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Drug Use by Employees in the Workplace and Employees' Performance in Some Selected Organisations in Ghana

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Abstract:

Drug users abuse both licit and illicit drugs and the situation had become worse due to the use of alcohol and tobacco products which are legally sold drugs. The research sought to find out drug use by employees in the workplace and its effects on work performance. The research design employed was the descriptive survey. Questionnaires and interview schedule were used as the instruments to collect data. The sample for the study was 305. The data collected was analyzed using frequencies and Percentages. The results indicated that drugs used at workplace were alcoholic beverages, paracetamol, amodiaquine, marijuana and tobacco products. Majority of respondents said drug users had low performance at work place. Mechanism to control drug use at workplace included; counselling, queries, transfer, demotion, dismissal, open release, handing over culprit to the police and ban from station in the case of drivers. From the findings, it was recommended that employers need to employ requisite tools to detect drugs users during interviews and at workplace and the government of Ghana should enact laws to limit the use of raw or pure alcohol to only pharmaceutical industries that use alcohol as raw material.

Keywords: Drug, Employee, Performance, Effects, Workplace

1. Introduction

Drugs could be described as chemical substances that could alter or change the behaviour of a person and could also have physical, mental and emotional effect when used. People who use drug resulting in such impairments are said to abuse the drugs. These illicit drugs include alcohol, tobacco, cocaine (from coca bush), amphetamines, barbiturates, qat (bud or leaves of *Catha edulis*), opium (from opium poppy), hashish, hashish oil (hash oil), tetrahydrocannabinol (THC and cannabis) (CIA World Factbook, 2016; Amaglo, 2012). When employees or workers use drugs, they are not able to perform tasks well. The behaviour and the consequences of drug use should be a concern to co-workers because they were also at risk in terms of safety and security (Priut & Prothrow-Stith, 1997).

In Ghana, drug use had increased with negative impact on every individual and there had not been any additional treatment because many had the belief that drug addiction was a spiritual issue. In 2007, world drug report on drugs and crime indicated that "21.1% of Ghanaians aged from 15-64, smoked marijuana or used another cannabis product in 2006. The report continued that Ghanaians use marijuana more than 5 times the world average, which as a result, had made Ghana the leader of African countries and third in the world in cannabis or marijuana" (Selby, 2012).

Various reasons had been given as to why people use drug or drink alcohol which included; socialization, to forget about one's problem, to feel good while some did it for fun because colleagues or friends did it. Some used drugs to avoid boredom especially night workers (Coalition against Drug Abuse, 2013). The drug users went through three phases namely early, middle and late phases. During the early phase, people who drank alcohol or used drug had these symptoms that were visible. They included unnecessary criticisms, complaining often of nausea and headache. Some became very quiet while others became talkative. These drug users were not reliable at the workplace, gave some reasons or excuses in order to leave job early, spoke to colleagues anyhow, judged poorly and would not pay attention to anybody (Coalition against Drug Abuse, 2013).

The Occupational Safety and Health Administration (OSHA) said 12.9 million employees use drugs at work place (Reisner, 2008). It continued that, between 10 and 20 percent of employees or workers who died while still at work place had tested for alcohol or drugs and that, the mining and construction sectors topped in terms of drug related issues at workplace. It cost the employer financially to hire drug addicts in terms of lateness to work, low performance, often changing work places and often seeking benefit as a result of work place accidents and constant ill health problems (Test country, 2013). Companies lose huge sums of money due to alcoholism.

