CHAPTER VI

FINDINGS, SUMMARY, CONCLUSION & SUGGESTIONS
CHAPTER VI

SUMMARY:

The study attempts to understand the various strategies and policies adopted by corporate managements in controlling workplace alcohol problems in a survey spanning the three districts of Trichy, Pudukottai and Karur. These 3 districts were so chosen because these 3 districts form the major industrial zone that came under the jurisdiction of the Inspectorate of Factories Tiruchirapalli range. The district of Tiruchirapalli plays host to number of factories both in the public and private sector, which include Bharat Heavy electricals Ltd, Ordinance Factory, Dalmia Cements a unit of Hindustan Lever etc besides having a major industrial estate. The Pudukottai district is famous for its Viralimalai industrial belt and the Mathur Industrial estate, which account for the major part of the industrial activity in the district. The Karur district is famous for its textile industry. Besides, 2 major Cement corporation and a number of public and private spinning and textile units are concentrated in and around Karur. Thus these 3 districts which account for a large amount of industrial activity with the maximum number of industrial units in the Tiruchirapalli range were taken as the area of the study.

A case study was done after having analysed the survey results, since the idea was to study one factory which is a typical case, where the problem of alcoholism among workers is high, reflecting on certain indicators of industrial ill-health like absenteeism, accidents, indiscipline etc, and where the management has a well drawn out alcohol policy. The factory thus identified was a textile unit with an average daily employment of 561 (class IV workers), the percentage of alcoholic workers (according to management records) is 35% rate of absenteeism being 21%, average number of accidents in the last 3 years being 14 and whose management had a score of 80 on the alcohol policy checklist framed by the researcher, which was comparatively higher than the
other factories surveyed. The case studied being a factory, the workers of the factory who form the main beneficiaries of the alcohol policy, the executives and the trade union leaders etc. who play a major role in the policy formulation and implementation were included as the respondent groups.

The thesis runs into six chapters. The 1 Chapter is introductory in nature and introduces the concepts. The measure taken by corporate managements, policies and strategies followed, teleological and etiological explanations, occurrence and prevalence patterns in India, theoretical models explaining the phenomenon and preventive efforts, the ILO’s stand on the issue including major provisions of the draft code of practice etc are the major highlights of the Introduction. The need for such a study and its relative importance is also focussed upon in this chapter. The chapterisation scheme followed in the thesis is mentioned in this chapter as well.

Chapter II of the thesis reviews the literature and resource material available on the concepts relating to the study. The literature includes micro and macro level studies, international initiatives, books, journal articles, research databases, online information and all other resource material available on the subject. For coherent and logical presentation this chapter has been divided into four sections. The 1st section reviews literature on Prevalence trends, drinking patterns and socio-cultural dimensions of alcoholism. An array of studies have been reviewed the important ones being those of Aertgeerts et al (2000), Balabanova (2000), Berry and Boland (1996) Birch et al (2000) etc. The second section focuses on Etiological factors contributing to workplace alcoholism. Major contributions in this area have been made by the National Institute on Alcohol Abuse and Alcoholism (1999), Ames and Grube (1999), French, et al (1998), Frone et al (1991), by Greeber, E.s. and Grunberg. L. (1995), Hollinger (1988) etc. The third section in this chapter reviews literature regarding the consequences and manifestations of workplace alcoholism of which remarkable
work has been done by Ames, G.; Grube, J.; Moore, R. (1997), Casswell, and Zhang, J.F(1995), Caruso-C; Schmidt-S. (1989), Chetwynd and Rayner (1998) etc. The fourth and final section focuses on Responses of corporate, policies and strategies, legal issues etc – including Employee assistance programmes – which form the central focus of the study and hence further categorized into the following four sub-heads (a) Important experiments at the international level and development of alcohol policies world-wide (b) Prevention efforts by corporates including employee drug testing and the issues concerned with prevention (c) Legal issues regarding policies and intervention. (d) Intervention strategies including the importance development and role of employee assistance programs (e) the effects of the corporate policies on employee behaviour, the necessity and importance of follow-up, job-re-entry, rehabilitation etc and finally (f) the responses and feedback of the employees with regard to the policies. Major contributions in this area have been made by Cserne and Katona (1995), Larsson and Harison (2000), Angarola, (1990), Flaunders (1995), Crow et al (1992), Appelgate et al (1988), Mogorosi, L.D.(1998), Bennett. J. and Lechman, W (1996), Morse (1988) etc.

