined whether they were willing to participate – as such the researcher employed an indirect recruitment strategy for the study. Gender was not considered since all clients who had been to drug treatment centres within the organisation were male. Informed consent forms were explained and given to the participants to sign before any data collection commenced. The language of communication during the interview was stipulated clearly on the consent forms that participants should be able to communicate in English, isiZulu or Sesotho. Clients serviced by the researcher were not recruited to participate in the research.

<u>Supervisors</u>: Operational supervisors who form part of the middle management were also recruited as they are the first line of interaction with the employees they supervise. Supervisors refer employees identified with substance abuse problems to the EAPs for intervention. As such, their data were valuable as they experienced employee substance abuse problems first hand. One supervisor per depot was recruited to make up a total of eight supervisors because supervisors of the depots where the researcher is assigned, were excluded to participate in the research. Volunteer sampling was appropriate to recruit supervisors as they were allowed to join on their own volition and were more motivated, better trained and possessed more specific psychosocial characteristics (Mark, 1996 in Strydom & Delport, 2011:394). The overall purpose of volunteer sampling was to collect the richest data (Strydom & Deport, 2011:394). The researcher sent out an e-mail to all the supervisors explaining all the details regarding the research. Volunteer participants were able to communicate in English, which was the language used in the focus group. Interested participants were requested to respond by sending their names to the researcher by a specific due date.

Freeman (2006:492) and Krueger and Casey (2001:2) suggest that the number between six and twelve participants is the most appropriate for focus group discussions as it is manageable for participants to share diverse opinions across the whole group and small enough for everyone to contribute.

## 3.7 Data collection methods

The interview is the predominant mode of data or information collection in qualitative research. However, in this study two different data collection methods were applied to two different sample groups, namely the interview and focus group discussion.

<u>Employees from drug treatment centres</u>: Semi-structured interviews were utilised to gain a detailed picture of each participant's account of the risk factors for substance abuse at PIKITUP (Greeff, 2011:351). The advantages of semi-structured interviews, with an interview-schedule, are that, questions are predetermined, but the interview is guided rather than dictated by the schedule. Participants shared more closely in the direction the interview went and introduced an issue the researcher had not thought of (Greeff, 2011:352). The researcher had 15 pre-determined questions that guided the interview (see Addendum A). One of the

limitations of face to face interviews is that the researcher has to avoid the risk of changing the interviewing relationship into a therapeutic one. Participants may find the interviewing process emotionally troubling and if that happens, the researcher may have diverted the discussion and if the distress is severe, it becomes necessary to refer the participants to a therapist for support (Greeff, 2011:360). To ensure absolute privacy and safety, the researcher conducted interviews in the offices of the EAPs. Interviews were audio recorded to ensure accurate transcriptions of the interviews with the informed consent of each participant.

Supervisors: In accordance with a qualitative study, a focus group discussion, directed by a focus group interview guide, was used to collect data from the group comprising the supervisors. The focus group technique enabled the researcher to collect data through group discussion in a shorter period of time when compared with individual interviews. It was useful in providing the researcher with multiple viewpoints and generation of complex information about the risk factors for substance abuse in a minimum amount of time (Greeff, 2011:361). Participants were also able to build on each other's ideas and comments to provide an indepth view not attainable from individual interviews (Nieuwenhuis, 2007a:90). Due to the nature of the focus group, the researcher used an assistant to take comprehensive notes, operate the audio recorder, handle environmental conditions and logistics, and to respond to unexpected interruptions (Greeff, 2011:368). In addition, the focus group discussion was guided by an interview schedule with some pre-determined prompts to assist with facilitation (see Addendum B). As the focus group participants were all supervisors at the management level, the interviews were conducted in English. The focus group session took place in a boardroom which provided comfortable space, ventilation and privacy for participants to be at ease. Supervisors of depots were the researcher is stationed were excluded from participating in the focus group.

One disadvantage of the focus group method is that the researcher had to guard against domination of the most expressive active participants. This could create a situation where passive participants would be unduly influenced or inhibited to express their views by active participants (Greeff, 2011:374). The researcher's experience help to effectively observe any unresponsive behaviour and involved those participants who were passive.

## 3.8 Data analysis

The method used to analyse data obtained through both the semi-structured interviews and the focus group discussion was the thematic analysis process proposed by Braun and Clarke (2013), namely: Familiarisation, coding, searching for themes, reviewing themes, defining and naming themes and writing the research report. The data analysis process is briefly described:

<u>Transcription and Familiarisation</u>: This initial stage of the process started with transcribing data, reading, re-reading the data, and noting down initial ideas. The researcher used the orthographic transcript recording as it signals both what was said and who was speaking with the aim to create a clear picture of what transpired. Interviews in isiZulu or Sesotho were translated into English. As a result, no message was corrected or changed as the aim was to capture how participants expressed themselves. Imperative to note is that, the process of transcribing data enabled the researcher to familiarise herself with the data as it involved reading and re-reading over time to note information that might be relevant to the study question (Braun & Clarke, 2013:163). The researcher recorded the information and also focused on looking at the data in detail to critically analyse it and understand its meaning (Braun & Clarke, 2013:205).

<u>Generating initial codes</u>: Once data familiarisation was complete, it was coded. In this study, the researcher used complete coding which means that all information that was relevant or important for the research was identified. This means that features of all relevant data were labelled as precisely as possible in multiple ways. The codes reflected the latent codes that invoked the researcher's conceptual and theoretical frameworks and to identify implicit meanings or assumptions that underpinned what was stated during data collection. The actual coding of data can be coded electronically through comments on a document, keeping cards with the relevant text under the code or marking codes, on the 'hard copy data' (Braun & Clarke, 2013:210). In this study, manual coding was used through notes scripted from interviews and the focus group.

<u>Searching, reviewing, defining and naming themes:</u> Searching for themes is a process in thematic analysis where the researcher actively identifies common patterns, interrogate and interpret those patterns throughout the information (Braun & Clarke, 2013:223). The themes were a combination of codes that related to each other, thus providing a broader organisation of concepts (Braun & Clarke, 2013:224). These themes needed to be independent of each other but still formed part of one final analysis. This means that although the themes were different, they still led the researcher to draw relevant conclusions and present the themes in one final document. The themes needed to link in such a way that the relationship between them were evident (Braun & Clarke, 2013:231).

Using a visual representation for the themes was useful in identifying relationships between themes and sub-themes (Braun & Clarke, 2006:89; Braun & Clarke, 2013:232). The researcher used a 'mind map' to organise the information into themes and sub-themes (Braun & Clarke, 2006:89). Once the possible themes were identified and a thematic map developed that outlined these themes, they were then reviewed. This process was essentially a form of

'quality control' which ensured that identified themes were reflective of the information collected (Braun & Clarke, 2013:233).

The quality control process also provided an opportunity for the researcher to add any themes that could have been missed, or to reject those that were not suitable (Braun & Clarke, 2013:234). Upon finalisation, the themes needed to be named and defined. Once a theme is named in an 'evocative, catchy, concise and informative way', defining them provides a clear direction as well as ensures that the themes correspond as necessary (Braun & Clarke, 2013:258). Finally, the analysis could be developed. The themes were written, with the relevant information described within them (Braun & Clarke, 2013:249). The information used in the final analysis was evident of all participants (Braun & Clarke, 2013:252).

At this point the researcher had a number of themes which highlighted and described the risk factors for substance abuse in the waste management sector. Throughout the writing of the analysis, it was possible to add or remove themes or sub-themes as necessary (Braun & Clarke, 2013:254). The researcher also discussed the themes generated from the two sample groups with the research supervisor.

Once the themes and corresponding information were completed, relevant literature was also included to interpret the findings from among others, the social learning theoretical framework (Braun & Clarke, 2013:257).

It should be noted that the researcher occasionally used numbers to report sub-themes. Sandelowski (2001:231) indicates that displaying information numerically can make patterns "emerge with greater clarity." Maxwell (2010:479) holds a similar view and explains that numbers could help the researcher to present evidence adequately and to demonstrate that interpretations have not simply been "cherry-picked." The use of numbers "is a legitimate and valuable strategy for qualitative researchers when it is used as a complement to an overall process orientation to the research" (Maxwell, 2010:480). Trustworthiness will be the next discussion.

## 3.9 Trustworthiness

A study is usually trustworthy if steps are taken in the research procedures to ensure that the perspectives of the participants are authentically gathered and accurately represented in the findings (Lietz & Zayas, 2010:191; Nieuwenhuis, 2007b:113). Lietz and Zayas (2010:191) identified four concepts that are interrelated and work together to achieve trustworthiness, which are: credibility, transferability, auditability, and confirmability. In this study the following

three constructs were applied in the quest to achieve trustworthiness. Credibility, transferability, and confirmability.

<u>Credibility</u>: Credibility refers to the degree to which a study's findings represent the meanings of the research participants. Padgett (in Lietz and Zayas, 2010:191) states that to achieve credibility, qualitative researchers must always guard against their own research reactivity and bias. Research reactivity refers to the potential for the researcher or the study procedures to influence participants and consequently change the findings of the study. Researcher bias involves how researchers' socio-political background and predetermined ideas may shape the way they design the study and engage in analysis, thereby potentially leading to a misrepresentation of the data (Lietz & Zayas, 2010:192). There are different strategies that can be used to manage the threats to research reactivity and bias. In this study, the researcher used triangulation and peer de-briefing.

Triangulation as a concept involves the use of two or more sources to achieve a comprehensive picture of a fixed point of reference (Lietz & Zayas, 2010:193). In this study, the researcher used a combination of individual interviews to gather data from the employees from treatment centres and their supervisors during a focus group. By gathering data from multiple sources (data triangulation) qualitative researchers are able to achieve an exhaustive response to the research question. Therefore, if data from these different sources correlate towards similar conclusions, the researcher will have more trust in his/her results (Nieuwenhuis, 2007b:113). The second strategy used to manage threats to researcher reactivity and bias was peer de-briefing.

Peer de-briefing: Peer de-briefing involves consulting with colleagues experienced in qualitative methodology in order to discuss research decisions and procedures. Such discussions generate important feedback to help enhance the quality of the project. Peer debriefing can help to promote reflexivity allowing researchers to become more aware of the effects of their socio-political position. It can also enhance the research process by generating new ideas and identifying potential pitfalls related to the methodology (Lietz & Zayas, 2010:196). The researcher consulted with other professionals who are knowledgeable in the field that is being researched. Throughout the entire research process, the researcher also consulted with the research supervisor who is knowledgeable in the field and therefore helped to enhance the research process by generating new ideas and identified potential pitfalls related to the methodology. The second strategy employed to ensure trustworthiness was transferability.

<u>Transferability</u>: It refers to the degree to which the findings are applicable or useful to theory, practice and future research (Lincoln & Cuba in Lietz & Zayas, 2010:195). Although the

researcher did not seek generalizability due to the qualitative nature of the research, transferability is achieved when the findings have applicability to another setting, theory, practice or future research. In this research, the study findings along with the suggestions that followed may be transferable to other waste management companies in other municipalities that provide similar services with comparable staff, resources and clientele. When assessing transferability, credibility becomes core. Qualitative studies should produce findings that are transferable and credible to contribute to the knowledgebase (Lietz & Zayas, 2010:195). The last strategy used to ensure trustworthiness in this study was confirmability.

<u>Confirmability</u>: Refers to the ability of others to confirm or corroborate the findings (Lietz & Zayas, 2010:197). Confirmability was achieved by demonstrating a corroboration between participants' data and the findings. Meaning taking steps such as peer de-briefing and member checking to ensure that the findings are the results of the ideas of the participants rather than preferences of the researcher.

A discussion on a pilot study conducted will follow.

### 3.10 Pilot study

In qualitative research the pilot study usually takes place in an informal setting where a few of the participants having the same characteristics as those of the main investigation are involved in the study, merely to test the data collection instruments (Strydom & Delport, 2011:394). In this study, the researcher piloted the semi-structured interview schedule with two employees who were from drug treatment centres and two supervisors who did not form part of the anticipated focus group. By testing the nature of questions in the interviewing schedule or for the focus group, the researcher was able to make changes with a view to improve quality interviewing during the main investigation. For example, 'dangerous' was added as a synonym of 'hazardous' on the focus group interview schedule to improve initial understanding during the focus group. Participants in the pilot study did not form part of the main study (Strydom & Delport, 2011:395).

#### 3.11 Ethical considerations

Ethical guidelines serve as standards, and a basis upon which each researcher ought to evaluate his or her own conduct. As such, this is an aspect which should be borne in mind continuously throughout the study (Strydom, 2011:114). In this study, the following ethical considerations were applicable.

## 3.11.1 Avoidance of harm

Avoidance of harm means that the researcher should, as far as possible, protect the participating employees who went for drug treatment from emotional, physical or any other form of harm (Strydom, 2011:115; Babbie, 2014:34). Participants did not experience any physical harm, they were relaxed and free to share their experiences with the researcher. As such, no emotional discomfort was experienced by any of the participants during the study.

## 3.11.2 Voluntary participation and informed consent

Full clarity was given to all employees who participated in both the semi-structured interviews and the focus group that participation was voluntary and no person was forced to participate in the study (Strydom, 2011:116). In order to ensure voluntary participation, participants were given accurate and complete information so that they fully understood the details of the investigation to make an informed choice. Thus, written informed consent was a necessary condition rather than a luxury or impediment (Strydom, 2011:117). All participants were made aware that the data would be archived for a period of 15 years in the Department of Social Work and Criminology at the University of Pretoria (see Addendum C & D).

# 3.11.3 Violation of privacy/confidentiality/anonymity

Privacy was ensured by maintaining confidentiality, which means that although the particulars of employees who participated who had been to treatment centres were known to the researcher, that information would not be made public and their responses would not be linked to them in a way that would make them identifiable to others (Strydom, 2011:119; Babbie, 2014:37). The researcher also clarified to the participants that unlike confidentiality she would not guarantee anonymity. Anonymity is achieved in a research project when neither the researcher nor the readers of the findings can identify a given response with a given respondent (Babbie, 2014:35). In this study anonymity was not guaranteed for both the semi structured interviews and focus group; however, pseudo names were used to report the findings. The assistant who assisted the researcher with the focus group discussion, signed a declaration to maintain confidentiality from the discussions that transpired.

## 3.11.4 Actions and competence of the researcher

The researcher made sure that her actions were ethical in that she was honest, competent and adequately skilled to undertake the investigation (Strydom, 2011:123). To ensure that the research occurred in an ethically sound manner, the researcher worked closely with her research supervisor to receive complete guidance throughout the study. Additionally, the researcher was competent to undertake the study as she is a registered social worker with interviewing skills, and completed the pre-requisite module in research methodology in preparation to undertake this study.

Before the study was conducted, the researcher obtained written permission from PIKITUP to conduct the study (see Addendum E), and she received ethical clearance from the Research Ethics Committee of the Faculty of Humanities at the University of Pretoria, South Africa (see Addendum F).

## 3.12 Challenges and limitations of the study

While conducting this research study, the researcher experienced certain challenges and limitations which could be listed as follows:

- The literature on substance abuse in the workplace is very limited and much of it is outdated. Only a few researchers offer recent South African data. Additionally, literature on substance abuse particularly in the waste management sector was not found. Such limitation was overcome by drawing on literature in male dominated industries, and blue collar workers or the migrant labour setup – thus, consulting literature on the periphery.
- Although it was clearly indicated during recruitment that supervisors should be conversant in the English language, some of the participants experienced some difficulty expressing themselves during the focus group discussion. However, the researcher was able to pick up all the messages communicated without losing any valuable data.
- The sensitive nature of the study may have also possibly led to participants providing socially desirable answers so as to protect themselves. The researcher however ensured that all participation was voluntary, and that participants were fully informed regarding the aim and nature of the study prior to taking part in the interviews. The researcher also attempted to counter this by adding a focus group discussion with the supervisors in order to obtain a holistic overview of the topic.

- As the study was exploratory and used two small sample sizes, the results that were obtained cannot be generalised to the broader population.
- Because the data gathered from the study were open to interpretation by the researcher, the findings may be influenced by the researcher's subjectivity. In an effort to minimise this, the researcher consulted with her supervisor in order to obtain a second opinion on the themes that were deduced from participants' responses.
- Anonymity was not absolute due to the fact that interviews were held on a face-to-face basis. Confidentiality was however upheld.
- Data collection took quite a while as the waste management sector is often crippled by prolonged strikes, especially PIKITUP which had numerous challenges during the empirical study.

The next section discusses the findings and interpretation thereof.

# **SECTION B: EMPIRICAL FINDINGS AND INTERPRETATION**

As mentioned above, Section B, discusses the findings and interpretation of the research findings. The study presents the data obtained from employees from drug treatment centres and provides an interpretation thereof (see Section B1). This is followed by a presentation of data obtained from the supervisors (see Section B2). The section concludes with a discussion and interpretation of a comparative analysis of both findings, that is; from participants from treatment centres and supervisors (see Section C).

The findings and the interpretation of data from the individual interviews with employees who were from drug treatment centres, will be presented as follows: biographical information, gender of the participants, age of the participants, highest qualification and positions of the participants and the number of years working for the company. Thereafter the focus will shift to the themes and sub-themes originating from the individual interviews.

# 3.13 SECTION B1: EMPLOYEES FROM DRUG TREATMENT CENTRES

The biographical information of participants is as follows.

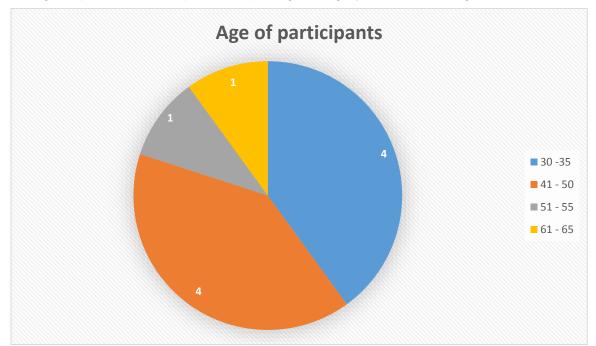
## 3.13.1 Biographical information

### (i) Gender of participants

All participants who were interviewed for the study were male.