Conference Board reported that companies lose about \$20.6 billion every month due to excess use of alcohol. The people who abused alcohol were more than 10.5 million and these alcoholics were spread over all categories of occupations. People who abused alcohol started at social gathering and some continued until they got drunk. If the employers wanted to combat these alcoholism, then it must be seen as a disease so that employers could look out for its symptoms so as to address its progressions among employees. When an alcoholic continued to drink without control, he or she kept drinking even anywhere. The alcoholics complain a lot and blamed other people for their problems and to curb these problems and also to ensure drug free work place, the following initiatives were taken by the federal antidrug act (Snell & Bolander, 2007). From 2000 to 2004, 9.4 million illicit drug users and about 10.1 million alcohol abusers were found to be full time workers. This was disclosed by Substance Abuse and Mental Health Service Administration (1993). In 2007, of the 17.4 million current illicit drug users age 18 and over, 13.1 million (75.3 percent) were employed. Similarly, among 55.3 million adult binge drinkers, 44.0 million (79.4 percent) were employed, and among 16.4 million persons reporting heavy alcohol use, 13.1 million (79.6 percent) were employed. Of the 20.4 million adults classified with substance dependence or abuse, 12.3 million (60.4 percent) were employed full-time. In 2007, 8.4 percent of those employed full-time were current illicit drug users, and 8.8 percent reported heavy alcohol use. (Substance Abuse and Mental Health Services Administration, Office of Applied Studies, 2008). Further, the National Council on Alcoholism and Drug Dependence Inc. NCADD, (2015) reported that the 2015 estimate of marijuana users was similar to the estimate in 2014, but it was higher than the estimates from 2002 to 2013. This increase in marijuana use among people aged 12 or older reflects the increase in marijuana use by adults aged 26 or older and, to a lesser extent, the increase in marijuana use among young adults aged 18 to 25. 70% of the estimated 14.8 million Americans who use illegal drugs are employed. Marijuana was observed to be the most commonly used and abused illegal drug by employees, followed by cocaine, with prescription drug use steadily increasing (NCADD, 2015). In addition, the report, from Quest Diagnostics, found that "4 percent of the tests, of the use of illicit drugs at the workplace, it analyzed from 2015 came back positive. That compares to 3.9 percent in 2014, 3.7 percent in 2013 and 3.5 percent annually from 2010 through 2012. Last year's positive test rate was the highest annual rate since 2005, when Quest said 4.1 percent of tests came back positive. For the study, Quest (NYSE: DGX) analyzed about 11 million urine, oral fluid and hair tests performed last year. According to the company: Amphetamine positivity increased 44 percent and marijuana positivity increased 26 percent since 2011; almost half (45%) of individuals in the general U.S. workforce with a positive drug test for any substance in 2015 showed evidence of marijuana use" (Arnott, 2016). This depicts the extent to which employees engage in drug use in the workplace. In spite of this, majority of the studies conducted to test drug use at the workplace are conducted outside Ghana, studies on drug use and its prevalence in Ghana mostly focus on the youth population with very little attention to the workforce whose performance determines the performance of the organization and hence the nation's GDP.

There were several ways of helping employees cope with the challenges that they faced at the work place while performing their jobs. For instance during orientation for new employees, work procedures, work place hazards and how to use protective clothes and devices had to be explained very well. Employees must be made to understand that they could also take initiatives in ensuring safety at the work place. "Since training by itself does not ensure continued adherence to safe work practices, supervisors must observe employees at work and reinforce safe practices" (Snell & Bohlander, 2007, pp. 493) Supervisors should be able to detect unsafe acts so that the necessary measures would be taken. Further organisations can put up measures to control by setting clear policy on drug use, reinforcing the policy, anticipating drug use at workplace, maintaining a good relationship and others.

2. Problem Statement

Alcohol is a legal drug for adults (Kandel & Yamaguchi, 1993) and due to the legality of alcohol use, employees consume it unnoticed until its effects start showing at the workplace (American Council for Drug Education Fund for Employers, 1999). People have taken for granted the effect of alcohol and illicit drugs use in the workplace. In Ghana, alcoholic beverages were sold in almost every corner of every street. There is no scientific mechanism to check those on alcohol and illicit drugs in the workplace unless the person is drunk and cannot control himself or herself. The use of drugs in the workplace seems to be ignored or taken for granted and its effect on work performance is even not considered. It is of this reason that the researcher sought to find out the type of drugs used in the workplace. Also, to find out the extent to which the use of drug had impacted on employee performance at the workplace. Finally, to find out measures put in place to reduce drug use in the work place.