Chapter III explains the methodology adopted by the researcher, including research design, objectives, hypotheses, tools of data collection and data analysis. The study tries to analyze the problem from a functional perspective and is mainly influenced by Merton’s paradigm and the Parsonian concept of value consensus.

The objectives are as follows.
Survey:
1. To study the policies and strategies adopted by the factory managements in controlling alcoholism among the workforce.

2. To study the awareness of the chief executives of the factories about the harmful consequences of alcoholism among the workforce.
3. To study the attitude of the chief executives towards the need for the management’s involvement and action in controlling alcoholism among the workers.

4. To study the pathological manifestation or negative consequences of alcoholism in the factories surveyed.

Case Study:
1. To identify and screen the workers for problem and harmful alcohol consumption, using the AUDIT screening instrument, study their drinking patterns and compare them with the abstainers with regard to certain important socio-demographic and work-related variables.

2. To study the attitude of the three groups involved i.e. a) workers, b) executives and c) Trade Union representatives with regard to the need for management initiative and action regarding alcoholism at the workplace.

3. To study the awareness and attitude of the three groups with regard to the current alcohol policy prevailing in their factory.

4. To study the level of awareness of the three groups with regard to the harmful consequences of alcoholism for the workplace.

The following hypotheses were drawn.

Survey:
1. Higher the age of the factory, higher will be the percentage of alcoholic workers.

2. Higher the absenteeism rate in a factory, higher will be the percentage of alcoholic workers.
3. Higher the number of cases of indiscipline in a factory higher will be the percentage of alcoholic workers.

4. Higher the number of accidents in a factory higher will be the percentage of alcoholic workers.

5. Higher the number of permitted OT hours in a factory higher will be the percentage of alcoholic workers.

6. Lower the average age of the workers in a factory higher will be the percentage of alcoholic workers.

7. Factories that have in-house hospital facilities score high on the alcohol policy checklist.

8. Higher the turnover of the factory, higher will be the score on the alcohol policy checklist.

9. There is a significant relationship between ownership of the factory and its score on the alcohol policy checklist.

10. Higher the amount spent on worker education programmes by the factory higher will be the score on the alcohol policy checklist.

Case study:
1. Problem drinkers are likely to work for more number of OT hours than the abstainers.

2. Problem drinkers are more likely to have a higher amount of outstanding debt than the abstainers.

3. Problem drinkers are likely to take more level with loss of pay than the abstainers.

4. Problem drinkers are more likely to be involved in accidents than abstainers.
Chapter IV presents the data analysis of the survey. Tabulation, interpretation and statistical tests have been used to explain the relationship between variables. The general industrial variables like turnover, ownership, locality, worker strength, etc variables indicating industrial ill-health like absenteeism, late-coming, accidents, indiscipline etc have been cross matched with the dependent variables namely alcoholism rate, awareness regarding negative consequences, attitude towards need for management action and the scores of the factories on the alcohol policy checklist. Statistical tools like the chi-square, "t", "f", "z" tests, correlation etc have been used to explain the relationships between variables.

Chapter V consolidates the data analysis of the case study. Within the case study, several techniques like questionnaire, detailed interviews, observation and quasi-participant observation were employed by the researcher. The tabulation and quantitative and qualitative analyses of the data collected through questionnaire and interviews is presented. A comparative analysis of problem alcoholics and non-drinkers with regard to socio-economic and industry related variables is attempted. This is followed by an analysis of the relationships between socio-economic and industrial variables and the AUDIT scores of the problem drinkers, following which an analysis of variance in the awareness and attitude of the groups in the factory (workers, executives and the trade unions) with regard to a) harmful effects of alcoholism b) need for management initiative and action c) awareness about existing policy and d) satisfaction with existing policy. (these are measured by the awareness and attitude scales constructed by the researchers. The trade unions and the executives from the core policy making body in the industry and form a major part of the alcohol problems management committee in the factory, while the workers are the direct recipients and beneficiaries of the policy. Hence the views of these three vital groups is very essential in determining their cooperation which is likely to ultimately decide the success of the policy. Statistical tools and tests have been used to analyze data,
test the relationship between variables and confirm hypotheses. The findings of the current research are listed and presented as follows. The findings consist of two parts A Findings of the Survey & B Findings of the Case study. Results of the testing of hypotheses are also presented. Following the findings, the conclusion presents the discussion of the current findings with earlier research as well as the justification of the theoretical perspective adopted in the current study. Suggestions are also given which include suggestions to corporates regarding policy implications as well as suggestions to researchers for undertaking further research in this area of study and related areas.