Across the country the type of job in the waste management sector is mainly and formally performed by male employees. Moreover, typical to South Africa the dominant pattern has been migration by single males who leave their families in villages, return there periodically and generally leave the city when jobs end through dismissal or old age (Fakier & Ehmke, 2014:8). The above was attested to by Roche et al. (2015:125) who highlighted male-dominated industries as high-risk occupations for alcohol use. SACENDU (2016:15) reported that out of the 4285 total admissions to treatment centres in the Gauteng Province between January and June 2015, 86% were males, whilst females were in the lower range of 14%.

# (ii) Age of participants



The age of participants are presented per age category as follows in Figure 1.

### Figure 1: Age of participants per age category

The biographic status relating to age indicates that 4 out of 10 participants fell within the age group 30 to 35 years and 41 to 50 years, respectively. Several studies found largely mid-age workers to be at greater risk of alcohol-related problems than their younger counterparts (Roche et al., 2015; Harker Burnhams et al., 2014:7; Parry, 2013:1; McCann & Harker Burnhams, 2011:31). It is interesting to note that heavy drinking in 30-39 year old men was found to be positively influenced by intragroup conflict, whilst heavy drinking in 40-49 year old men was positively impacted by the physical environment (Roche et al., 2015:134).

## (iii) Racial group of participants

It was imperative to indicate the racial group of participants as substance abuse is also distinguished in terms of race in a number of literature studies which are discussed below.

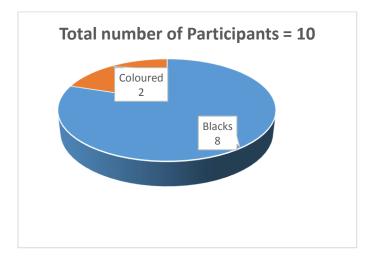


Figure 2: Race

Figure 2 above indicates that more blacks (with a total of 8 out of 10) participated in this study, than coloured persons. SACENDU (2016:16) indicates that the majority of alcohol, cannabis, nyaope/whoonga, heroin and cannabis/mandrax users in the Gauteng Province were of Black African descent. Compared to Black Africans, a significant increase was noted in the proportion of coloured patients admitted for methcathinone (CAT). This is in line with the racial profile of PIKITUP which is 98% black, 1.2% coloured, 0.2% Indian and 0.04% White (PIKITUP Third quarter report, 2016/2017: 76).

## (iv) Home language

The home language of participants is also presented as follows:

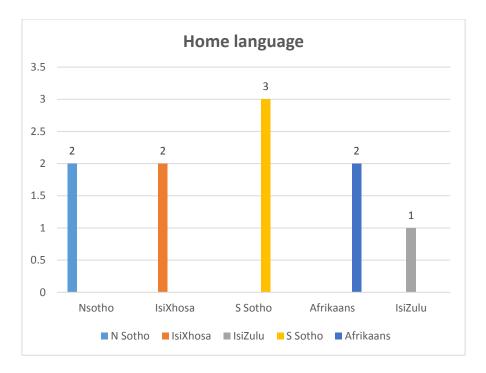


Figure 3: Home language

Three out of the 10 participants used Southern Sotho as their home language, whilst two out of 10 used Northern Sotho, Afrikaans, and isiXhosa, respectively, as their home languages. Only one participant spoke isiZulu as his home language.

# (v) Marital Status

Marital status is another important variable in the interpretation of substance abuse and presented as follows:

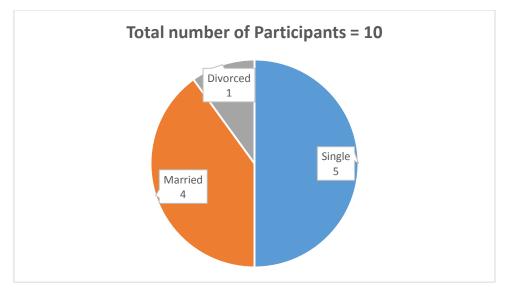


Figure 4: Marital Status

Five out of the 10 participants were single; four were married and one was divorced. Roche et al. (2015:134) in the study of risk factors for alcohol use in male dominated industries, reported that single workers are more likely to be heavy drinkers than married workers. The study showed that married workers consumed lower average amounts of alcohol than single, divorced and separated workers.

# (vi) Highest level of education

Educational background is another important factor to be presented in order to understand the biographical history of the participants.

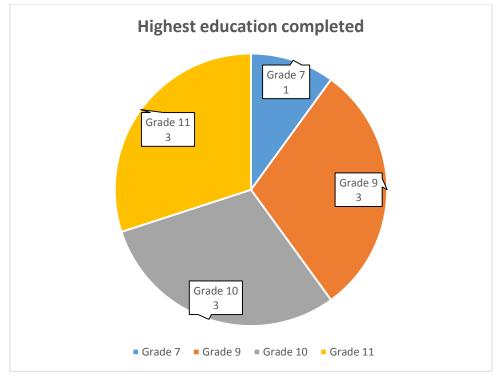


Figure 5: Highest level of education

Figure 5 indicates that out of the 10 participants who participated in this study, nine had attained secondary level, whilst one had reached primary level. The results correlate with the SACENDU report (2016:16) which indicates that 75% of people admitted at Gauteng treatment centres had secondary education, followed by 18% who had tertiary education.

#### (vii) Years of service in the company

Figure 6 below depicts the years of service of participants within the organisation. Six participants had worked for the company for five years and less at the time of the research. However, five of them (which is half of the participants) had considerable experience from their previous places of employment before joining the organisation. It is noteworthy that three of the participants were employed in the food and beverage sector, for instance as barman or chef. Two participants previously worked as barmen and chef and one in the Safety and Security sector, which are all industries for which several studies reported a high prevalence of risky substance use and abuse (Roche et al., 2015; Harker Burnhams et al., 2014:7). The three longest serving participants had worked for 17, 20 and 22 years, respectively.

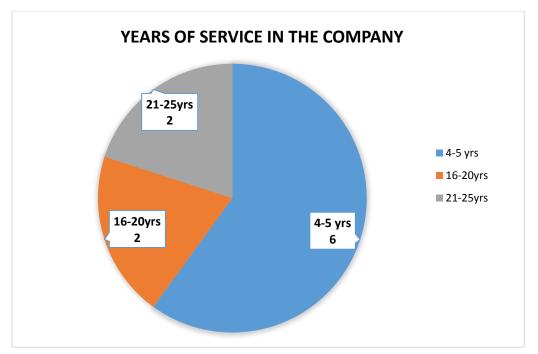


Figure 6: Years of service in the company

# (viii) Designation

Figure 7 below indicates that over six out of 10 participants were working as Refuse Collection Round loaders. The job specification of a loader is to collect refuse bins from households on a daily basis. Their working conditions are not as comfortable as the other job categories within the organisation as they work in all types of weather conditions. The job also requires a lot of physical strength and energy on a daily basis for the entire day. Only two of the participants worked as street sweepers, whilst one worked as a team leader and the last as a litter picker.

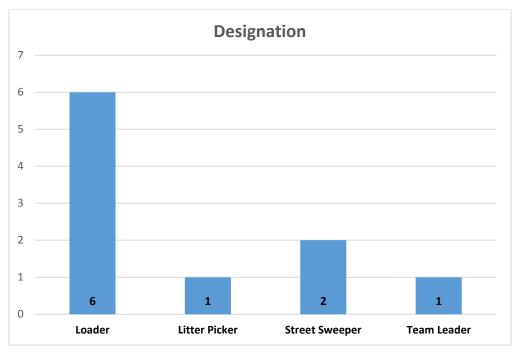


Figure 7: Designation

With the biographical information having been presented, the focus now shifts to the themes and sub-themes that emerged from the data gathered from employees from treatment centres.

# 3.13.2 Themes and sub-themes

During the data analysis process, the researcher extrapolated themes and sub-themes for both employees from treatment centres and supervisors. In order to express the views, perceptions and experiences of the respective participants, verbatim quotations will be presented where applicable.

This section focuses exclusively on employees from treatment centres as study participants. Although the interviews were conducted in isiZulu, Sesotho and Northern Sotho, only the translated English quotations are offered.

Table 1 offers an overview of the themes and sub-themes before they are discussed in detail.

## Table 1: Themes and sub-themes: Employees from drug treatment centres

TURNEO	
THEMES	SUB-THEMES
1. Working conditions	1.1 Stigma associated with the work environment
	1.2 The nature of the work environment
2. Human resources	2.1 Inadequate supervision
	2.2 Human resource challenges
3. Pushing the boundaries	3.1 Lack of fear of the law/consequences
	3.2 Reliance on unions for representation
<ol> <li>Motive for abusing alcohol and other drugs</li> </ol>	4.1Culture of using drugs
	4.2Stress relief
	4.3Peer pressure
	4.4Socialisation
5. Support needed to discourage substance	5.1 Challenges of aftercare support post-
abuse within the organisation	treatment
	5.2 Support from both the EAPs and the
	organisation
	č

# **Theme 1: Working conditions**

Under the theme "working conditions", two sub-themes emerged, namely stigma associated with the work environment and the nature of the work environment.

According to a study conducted among municipality workers in Egypt, the removal of municipal solid waste is a job associated with a variety of physical, chemical and biological hazards (El-Wahab, Eassa, Lofti, El Masry, Shatat & Kotkat, 2014). A special report coordinated by Castillo (2014:1) reports that from collection to recycling, waste workers face many risks, such as repetitive movements and lifting heavy loads. Workers are mainly exposed to extreme temperatures, dust, dirt, and chemicals. Doorstep collecting can run up to 600 points, translating to 1200 bins per round. The workers in the waste management sector are exposed to more occupational health and safety hazards than workers in many other industries (El-Wahab et al., 2014).

Having said that, the stigma associated with the work environment is delineated below.

## Sub-theme 1.1: Stigma associated with the work environment

The majority of the participants believed that the dirtiness of their work environment due to stuff that they pick up on a daily basis creates stigma. The stigma thus, tends to encourage substance abuse by employees. Firstly, as a mechanism to numb themselves from been seen working in that environment by friends and, secondly, to numb themselves from the smell and what they see.

Participants elaborated on the issue of stigma and dirtiness as follows:

"...I don't think so much Mama, but sometimes especially when you start eh, because of selfpity about the type of job you are doing... you drink so that when your friends make fun of your job you don't take them seriously. When I started I didn't want this job, I just took it because of poverty as I was struggling to make ends meet."

"Yes, the work needs you to intoxicate to avoid seeing reality of the working conditions, when I started working I was assigned to Hillbrow passages, everything used to be thrown down from the flats... things such as diapers, adult diapers, pads etc..."

"Yes, so that you don't see or smell anything. It becomes difficult to work when you are sober sometimes you don't have gloves to pick up dog pew and pampers spills. It's even difficult to work wearing a mask, hence it doesn't serve the purpose to protect against smell.

"I worked as a loader before I became a Team Leader, yes sometimes most do drink to numb themselves of what they see."

"Yes, because sometimes we see funny things, pads, children's pampers or adults pampers, animal carcass... we drink so that we numb our senses."

"... I don't want to lie 100% sure it's working conditions...you know this boys others came to Pikitup not drinking and end up drinking heavy."

"We pick up everything...sometimes still borns...things that are out...yaaa and if you don't have plague you won`t cope..." The participants' responses resonate with a study by EI-Wahab et al. (2014:15) which delineated on the health hazards and the dirty stuff that employees in the municipality have to pick-up on a daily basis. The above study corroborates a study by Barnes and Brown (2013:108) which found out that employees in the waste management sector fall within the category of blue collar workers, that these workers often do the "dirty work" in organisations, often working longer hours, under strenuous shifts, in return for little pay and often little respect and recognition by white collar employees and society at large. Consequently, for these workers, using substances of abuse, such as alcohol and other drugs may be their way of coping with their reality (Roche et al., 2015:125).

To explain the above, the Social Learning Theory (SLT) emphasises that employees are exposed to fellow employees whose behaviour they imitate (model on) and who are social reinforces for use of the substance: the act of drinking is seen as socially desirable by the group that the employee associates with. Additionally, due to the nature of the waste management environment, that is psychologically hazardous, employees may learn to cope with stress by watching how those they closely interact with deal with stressors by using negative coping skills such as alcohol and drugs (Jung, 2010:31).

In addition to the stigma associated with the work and the dirtiness of the work, the nature of the work environment automatically comes into play which is the sub-theme to be discussed next.

## Sub-theme 1.2: Nature of the work environment

The nature of the waste management sector is physically demanding, fast paced and risky. The sector is characterised by time pressures, for instance to collect refuse within specific time frames. Physical and social availability of substances were also identified to be another contributory risk factor under this sub-theme.

Participants elaborated on this sub-theme as follows:

"...Yaaa. Too much, for me like when you smoke dagga this kind of job we are doing require energy throughout collection, the dagga gives you energy..."

"Yes, the heaviness, physical demand of the job makes you wanna drink"

"... For RCR [Refuse Collection Rounds] is worse, that type of work is heavy, you can't cope when sober."

It is interesting to note that it was mostly employees who used cannabis whilst at work who believed that the substance gives them energy to endure the heaviness and fast pace of the job for the entire collection time. Yet studies have reported the short term effects of cannabis on the Central Nervous System (CNS) which affects normal functioning. Cannabis contain mind-altering chemical THC (Tetrahydrocannabinol) which 'over activates' certain brain cell receptors that causes the "high" that people feel resulting in effects such as altered senses, changes in mood, impaired body movement, difficulty with thinking, problem solving and impaired memory and learning. Frequent cannabis use is also linked to more job absences, accidents and injuries (National Institute on Drug Abuse, 2017:6).

To corroborate participants' responses above, Alhaique (2014:23) indicates that, in addition to the nature of the work environment being risky, musculoskeletal disorders also takes a toll on workers in the waste management sector which reflects the risks of handling heavy loads and faster work pace. To indicate the heaviness and physical nature of the work, doorstep collecting can run up to 600 points, meaning 1200 bins per round (Castillo, 2014:15). Barnes and Brown (2013:108) concur by highlighting unusual work hours, such as shift work or excessive working hours, and dirtiness or heaviness of work as some of the significant risk factors for substance abuse.

Social Learning Theory (SLT) posits that behaviour is learnt in two ways: either through observation or by direct experience. Learning through direct experience takes place as a result of reinforcement, which can either be positive or negative. The punishment or reward of a specific behaviour is learnt in order to determine the behaviour that will continue (Bandura, 1973:5). In this case, employees learn and observe from the example others set, which may be deliberate or not, that they can use a substance to give them energy to endure the entire collection time.

Still on this sub-theme, participants indicated that their work is by nature outside in the neighbourhood, where there are, for instance bottle stores, bars, shebeens, friends, etc. This is their typical work environment where they spend eight hours of their time per day. Participants indicated that those who are not mentally strong succumb to temptation. Several participants indicated how working in communities was a trigger for them after they were discharged from treatment centres. As they were battling to maintain their sobriety, these outlets become triggers for a slip and ultimate relapse. Participants also highlighted communities offering them alcohol during working hours as one of the challenges facing them. Several participants mentioned that it happens all the time particularly during the holidays and festive season.

Some of the responses were elaborated as follows:

"Yes, sometimes the bottle store owner would call us to come and load waste from the inside and seeing that bottle immediately triggers the previous experience."

"Yaaa I think ... because most of the time we are in the streets working within the community next to bottle stores and bars."

".... white people would give us alcohol, especially now in December and we would drink right there in the truck...they don't buy alcohol this boys, I know it's against the law but it's their way of thanking them."

*"When we go out we used to start by working first...sweeping, sweeping, sweeping, and our lunch would be brewery, laugh."* 

Ames et al. (2009:143), Bennet et al. (2006:486), McCann and Harker Burnhams, (2011:56) and Roche et al. (2015:125) agree that the availability of alcohol is a well-known risk factor for higher drinking rates and drug use in the general population and has been found to be equally important in occupational settings.

To conclude the discussion of findings on the nature of the work environment, Ames et al. (2009:143) postulate that high physical, and particularly social availability of alcohol or drugs within the workplace shapes workplace norms regarding consumption. The finding is similar to a study that was conducted in the USA which found out that more than two-thirds of the 984 workers surveyed at a large manufacturing plant in the USA civilian workforce indicated how easy it was to bring alcohol into the workplace (NIAAA, 2004:5). Physical and social availability of alcohol at work sites puts the issue of supervision to monitor employees from using substances whilst at work on the spotlight as the next topic for discussion.

#### Theme 2: Human resources

Under the theme "human resources", two sub-themes emerged, namely inadequate supervision and human resource challenges. Both sub-themes were cited by the participants as some of the reasons for employee's substance abuse within the organisation. The discussion starts with inadequate supervision.

#### Sub-theme 2.1: Inadequate supervision

This sub-theme speaks to the issue of human resource challenges and failure of each responsible role player to perform their roles as required with particular reference to the team leaders.

As alluded to in the preceding discussions, the nature of the work environment in the waste management sector is such that an estimated 90 percent of the work is performed outside in the neighbourhood and ten percent in office administration which creates a supervision challenge.

The majority of participants indicated that supervision is not adequate to prevent employees from using substances whilst onsite. Participants indicated that employees see supervisors in the morning when they arrive at work to be "clocked" in. Afterwards, they would go out on trucks to their respective sites to work. They indicated that the only time they see supervisors is when there are problems at the sites that require the supervisor's intervention. Other than that, for monitoring purposes, they see their supervisors at least once in a month.

Participants presented inadequate supervision as follows:

"....because sometimes here there isn't supervisors to check on you unlike in the contractors."

"eh...yes there is but it's not enough. Sometimes the month ends without the supervisor coming to check the trucks or employees."