3. Research Objectives

Main objective is to examine "drug use by employees in the workplace and its effects on work performance Specific objectives of this research are:

1. Identify the types of drugs used by employees at the workplace
2. Identify procedures used at the workplace to detect drug use by employees
3. Ascertain the extent the use of drugs influence work performance
4. Ascertain the mechanisms to reduce drug use at work-place

4. Methodology

4.1. Research Design

The research design employed was descriptive survey. The descriptive survey made use of interviews and questionnaires to collect data and focused on experience, opinions, perception, knowledge and attitude of respondents as far as the effect of drugs use at workplace in Ghana is concerned.

4.2. Population, Sample and Sampling Procedure

The populations consisted of all employees and employers in Ghanaian organisations. The sample was 305 which was purposively selected to help the researcher generalize the sample, however, the various participants, namely; teachers, health workers, drivers and bankers were randomly selected.

4.3. Instrument

Questionnaire was the main data collection instrument. The questionnaires were made up of both opened and close-ended questions. With the open-ended questions, the researcher aimed at giving the respondents the ability to express themselves and to give their own views. This gave the respondent the chance to response to the best of their knowledge. The researcher also used the close-ended questions to obtain specific information based on the items in the questionnaire. Each questionnaire was in two sections. The first section contained items that formed the actual research work of the researcher because the responses gave answers to the research questions. The second section dealt with personal information of respondents and it included; sex, age, marital status, educational background and occupation.

4.4. Data Collection Procedure

The researcher first did informed interaction with the heads of the banking institutions, educational institution, the Ghana Private Road Transport Union (GPRTU) in the Winneba municipality and Gomoa East District about the topic before authority note was taken from the University of Applied Management, Germany, Ghana campus to them. The researcher then booked an appointment with the drivers for the interview but it took the researcher some days to interview the drivers since the stations were four. With the exception of the station masters and the commercial drivers who were interviewed, the rest were given questionnaires to complete. Different dates were given to all respondents and the dates were very close since the researcher was given a time frame within which to work. Some of the questionnaires were retrieved the same day, whereas the remaining were retrieved a week after.

4.5. Data Analysis

Since the research design was mainly descriptive, the research questions were analysed using descriptive statistics.

5. Results and Discussion

5.1. Demography of Respondents

The responses to the age distribution reveals that with the exception of employers that 2 representing 17% fall within the ages of 36-45 as against 83% for 46-55 and 56-60 and above, the rest have greater number of respondents falling within 18-35 and 36-45 as against 46-55 and 56-60 and above. Respondents for teachers within the ages of 18-35 and 36-45 is 80 representing 53% as against 70 representing 47% within the ages of 46-55 and 56-60 and above and health workers, drivers within the same range as teachers are 67% against 33%, 73% against 27%, 78% against 22% respectively.

Respondents marital status show that most respondents fall under single or married with teachers recording the highest respondents who are married with 84% followed by 83% for employers. Responses on educational background of respondents show that no respondent is illiterate. For teachers, all respondents fall under tertiary and for health workers, two representing 5% fall under 'O' level/SHS while the rest 38 representing 95% fall under tertiary. With drivers 19 representing 65% are middle school/JSS leavers and nobody falling under tertiary. For bankers, 4 representing 8% are 'O' level/SHS leavers while 46 representing 92% fall under tertiary. Respondents to each educational background show that teachers under Ghana Education Service have the largest number of employees who have attained certificates at the tertiary level followed by bankers and health workers in that order. Only one employee is a middle school/JSS leaver while the rest have tertiary certificates. The only respondents that do not have tertiary certificates are drivers. They are middle school/JSS and 'O' level/SHS leavers.

5.2. Analysis of Research Questions

Respondents were asked which drug the employees normally take at workplace without a medical doctor's prescription, responses by the respondents shown that 116 teachers representing 77% ticked paracetamol and 34 teachers representing 23 % ticked tricilate. Health workers who ticked paracetamol were 31 representing 76 %, drivers 19 representing 63 % and bankers 42 representing 84 %. Those who ticked tricilate were; teachers 34 representing 23%, health workers 9 representing 23 % and bankers 8 representing 16%. Nobody however ticked Valium or Caffeine. The responses by the various respondents as show that drugs mostly abused at the workplace among teachers, health workers, drivers and bankers were paracetamol and tricilate.