A : Findings of the Survey

1. Half of the factories surveyed were established after 1981. Only 14% of the factories surveyed were units established in the recent past (of below 10 years standing). (Table 1.1).

2. The region surveyed has a predominance of small to medium scale industries in terms of turnover in that 81.25% of the industries had a turnover of below 50 crores while hardly 4% of the factories surveyed have an annual turnover of above 150 crores (Table 1.2).

3. Most (83.3%) of the industries are based in rural setting. (Table 1.3)

4. As far as the type of industry in terms of products manufactured are concerned, more than half of the factories are engineering industries (automobile dimensions, Fabrication, & steel forging). (Table 1.2)

5. Majority of the industrial investment in the region is by private industrialists (83%). The public sector limits itself to a few major industrial units. (Table 1.4).

6. Most of the factories are labour intensive with a worker strength of 200 and above (Table 1.4).
7. As far as the average age of the manpower is concerned most of the factories employ a manpower in the most productive age group i.e. 20-40 years. (Table 1.4)

8. In terms of average pay for the workers, 62% of the factories had a range of 1200-2800 month for its workforce. Only 16.7% paid more than Rs.3601 / month to their workers. (Table 1.5).

9. As far as the degree of unionization is concerned most of the factories have more than one union, with 10% of the factories having a high degree of unionization (more than 11 unions). However its interesting to note that 14% of the factories surveyed had no unions altogether. (Table 1.5).

10. Majority (77%) of the factories surveyed do not have in-house hospital infrastructure. Table (1.6)

11. Majority (77%) of the factories provide opportunities for Over Time and nearly half of the factories surveyed allowed more than 6-10 hours of OT. (Table 1.6)

12. Most of the factories had an absenteeism rate of more than 6%, while at least a quarter of the factories surveyed had a high absenteeism rate of 21-25% (Table 1.7).

13. In nearly half of the factories surveyed, the average number of accidents was found to be more than 6 per year. (Table 1.8)

14. While half of the factories had 1-7% of alcoholic workers, another half of the factories had more than 8% of alcoholics in their workforce according to management records. (Table 1.9).
15. Only half of the respondents (chief executives) had a high score as far as the awareness scale on the negative effects of alcoholism for the workplace as well as the scale measuring attitude towards the need for management initiative and action were concerned. (Table 1.10)

16. With regard to alcohol policy which is the core focus of attention of the survey, it was found that with regard to detection/screening of the workers for alcohol addiction, nearly half of the factories score high on this aspect which means that half of the factories surveyed have a proper screening procedure for identifying their alcohol abusing workers. (Table 1.11).

17. With regard to prevention, 75% of the factories surveyed had a moderate to high score. (Table 1.11)

18. As far as intervention was concerned most (75%) of the factories have scored moderate to high scores (Table 1.11).

19. As far as intervention was concerned most of the units (60%) have scored low on this aspect (Table 1.11).

20. With regard to the overall total scores on the checklist, while half have scored high, another half have scored low to moderate scores. (Table 1.11)

21. There is no significant association between the locality of the factory and the attitude of the chief executives towards workplace alcoholism and its negative consequences. (Table 2.1).

22. There is no significant association between the locality of the factory and the attitude of the chief executives towards the need for management initiative and action with regard to workplace alcoholism (Table 2.2).

23. Locality did not have any influence on the score of the factories on the detection component of the alcohol policy checklist. (Table 2.3).
24. There is no significant association between the prevention component of the alcohol policy checklist and the locality of the factories (Table 2.4).

25. Locality does not have any influence on the scores of the factories on the intervention component of the alcohol policy checklist. (Table 2.5).

26. Locality does not have any influence on the scores of the factories on the rehabilitation component of the alcohol policy checklist. (Table 2.6).

27. There is no significant association between the locality of the factories and the percentage of alcohol policy checklist (Table 2.7).