To attest to the above, McCann and Harker Burnhams (2011:71), Swardt (2015:2), NCADD (2014:1) and Roche et al. (2015:137) indicate that poor supervision, lack of supervision and moderate support from supervisors is a risk factor for substance abuse. McCann and Harker Burnhams (2011:72) highlight that direct supervision of employees is made more difficult in situations where a significant volume of work is performed off-site. Additionally, in organisations where a strong drinking culture exists, the supervisor's position is compromised even further.

To support the above argument, the SLT explains that the punishment or reward of a specific behaviour is learnt in order to determine the behaviour that will continue. Reward or reinforcement may be in the form of lack of negative consequences for using alcohol or drugs in the workplace (Bandura, 1977 in Ames et al., 2009:131). Learning that supervisors are hardly present at the site may be a reinforcement for employees to continue using substances in the workplace as there are no negative consequences for such misconduct.

Some of the participants cited human resource challenges as the reasons for inadequate supervision.

## Sub-theme 2.2: Human resource challenges

Human resource challenges were cited by the participants as impacting on the quality of supervision. This means that the ratio of supervisor to employees and trucks to be monitored does not tally. Participants reported that each supervisor has to supervise many trucks that are operating in many areas which are largely spaced. It is therefore not easy for the supervisor to follow all the trucks for the whole day. Secondly, supervisors have administrative duties as an added responsibility in addition to monitoring employees' performance onsite. The human resource challenge was meant to be mitigated by the team leaders whose role is to travel with the truck all around its pick up points, monitor and supervise employees' onsite to give feedback to the supervisor. However, most of the team leaders do not perform their role as required and instead they drink or use other drugs with the employees they are supposed to monitor and supervisors. Some of the participants said the following in their responses:

"No, because they have too huge areas to supervise and still have to write reports."

"The supervisor cannot be behind you all the time and employees are clever....eh they wait for the supervisor to pass and then go to bottle stores or bars to drink..."

"... That time when I was still drinking, when I see a bar written castle I used to check if the supervisor has passed and take a quick turn and get one inside the bar."

"... Employees drink in front of team leaders. There isn't enough supervision."

"Team leaders also used to drink with us"

The above findings are similar to McCann and Harker Burnhams (2011:71) who highlighted that supervisors are often reluctant to challenge employees they believe to have a drinking problem, a tendency that alienates or antagonises the workforce. Furthermore, at this level of management one may find a manager who wants to be accepted or liked by employees and therefore may avoid confronting an abusive and potentially aggressive intoxicated employee. The greater the distance between employees and supervisors/managers in the organisational

hierarchy, however, the easier it becomes to address issues such as alcohol abuse (McCann & Harker Burnhams, 2011:21).

Roche et al. (2015:125) reported that limited supervision is a risk factor for substance abuse due to employees spending most of their working time outside the physical premises. This is evident in the waste management sector due to the nature of the work environment which is largely spaced in communities and impacting negatively on supervision.

Although the majority of participants experienced supervision as being inadequate, one out of 10 participants believed that his supervisor was doing his/her responsibility as required. His response was as follows:

"My supervisor does supervise us very well, she comes in her car to check in which state you are in, eh she tries to talk to you to see in which state you are in and pass to go and check the others."

The researcher's view is that, the above is indicative of a few of the supervisors who were able to push their limits to reach their outputs amid human resource challenges experienced in the organisation. Pushing the boundaries was also mentioned as a risk factor for substance abuse within the organisation and forms part of the next discussion.

# Theme 3: Pushing the boundaries

Under the theme "pushing the boundaries" two sub-themes emerged, namely lack of fear for the law/consequences and reliance on unions for representation, which is discussed below.

## Sub-theme 3.1: Lack of fear for the law/consequences

Lack of fear of the law was mentioned by participants that some of the employees engage in alcohol and drugs in the organisation due to lack of fear of the law or consequences. They indicated that employees engage and continue to use substances within the organisation because they know and are confident that nothing will happen to them and thus no punishment will come their way either from the supervisor or the team leader. They normally talk among themselves that "a person is never dismissed in the municipality" and this gives them courage to continue engaging in risky behaviour while on duty.

Some of the participants elaborated on the above sub-theme as follows:

"...eh I think people drink not because of the dirtiness of the environment but because they do not have fear of the law or of supervisors/consequences."

"No, if I want to go to the bottle store and buy beer no one can tell me, if I want to smoke a 'zoll' [cannabis] no one can tell me because you are not my supervisor."

According to National Institute on Alcohol Abuse and Alcoholism (NIAAA) (2004:5), researchers found that most managers and supervisors in one large manufacturing plant had little knowledge of the company's alcohol and drug policy. In addition, due to constant pressure to keep production moving at all times, supervisors were only encouraged to discipline employees for using alcohol and drugs only if the use was compromising production or becoming a safety risk. As a result, workers' knowledge that policies were never or rarely enforced seemed to encourage problematic use of substances in the workplace.

The normative beliefs, drawn from SLT, posit that people will practice behaviours that they learn from observing others' expressions and behaviours. The drinking and drugging behaviour is often reinforced or rewarded if no negative consequences are experienced. (Bandura, 1977 in Ames et al., 2009:131). This means that a reward or reinforcement may be in the form of lack of negative consequences for using alcohol or drugs in the workplace.

## Sub-theme 3.2: Reliance on unions for representation

Few of the participants mentioned the employees' great reliance on unions for protection in the case of corrective measures in the form of disciplinary processes been implemented against them. They elaborated their views as follows:

"Shop stewards also, should also assist, they can't even advise you to stop a certain behaviour, instead they can advise you to continue bad behaviour, they should advise the workers in the right way."

"...here in the company you know that you cannot be dismissed for smoking. You decide for yourself. You are given a chance to go to Rehab or not to go but come back and use again because of lack of consequences."

The municipality in general is a highly unionised sector which has two unions. The biggest and most influential union is called SAMWU (South African Municipal Workers Union) which represents the majority of the employees within the municipality inclusive of the waste

management sector. The second one is called IMATU (Independent Municipal and Allied Trade Union) which represents the minority.

Bennet et al. (2006) and McCann and Burnham (2011:57) maintain that corporate culture is often made up of sub-cultures within the company such as ethnic, political or union sub-culture, which speaks to the union sub-culture prevalent in the waste management industry. It is the above shared sub-cultures that make it easy for employees to bring and use substances within the work environment or alternatively, to obtain substances while performing their duties within the neighbourhood.

To support the above literature, the normative beliefs, drawn from SLT, posit that people will practice behaviours that they learn from observing others' expressions and behaviours, if they are rewarded and if these behaviours are reinforced (Bandura, 1977 in Ames et al., 2009:131). Reward or reinforcement may be in the form of lack of negative consequences for using alcohol or drugs in the workplace. Few of the participants mentioned this particular sub-theme as a risk factor by explaining that employees use substances in the workplace because nothing happens to those who are found to breaking the rules whilst in the workplace. For instance, no formal disciplinary actions are taken against the transgressors because of the intervention of labour unions.

As alluded to in earlier discussions, employees have different reasons for using substances. The next discussion focuses on the motive for abusing alcohol and different drugs.

## Theme 4: Motive for abusing alcohol and drugs

Generally people have different motives or reasons for drinking and using drugs. From this theme, five sub themes emerged which are: Culture of use, stress relieve, peer pressure, enhancement of positive mood and socialisation.

#### Sub-theme 4.1: Culture of using alcohol and drugs

The culture of using drugs is discussed in relation to initiation of use and familial role models which are discussed concurrently as they overlap with one another. Initiation of use is crucial to explain when participants started to use substances and also understanding if there were familial role models that participants observed and learnt behaviour from.

Nine of the ten participants started using substances before they joined the company. Some started using while at school with friends whereas a few started after they were employed. Notably, of the 10 participants interviewed, seven of them indicated that they had a family

member who drank or used drugs from during the informant's childhood years. Four of the participants mentioned their fathers' and stepfathers' substance abuse behaviour whereas three referred to their uncles and cousins.

"My uncle was drinking. He was working and would come when he is on leave sometimes, talking and making us laugh. He would take us in his car and drink nicely. We wished to be like him when we grew up."

"Yes my uncle was smoking and I used to watch him smoke."

"...my father used to take me with to the shebeen so that I can drive him back home when he had too much to drink."

The findings above are endorsed by Huurre et al. (2009:126) that the culture of use was identified as one of the risk factors for substance abuse in that some people develop a culture of drinking and using drugs earlier in their lives emanating from observations from home.

The findings are consistent with literature which states that family role models play an important part in determining whether or not an individual will develop substance dependence or not, with parents drinking and even smoking habits being modelled by children (Huurre et al., 2009:126). Furthermore, not only does the family or earlier interactions expose individuals to alcohol and drugs, but the family teaches approval for the use of these substances (Varela & Pritchard, 2011:751). Additionally, the findings and literature relates with the SLT which purports that behaviour is learnt in two ways: either through observation or by direct experience (Bandura, 1973:5). In this case, learning through direct experience took place as a result of positive reinforcement, which is observation of family members who were feeling good after using substances. The good feeling was an outcome which was learnt and therefore determined continuation of the subsequent behaviour. In other words, behaviour was learnt from the example others set, which may be learnt deliberately, or not, but requires the learning individual to observe and recognise the behaviour that is being displayed (Bandura, 1973:5). As a result, some of the participants developed norms and values about substance use from home which they brought into the workplace (McCann & Harker Burnhams, 2011:53). The younger workers are the most vulnerable as they will still be finding their job identity and would be absorbed into the prevailing or existing social norms and organisational culture of the company through observation and modelling (Bennet et al., 2006:487).

One of the motives for use which was highlighted as a risk factor for substance abuse is when substances are used for stress relief, which is the focus of the next discussion.

#### Sub-theme 4.2: Stress

The use of substances as a stress reliever has been reported in the literature and some people believe that substance use relieves stress and takes away emotional distress.

In this study, five of the ten participants started using alcohol and other drugs as stress relievers due to mainly problems at home, nature of the work environment and financial problems. Substances were thus used to cope with negative emotions. Although it was reported that moderate drinking to cope with stress could reduce stress levels, it can however lead to problem drinking and cause health problems such as hypertension and stroke. Thus, the researcher agrees with Lee et al. (2015:136) that a healthy means of relieving stress be provided for at-risk workers, particularly the male workers.

Participants elaborated on their experiences on stress relief as follows:

*"It was different....it was friends and problems at home you know...when you know you can't take it anymore it's too much stress at home and peer pressure."* 

".. Eish! I would say maybe its problems at home my sister, before I would say since my father passed away in 2008 it became better I was coping when I was left with my mother and sister... my sister was responsible she was older than me born in 1978... and she was advising and guiding me regularly and her illness affected me a lot...."

"Eh... others start drinking because of financial problems."

"I started drinking every day after I started working at RCR, when you have drank you don't have stress."

"...my finances were not balancing and I experienced a lot of stress and smoked more."

The findings above are similar to a study conducted in the USA Navy, where participants' rationale for engaging in excessive drinking was shaped by cultural norms that equate the use of substances with stress relief (Ames et al., 2009:146). Similarly, Lee et al. (2015:133) referred to the drinking and drugging motives that essentially mean that employees engage in alcohol and drug abuse with the expectation to relieve stress, enhance social reward, avoid social rejection or for enhancement of a positive mood or to cope with negative emotions. A meta-analysis of Korean studies indicated that drinking to reduce or avoid negative emotions

was greater among problem drinkers than normal drinkers, and coping motives increased the risk of problem drinking (Lee et al., 2015:135).

Research among college students in the USA has shown that "those who drink the most tend to have higher expectations regarding the positive effects of alcohol (i.e., outcome expectancies) and may anticipate only the immediate positive effects while ignoring or discounting the potential negative consequences of excessive drinking. Such positive outcome expectancies may become particularly salient in high-risk situations, when the person expects alcohol use to help him or her cope with negative emotions or conflict (i.e. when drinking serves as "self-medication"). In these situations, the drinker focuses primarily on the anticipation of immediate gratification, such as stress reduction and neglecting possible delayed negative consequences" (Larimer, Palmer & Marlatt, 1999:4).

To reinforce the above finding, the normative beliefs drawn from SLT, posit that people will practice behaviours that they learn from observing others' verbal expressions and behaviours, if these behaviours are reinforced (Bandura, 1977 in Ames et al., 2009:131). They believe that drinking or using drugs to relieve stress is a normal way to cope with negative emotions.

Thus, due to the nature of the waste management environment which is physically and psychologically hazardous as indicated in the former findings, employees learn to cope with stress by watching how those they closely interact with deal with stressors by using negative coping skills such as alcohol and drugs. Linked to this is the knowledge that individuals with poor coping skills are often found to develop friendships that encourage substance abuse (Jung, 2010:31). This leads the discussion to the next factor on peer pressure.

#### Sub-theme 4.3: Peer pressure

Peer pressure has been indicated as one of the risk factors for substance abuse in this study. Half of the participants indicated that they drank or smoked together as colleagues and influenced one another to do so while at work. Even on days when one did not feel like engaging in substance use at work, they indicated how they were pressured to use substances.

Participants particularised the role of peer pressure in their use of substances as follows:

".....when we go out we used to start by working first...sweeping, sweeping, sweeping, and our lunch would be brewery, laugh."

"....we used to go out and drink as friends because we knew each other those who were drinking."

"....my friends would say that I'm thinking better of myself if I don't join them."

".....Co-workers used to invite me to join them though I would join them with my staff Nyaope and not dagga."

"...eh, they used to influence me because sometimes even if I tell myself that today I don't feel like smoking, they used to bring it to me to smoke."

"...sometimes you don't feel like drinking because one can even be dismissed when found under the influence but end up going because friends said lets go and drink."

McCann and Burnhams (2011:58) confirm the above sentiments by highlighting that cultural and social pressures to drink are often found in the workplace and need not be associated with verbal persuasion. Instead, the presence of a favourable social or cultural environment which endorses drinking or even drug use, is often all that is needed. Thus, peer–group pressure is the most quoted cause of an individual's substance abuse problem (McCann & Harker Burnhams, 2011:59)

Essentially, males are particularly influenced by modelling associated with drinking as there is a perceived "macho" association and the prevailing cultural influence and peer pressure stigmatises any possibilities for seeking help for alcohol or drug problems. A notion supported by a study conducted among male-dominated industries in Australia found largely middleaged workers to be at greater risk of alcohol–related problems due to social norms than their younger counterparts (Roche et al., 2015:137). This is a salient factor applicable to this study because several participants were in their middle age.

A study conducted in Texas (USA) by Bennet et al. (2006:490) among municipal workers and at-risk employees in small businesses also identified drinking norms to enhance the frequency with which co-workers drink with colleagues, which in turn helps to establish standards for the social acceptability of alcohol even in the workplace.

SLT emphasises that employees get exposed to fellow employees whose behaviour they imitate (model on) and this socially reinforces the use of substances where the act of drinking is seen as socially desirable by the group that the employees associate with.

Additionally, SLT explains that employees are more likely to engage in risk taking behaviour in a group than when alone. Thus, colleagues play an important role in risk-taking behaviour by putting pressure on each other into engaging in that behaviour. Conformity plays an important role here in that employees might find themselves in situations where risky behaviours are taking place and might find it difficult to resist engaging in these behaviours (Varela & Pritchard, 2011:751).

The discussion on peer pressure therefore leads to the next section on socialisation, particularly outside the working hours as a risk factor for substance abuse.

#### Sub-theme 4.4: Socialisation

Half of the participants indicated that they meet as colleagues outside working hours to socialise as a way of unwinding. As they met, drinking or smoking became the order of the day. Some of participants indicated that because they stayed close to each other as colleagues, it was easier for them as colleagues at work to continue as friends outside the work environment.

Participants explained their socialisation as follows:

"Indeed! When we are going to catch a taxi at Bree [street name in Johannesburg], we would get in the Tavern first and drink together before taking a taxi home."

*"I started to smoke cannabis and I think it was too weak for me then started using mandrax ...You see me and my friends took it as a hobby."* 

The findings are further confirmed by Ames et al. (2009:144) that normative beliefs and expectancies concerning alcohol and drug use are informed by the culture that places high social value on drinking during leisure hours. As a result, there are pre-established traditions for socialising, reducing boredom, and alleviating stress.

Evans (2015:3) highlights that excessive alcohol consumption is exacerbated in industries such as farming and mining where workers may be away from their families, or have little to do in their spare time. This statement speaks to the male migration tendency that is also applicable to the waste management sector. Employees still share the living space in hostels or in the squatter camps where there is often the perception that there is nothing to do for recreational activity except engaging in alcohol and drugs after working hours.

The researcher's view is that, social norms are highly influential in the waste management sector, especially when considering the system of male migration that encourages continued social interaction even beyond the workplace. The SLT explains that through learning and observation the young workers are the most vulnerable as they are still finding their job identity

and would be absorbed into the prevailing or existing social norms and organisational culture of the company (Bennet et al., 2006:487).

It is imperative for the organisation to identify at-risk groups and give support to those most vulnerable employees by mitigating the risks to the organisation.

The following and last discussion on factors for substance will concentrate on the kind of support the organisation needs to offer employees from treatment centres as well as those who do not come forth.

## Theme 5: Support needed to discourage substance abuse within the organisation

Under the theme "support needed to discourage substance abuse within the organisation", two sub-themes emerged, namely challenges of aftercare support post treatment and support from both the EAPs and the organisation, which are discussed below:

## Sub-theme 5.1: Challenges of aftercare support post treatment

Most participants highlighted the importance of aftercare support group meetings and how this affords them a platform to motivate and encourage each other towards recovery. Some of the participants highlighted the challenges that employees who have undergone rehabilitation often go through including debt problems, work problems, friends at home offering alcohol or drugs, passing friends in street corners in action as well as inaccessibility of support group meetings at respective rehabilitation centres due to the long distance.

Participants indicated their challenges as follows:

"Problems at work and debt problems take them back especially those who came back from rehab."

"...I have friends outside who were waiting for me and gave me alcohol straight after rehab."