5.2.1. Discussion of Research Question One

➤ Research question one was "What types of drugs do employees use in the workplace?"

Results indicated that drugs used at the workplace were: paracetamol, tricilate, alcohol, marijuana and powdered tobacco. The powdered tobacco though not as common as alcoholic beverages, the study revealed that it was spreading across all occupations. These results actually supports the report of Centers for Disease Control and Prevention, (2016), when they said that, in the United States of America, most people had become dedicated to cigarette and other tobacco products resulting in frequent sick leave, injuries and accidents in the work place. Unlike the United States where most people are addicted to the smoking of cigarette, (Centers for Disease Control and Prevention, 2016), in Ghana, most people rather do not smoke cigarette or use tobacco products as compared to

the US as the result showed that only 3% of employees in Ghana use powdered tobacco. Even though only commercial drivers indicated marijuana which was 3%, the percentage was too high considering the work of drivers. This also is in support of Pinger, Payne, Hahn, and Hahn(1995) when they mentioned commercial bus drivers as one of the transportation workers who abuse marijuana. They however added train operators and pilots which this research did not deal with. The abuse of alcohol etc. that had resulted in speeding and reckless driving leading to series of accidents on roads. The result again revealed that some employees misuse alcohol, marijuana and other illicit drugs after work as 28% of teachers, 20% of health workers, 40% of drivers and 36% of bankers use alcohol after work. This confirms what Pinger et al (1995) said, when they said that after work, some people take alcoholic beverages, use marijuana and other illicit drugs before going home. With the three stages substance abuse by Carroll (2000), it means that some of these employees use marijuana, cocaine and other illicit drugs. Transportation workers like drivers misuse alcohol and marijuana thereby causing accidents.

Pinger et al (1995) said that 10% of medical doctors abuse cocaine and 35% also smoke marijuana. The difference here is that, while the researcher talked about the abuse of alcoholic beverages by health workers after work, Pinger et al (1995) dealt with the use of marijuana and cocaine specifically by medical doctors but did not tell when the medical doctors used the drugs while the researchers study could not show which category of health workers alcoholic beverages after work.

➤ Research question two: "Which procedures are put in place to detect drug use by employees at the workplace?"

Respondents were asked if there are general symptoms to detect drug users at the workplace, employers who said yes were 5 representing 42% and those who said No were 7 (58%). On further question that demanded Yes or No answers on specific symptoms to detect drug users during interview, 2 respondents said yes and 10 indicated no. When respondents were asked about the symptoms they look out to determine whether a college has a problem with substances abuse, all respondents mentioned smell of alcohol or marijuana during interview. With further question that demanded the symptoms of drug use, they mentioned drunkenness, reddish eyes, leaving work frequently, lateness to work and dark lips. One of the bank managers added that, drug users become unstable at work. They hardly sit on their seats for a long time. They often move from their seats and stand idle or try to engage other workers in conversation.

Research question two was meant for only employers. From the result, with the exception of smell of alcohol and marijuana and drunkenness, the other symptoms indicated in the study could occur as a result of sickness or even by nature. This is because by nature, some people have reddish eyes, dark lips and unstableness. Even drunkenness, smell of alcohol and marijuana are rare at the workplace. However, the result indicated leaving work frequently before time and lateness to work which are in support of Pinger et al (1995) though they had more symptoms. They mentioned frequent sick leave, receiving huge health benefits and work place accidents. While Pinger et al (1995) and Bryans and Rue added lateness to work and absenteeism than drug free workers. Bryans and Rue (1991) however had more symptoms of drugs abuse than the researcher. They include aggression, isolation, anti-social life, tardiness, unexpected change of behaviour, stealing, dishonesty and inability to take decision.

➤ Research Question Three: Research question three: "To what extent does drug use by employees in the workplace influence on performance?"

