



Q. My employee tested positive for illicit drug use and subsequently was referred for treatment. She obviously was cooperative, but I heard from others that she has no intention of quitting drugs and was “going through the motions” to keep her job. What should I make of these statements?

A. The referral for treatment was successful. This is all that can be measured at this time. Initial statements and apparent lack of motivation aren't predictive of whether she will be successful in treatment. More relevant will be evidence during treatment that demonstrates she is discarding mistaken beliefs, myths and misconceptions about addictive disease in favor of accepting accurate information about the illness that is grounded in the chronic disease model of addiction. Treatment staff will also look for true self-diagnosis and the realization that sustained recovery depends on abstinence and ongoing personal accountability. This shift in understanding enables individuals to self-diagnose, build authentic motivation, and fully engage in the recovery process. Surprisingly, some of the most resistant and intellectualizing patients become the most dedicated advocates of treatment and recovery and, later, outstanding employees.

Q. My employee exhibits behaviors that trouble me. For example, she's ignoring deadlines, forgetting what I asked her to do, and not responding to emails. She's a strong worker, so this is a difficult situation. It appears to be some sort of defiance, but how can the EAP help me manage it? Should I just demand change?

A. Yes, the EAP can discuss with you the difficulties associated with managing this employee. Most defiance of supervisors is not overt. It is passive-aggressive—for example, her not responding to your emails or claiming forgetfulness regarding your requests. The EAP will help you identify the underlying cause of this defiance. You'll discover it probably stems from stress, miscommunication, or some perceived unfairness. Generally, it's not useful to demand change with a heavy-handed, drill-sergeant approach. It's smarter to use effective communication and empathy to address these behaviors constructively. Your goal is to build trust and encourage the employee to engage with you more positively and meet expectations. This is a balanced approach, but it does not dismiss the fact that ultimately your role is to ensure accountability. Practice constructive confrontation through role-playing with the EAP. Role-playing is highly effective for cases like yours. Based on the outcome of your meeting with the employee, consider referring her to the EAP if appropriate.

Q. Can you explain the feedback model referred to as Situation-Behavior-Impact (SBI)?

A. SBI is an easy to understand and apply feedback model for supervisors developed by the Center for Creative Leadership, a global provider of leadership development and research. SBI helps ensure that when you give feedback to an employee, it is done in a clear, respectful, and effective way regardless of whether it is positive or negative. Here is the model: Situation—Be specific and give your employee the when and where a certain behavior occurred so they can recall what you are referring to. For example, “Lei, yesterday when you presented your project...” Behavior—Describe the observable action, not your interpretation. For example, “Your audiovisual projector wouldn't function correctly.” Impact—“This created a delay in the program, causing other speakers to cut their presentations short.” The feedback ends there without judgment or assumptions. Its goal is impartiality and accuracy, but it's been proven to have a significant impact on facilitating change or reinforcing desirable behaviors.

Q. I'm a senior manager but also a recovering drug user who's been totally abstinent and sober for over 22 years. I am not fooled easily and can spot subtle cues of drug users because of my past experiences. Although it's not appropriate to point out these subtle cues, how can my experience be useful in my role?

A. You're right, you can't diagnose and confront employees, but you do have insights that give you a level of empathy other managers may lack. However, we're not talking about addiction necessarily, but instead the acute stress, the personal struggles, and a host of consequential problems common to a life affected by drug addiction. As a person in recovery, you can create a team environment or workplace that feels safe and supportive. When an employee's performance problems appear, you can document and discuss these. Inquiring about the cause of them (which is manager-appropriate and not a diagnostic inquiry) may elicit the nature of a personal problem that you can refer to the EAP. It is more likely that an assessment will then identify the substance use disorder. Note that it is not unusual for those in recovery to share their stories with others in social or informal gatherings. However, be self-aware about maintaining professional boundaries by focusing only on observable behaviors and work issues in your supervisory role.

Q. How can supervisors help employees deal with anxiety, and how would managers notice this condition since we can't diagnose mental health problems? I've heard anxiety has surpassed even depression as a key struggle for many workers.

A. Some surveys report that up to 30% of employees believe anxiety interferes with their productivity to some degree. Although supervisors can't diagnose anxiety, they can play a supportive role and make it easier to get help and overcome resistance toward professional counseling. If an employee seems overwhelmed, inquire about it by saying something like, "Kimo, you seem overwhelmed with all these new changes. Can I help in some way?" Also, never dismiss or discount the value of mental health services. Employees should know where you stand on the importance of support services, including the EAP. Never kid about counseling or use language like "the in-house shrink" or other terms that imply bias or stigma. A solid list of performance and behavioral symptoms that you can obtain from the EAP will alert you to documentable items that may be associated with anxiety. The best advice: Don't think "anxiety." Think performance, conduct, attitude, quality of work, quantity of work, attendance, and availability of the worker. By using this list, you will discover far more employees with personal issues that are interfering with work, including anxiety. Learn more: yec.co/blog/helping-employees-deal-with-workplace-anxiety



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