To support the above findings, in a study conducted by Swanepoel (2014:102) on the causes of relapse among young African adults following inpatient treatment for drug abuse in the Gauteng Province, the study found that the young adulthood age group (25 -38 years) are affected among others, by lack of recreational activities, lack of support needed after treatment, stressful life events, cravings, experiencing negative or euphoric emotional states,

not attending aftercare support services and physical pain. The study reported that having efficient support (meso-level) was found to increase the confidence levels of the respondents. Due to the above challenges or causes of relapse, it is imperative for the employees who have been to treatment centres to receive enough support from the EAPs and the organisation to encourage them to maintain sobriety which is the next subject for discussion.

## Sub-theme 5.2: Support from both the EAPs and the Organisation

Several participants indicated the need for aftercare support group meetings to be held on a more regular basis at least twice a month as compared to once a month. Most participants highlighted the importance of aftercare support group meetings and how this affords them a platform to motivate and encourage each other as the road to recovery is characterised by turbulences. Aftercare support is the cornerstone of substance abuse recovery because real recovery begins after treatment.

Participants elaborated their responses as follows:

"You must encourage us more, know I don't smoke anymore but I still need your encouragement to build myself strong after that, then I can also build people outside who use drugs and alcohol."

"Keep on educating us and have meetings, those who come from treatment centres to ensure that we have contact with AA meetings."

Participants have had their experience of the services provided by the Employee Assistance Programme (EAP) within the company, particularly with regards to substance related issues. Jacobson and Sacco (2012:469) mention that employees seeking help from the EAP with alcohol and drug problems represent approximately 1.5% to 2.5% of all clients which is far less than the prevalence of substance abuse in the workplace. Research suggests that integrating brief screening measures for alcohol and drug use into the EAP intake and assessment procedures, may improve the identifying rate of problematic alcohol and drug behaviour (Jacobson & Sacco, 2012:469).

During data gathering, participants made some of the following suggestions as to the kind of support the organisation could provide to discourage substance abuse:

- Education on substance abuse should be on a regular basis and not once in a while.
- Continuous training for supervisors.
- Supervisors to strengthen supervision outside the depots onsite.

- Management and supervisors to encourage employees not to use alcohol and drugs.
- Continuous training of shop stewards.
- Team talks to be conducted by supervisors on a regular basis reminding employees not to use substances whilst at work.
- Negotiate with labour unions so that employees be tested for blood alcohol levels and for other drugs.

The organisation has a huge role to play in supporting employees with substance abuse problems, as well as to discourage substance use within the organisation. There is legislation in place that gives guidelines on how to manage substance abuse in the workplace which companies have to adhere to and implement. Most importantly, companies need to develop substance abuse policies which will derive processes and procedures from the national legislations. Moreover, the company has a substance abuse policy and procedure, from which protocols were developed which tabulate the support provided by the company to all employees.

Section B2 is a presentation of the empirical findings and interpretation in relation to the second group of the research participants, namely the supervisors.

## 3.14 SECTION B2: SUPERVISORS

This section provides an overview of the supervisors' biographical information, outlines the research findings and interpretation thereof.

## 3.14.1 Biographical profile of supervisors

The biographical information of the participants is presented with the view of familiarising the reader with the people who comprised the members of the focus group discussion.

## (i) Age

Presented below is the age of participants which is imperative in the analysis of the research data.

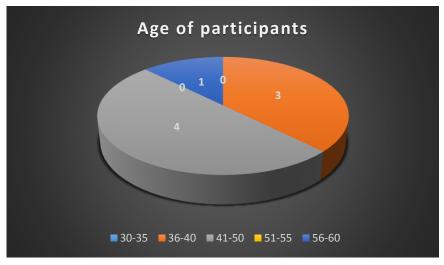


Figure 8: Age of participants per category

Figure 8 reflects that out of the eight participants who participated in the study, the majority fell in the 41 to 50 year old age group. Three of the participants were between the ages of 36 and 40 years. The last category had one participant who fell in the 56 to 60 year age group. There were no participants in the age category of 30-35 years and 51- 55 years represented in this study.

## (ii) Gender

Seven out of the eight participants were male, which is a reflection of the waste management sector male-dominated management structure.

## (iii) Years of service as supervisor

The number of years of service in a management position is imperative in getting surety that the type of data received from the participant is rich and informed by a good experience.



Figure 9: Years of service as supervisor

Figure 9 above indicates that the majority of participants had less than five years of service occupying a management position. Two of the participants fell under the category 6 -10 years. The longest serving supervisor had 26 years of service as a supervisor at the time of data collection.

The next section discusses the themes and sub-themes that evolved from the data analysis stemming from the focus group interview with the supervisors.

## 3.14.2 Themes and sub-themes: Supervisors

During the data analysis process, the researcher extrapolated themes and sub-themes from supervisors' views. In order to represent the views, perceptions and experiences of the respective participants, verbatim quotations are presented where applicable. The discussion will therefore be initiated by a presentation of a table on themes and sub-themes.

Table 2: Themes and sub-themes: Su	upervisors
------------------------------------	------------

THEMES		SUB-THEMES
1. Working conditions	1.1	Hazardous and dangerous conditions to employee health
	1.2	Community's role in exacerbating the use of substances by employees while on duty

	1.3	Accessibility to bars, shebeens and bottle stores
2. Work culture	2.1	Normalised drinking on duty
	2.2	Peer pressure at work and outside work
	2.3	The role of the system of male migration
<ol> <li>Use of substances as coping mechanism</li> </ol>	3.1	Family problems
	3.2	Debt problems due to loan sharks/Umashonisa.
	3.3	Management of work conflicts with supervisors
4. Inadequate supervision	4.1	Human resource challenges
	4.2	The role of team leaders
5 Pushing the boundaries	5.1	Lack of fear of the law/consequences
	5.2	Reliance on unions for representation
6. Substance abuse policy	6.1	Dissatisfaction with policy pertaining to treatment and aftercare
	6.2	Call for policy review

## Theme 1: Working conditions

Under the theme "working conditions", three sub-themes emerged, namely "hazardous and dangerous to employee health", "community's role in exacerbating the use of substances by employees while on duty" and "accessibility to bars, shebeens and bottle stores."

## Sub-theme 1.1: Hazardous and dangerous conditions to employee health

Several participants agreed that the working conditions in the waste management sector are hazardous and dangerous to the employees' health which can be a risk factor for substance abuse.

Participants described the hazardous and dangerous nature of the conditions as follows:

".... yes even if they can put those dust masks it's still hazardous because they can put on the masks but the chemicals that are coming from the bags or plastic bags with bins when they burst booby, ya and also the bottles the broken bottles in the bags when they empty the bin and while is still crushing inside....."

"...there was an incident whereby the... they were loading so eh, the car was passing, so one of our loader he saw the car the car was coming straight to him so now he decided to leave

the bin on the road and run away from the car and let the car bump the bin so there was an issue there so when I visited the scene I asked that lady when you see the people working you must be cautious because you bumped the bin you never bumped a person but you could have bumped the person."

The above findings concur with a study conducted among municipal workers in Egypt, which indicated that the removal of municipal solid waste is a job associated with a variety of physical, chemical and biological hazards (EI-Wahab et al., 2014:15). A special report coordinated by Castillo (2014:1) also reports that employees in this sector are exposed to extreme temperatures, dust and toxic products.

To support the above finding, Alhaique (2014:23) indicates that in Italy, the National Work Accident and Occupational Disease Insurance Agency reported that between 2009 and 2011, an average of 133 street sweepers in 1000 had a work accident each year - five times more than all other sectors together. The nature of accidents includes slip or trip (35%), being hit by a moving vehicle (7%), moving or falling objects (14%) and contact with harmful substances (1%). Musculoskeletal disorders also take a toll on workers in the waste management sector which reflects the risks of handling heavy loads and faster work paces (Castillo, 2014:15).

In view of the above, EI–Wahab et al. (2014:16) confirms that the workers in the waste management sector are exposed to more occupational health and safety risks than workers in many other industries. Harker Burnhams et al. (2014:4) also concur that literature suggests that employees in physically and psychologically risky positions are more likely to have problems associated with alcohol or drugs when compared to persons who hold jobs that are less risky.

The researcher supports the view that the use of alcohol during work is common in certain workplaces particularly in stressful workplaces. This is troubling as it compromises on safety of users, non-users and the general public.

To buttress these findings, the SLT posits that due to the nature of the waste management environment, which is physically and psychologically hazardous employees may use substances to cope with the physical and psychological demands of the job. The SLT emphasises that employees may learn to cope with stress by watching how those they closely interact with deal with stressors through use of negative coping skills such as alcohol and drugs (Bandura, 1977 in Ames et al., 2009:131).

Still on the theme about "working conditions", the subsequent sub-theme to be discussed is the community's role in exacerbating the use of substances by employees while on duty.

## Sub-theme 1.2: Community's role in exacerbating the use of substances by employees while on duty

According to the participants, the issue of community members giving alcohol to employees is a huge problem that exacerbates the use of substances within the organisation. It is a problem that has been in existence for a long time and thus affects the company's productivity and compromises the safety of all employees. The problem happens throughout the year and more often during the festive season.

Participants gave a description of the community members giving alcohol to employees as follows:

"...when there's a festive season there's a lot of presents, some when they get the present... they get alcohol you see and when the person got the present of alcohol and he doesn't know what to do with it and start to drink it for the first time..."

"...they start in the morning they are sober as a judge, but later on when they get these things they are getting injured, now the company has to take care of them in the form of WCA."

The problem of communities giving alcohol to employees extends to sharing of traditional beer. Participants indicated that employees are often offered left over traditional beer (known as *Umcombothi*) from family rituals conducted over the weekend on their Monday collection rounds.

"We used to give them when we had umsebenzi (traditional ritual) over the weekend on Monday those left overs of mcombothi"

"They are not even putting it aside to drink later, no on the spot, same time."

Besides employees been given alcohol by community members, participants mentioned that they sometimes helped themselves to left over alcohol from disposed wine bottles. Participants indicated that they had often wondered as to when the employees got into the bars or tavern to buy alcohol as they had monitored the truck going straight to the work site. To their dismay, they found out that workers drank from left over disposed alcohol bottles which could be anything from wine bottles, whisky bottles to what looks like alcohol that they do not know.

Participants' responses were as follows:

"...you know what the other workers did, in the morning you clock them sober they are not going to the bottle store those eh... the community left there like wine leftover they drink it as they pick up dustbins"

"[Laughing!] The problem they are mixing wines, beers, everything."

"...that is why now you'll find at Midrand [a town forming part of the Johannesburg metro] ...I think... I can't remember...ya. They will work out you`ll find them that they are sober we going to the other truck whilst we are busy on the other truck we got a call that the people are sick. When we got to that truck we found that no they are not sick they are drunk."

"... they don't know what they were drinking because they just took and drink."

To summarise the above discussion on this sub-theme, the researcher's interpretation is that substance abuse by employees boils down to the problem of physical and social availability of substances of abuse, especially alcohol, while onsite. The view is supported by Ames et al. (2009:143), Bennet et al. (2006:486), McCann and Harker Burnhams (2011:56) and Roche et al. (2015:125) that, the availability of alcohol is a well-known risk factor for higher drinking rates, as well as other drug use in the general population and has been found to be equally important in occupational settings. Additionally, the local communities' attitudes towards alcohol consumption and abuse have a direct bearing on how alcohol is perceived, used and misused in the workplace. If the community has a thriving culture of substance use, it is very likely that the businesses within that community will display a high acceptance of alcohol at work (McCann & Harker Burnhams, 2011:72).

The above findings can be explained in terms of the premises of the SLT. Initially, social norms are learnt with respect to when, where, and how other individuals use different substances of abuse and how the amount used depends on the situation (Jung, 2010:30; Weiten, 2014:483). Conformity plays an important role in that employees might find themselves in situations where risky behaviours are taking place and might find it difficult to resist engaging in these behaviours (Varela & Pritchard, 2011:751). Accessibility to bars, shebeens and bottle stores is the next focus of discussion.

#### Sub-theme 1.3: Accessibility to bars, shebeens and bottle stores

Participants agreed that accessibility to bars, shebeens and bottle stores is a huge risk factor to substance abuse in the company. They indicated that employees are usually on-site alone and get tempted to use substances whilst at work. One example is that there is even a liquor store just two blocks from one of the depots. Employees stop there all the time to drink and when managers try to go and confront the employees whilst drinking, the owner threatens to kill them passing a strong warning that the dealer does not call employees, but they go there on their own accord.

The views above were presented as follows by the participants:

"...the other thing is that they are working out there, so when they want to hide away from supervision from being wanted by supervisors, they go and hide inside the taverns and shebeens things like that, so you see that's where the supervisor experience problems."

"The answer is 'yes', because they are there they working there without supervision so, maybe if the supervision can be there then we would know what to do, then we would know what is right what is wrong as they are there for themselves, they are tempted and... they will continue to do this."

Once again, this point is interrelated to the former sub-theme already discussed above. These views have more to do with physical and social availability of substances as a result of the nature of the work environment. Ames et al. (2009:143) purport that high physical, and particularly social availability of alcohol or drugs within the workplace, shapes workplace norms regarding consumption. Thus, limiting or controlling access to alcohol and drugs onsite may reduce employees' drinking behaviour (McCann & Burnhams, 2011:60; NIAAA, 2004:278). However, in a waste management environment, restricting access to alcohol and drugs can be a huge challenge.

SLT is still relevant here in explaining that easy access to alcohol and drugs become a reinforcement to use while onsite (Varela & Pritchard, 2011:751). The researcher's view on the two latter sub-themes is that, the communities' influence is a huge challenge as employees have established friendships within those communities where they work. As a result, they offer them alcohol and other drugs with ease. This "practice" is normally communicated to communities via the different media platforms by the organisation especially during the festive season with the hope of discouraging "the practice." Nonetheless, this tendency has continued unabated. Thus, more innovative initiatives should be put in place to curb this challenge.

The next theme to be discussed is work culture.

#### Theme 2: Work culture

From the theme on "work culture", three sub-themes emerged, namely "drinking on duty normalised," "peer pressure at work and outside work" and "the role of the system of male migration."

Work culture could be viewed as a set of norms, values and traditions that govern an organisation. It is often formed over a period of time and may alter over time as it is a social construct. The first sub-theme to be discussed is about normalised drinking on duty.

#### Sub-theme 2.1: Normalised drinking on duty

Participants indicated that drinking and using drugs on duty was normalised. Employees drank whilst at work, at home and easily absconded themselves from work creating an enormous shortage of human resources, particularly during month ends, Fridays and Mondays. Those employees who did not drink were always at work, however they also would usually become tired of standing in for their colleagues who are constantly absent with nothing been done about it. Hence, the very same employees who do not drink ultimately feel awkward for not drinking and might end up also joining the drug users or drinkers. Alternatively, they end up absenting themselves from work as well.

Participants elaborated on this point as follows:

"Cultural theme at work it's got something to do with the problem because let's say we are working here in this truck we are five three of them are drinking two of them are not drinking, there comes month end the ones who are drinking are not at work, the only two are at work when they bring the people to make the team full so that they can be able to go and work they bring another three who are drinking so now we will start to think that there is something wrong with us if we are not drinking because this ones are drinking they are not complaining about....."

"... you see eh, when you talk about this work culture, eh sometimes this is caused by someone who is challenging the authority that is the work place, the policies as well, yes...eh. just to see that if I'm drunk what are they going to do..."

Normative beliefs and expectancies concerning alcohol and drug use are usually informed by the culture that places high social value on drinking during working hours (Ames et al., 2009:144). As alluded above, some of the participants concurred that the work culture is sometimes caused by employees who challenge the authority to test if there will be steps taken to impose disciplinary action for misconduct. If not, this irresponsible behaviour often progresses over a long period of time. Thus, Ames et al. (2009:144) agree that organisational culture/work culture is often formed over a period of time and may alter over time as it is a social construct. Harker Burnhams et al. (2014:14) support the view that drinking at work highlights a serious disregard for policies regulating the use of alcohol and drugs within the workplace. Culture is one of the most powerful influences to impact on an individual or a work group. It is also the most difficult aspect of an organisation to change. The addicted organisation is analogous to the addicted individual (McCann & Harker Burnhams, 2011:56).

To explain the above finding, the normative beliefs drawn from SLT, posit that employees will imitate behaviours that they learn from observing others' expressions and behaviours, if they are rewarded and if these behaviours are reinforced (Bandura, 1977 in Ames et al., 2009:131). Reward or reinforcement may be in the form of lack of negative consequences for using alcohol or drugs in the workplace. The use of substances within the work environment may therefore progress over a long period of time if it remains unchecked.

The influence of peer pressure within the organisation is the focus of the following sub-section.

## Sub-theme 2.2: Peer pressure at work and outside work

Participants concurred that peer pressure has a serious role in encouraging the use of substances at work by employees.

Some of the participants elaborated on the influence of peer pressure as follows:

"...on a point of peer pressure, you cannot be left alone if the others are drinking and you are not drinking."

"I think it`s just an influence of others."

Bennet et al. (2006:490) purport that drinking norms affect young workers more as they are more prone to peer pressure as newcomers into the work place to develop their careers. As a result, they may use social interactions as a way to unwind from work-stress spill over. On the same note, as a way of seeking recognition, apprentices usually model their behaviour on the artisans they wish to emulate, through observational learning (McCann & Burnham, 2011:5;

Bennet et al., 2006:9). In addition, Berry et al. (2007:1400) indicate that social networks involving drinking after work can promote a workplace culture that can encourage workers' consumption patterns away from the workplace. Findings from a random sample of workers in the manufacturing sector in the District of Columbia in the USA, it was noted that social interaction at work leads to the development of norms regarding substance use at work and that these social norms may encourage employee substance use overall and in the workplace (Frone & Brown, 2009:527).

The above findings show that social interaction at work potentially leads to the development of social norms which normalise the use of substance at work. Furthermore, it is the said social norms that potentially enhance the frequency with which co-workers drink with colleagues in the workplace.