When asked about if employees go to work when on licit drugs such as amodiaquine, alcohol, powdered tobacco and Valium, the responses showed that, 15 teachers representing 10%, 2 health workers representing 5%, 7 drivers representing 23% and 2 bankers representing 4% go to work when on such drugs. On how respondents perform when on such drugs, 114 teachers representing 76%, 39 health workers representing 98%, 27 drivers representing 90% and 50 bankers representing 100% ticked low performance. The respondents who ticked high performance were; 6 teachers representing 4%, 1 health worker representing 2.5% and 3 drivers representing 10%. The banker ticked high performance. When respondents were asked how they perform at workplace when they go drunk the previous evening, 143 teachers representing 95%, 37 health workers representing 93%, 29 drivers representing 97% and 41 bankers representing 82% admitted low performance.

The findings revealed that quite a number of teachers, health workers, drivers and bankers go to work when on drugs like amodiaquine, alcohol, powdered tobacco and Valium drugs like amodiaquine makes the user weak and the user has to sleep or rest while valium induces sleep. Alcohol and powdered tobacco make the user weak when used for a period of time. It therefore shows that teachers, health workers, drivers and bankers who go to work while on these drug have low performance as they all admitted so even though bankers according to the responses do not take such drugs at the workplace, 41 respondents representing 82% admitted that getting drunk after work causes the user to have low performance at work the next day. The responses of the various respondents indicate that almost all respondents responded "NEGATIVE" to the question. The few who responded in a "POSITIVE" manner might be exceptional cases. The responses of the majority therefore show that the above mentioned drugs make users feel weak and cannot perform normally at workplace.

Employer	Cost on drugs related issues
Ghana Education Officer	Could be millions of Ghana cedis but not calculated
Ghana Health Services	Could be millions of Ghana cedis but not calculated
Station Master (GPRTU)	No record on that, but rather on reckless driving, speeding and accidents
Banking Sector	Thousands of Ghana cedis

Table 1: Financial cost of drug related issues

Respondents were asked how much it cost the employers financially on drug and drug related issues annually, G.E.S and GHS said it could be millions of Ghana cedis but drug issues are not quantified in monetary terms. For station masters, they only record issues on

reckless driving, speeding and accidents or quarreling of drivers but the monetary aspects of all these problems are born by drivers and their car owners. The banking sector also said thousands of Ghana cedis but could not give any specific or general amount of money spent on such issues annually. Here, the researcher was surprised because he thought that banking institutions keen interest in recording such losses but nothing of that sort was done.

The result showed that legal drugs like amodiaquine and alcohol could affect the performance of workers when consumed before or at work which is in support of Snell and Bolander, (2007). American Counsel for Drug Education Fund for Employees (1991) said drugs users at the work place could not be noticed until their performance began to reduce or they caused accident at the work place. It was therefore not surprise when six teachers, one health worker and three drivers indicated high performance. It was also revealed that a financial lost as a result of drug users was not considered and calculated in Ghana even though employers were aware that it could cost them millions of Ghana Cedis and was in support of Bryan and Rue (1991) who indicated that it cost the employer to recruit and train a new employee to replace the drug addict. The result also supports, Snell and Bolander (2007) that, companies lose about 20.6 billion US dollars due to alcoholism and over 10.5 million of this alcohol misusers were found in all occupations

➤ Research Question Four: "What mechanisms have been put in place to reduce drug use in the workplace?"

Asked how employers namely Ghana Education Service, Ghana Health Service, Station masters of GPRTU and Banking Sectors selected mentioned observation as a mechanism. However, Ghana Health Service use blood test and that is even in extreme cases.