The researcher's interpretation is that, as indicated in the former discussions, it is clear that employees do influence each other due to peer pressure by being involved in the drinking and drugging habit together. An example was made about a supervisor who was notified that some employees were sick only to find that the whole team of employees was intoxicated. As also elaborated earlier on, employees tend to drink from left over alcohol bottles as a team. Subsequently, should they get into trouble, this tendency will negatively affect all of them.

Summarily, the SLT posits that employees are usually more likely to engage in risk taking behaviour in a group than as individuals (Varela & Pritchard, 2011:751). Thus, colleagues play an important role in risk-taking behaviour by putting pressure on each other into engaging in irresponsible behaviour. Since employees in this sector often work more in teams than alone, the above may have a negative impact on productivity in general if the influence is towards negative behaviour. Therefore, the EAP professional could use peer influence to encourage positive behaviour among employees.

The next discussion delineates the role of male migration in influencing a culture of substance abuse.

## Sub-theme 2.3 The role of male migration

Participants reported that, with particular reference to the older employees, the culture of substance abuse emanates from the system of male migration introduced by the old regime pre-1994. During this period employees lived in hostels using alcohol and drugs for recreational purposes or entertainment after work. These employees have become alcoholics and they cannot function without alcohol.

This viewpoint was elaborated as follows by one participant and supported by the majority:

"You see, when someone says he was not drinking he started drinking when working for eh, PIKITUP, with the older people, eh it has something to do with the previous regime and people were staying in the compounds and hostels and in those compounds there were what you call bars ne, where this 'mcombothi' things were being sold, so that was some sort of entertainment in the place where they were staying, Previously, you see that happens with the old people and you find that most of them they can't really work without getting something to drink first, the, the, it's a norm to them that every day when they come you will find them smelling eh alcohol, 'yes' ... and if that person is deprived of the chance of getting alcohol he won't perform."

"...that system has affected a lot of our employees and most of them cannot function without alcohol and are about to go on pension."

The initial introduction of alcohol in the workplace contributed to the problem of substance abuse not only within the workplace, but also in the communities as a result of the policies of the apartheid regime. "During colonial and apartheid rule alcohol was used as a means of labour mobilisation. It was often used to control migratory work and as a social outlet for workers, as part of their relaxation time" (McCann & Harker Burnhams, 2011:55). Similarly, Evans (2015:3) also indicated that excessive alcohol consumption is exacerbated in industries such as farming, where workers may be away from their families, or have little to do in their spare time. Extensive research had been conducted particularly in two sectors, namely the mining and the farming industries to demonstrate the impact of male migration in these industries which is applicable to the waste management sector.

As indicated earlier, the prevailing social norms encouraged by the apartheid regime are highly influential in the waste management sector especially when considering the system of male migration that encourages continued social interaction beyond the workplace. It becomes a challenge for those employees who opt not to conform because, they live with substance users together as friends, families and colleagues, far away from their families and have no recreational activities. Thus, there would be nothing else to do except drinking and doing drugs. Linked to this is the knowledge that individuals with poor coping skills are often found to develop friendships that encourage substance abuse (Jung, 2010:31).

The following theme discusses the use of substances as coping mechanisms.

## Theme 3: Use of substances as coping mechanism

Under the theme, "use of substances as coping mechanism", three sub-themes emerged, namely "family problems", "debt problems due to loan sharks/mashonisas" and "management of work conflicts with supervisors."

Supervisors reported that employees use substances to cope with problems they experience at home, the debt problems they have, as well as deal with conflicts they encounter with their supervisors.

## Sub-theme 3.1: Family problems

Family problems came out to be the most prevalent in the responses. According to the participants, most of the employees they interviewed who presented with work-related problems indicated family problems as their reason for drinking and using drugs. Employees tend to resort to using drugs to avoid dealing with the problems or to numb themselves from experiencing pain.

Participants responded in the following way to explain family problems as a risk factor.

"... yaaa, yes, got some stress now want to remove stress, you can't remove stress with drinking while this drinking is finished you get to worry again."

"Tell us the major problem, sometimes if he's not shy you he's going to tell you 'eyi' I got family problem so I don't know how to live with myself because of this ..."

"...you know I can't stay at home always we fight with my wife then I said no this one I can refer to the social worker."

Swardt (2015:2) concurs that if an employee uses drugs in the workplace, or comes to work under the influence, it can be seen as that individual's problem. Clearly, there are difficulties that drive him/her to use drugs or alcohol. She further supports the view that people use drugs for all sorts of reasons, ranging from financial stress, relationship problems and pain management. As a result, with the use of drugs and alcohol they experience instant gratification. "If I want to feel better, I want to feel better now" without waiting for a doctor's appointment, medication to kick in or therapy to finally take effect (Swardt, 2015:2). It is therefore important to encourage early identification of employees with problems and refer them before the problem worsens. McCann and Harker Burnhams (2011:50) hold a similar view that "alcohol is the fastest acting, most effective and most easily available tranquilliser. Its immediate relaxing effect and social acceptance makes it attractive as a reducer of inhibitions and as a means of providing a feeling of wellbeing, an escape from reality or depression, and it makes us feel powerful and assertive when feelings of inadequacy are present."

To highlight the above view Bandura (1973:4) argue that chemical dependency is a learnt behaviour. The authors suggest that the manner in which individuals are socialised and exposed to alcohol or drug use as a coping mechanism can influence the individual's own behaviour as an adult.

The next discussion focuses on debt problems due to loan sharks/"mashonisas" which is one of the risk factors for employees' alcohol and drug use.

## Sub-theme 3.2: Debt problems due to loan sharks/"mashonisas"

The problem of loan sharks was mentioned as a huge contributory factor for substance abuse by the supervisors. They indicated that it is usually not somebody from outside the organisation who is a loan shark but somebody within the employees midst. The employee who owes a loan shark some money would rather stay at home than go to work to face a loan shark who is within the organisation demanding his/her money. Whilst at home, they do nothing else except drinking with friends and neighbours. When they do not have money to buy alcohol, they would go to the extent of taking alcohol on credit only to pay at the end of the month. Participants concurred that the problem gives rise to chronic absenteeism which constantly impacts on productivity and increased substance abuse.

Participants described the above as follows:

"... because 'mashonisa' is not even a registered 'mashonisa' that you go to him or her, the 'mashonisa' is an internal within the depot, let's say this man is working with me clocking to me but he owes me so he can never come to work afraid of me I have to clock him I have to ask him where is my money which is wrong."

"Because this person if he's not coming to work the supervisor got the responsibility to find out about his whereabouts when you go to check him you find that already he is the worst part of it now in nyaope which is very hard to come out."

The above participants' views are also highlighted by Sinha (2009:3) who maintains that there is a substantial literature on the significant association between acute and chronic stress and

the motivation to abuse addictive substances. From this angle, employees with stressors at work or in their personal lives could be identified as high-risk groups where substance abuse is concerned. Addressing root causes of the problem on all levels of intervention and reducing anxiety experienced by the individual can serve to decrease substance abuse.

Early identification and referral of employees with financial problems are recommended before the employees self-medicate. Some scholars have remarked that alcohol and drugs never solve any problems, but only numb users for a while. When users finally acknowledge that they need professional help for the original problems, they often find that they have created new problems, like further relationship breakdown, bankruptcy or worse addiction (Swardt, 2015:2).

To highlight the above situation, Bandura (1973:4) argue that chemical dependency is a learnt behaviour. The authors also suggest that the manner in which individuals are socialised and exposed to alcohol or drug use as a coping mechanism can influence the individual's own behaviour as an adult. Learning could have taken place from significant others as the individual was growing up or from the interactions with colleagues as an adult.

The next discussion focuses on management of work conflicts with supervisors.

## Sub-theme 3.3: Management of work conflicts with supervisors

Participants indicated that employees use alcohol and drugs to manage work conflicts they encounter with their supervisors.

Participants elaborated the above experience as follows:

"... let me take myself ... you are a supervisor as you working your superior is not handling you with care in terms of the job so he doesn't follow the procedures and the policies of the company so that can make me to say for me to solve this supervisor of me, let me go to have a sip then when I'm coming back he will see me who am I, therefore you starting to do something wrong intending thinking that you going to solve problem whereas you cannot.... even our subordinates us as supervisors you will find that there are those supervisors who are not handling the staff with care but now those people are going to run into drinking and smoking, you know..."

"They want to show that supervisor that you are my supervisor I'm educated than you...I'm thinking better than you, it's all sorts of things."

A study by Hendershot, Witkiewitz, George and Marlatt (2011) on relapse prevention indicated that relationships between daily events and /or mood and drinking can vary based on intraindividual or situational factors. Interestingly, anger and frustration were found to cause the majority of relapses emanating from confrontations or arguments with supervisors, employers, co-workers or marriage partners (McCann & Harker Burnhams, 2011:52) The anticipation of negative criticism was also a significant factor whereas the anticipation of a conflict was a likely cause of starting to drink (McCann & Harker Burnhams, 2011:53).

The researcher concurs that family problems, debt problems and interpersonal conflicts are the major risk factors for alcohol and drugs within the company and that they subsequently breed problems of absenteeism. The three arise as a result of avoiding to deal with a problem or using negative coping skills to address the problem. SLT is also relevant in explaining that behaviour is learnt either through observation or by direct experience. Learning through direct experience takes place as a result of reinforcement, which can either be positive or negative. The punishment or reward of a specific behaviour is learnt in order to determine the behaviour that will continue (Bandura, 1973:5). Employees learn from home through observation of parents or co–workers that, it helps to use substances in order to forget about their problems, be it family problems, financial problems or interpersonal conflicts. If it works for the first time, which is a reward, this subsequently becomes a reinforcement for that behaviour to continue. This condition then creates a dependency on the substance being abused.

Having said that, the next theme focuses on inadequate supervision.

#### Theme 4: Inadequate supervision

Under the theme on "inadequate supervision", two sub-themes emerged, namely "human resource challenges" and "the role of team leaders."

#### Sub-theme 4.1: Human resource challenges

Participants mentioned that supervision was not adequate due to the volume of work allocated in against the number of supervisors in the organisation. For instance, a Refuse Collection Round supervisor has about seven trucks to supervise and monitor to ensure that all the employees are in an acceptable state physically and mentally to work and that they do not use substances while onsite. Participants reported that it was not possible and feasible for them to follow all the trucks they supervise wherever to monitor employees. This indicates that there is a lot of work allocated to supervisors as part of their administrative duties. Hence, the supervisors cited human resource challenges as the central point to their problems.

Some of the participants described their challenges as follows:

"Nooo, like what we were saying that there's so many trucks for RCR with one supervisor, can you supervise all the seven trucks I say no there is not enough supervision"

"...The answer is yes, because they are there they working there without supervision so, maybe if the supervision can be there then we would know what to do, then we would know what is right what is wrong as they are there for themselves, they are tempted and... they will continue to do this."

"...Workers are alone out there"

Contextualising the above remarks within a waste management company, this confirms that there is limited supervision due to employees spending most of their working time outside the physical premises (McCann & Harker Burnhams, 2011:58). For instance, employees spent most of their working time in the streets collecting refuse, picking up litter and sweeping the streets.

Attesting to the arguments made above, McCann and Harker Burnhams (2011:71); Swardt (2015:2) and Roche et al. (2015:137) indicate that poor supervision, lack of supervision and moderate support from supervisors is a risk factor for substance abuse. McCann and Harker Burnhams (2011:72) highlight that direct supervision of employees is made more difficult in situations where a significant volume of work is performed off-site. In addition, in organisations where a strong drinking culture exists, the supervisor's position is compromised even further.

To support the above views, the SLT explains that the punishment or reward of a specific behaviour is learnt in order to determine the behaviour that will continue. Reward or reinforcement may be in the form of lack of negative consequences for using alcohol or drugs in the workplace (Bandura, 1977 in Ames et al., 2009:131). Learning that supervisors are hardly present at the site may be a reinforcement for employees to continue using substances in the workplace as there are usually no negative consequences.

Human resource challenges were meant to be mitigated by the role played by team leaders and it is the issue that is discussed next.

#### Sub-theme 4.2: The role of team leaders

The study noted that role that team leaders played was questionable. According to the participants, the role of team leaders is to be the eyes and ears of the supervisor in the truck whilst the vehicle is on-site. They are supposed to be the leaders and managers in the truck on behalf of the supervisor, but unfortunately, that is not always the case.

Participants indicated that employees drank and used drugs in the presence of their team leaders. Employees drank from left over alcohol bottles in full view of the team leaders, got into shebeens and bars whilst the team leader was there. Participants also voiced their frustration of team leaders being unable to resolve simple complaints from the communities which is part of their roles. Instead, they gave community members the supervisors' contact numbers to resolve the issues that were supposed to have been resolved by them.

Participants voiced their frustration as follows:

"... to add in supervision, a supervisor can have seven trucks but each and every truck there is a team leader who's going to work as an eye as an ear of the supervisor on his absence, so and also to drive the community out there you find that now the people want 'eh!' ... the bin they just give your number and when they give your number to the client you find that there were some words that were exchanged and when the client phones you instead of wanting the bin he will say your staff your staff, the supervision is not enough."

"The thing is, is somebody injured there's a problem they must nobody fill the WCA [Workman's Compensation Act] form to send someone in hospital they will wait for you tomorrow morning you must come and fill it and you were not there."

In addition, the problem of lack of leadership by the team leader in the absence of the supervisor came out strongly from the supervisors. For example, when there were injuries onsite and a WCA (Workman's Compensation Act 30 of 1941) process had to be followed, the team leaders did nothing to follow the stated procedure. They would rather leave the forms for the attention of the supervisor for the following day. The supervisor would then be expected to complete the form based on "hear say."

From what has been alluded to above, it is clear that the issue of team leaders not performing their roles as expected is a serious risk factor that needs to be resolved to reduce the risk of substance abuse to positively contribute towards the organisation's success. The researcher believes that team leaders have a very crucial role to play and that if they were committed, existing measures would assist to bring a positive impact towards ensuring that employees do not use substances whilst onsite.

Team leaders' failure to perform their roles is equivalent to poor supervision as they are the leaders and supervisors of employees while onsite in the absence of the supervisor. McCann and Harker Burnhams (2011:21) elaborate on the above that, at this level of management one may find a manager who wants to be accepted subsequently making it difficult to confront an abusive and potentially aggressive intoxicated employee. The greater the distance between employee and supervisor/manager in the organisational hierarchy, the easier it becomes to address issues such as alcohol abuse (McCann and Harker Burnhams, 2011:21). This may be compounded by the fact that, often co-workers, including superiors usually cover up for fellow employees who have a drinking problem.

Following the arguments presented above, in organisations where a strong drinking culture exists, the supervisor's position is compromised even further. Therefore, the researcher's view is that if team leaders can be empowered to be able to stand firm in assuming their roles, the risk of human resource challenges might be mitigated.

The next theme identified as a risk factor to be discussed is pushing boundaries.

## Theme 5: Pushing the boundaries

Under the theme on "pushing the boundaries" two sub-themes emerged, namely "lack of fear of the law or consequences" and "reliance on labour unions for representation."

## Sub-theme 5.1 Lack of fear of the law/consequences

This particular theme was mentioned with specific reference to employees who are taken for treatment and only to come back straight into drinking or using drugs again right after release from the treatment centre. Participants indicated that this is a sign of disrespect. The lack of fear of the law/consequences does not only show on employees who have been sent for treatment, but also to those who have been identified with a substance abuse problem. Participants indicated that when supervisors suggest referral to the EAP so that the possibility of treatment can be explored, such employees blatantly refuse and indicate that the supervisor cannot force them to go for treatment.

Participants indicated their comments as follows:

"...after the rehab when they come back they still going back to drink and then now there are support groups they are just going there that encourages the employee I meant to say I was taken to rehab for 30 days the company paid and company's time, and 'eh' ... the one who is a non- drinker is looking and once a month on a Friday this rehab people they are called to go and talk..."

"... the other thing I have about five who were from rehab but when they come back it's the same thing, they continued to drink, you see and the company paid that time about R19 000 for each person, so but when they came back they continued to drink."

"...and the other ones when you tell them about the support group on this day, they make themselves absent they don't come ..."

"...the thing is with the mining sector there's lot of training that people are been send to and there are rules of which the employee are aware that if you break that there are consequences, yes that is the only thing that needs to happen here at PIKITUP."

Participants further highlighted that employees drink and use other drugs especially cannabis whilst in the workplace because they know that if they are found, nothing serious happens to them. The participants concurred that all the above happens because of their failure to monitor employees and implement corrective measures. There should be clear conditions put in place regarding employees coming back from treatment, particularly with regards to maintaining sobriety. Participants also agreed that supervisors should not be scared to implement corrective measures there are support groups established within the company for employees who have been sent for treatment to assist them with their recovery. However, some employees' lack of interest lead them to go to the extent of not going to work on the day that they are supposed to go and attend the support group. The type of behaviour is an absolute indication of disregard for the law.

According to Harker Burnhams and McCain (2011:174) researchers in the USA found that most managers and supervisors in one large manufacturing plant had little knowledge of the company's alcohol and drug policy. In addition, due to constant pressure to keep production moving at all times, supervisors were only encouraged to discipline employees for using alcohol and drugs only if the use was compromising production or being a safety risk. As a result, workers' knowledge that policies were never or rarely enforced seemed to encourage problematic use of substances in the workplace (NIAAA, 2004:4).

To support the above, the normative beliefs, drawn from SLT, posit that people will that they learn from observing others' expressions and behaviours, if they are rewarded and if these behaviours are reinforced (Bandura, 1977 in Ames et al., 2009:131). In other words, lack of negative consequences has been a reward or reinforcement for the drinking and drugging behaviour to continue.

The above lack of fear of the law/consequences was encouraged by the employees' reliance on unions for representation if they got into trouble with the law, which is the next sub-theme to be discussed.

## Sub-theme 5.2: Reliance on unions for representation

The above sub-theme was mentioned by the participants many times throughout the focus group discussion. They strongly believed that the prevailing drinking culture was encouraged by the labour unions. The unions interfere in the company's endeavour to make it a drug free workplace. Participants further indicated that the company had introduced an alcohol testing programme which was terminated by the labour unions claiming it to be a form of abuse to their employee members.

Participants elaborated on this matter as follows:

"... here at PIKITUP the union is the head."

"...and then you as a supervisor you try to enforce to say try to solve the problem and also to help a person there comes the union now you find that the supervision there has a tight because you tend to be someone who is abusing the people whereas the people they are abusing their rights they have been given and the job they have been given you end up saying no allright its fine you see if he's absent ... it's fine because it is his money that he's not going to get at the end of the month."

"...previously we had this machines that were used to breathalyse, now because labour was against it, it fell away, so that was one of the things which were like encouragement to them, because if labour worked hand in hand with management eh... to see it with the eye that no, the management is trying to help this people build a better and healthier workforce, but now they looked at it as if no, people are being abused as if doing drugs at work is somebody's right so that needs to be undisturbed. If in some of the things the union can start to see that no, some of the things are done to help our members to keep them as good and healthy employees' 'yaaa' this thing can be controlled."

To attest to the above, Bennet et al. (2006) and McCann and Burnhams (2011:57) describe corporate culture as often made up of sub-cultures within the company such as ethnic, political or union sub-culture. The union sub-culture as one of the corporate cultures seems to produce more resistance to change in drinking attitudes. It is has been described by the participants as hampering the management of substance abuse within the organisation.

McCann and Harker Burnhams (2011:180) highlight that the trade unions have an obligation to ensure that impaired employees are not permitted to work as this may put their fellow employees and the public at risk. To fulfil this obligation, trade unions often work with employers to develop policies and procedures regarding the issue of impairment at work and at the same time assume the responsibility towards their members. Thus, the researcher's view is that a collaboration between the employer and the trade unions is a strategic imperative in the development of policies and procedures in the quest to manage the risks associated with substance abuse within the organisation.

To be discussed in the next session is the last theme, on "substance abuse policy."

#### Theme 6: Substance abuse policy

Under the theme on "substance abuse policy", two themes emerged namely, "dissatisfaction with policy pertaining to treatment and aftercare" and the "call for review of policy."

PIKITUP has a substance abuse policy which was developed and has been implemented since its inception (PIKITUP Substance abuse Policy, 2010:2). Participants voiced their dissatisfaction with regards to the content of the policy particularly pertaining to treatment on consequences of substance use and aftercare and thus called for a review of policy. The discussion starts with the sub-theme, on "dissatisfaction with policy pertaining to treatment and aftercare."

#### Sub-theme 6.1: Dissatisfaction with policy pertaining to treatment and aftercare

As supervisors of the employees using substances on duty, participants mentioned the challenges they were experiencing pertaining to the content of the present policy, particularly with regard to treatment and aftercare. Whilst most of the participants were of the opinion that the present policy is too lenient, a few indicated that supervisors should not shy away from implementing corrective measures for those who do not comply with the policy.

Participants presented their views as follows:

"...also they have to have the policies that also are going to protect the company not to protect the drunkards..."

"...policies must be changed, maybe it will encourage the others the non- drinkers now because by the way the policy says if one is drunk so that now I must sit down with him, I must do this and that and then I must arrange with EAP they are going to take them to rehab, after the rehab when they come back they still going back to drink."

McCann and Harker Burnhams (2011:59) cautioned that a company can implement a substance abuse policy but individuals can sabotage its impact unless they are participants in the policy and stand to benefit from it. Individuals or groups in an organisation tend to choose information which accords with their own views and ignore that which oppose their interests. They will tend to resist changes which they believe will impact adversely upon their own behaviour.

The above concurs with the union's rejection of the alcohol testing programme which is in the policy as it opposes their own views (PIKITUP Substance abuse Policy, 2010:5). Participants believe that the testing programme that was included in the policy was a breakthrough in the management of substance abuse within the organisation.

Due to the above context, the participants' view is that the policy needs to be reviewed to cover both the interests of the organisation and the employees, which is discussed in the next section.

## Sub-theme 6.2: Call for policy review

Participants called for the policy to be reviewed to help with the control and management of substance abuse within the company. They highlighted more on the issue of corrective measures or disciplinary action in the case of a misconduct. They referred to the areas that need to be clearly stipulated on the policy and the procedures to be used to encourage employees who have been sent for treatment to maintain their sobriety.

Participants elaborated on the sub-theme as follows:

"... if it can be said that you go to rehab when you come back from rehab once we find you that you are drunk, you will be given... you will be disciplined, you will be given a final warning because we've spent money on you and if for the second time he must go, if they'll know that its fine because the people who are coming back from rehab they are the problematic people like before and they are the ones encouraging the new ones to come in because there are no

action taken against them. So the policy is what is letting us down"... I'm of the opinion that the company has done everything that needs to be done to educate the people, the policies are there and the... we are following whatever we need to follow in order eh... to correct our people, the only thing we are not doing is to follow up after as he indicated that someone who's been sent to rehab coming back and doesn't attend this support group and he goes back to his old ways, so I think, I think if the employee tends to do that what you need to do is to put him on conditions."

"Yes. He must be aware of the consequences, let us not allow ourselves to be seen as people who are abusing workers, let it be known that this are the corrective measures, yes we understand that disciplinary action is not a punitive action it's a corrective tool let us not be shy to do it."

The participants' view was that the policy protects the interests of employees with a substance abuse problem at the expense of the interest of the company. They defended their view by indicating that those employees identified with a substance abuse problem are referred to the EAPs who will make an assessment for motivation to receive treatment. If motivated, the employee will be sent to a treatment centre on the company's account and the company's time but only to come back and go back to his/her old ways. When the person relapses, he/she can be sent back to a treatment centre again on the same procedure without any negative consequences. Furthermore, the participants indicated that it becomes unfair on those employees who do not have a substance abuse problem as they always have to cover up for the person with a problem when he/she has been admitted. In actual fact, they may also decide to start using substances as they can observe that people with a problem are often treated with "soft gloves."

Having said that, it is imperative to highlight that an organisation's policy on alcohol or any other substance use should reflect the views of all its employees, so far as this is possible and provided that these views are not contrary to any statutory requirements (McCann & Harker Burnhams, 2011:77).

The next part of this chapter, Section C, focuses on a comparison of research findings between employees from treatment centres and supervisors (i.e., data triangulation).

## SECTION C: COMPARISON OF RESEARCH FINDINGS (DATA TRIANGULATION)

This section discusses the research findings based on data from the individual interviews conducted with employees from drug treatment centres and the focus group discussion with supervisors. The section presents key agreements between employees from drug treatment centres and supervisors, key disagreements between employees from drug treatment centres and supervisors, and lastly a summary of the chapter.

The research findings show that there are some similarities and differences between what employees from drug treatment centres perceived to be the risk factors for substance abuse in the waste management sector and what the supervisors perceived.

# 3.15. Agreements between employees from drug treatment centres and the supervisors

The agreements are as follows:

## • Working conditions

Data from both employees from drug treatment centres and the supervisors revealed that working conditions in the waste management sector are both hazardous and dangerous to the health of employees. This is particularly due to the fact that it is a job associated with a variety of physical, chemical and biological hazards, thus exposes employees to dirt, smell, noise, dust, and extreme temperatures. Both participant groups concurred that the nature of the job is physically demanding, fast paced and encourages the use of both alcohol and drugs.

Physical and social availability was also revealed to be a risk factor for encouraging the abuse of substances within the work environment. Availability, particularly, bared reference to accessibility to bars, taverns and shebeens whilst onsite were cited. Both participant groups agreed that the fact that the work environment of employees in the waste management company is within communities, it sort of predisposes them or makes it easy for them to access bars, taverns and shebeens whilst within the work environment. Furthermore, it was also revealed that, community members gave alcohol to employees whilst on duty throughout the year but mostly during the festive season.

#### • Inadequate supervision

Employees from drug treatment centres and supervisors agreed that there is no adequate supervision. While the former raised concerns of inadequate supervision, they understood that supervision was inadequate due to challenges such as, supervisors being allocated to a vast area and having administrative responsibilities additional to monitoring of employees. This finding was very similar to the supervisors who emphasised that they had a serious challenge of human resources whereby one supervisor was allocated to monitor seven to eight trucks per day which had to collect refuse from a vast area. This made it impossible to follow up on all the seven to eight trucks in the areas were they operated.

For both groups, the role of team leaders came to the fore as a contentious matter. They agreed that team leaders are supposed to be the leaders in the trucks as each and every truck has a team leader to supervise employees throughout the day. Data analysis also revealed that some of the team leaders who were supposed to lead the workers actually drank with them.

## • Justification for drinking and using drugs

Employees from drug treatment centres indicated that peer pressure at work played a crucial role in encouraging their drinking at work as they used to drink together as colleagues and put pressure on each other to drink and use drugs especially cannabis. This concurs with the finding based on supervisors' views that peer pressure encouraged employees to drink together as colleagues within the work environment. Supervisors highlighted specific scenarios that happened confirming the finding that peer pressure was a very strong contributing factor in individual substance abuse problems in the waste management company.

## • Stress relief

Data analysis also revealed that both employees from drug treatment centres and supervisors agreed that employees drink and use drugs to relieve stress or as a coping mechanism. They did this to cope particularly with family, work and financial challenges, as well as to unwind or socialise after work. Similarly, illicit drugs provided an escape from experiencing emotional distress or facing challenging life experiences by giving the user a false happy mood.

#### • Lack of fear of the law

Both two groups agreed that employees drink and use other drugs whilst at work due to lack of fear of the law or subsequent consequences. This finding came out much strongly from the supervisors who voiced their frustration with the union's involvement in disturbing the positive efforts initiated by the employer in an attempt to curb the problem of substance abuse in the company. This particularly was evident when the union intervened by stopping the breathalyser test which was making a difference as a deterrent. Both groups believed that employees continue to drink and use other drugs as they rely on the union to represent them against disciplinary action when necessary.

## • Support from the EAP and the company

The employees from treatment centres highlighted the need for continuous awareness sessions for all employees regarding substance abuse and training for supervisors on how to deal with employees with substance abuse problems. They also highlighted the need for support groups on a more regular basis instead of receiving such service once in a month. The supervisors also concurred with the employees from drug treatment centres that regular awareness trainings for all employees was necessary. However, they were sceptical about support groups which were not making any positive impact on those employees who had been to drug treatment centres. There are certain risk factors that were only identified by supervisors and not indicated by employees from drug treatment centres and vice versa. These risk factors are discussed below.

## 3.16 Disagreements between employees from drug treatment centres and supervisors

The following section focuses on the key disagreements between employees from drug treatment centres and supervisors regarding risk factors for substance abuse in the waste management sector.

#### • Need for policy change

Supervisors reported that the present policy on substance abuse is more concerned with serving the interests of employees with a substance abuse problem at the expense of the company's interests. They strongly believed that the policy should be amended to clearly specify issues such as what should happen if a person is sent to a treatment centre and comes back to continue drinking and using drugs. They believed the policy should also specify disciplinary action that should be taken and as supervisors, they must start implementing those corrective measures.

#### Normalised drinking on duty

One of the findings from the supervisors was that drinking and using drugs on duty has been normalised. Employees drank whilst at work, home and easily absconded themselves from work creating an enormous shortage of human resources, particularly during month ends, Fridays and Mondays. Those employees who do not drink at work were always at work. However, it was reported that they also became tired of standing in for their colleagues who were constantly absent from duty with no consequences. Hence, the very same employees who would not have been drinking ultimately felt awkward for not drinking, something that might have ended up causing them to join the drinkers.

#### • Debt problems due to loan sharks/ "Mashonisas"

Supervisors reported a serious challenge of loan sharks who had mushroomed within the company. An employee would be scared to go to work because the person he/she owed some money is a colleague or a supervisor who is supposed to clock him/her. As a result, for as long as the employee did not have money to pay back the loan shark, he/she stays absent from work. In most cases, when the supervisor or any other concerned person went pay them a visit at their home to assess their problem, they would often find them highly engaged in alcohol or hard core drugs such as *nyaope*.

## • The role of migration

Supervisors highlighted that, particularly with regards to the older employees, the culture of substance abuse emanates from the system of migration caused by the old regime. Employees were living in hostels using alcohol and drugs for recreational purposes or

entertainment after work. These employees are now alcoholics and they cannot function without alcohol. Extensive research has been conducted particularly in the mining and farming industry to demonstrate the impact of migration in these industries. As alluded to earlier, not much research has been done which focused on the waste management sector. However, employees in the waste management sector have very similar characteristics to the mining and farming industries. These industries still operate on the basis of the migrant labour system where employees are often separated from their families for a long period of time, particularly male blue collar workers, whose work is usually physically demanding.

### • Stigma associated with the work environment

There was one finding from the employees from drug treatment centres which was different from the supervisors regarding working conditions. Employees reported about the stigma that they experienced due to the dirtiness of their work environment. They felt ashamed to be seen working in a dirty environment and used substances, firstly, as a mechanism to numb themselves from been seen working in that environment by friends and, secondly, to numb themselves from the smell and what they see from picking up dirty material, such as baby nappies, adult nappies, sometimes still borns, pads. Therefore, employees used substances to buffer the trauma they are experiencing just to earn a living.

# 3.17 SUMMARY

In this chapter, the researcher explored the views of employees from treatment centres and the supervisors regarding what they considered to be the risk factors for substance abuse in the waste management sector. The chapter presented an overview of the research methods, which were used to undertake the empirical study.

Subsequently, the chapter focused on the analysis and interpretation of the research findings. The researcher presented the empirical findings from two groups of participants, namely the employees from treatment centres and the supervisors. The empirical findings for employees from treatment centres were presented as five key themes, namely: working conditions, inadequate supervision, lack of fear of the law, motive for abusing alcohol and drugs, and support needed to discourage substance abuse within the organisation. Empirical findings from the supervisors' data were presented according to six themes, namely: working conditions, inadequate supervision, lack of fear of the law, work culture, use of substances as coping mechanism and substance abuse policy.

Where possible, the findings were verified through literature control and interpreted from the theoretical framework underpinning this study.

A comparison of the research findings between employees from treatment centres and supervisors was also undertaken to facilitate for the synthesis of triangulated findings of the study.

In the next chapter, the researcher summarises the findings of the study, determines whether the goal and objectives of the study were achieved and provides recommendations on the management of risk factors for substance abuse in the waste management sector.

## **CHAPTER 4**

## CONCLUSIONS AND RECOMMENDATIONS

### 4.1 Introduction

In the previous chapter, the researcher presented empirical research findings of the qualitative study. In this chapter the research study will be concluded. The researcher will indicate how the goal and objectives of the study were met, and subsequently answer the research question, as well as the sub-questions. A discussion of the key findings of the study will be followed by conclusions. Thereafter, recommendations of the study will be offered. Recommendations for future research on risk factors for substance abuse in the waste management sector will also be made.

### 4.2 Research goal and objectives

The **goal** of the study was to explore and describe the risk factors for substance abuse in the waste management sector within the Johannesburg Metro.

This goal was achieved through the following research objectives:

**Objective 1**: To contextualise EAP services for substance abuse in the workplace.

This objective was achieved in Chapter 2 where essential EAP services in the workplace were delineated in general and also in terms of the Standards of Employee Assistance Programme in South Africa (EAPA-SA) which included clinical and non-clinical services pertinent to the management of substance abuse within the organisation. Of critical importance, the Standards of EAPA-SA highlighted that EAPs deliver comprehensive quality services in dealing with substance abuse to three target groups, the organisational management structures, worker organisations, and employees and their family members. Lastly, because intoxicated or impaired employees are a danger to themselves and to others, applicable legislation mandating the management of substance abuse in the workplace was discussed, which included: the Occupational Health and Safety Act 83 of 1993, the South African Labour Relations Act 66 of 1995, National Road Traffic Act 93 of 1996, the Employment Equity Act 55 of 1998 and the Compensation for Occupational Injuries and Diseases Act 130 of 1993.

**Objective 2**: To identify the risk factors for substance abuse among employees and the supervisors in direct contact with employees.

This objective is comprehensively addressed throughout Chapter 3 (see Section B1 and Section B2), and triangulated in Section C (Chapter 3). Following the data analysis process, the presentation and interpretation of the research findings highlight the risk factors for substance abuse among employees of the waste management company understudy. These findings were interpreted from the social learning theory perspective as a theoretical framework.

**Objective 3**: Based on the research findings, to make recommendations for policy and prevention, treatment, monitoring and aftercare services to employees who abuse substances within this particular sector.

Chapter 4 outlines recommendations for policy and prevention, treatment, monitoring and aftercare services to employees who abuse substances within this particular sector.

In view of the above, the study aimed to answer one research question and two sub-questions, namely:

**Research question:** "What are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?"

The research question could be answered through the following two **sub-questions**:

- "Based on the views of employees recently released from treatment centres, what are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?"
- "Based on the views of management (in this instance supervisors), what are the risk factors for substance abuse within the waste management sector in the Johannesburg Metro?"

The research findings between employees recently released from drug treatment centres and supervisors showed similarities on their views regarding risk factors for substance abuse among employees. However, there were variant views on risk factors for substance abuse mentioned by the two samples. The answers to the sub-questions, are highlighted below.