Employer	Mechanism
Ghana Education Services	Observation
Ghana Health Services	Observation, blood test (extreme cases).
Station Master (GPRTU)	Report about speeding drivers, reckless driving, quarrelling and observation.
Banking Sector	Observation

Table 2: Mechanisms to detect drug usage at workplace

Respondents were asked what advice they give to colleagues suspected to be on drugs, 45 teachers representing 30%, 11 health workers representing 27%, 8 drivers representing 27% said they counsel them to stop while some said they find it difficult to approach them because they do not know how such a drug user may take it and the rest said they do not give any advice. 22 bankers representing 44% said if they find out that some of their colleagues are on drugs, they will counsel them but the rest said they would not know how to approach such people. Further when respondents were asked what was done to employees who often come to work late or often absent, Ghana Education Service, Ghana Health Service and Banking sectors stated query and transfer but the banking sector added dismissal. The station masters of GPRTU said no sanction. The commercial drivers are not given any sanction when they absent themselves or come to work often late because they work for themselves and passengers use any available vehicle or car. The queries and transfer are good but the query letters and transfer letters even cost the employers some monies. The dismissal may be very hashed but the researcher thinks it is the best.

Further the research inquired whether the employers have professional counselors to deal with employees who misuse drugs at the workplace, responses by participants showed that, only one institution out of the four institutions has a professional counselor that deal with drug issues. The two health centers selected had professional counseling divisions and they deal with health workers who use drugs even though they may deal with patients as well. All four station masters said they did not have professional counselors who deal with commercial drivers on drug abuse. The banking institutions also reported that they do not have counselors.

Responses to the question on "what sanctions are giving to drug users at a work place?" revealed that all employers stated counseling while G.E.S, GHS and banking sectors added transfer and demotion. With the exception of GPRTU the other three stated dismissal but that of G.E.S is only in extreme cases. GES alone has open release as one of the sanctions. In the case of GPRTU, in extreme cases the culprit is either handed over to the police or banned from the station.

The researcher further probed to find out the highest sanctions that could be given to a drug user at you work place, the result showed that GES, GHS and banking sector stated dismissal while GPRTU said handing over the culprit to the police. The study revealed the majority of employees find it difficult to address drug issues even though they are aware of the situation of drug issues in the workplace. This drug issue however is a concern to all employees and not only the user because both the employees and the employers would be held responsible if some employees misuse drugs and they fail to report it (Bryans & Rue, 1991). Counselling of drug addicts by both employees and employers revealed by the study is therefore not enough to reduce drug use in the workplace.

With the exception of Ghana Education service that used counselling to transform drug users, the rest did not have one. This showed that, in Ghana only little attention is paid to drug use in the workplace. On the contrary, Salt River Project (SRP) research indicated that even taking drugs when not at post affected the output of employees at work and therefore assisted affected employees through Employees Assistance Program (EAP). The SRP made employees suspected to be drug addict undergo laboratory test to determine drug use and if one refuses going for such laboratory test, is declared unfit for the job (Snell & Bolander, 2007). Even though SRP has a good policy to control drug use in workplace, the researcher realized that blood testing implementation given by Bryans & Rue (1991) is the best. In their work, Bryans & Rue (1991), said that new employees are made to understand the substance abuse policy and also to sign testing agreement form for testing to be used or a prerequisite for transfers, rewards and punishment. This agreement policy becomes a metric for employment. Some employees are also given special training to use technology to detect drug users in the workplace. The researcher sees the drug policy given by Bryans & Rue (1991) as the best even though the researcher could not find such mechanisms in his study. The researcher realised that observation and speed of drivers are not enough to detect drug users in the

workplace. Again sanctions such as queries, transfer, demotion, open release and dismissal might be applied wrongly since these sanctions might change their workplaces or remove them from workplaces but not from society.

6. Recommendations

In line with the findings, the following recommendations were made:

1. Employers should come together and find requisite tools to detect drug use during interview and also the existing employees at the workplace.
2. The employers should also design appropriate policies to reduce drug use at workplace especially the use of alcohol among teachers in Ghana Education Service and commercial driver.
3. The employers should establish correction and rehabilitation centers for those who have drug problems. Employers should deem it necessary to engage the services of professional counselors who are trained to deal with drug issues at the workplace.
4. Employers should find appropriate way of calculating the monetary loses they incur as a result of drug use and drug related issues at the workplace.
5. The Ghana Education Service and Ghana Health service have done well for engaging the services of professional counselors but they should train them to deal with drugs and drug related issues employ more of such professional counselors to cover their small centers especially rural areas.

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