In response to **sub-question 1**, namely: "Based on the views of employees recently released from drug treatment centres, what are the risk factors for substance abuse within the waste management sector in the Johannesburg metro?" The following risk factors were identified:

- Working conditions. The removal of municipal solid waste is a job associated with a variety of physical, chemical and biological hazards. The majority of participants believed that the dirtiness of their work environment due to stuff that they pick-up on a daily basis creates stigma. The stigma tends to encourage substance abuse with the purpose of numbing themselves from reality. Secondly, as a mechanism to numb themselves from self-pity they experience from been seen working in that environment particularly by friends.
- The nature of the work environment is physically demanding, fast paced and risky. The sector is characterised by time pressures to collect refuse within specific time frames, particularly with regards to Refuse Collection Round (RCR). For instance, doorstep collecting can run up to 600 points, which amounts to 1200 bins per round, which them susceptible to developing musculoskeletal problems.
- Physical and social availability of substances were also found to be a risk factor. The work environment of employees in the waste management company is usually in communities with easy reach to suppliers of alcohol and drugs, e.g. bottle stores, bars, shebeens, and drug lords. Community members giving employees' alcohol while on duty was highlighted as a strong risk factor encouraging the use of substances onsite. This happened throughout the year but more often during the festive season. These factors were subsequently triggers of relapse for some of the participants upon discharge from drug treatment centres.
- Inadequate supervision. There was supervision inadequacy within the waste management company due to human resource challenges and the nature of the work environment. One supervisor had to supervise approximately eight trucks with each truck consisting of about seven crew members. Each truck operated in many areas which were largely spaced and thus made it difficult for each supervisor to follow the seven trucks. The human resource challenge was meant to be mitigated by the team leaders whose role was to travel with the truck all over its door step pick-ups to monitor and supervise employees to ensure that they refrain from engaging in alcohol and drugs onsite. Notably, the study found that most team leaders did not perform their roles as expected.

- Lack of fear of the law among those found intoxicated in the workplace reinforces risky behaviour. The risky behaviour is largely exacerbated by the strong union sub-culture evident within the waste management company which affords employees an absolute reliance on unions for representation when they transgress company policies.
- A culture of using substances which speaks to initiation of use. Interestingly, the majority of participants started using substances before they joined the organisation. The majority also had a family member such as a father, uncle or brother who was either drinking or using drugs during their upbringing which can be attributed to familial role models. Others were introduced through peer pressure at school or at home. The workplace then exacerbated the behaviour that had already been initiated to.
- Stress. Employees believe that substance use relieves stress and take away emotional distress. Most employees indicated that they used alcohol and drugs to relieve stress due to family problems, financial problems and due to the nature of the work which is associated with a variety of physical, chemical and biological hazards.
- Peer group pressure. Employees highlighted the risk of influencing one another as colleagues to go and drink or use drugs together while on duty. Peer-group pressure was the most cited cause of an individual's substance abuse problem. The risk was seen to be higher in the waste management company as employees tend socialise together further outside of work as a way to unwind with one another as colleagues.
- Support from the EAP and the organisation. Lack of more regular aftercare support group meetings was identified as a risk factor by employees from treatment centres. A request for aftercare support group meetings to be held on a much regular basis at least twice in a month was put forth. Furthermore, the kind of support required from the organisation by all employees to discourage substance use within the organisation was as follows:
  - Education on substance abuse should be on a regular basis and not once in a while.
  - There should be continuous training for supervisors.
  - Supervisors should strengthen supervision outside the depots onsite.
  - Management and supervisors should encourage employees not to use alcohol and drugs.
  - There should be continuous training of shop stewards.

- Team talks should be conducted by supervisors on a regular basis reminding employees not to use substances while at work.
- Negotiations with labour unions should be facilitated so that employees can be tested for alcohol.

In response to **sub-question 2** namely: "Based on the views of management (in this instance supervisors), what are the risk factors for substance abuse within the waste management sector in the Johannesburg metro?" The following risk factors were identified:

- Working conditions in the waste management sector are hazardous and dangerous to employees' health due to being exposed to smell, dust, rain, cold weather, hot weather, chemicals, and broken bottles.
- Supervisors indicated that physical proximity to bottle stores, bars, shebeens and drug suppliers tempt employees to drink and use drugs while on duty. The situation is exacerbated by the community members who give alcohol to employees while on duty, especially during the festive season.
- Drinking and using drugs within the waste management company has been normalised. Employees who do not drink at work are always at work, however, they always have to cover for those employees who are always absent due to alcohol or drug abuse and nothing in the form of corrective measures has been taken against them. Thus, the very same employees who do not drink and are always at work, ultimately feel awkward for not drinking and usually end up joining drug users or drinkers.
- Supervisors reported employees' influence on one another due to peer-group pressure as a pertinent risk factor. Peer-group pressure encourages employee drinking and smoking together within the working environment. If it works for the first time it becomes a reward which subsequently becomes a reinforcement for the behaviour to continue if there are no negative consequences.
- The role of the system of male migration. Employees in this sector still live in communal settings in hostels and informal settlements where they meet together outside of work with no recreational activities. They resort to alcohol for recreational purpose.
- The use of substances as a coping mechanism was identified as a risk factor by supervisors. Employees in this sector tend to use substances as a mechanism to cope

with family problems, debt problems due to loan sharks within the workplace and to manage the work conflicts they have with supervisors.

- Supervisors opined that supervision is not adequate due to the volume of work allocated to each supervisor in relation to the number of supervisors within the organisation. For instance, an RCR supervisor has approximately eight trucks to supervise, monitor and ensure that all the employees are in an acceptable state, physically and mentally, while on duty. The waste removal pick-ups and litter picking is done in communities which are largely spaced and this makes supervision a challenge. The situation therefore creates an opportunity for employees to work without supervisors for a large part of their time while onsite and this encourages the use of substances. Supervisors questioned the role that team leaders should play in relation to their role. The role of a team leader is to assume the role of a supervisor in a truck throughout the door step collection activity. Arguably, most team leaders were not performing their role as expected and this created a human resource challenge.
- Employees in the waste management company often pushed boundaries as they did not have fear of the law. Supervisors were not using the tools that they had at their disposal in the form of policies to apply corrective measures for those employees who were found to be using substances within the work environment. It is this lack of consequences that reinforced the continuation of alcohol and drug behaviour in the work environment. Lack of fear of the law was also exacerbated by the union subculture evident in the municipality. Employees had absolute reliance on the union to represent them in cases where they were found intoxicated in the workplace.
- Supervisors made a call for the review of the substance abuse policy, particularly
  pertaining to drug treatment and aftercare. Their concern was that the policy is too
  lenient, it protects the interests of employees from drug treatment centres than the
  interests of the company, thus does not play as a deterrent. They wanted the policy to
  stipulate clearly corrective measures or disciplinary action in case of transgression to
  encourage those employees who have been sent for treatment to maintain their
  sobriety.

As such, the research question, as well as the two sub-questions, were answered. The chapter's focus shifts to the conclusions and subsequent recommendations.

The next section will focus on the conclusions from the individual interviews with employees from drug treatment centres.

# 4.3 Conclusions

The discussion starts with conclusions from findings based on employees from drug treatment centres.

# 4.3.1 Conclusions: Employees from drug treatment centres

Based on the data obtained from the employees, the following conclusions were reached:

Due to the stigma created by the dirtiness of the job, employees in this sector do not feel proud of their job. They feel that their job is less valued, less important and less respected by friends and society at large. That in itself translates into creating a lack of self-worth within themselves about the type of job they are doing. This encounter subsequently requires them to use substances in order to camouflage the feeling.

Due to the nature of the job that is physically demanding and fast-paced, particularly in RCR division, employees may be using substances particularly cannabis to cope with the daily physical demands of the job within specific time frames. The risk thereof is to expose them to susceptibility to development of musculoskeletal disorders early in their lives.

It can be concluded that employees' proximity to alcohol outlets and suppliers of other drugs throughout the working hours can be considered a risk factor for substance abuse. Physical and social availability are exacerbated by community members offering alcohol to employees while on duty, which happens throughout the year, but is more common during the festive season.

Considering the nature of the work that is situated outside the supervisors' offices, supervision of employees within the waste management sector is inadequate and subsequently become a risk factor for substance abuse. There are few supervisors allocated to monitor several trucks servicing a number of areas which are largely spaced with many employees. As a result, because employees know that they are not regularly monitored round the clock, they get the opportunity to drink alcohol and use drugs while onsite. Arguably, the supervision challenge was supposed to be mitigated or addressed through the role played by team leaders. Opinions attested by the two groups of participants that most team leaders failed to perform their roles as expected, creates a gap that encourages employee drinking and use of drugs onsite.

The workers' knowledge that policies are rarely enforced by supervisors encourages lack of fear of the law knowing that there would not be any negative consequences for their problematic use of substances within the work environment.

A culture of drinking and using drugs can be learnt and developed earlier on in the employee's life emanating from observations from home. This plays an important role in determining whether an individual develops substance abuse dependency or not. This means that employees may bring problematic drinking and drug use behaviour from home into the workplace. This may be exacerbated by the working conditions and nature of the work at the workplace.

Employees in the waste management company believed that drinking or using drugs to relieve stress is a normal way to cope with negative emotions they experience as a result of family problems and financial problems.

Since the waste management sector is male dominated, it can be concluded that peer group pressure is likely to be a risk factor for substance abuse. This is owed to the fact that, males are particularly influenced by modelling associated with drinking as there is a perceived "macho" element to this behaviour. Moreover, employees are more likely to engage in risk taking behaviour in a group than when alone. The prevailing cultural influence and peer pressure stigmatises any possibilities for seeking help for alcohol or drug problems. Peer-group pressure goes beyond the workplace as employees still share residence hostels or accommodation in informal settlements where social norms are highly influential.

Social norms are highly influential in the waste management company, especially when considering the system of male migrancy that encourages continued social interaction beyond the workplace. Most of the employees in this sector still live in hostels and informal settlements where there is lack of recreational activities and this contributes to boredom which consequentially results in the abuse of substances.

Lack of aftercare support post treatment puts employees at the risk of relapse due to the overwhelming challenges they experience. Most importantly, aftercare support is the cornerstone of substance abuse recovery as this begins after treatment. Essentially, it important to note that participants indicated that the organisation was willing to offer more support to promote an alcohol and drug free workplace.

The next section will focus on the conclusions from the focus group discussion with supervisors.

# 4.3.2 Conclusions: supervisors

Based on the data obtained from the supervisors, the following conclusions were reached:

Employees in the waste management sector are employed in physically and psychologically hazardous conditions and may be using alcohol and drugs to cope with these dire conditions which expose their health to a number of physical and psychological hazards.

Physical and social availability of alcohol and drugs is a challenge in this sector as employees spend most of their working time around or next to alcohol outlets. Exacerbating the risk of alcohol and drugs is community members who often give alcohol to employees while they are on duty. This impacts negatively on the organisation's productivity and further compromises the safety of all employees and the public.

The management's continuous failure to curtail the use of substances on duty by taking action against the employees involved has normalised the problem. This has ultimately created divisions between employees who drink on duty and those who do not. The tendency lowers the morale of those employees who are committed to going to work regularly and usually perform to their optimal levels. Arguably, whilst most of the supervisors concurred that it was a challenge to act against intoxicated employees due to the substance abuse policy that is too lenient towards employees with a substance abuse problem, some of them encouraged fellow supervisors not to be scared to implement corrective measures.

Peer-group pressure was observed to be a risk factor for substance abuse in the waste management sector. To confirm this, supervisors delineated that employees often engaged in problematic drinking as a group rather than as individuals. For instance, the whole crew would fall sick because of what they would have drank together during their collection rounds. Therefore, conformity played a crucial role in that, some employees found it difficult to resist engaging in substance use as part of a group.

The culture of substance abuse within the waste management sector can also be attributed to the system of male migration introduced by the old regime which is still applicable to date. Employees still live in hostels and informal settlements where there is lack of recreational activities, thereby contributing to boredom which eventually results in the abuse of substances.

Substance abuse is a learnt behaviour. The manner in which individuals are socialised and exposed to alcohol or drugs as a coping mechanism can influence the individual's own behaviour as an adult. For instance, employees would have learnt that alcohol and other drugs bring instant gratification to problems or emotional distress. "You feel better now" without waiting for a doctor's appointment, or medication to kick in or therapy to finally take effect. If it

works for the first time which becomes a reward then subsequently becomes a reinforcement for that behaviour to continue (Swardt, 2015:2). Essentially, the above applies to family problems, debt problems and interpersonal conflicts which are the major risk factors for alcohol and drugs within the company as they subsequently breed conflicts between employees and supervisors, often leading to absenteeism as the end product. Internal loan sharks on the other hand were cited as contributors to chronic absenteeism, subsequent substance abuse and low productivity. This hostile relationship often effectively drives employees to stay at home if they do not have money to pay the loan shark who is also an employee within the same company.

Lack of adequate human resources and too much work allocated per supervisor often led to inadequate supervision to monitor employees on duty. It therefore gave employees an opportunity to use substances at work freely. The inability of team leaders to perform their roles as required makes the fight against substance use and abuse by employees while on duty unsuccessful. At this level of management, a team leader may want to be accepted and be liked by the subordinate employees and may lack the confidence to confront abusive and potentially aggressive intoxicated employee who may have broken the rules. Thus, the greater the distance between employee and manager in the organisational hierarchy, the easier it becomes to address issues such as alcohol and drugs abuse within the organisation.

The union sub-culture coupled with supervisors' inability to implement corrective measures takes the centre stage within the waste management company. They both reinforce the use of substances within the company.

Substance abuse policy needs to be reviewed in order to empower the supervisors as important role players in the implementation of the policy. This will provide an opportunity for them to make their inputs and encourage inclusive participation.

# 4.4 Recommendations

Based on the key findings and conclusions above, the following recommendations are offered for PIKITUP, policy review within PIKITUP, EAP services and future research:

# 4.4.1 PIKITUP

• Considering that the waste management sector is associated with health and safety hazards more than any other occupational setting, it is imperative for PIKITUP Safety

and Risk Department to put strict measures to ensure the supply of personal protective equipment on a daily basis. This will ensure that team leaders and supervisors monitor the daily use of this equipment throughout the day while onsite.

- Considering that the nature of the job is physically demanding and fast-paced, the
  organisation should look into an assessment of the volume of work per day in relation
  to human resources allocated. This should be done with the intension to ease the
  burden of musculoskeletal disorders some employees are prone to develop while on
  duty.
- Although the company cannot shut down all the liquor outlets because they are around the employees' working environment, it should put measures in place that will prevent employees from engaging in alcohol and drugs whilst within the work environment.
- The company's communication department should issue media statements including radio or TV advertisements, explaining the safety risk associated with giving employees alcohol whilst on duty. Emphasis should be made that this creates a danger to the employee himself /herself and the public.
- PIKITUP should sensitise communities on the effect that exposed waste has on its employees and embark on educational drives to those communities to wrap/secure their waste in order to reduce the risk.
- Development of recreational activities for employees within PIKITUP as well as the entire City of Johannesburg should be considered in conjunction with the relevant department responsible for sports and recreation. Recreational activities could lessen boredom of employees outside of work and subsequently lessen the use of substances. This development will particularly benefit those employees who have been to treatment for substance abuse by keeping their time outside of work occupied with positive activities.
- Since the majority of employees in the waste management sector are blue collar workers who feel less valued, less important and less respected by white collar workers, the organisation should develop and implement programmes to increase the employees' morale and bring about a sense of value and respect for all employees. This may subsequently reduce the use of substances within the company and increase productivity.
- To address supervision challenges, the organisation should improve on the present model of having team leaders in all trucks and onsite in street cleaning. Improvement should be in the form of continuous empowerment of team leaders in instilling a good leadership roles in monitoring employee behaviour and performance while onsite.

Supervisors should therefore monitor the team leaders' performance on a regular basis to ensure that they perform their roles as required.

- It is also imperative for supervisors to be empowered on general supervisory skills to ensure that they know and understand what is expected of them and also to teach them skills on how to deal with the challenges they come across in discharging their duties. An example of such content could include general behaviour management skills. A skilled supervisor will always bring the best out of the employee.
- Despite the unions being an important stakeholder in addressing issues of the workers, it is important for the organisation [supervisors] to set clear parameters as to where their role ends.

# 4.4.2 Policy review at PIKITUP

- Substance abuse policy should be reviewed to ensure that supervisors and employees contribute towards the review process to address their concerns in order to make management of substance abuse effective within the organisation.
- Supervisors should take a stand and implement company policies and procedures to ensure that employees are aware that policies are not only on paper but are implemented. This evolves from the fact that, their constant failure to implement policies reinforces the use of substances by employees within the working environment.
- Policy review is recommended pertaining to the role of team leaders in effecting positive change in monitoring of employees onsite.
- The prevention of loan sharks ("mashonisas") operating within the organisation should be made policy as this contributes immensely to absenteeism and impacts negatively on productivity.
- The alcohol testing programme should rather be framed as a protective mechanism rather than as a tool to punish. Essentially to be negotiated with labour unions from the ground in order to get a buy- in for the programme to become a success.

# 4.4.3 Employee Assistance Programme (EAP) services at PIKITUP

- Early identification and referral of employees with family, financial and emotional distress by supervisors is highly encouraged before these employees self-medicate by using substances
- Trauma support for employees to deal with the nature of their work in the form of continued EAP workshops to address the dehumanising aspect of their work and collaborative approach to changing how they view their role in the City, for instance by removing the waste they uphold community pride.
- Substance abuse awareness programmes should be put in place targeting particularly
  males in the middle age years (25 to 38 years). This age bracket has been identified
  as an at-risk group critical to addressing peer-group influence and its negative
  consequences. This stems from the view that men are more easily influenced by
  others, than females (Swanepoel, 2014:82).
- Intensification of internal support group meetings for those employees from treatment centres and make attendance compulsory on a regular basis is advisable.
- In addition to support groups held internally, employees from treatment centres should be linked with AA groups which are nearer to their place of residence.
- Recognition in the form of awards and incentives to employees who have gone for substance abuse treatment to encourage them to maintain sobriety should be done.
- The EAP department in consultation with the City of Johannesburg Sports and Recreation Department should facilitate the development of recreational activities for all PIKITUP employees living in shared common areas, in order to occupy their time with meaningful activities to minimise boredom outside working hours.
- Considering the impact of substance abuse in the workplace and the paucity of literature on substance abuse in South Africa, EAPA-SA Standards should include a more specific, in-depth and clear standard on substance abuse within organisations that should guide EAP services in the management of substance abuse within the workplace.

# 4.4.4 Future research

It is recommended that:

 Similar research studies should be extended to other Metropolitan Municipalities in the Gauteng Province, in order to compare the risk factors for substance abuse in the waste management sector in the province.

- Future research may use the quantitative approach in order to get the views of a much bigger sample and also to get different perspectives of different relevant groups within the organisation.
- Risk factors for substance abuse in the waste management sector should be investigated further in the South African context, to serve as a guide for workplace interventions in order to develop targeted interventions based on identified risks.
- Middle aged males were identified as high risk group to developing alcohol and drug problems, as a result, an investigation that will focus particularly on this high risk group will be imperative for the development of targeted interventions that will encourage efficiency.
- Working conditions were highlighted in this research as physically and psychologically hazardous. A participatory action research (PAR) study with employees, the employers and communities could yield better results and strategies could be developed to reduce the hazardous nature of their work, or to equip employees to cope with the hazards associated with their working environment.

## REFERENCES

Alhaique, D. 2014. Working the bins in Italy: Health and Safety at work observatory. *HesaMag*, (32):22-25.

Allen, V.L. 2006. The History of Black Mineworkers in South Africa: Apartheid Repression and Dissent in the Mine. *The Journal of African History*, 47(2):338-341.

Ames, G.M., Duke, M.R., Moore, R.S. & Cunradi, C.B. 2009. The impact of Occupational Culture on Drinking Behaviour of Young Adults in the U.S. Navy. *Journal of Mixed Methods of Research*, 3(2):129-150.

Azzone, V., McCann, B., Merrick, E.L., Hiatt, D., Hodgkin, D. & Horgan, C. 2009. Workplace Stress, Organizational Factors and EAP Utilization. *Journal of Workplace Behavioural Health*, 24(3):344-356.

Babbie, E. 2014. The Basics of Social Research. 6th ed. Belmont: Wadsworth/Cengage Learning.

Bandura, A. 1973. Social Learning Theory. New York: General Learning Press. Available:

http://www.asecib.ase.ro/mps/BanduraSocialLearningTheory.pdf (Accessed 2015/11/05).

Barnes, A.J. & Brown, E.R. 2013. Occupation as an Independent Risk Factor for Binge Drinking. *American Journal of Drug and Alcohol Abuse*, 39(2):108-114.

Bennet, J.B., Patterson, C.R., Wiitala, W.L & Woo, A. 2006. Social Risk for At-Risk Drinking in Young Workers: Application of Work-life Border Theory. *Journal of Drug Issues*, 6(3):485-514.

Berry, J.G., Pidd, K., Roche, A.M. & Harrison, J.E. 2007. Prevalence and patterns of alcohol use in the Australian workforce: findings from the 2001 National Drug Strategy Household Survey. *Society for the Study of Addiction*, 102:1399-1410.

Braun, V. & Clarke, V. 2006. Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(1):77-101.

Braun, V. & Clarke, V. 2013. Successful Qualitative Research: A practical guide for beginners. London: SAGE.

Castillo, A.P. 2014. Waste and recycling: workers at risk. HesaMag, (32):13.

Compensation for Occupational Injuries and Diseases Act 130 of 1993 (Published in the *Government Gazette*, (15158) Pretoria: Government Printer).

Employee Assistance Professional Association of South Africa (EAPA-SA). 2010. Standards for

Employee Assistance Programmes in South Africa. Available:

http://www.eapasa.co.za/resources/resource-downloads/1-documents/4-standards.html

(Accessed 2015/10/15).

Employment Equity Act 55 of 1998. (Published in the *Government Gazette*, (19370) Pretoria: Government Printers).

El- Wahab, E.W., Eassa, S.M., Lotfi, S.E., El Masry, S.A., Shatat, H.Z. & Kotkat, A.M. 2014. Adverse Health problems Among Municipality workers in Alexandria (Egypt). *International Journal of Preventive Medicine*, 5(5):545-556.

Evans, R. 2015. Tackling Alcohol Abuse among South African Farm Workers. The Ripple Effect, 141:3.

Fakier, K. & Ehmke, E. (Eds.) 2014. Socio-Economic Insecurity in Emerging Economies. Building New Spaces. New York: Routledge.

Frone, M. R & Brown, A.L. 2009. Workplace Substance - Use Norms as Predictors of Employee Substance Use and Impairment: A Survey of U.S Workers. *Journal of Studies on Alcohol and Drugs*, 71:526-534.

Frone, M.R. 2009. Does a permissive Workplace Substance Use Climate Affect Employees Who Do Not Use Alcohol and Drugs at Work? A U.S. National Study. *Psychology of Addictive Behaviour*, 23(2): 386-390.

Frone, M.R. 2012. Workplace Substance Use Climate: Prevalence and Distribution in the U.S Workforce. *Journal of Substance Use*, 71(1):72-83.

Fouché, C.B. & Delport, C.S.L. 2011. Introduction to the Research Process. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at grass roots for the social sciences and human science professions*. 4<sup>th</sup> ed. Pretoria: Van Schaik Publishers.

Fouché, C.B. & De Vos, A.S. 2011. Formal Formulations. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at grass roots for the social sciences and human science professions*. 4<sup>th</sup> ed. Pretoria: Van Schaik Publishers.

Fouché, C.B. & Schurink, W. 2011. Qualitative research designs. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at grass roots for the social sciences and human science professions*. 4<sup>th</sup> ed. Pretoria: Van Schaik Publishers.

Greeff, M. 2011. Information collection: interviewing. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at grass roots for the social sciences and human science professions.* 4<sup>th</sup> ed. Pretoria: Van Schaik Publishers.

Harker Burnhams, N., Dada, S., Linda, B., Myers, B. & Parry, C. 2013. The extent of problematic alcohol and other drug use within selected South African workplaces. *South African Medical Journal*, 103(1):845-847.

Harker Burnhams, N., Parry, C., Laubscher, R. & London, L. 2014. Prevalence and predictors of problematic alcohol use, risky sexual practices and other negative consequences associated with alcohol use among safety and security employees in the Western Cape, South Africa. *Substance abuse Treatment, Prevention, and Policy*, 9(14).

Harker Burnhams, N. & Parry, C.D.H. 2015. The state of interventions to address substance-related disorders in South African workplaces: implications for research, policy, and practice. *South African Journal of Psychology*, 45(4):495-507.

Hendershot, C.S., Witkiewitz K., George W.H and Marlatt GA. 2011. Substance abuse treatment, Prevention, and Policy: *Relapse Prevention for addictive behaviours,* 6(17).

Available: http://www.substanceabusepolicy.com/content/6/1/17 (Accessed 2017/11/08)

Huurre, T., Lintonen, T., Lintonen, T., Kaprio, J., Pelkonen, M., Marttunen, M. & Aro, H. 2009. Adolescent risk factors for excessive alcohol use at age 32 years. A 16-year prospective follow-up study. *Soc Psychiat Epidemiol*, 2010(45):125-134.

Jacobson, J.M. & Sacco, P. 2012. Employee Assistance Program Services for Alcohol and Other Drug Problems: Implications for increased Identification and Engagement in Treatment. *American Journal on Addictions*, 21:468-475.

Jung, J. 2010. *Alcohol, other Drugs and behaviour. Psychological Research Perspectives.* 2<sup>nd</sup> ed. Thousand Oaks, California: Sage.

Labour Relations Act 66 of 1995 (Published in the *Government Gazette,* (14689) Pretoria: Government Printer).

Lakhanpal, P., & Agnihotri, A. K. 2007. Drug abuse an international problem: A short review with special reference to African continent. *Indian Journal of Forensic Medicine & Toxicology*, 1(1):1-11.

Available: <u>htt//www.dmedica.com/journals.php?journalid=11&issued=98&articled=1318&action=article</u> (Accessed 2016/04/15).

Larimer, M.E, Palmer, R.S & Marlatt, G.A. 1999. Relapse prevention: An overview of Marlatt's Cognitive Behavioural Model. *Alcohol Research and Health*, 23(2):151-160.

Lee, E.K., Kim, O.S. & Hong, J.Y. 2015. Characteristics and Factors Associated with Problem Drinking in Male Workers. *Asian Nursing Research*, 9(1):132-137.

Legg, T.J., 2016. Alcohol and Anxiety. Healthline. Available: <u>https://www.healthline.com/health/alcohol-and -anxiety#overview1</u>. (Accessed 2017/11/08).

Lietz, C.A. & Zayas, L.E. 2010. Evaluating Qualitative Research for Social Work Practitioners. *Advances in Social Work*, 11(2):188-202.

Maxwell, J.A. 2010. Using numbers in qualitative research. *Qualitative Inquiry*, 16(6):475-482.

McCann, M. & Harker Burnhams, N. 2011. Alcohol, Drugs & Employment. Claremont: Juta & Co.

Merrick, E.S., Volpe-Vartanian, J., Horgan, C.M. & McCann, B. 2012. Revisiting Employee Assistance Programs and Substance Use Problems in the Workplace: Key Issues and a Research Agenda. *Psychiatric Services*, 58(10):1262-1264.

National Environmental Management Waste Act 59 of 2008 (Published in the *Government Gazette*, (32000) Cape Town: Government Printer).

National Road Traffic Act 93 of 1996 (Published in the *Government Gazette*, (20963) Pretoria: Government Printer).

Neate, I., Kotze, C., Nkomo, Z., & Birch, L. 2008. *Substance Abuse in the Workplace and the Law.* Cape Town: Drug Testing Africa.

Neuman, W.L. 2012. *Basics of Social Research: Qualitative and Quantitative approaches*. 3<sup>rd</sup> ed. New Jersey: Pearson.

Nieuwenhuis, J. 2007a. Qualitative research Designs and Data gathering techniques. In Maree, K. (Ed.) *First Steps in Research.* Pretoria: Van Schaik.

Nieuwenhuis, J. 2007b. Analysing Qualitative Data. In Maree, K. (Ed.) *First Steps in Research*. Pretoria: Van Schaik.

Njuho, P. & Davids, A. 2010. Extent and Influence of Recreational Drug use in Men and Women aged 15 years and older in South Africa. *African Journal of Drug & Alcohol Studies*, 9(1):33-48.

National Council on Alcoholism and Drug Dependence (NCADD). 2014. Fact sheet. Alcohol and other Drugs in the Workplace. Available: <u>http://www.ncadd.org/facts/workplace.htm/</u> (Accessed 16/11/2015).

Occupational Health and Safety Act 85 of 1993 (Published in the *Government Gazette*, (22991) Pretoria: Government Printer).

*Oxford Dictionary.* 2012. Available: <u>http://oxforddictionaries.com/definition/intrapersonal</u> (Accessed 2016/04/15).

Pikitup Waste Management Entity. 2014. Annual report and financial statements 2013/2014. Johannesburg.

Pikitup Waste Management Entity. 2010. Substance abuse Policy. Johannesburg.

Pikitup Waste Management Entity. 2017. Third quarter report 2016/2017. Johannesburg.

Ramsoomar, L. & Morojele, N.K. 2012. Trends in alcohol prevalence, age of initiation and association with alcohol – related harm among South African Youth: Implications for Policy. *South African Medical Journal*, 102(7):609-612.

Ravasi, D. & Schults, M. 2006. Responding to Organisational Identity Threats: Exploring the role of Organisational Culture. *Academy of Management Journal*, 49(3):433-458.

Roche, A.M, Lee, N.K., Battams, S., Fischer, J.A., Cameron, J., & McEntee, A. 2015. Alcohol use among workers in male-dominated industries: A systematic review of risk factors. *Safety Science*, 78(1):124-141.

South African Community Epidemiology Network on Drug Use (SACENDU). 2015. Monitoring alcohol and drug abuse treatment admissions in South Africa: July- December 2014 (Phase 37). Available: <a href="http://www.sahealthinfo.org/admodule/sacendu.html">http://www.sahealthinfo.org/admodule/sacendu.html</a>. (Accessed 2015/06/05).

South African Community Epidemiology Network on Drug Use (SACENDU). 2016. Monitoring alcohol and drug abuse treatment admissions in South Africa: January- June 2015 (Phase 38). Available: <a href="http://www.sahealthinfo.org/admodule/sacendu.html">http://www.sahealthinfo.org/admodule/sacendu.html</a>. (Accessed 2017/02/05).

Sandelowski, M. 2001. Real qualitative researchers do not count: The use in numbers in qualitative research. *Research in Nursing & Health*, (24):230-240.

Schuckit, M.A. 2006. Drug and Alcohol Abuse: A clinical Guide to Diagnosis and Treatment. 6th ed. California: Springer.

Sinha R., 2009. Chronic Stress, Drug use, and vulnerability to addiction. Department of Psychiatry, Yale University School of Medicine, New Haven USA.

Substance Abuse and Mental Health Services Administration. 2011. *Results from the 2010 National Survey on Drug use and Health: Summary of National Findings*. Rockville, MD: Substance Abuse and Mental Health Services Administration.

Swardt, S. 2015. Drug Addiction in the workplace. The Ripple Effect, (141):2.

Strydom, H. 2011. Ethical aspects of research in the social sciences and human service professions. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at grass roots for the social sciences and human science professions*. 4<sup>th</sup> ed. Pretoria: Van Schaik Publishers.

Strydom H. & Delport, C.S.L. 2011. Sampling and pilot study in qualitative research. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at grass roots for the social sciences and human science professions*. 4<sup>th</sup> ed. Pretoria: Van Schaik Publishers.

Swanepoel, I. 2014. The causes of relapse amongst young African adults following in-patient treatment for drug abuse in the Gauteng Province. Pretoria: University of Pretoria. (MA Dissertation).

U.S Department of Health and Human Services. National Institute on Alcohol Abuse and Alcoholism (NIAAA). 2004. *Alcohol facts and Statistics*. [SI].

U.S Department of Health and Human Services. National Institute on Alcohol Abuse and Alcoholism (NIAAA). 2014. *Alcohol facts and Statistics*. [SI].

U.S Department of Health and Human Services. National Institute on Drug Abuse. 2017. *Drug facts Marijuana*. [SI].

Varela, A. & Pritchard, M.E. 2011. Peer Influence: Use of Alcohol, Tobacco and Prescription Medications. *Journal of American College Health*, 59(8):751-756.

Weish, E.M. 2006. Substance use disorders. Continuing Medical Education, 24(8): 436-440.

Weiten, W. 2014. *Psychology: Themes and Variations. South African Edition.* Hampshire: Cengage Learning.

World Health Organization (WHO). 2014. *Global Status Report on Alcohol and Health*. Switzerland: Luxembourg.

United Nations Office on Drugs and Crime (UNODC). 2015. *World Drug Report*. Vienna: United Nations Publications.

Yoada, R.M., Chirawurah, D. & Adongo, P.B. 2014. Domestic waste disposal practice and perceptions of private sector waste management in urban Accra. *BMC Public Health*, (14):697.

Zero Waste: The Great Environmental Debate That All Solid Waste Management Professionals Must face, 2014. Available: <u>http://foresternetwork.com/author/admin\_fm/</u> (Accessed 2016/02/27).

### SEMI – STRUCTURED INTERVIEW SCHEDULE: EMPLOYEE FROM TREATMENT CENTRE

#### Risk factors for substance abuse in a waste management sector:

#### A case study in the Johannesburg Metro

### Section A: Demographic information

- 1. Gender
- 2. Age
- 3. Racial group
- 4. Home language
- 5. Marital status
- 6. Highest education completed
- 7. Number of years of service in the company
- 8. Designation

#### Section B: Open Questions

- 1. What was the date of admission to the treatment centre?
- 2. What was the date you were discharged from the treatment centre?
- 3. What is your drug(s) of choice?
- 4. When did you start drinking or using drugs?
- 5. Did you start using alcohol/drug before joining the organisation or after joining the organisation? Explain in detail please.
- As a child did you grow up having a family member who was using alcohol or drugs? Yes No

Please explain.

- What was the rationale/reason/motivation for drinking or using drugs? Explore: Stress relieve
   To avoid social rejection
  - To avoid social rejection Enhancement of a positive mood Peer pressure at work Problems at home Problems at work Socialisation/ unwinding after work
- Do you think your work environment had any role to play for your addiction? Yes No
  - NO

Motivate/explain your answer.

9. Do you consider your work environment to be hazardous/dangerous?

Yes

No

Please explain.

10. Do you think there is enough supervision conducted by supervisors against substance abuse at work?

Yes		
No		
	_	_

Please explain.

- 11. Do you experience triggers for substance use while working outside the depot in the community? Please explain.
- 12. Would you say co-workers had a role in your drinking and drugging habits at work? Explore:
  - Do your friends often ask you to go for a drink or use other substances whilst at work?
  - Do you sometimes feel as though you might lose your friends if you don't drink alcohol with them or do drugs with them at work?
- 13. Would you say co-workers had a role in your drinking and drugging habits after working hours?
  - Do you join co- workers when they drink or use drugs after hours?
- 14. What kind of support do you think should be offered by the EAP to enable employees not to

use substances?

15. What role should the organisation play to enable employees not to misuse substances?

# Thank you for your time and patience

### SEMI – STRUCTURED FOCUS GROUP INTERVIEW SCHEDULE: SUPERVISORS

#### Risk factors for substance abuse in a waste management sector:

#### A case study in the Johannesburg Metro

#### **Section A: Demographic information**

- 1. Gender
- 2. Age
- 3. Racial group
- 4. Home language
- 5. Number of years of service in the company
- 6. Number of years as a manager

#### Section B: Open Questions

- 7. Do you think substance abuse (alcohol and drugs) is a problem amongst employees working in a waste management sector?
- 8. What do you think are the reasons for employee's alcohol abuse or use of drugs?
  - Explore: Stress relieve Peer pressure Problems at home Socialisation/ unwinding after work Family influences Work Culture
  - 9. Do you think the work environment has a role to play in encouraging the use of substances at work? Discuss.
  - 10. Do you consider employees work environment to be hazardous/dangerous? Discuss.
  - 11. Do you think there is enough supervision conducted by supervisors to ensure that employees do not use substances at work? Discuss.
  - 12. Do you think employees get tempted to use substances whilst working outside of the depot in the community? Discuss.
  - 13. What role should the organisation play to enable employees not to misuse substances?
  - 14. What role should the organisation play to enable employees to maintain abstinence?

#### Thank you for your time and patience!