28. There is no significant relationship between the locality of the factories and the percentage of alcoholic workers (Table 2.8).

29. There is no significant association between the ownership of the factories and the attitude of their chief executives towards the harmful effects of workplace alcoholism (Table 3.1).

30. There is no significant association between ownership and the attitude of the chief executive towards need for management initiative and action to control workplace alcoholism (Table 3.2).

31. There is no significant association between the ownership of factories and the detection component of the alcohol policy checklist (Table 3.3).

32. There is no significant association between ownership and the factory's score on the prevention component of the alcohol policy checklist. (Table 3.4).

33. There is no significant association between the scores of the factories on the intervention component of the alcohol policy checklist and the ownership of the factories. (Table 3.5).
34. Though a slightly higher number of factories of both groups (government and private) have scored low on the rehabilitation and follow-up component of the alcohol policy checklist, there is no significant difference between the two groups with regard to their scores on this component (Table 3.6).

35. As far as the overall checklist scores are concerned irrespective of ownership the factories are divided evenly (around 50% in both groups) between the low and high scores categories (Table 3.7).

36. There is no significant relationship between ownership of the factories and the percentage of alcoholic workers in the factories (Table 3.8).

37. There is no significant difference between the chief executives of factories with and without in-house hospital facilities with regard to their attitude towards the negative consequences of alcoholism for the workplace as well as their attitude towards the need for policy intervention and management initiative (Table 4.1).

38. A significant difference is found between factories with and without hospital facilities with regard to the rate of alcoholic workers as confirmed by the "t" test. (Table 4.2)

39. There is no significant difference between industries with and without in-house hospital facilities with regard to the detection, prevention and rehabilitation component of the alcohol policy checklist. (Table 4.3)

40. With regard to the intervention and overall scores the factories with hospitals scored significantly higher than factories without hospitals (Table 4.3).
41. There is a significant difference among the Chief executives of various types of factories (classified according to the nature and type of industrial activity) with regard to their scores on the attitude scale measuring attitude towards the harmful effects of alcoholism in the workplace. Chief executives belonging to the automobile industry were the top scorers with their mean score being the highest, followed by Chief executives belonging to the chemical industry and the steel processing industry. (Table 5.1).

42. With regard to the scores of the Chief executives on the scale measuring attitude towards need for intervention. Though the statistical test proves that the difference between the groups is statistically insignificant, the table reveals that the highest mean scores were found among executives belonging to the cement industry followed by the textile units (Table 5.2).

43. There is no significant difference between the different type of factories with regard to their score on the detection component of the alcohol policy checklist. (Table 5.3).

44. There is no significant difference between various types of factories (industrial activity) with regard to the prevention component of the alcohol policy checklist. (Table 5.4).

45. There is no significant difference between the factories with different types of industrial activity, as far as the scores on the intervention component of the alcohol policy checklist was concerned. However, among the groups, the groups with the highest mean was the cement industry followed by the textile and fabrication industries (Table 5.5).

46. There is no significant difference among the groups (as confirmed by the F test) with regard to the rehabilitation and follow-up component of the alcohol policy checklist. However, the top scores were the cement and textile units (Table 5.6).
47. There is no statistically significant difference between the groups with regard to overall scores on the alcohol policy checklist. However, the highest scoring factories on the alcohol policy checklist were the textile and cement units, followed by the fabrication and steel processing units (Table 5.7).

48. There is no statistically significant difference between the groups (factories based on types of industrial activity) with regard to the percentage of alcoholics among their workforce. However it was found that the cement and the textile units had the highest mean alcoholism percentage. (Table 5.8).

49. Rate of Absenteeism, No of chronic absentees, No of Chronic Latecomers and Number of Accidents in the factories are positively correlated with the percentage of alcoholic workers in the factory. (Table 6.1).

50. High positive correlation exists between the average salary of the workers and the percentage of alcoholic workers in the factories (Table 6.2).

51. Average age of workers, strength of workers, age of the factory and number of unions are found to be positively correlated with the percentage of alcoholic workers in the factories (Table 6.2).

52. Turnover of the factory, number of special incentives offered and no of non statutory welfare measures in the factory did not correlate with the percentage of alcoholic workers in the factory. (Table 6.3)

53. Absenteeism rate, accidents, alcoholism rate etc are positively correlated with the scores of the chief executives of factories on the awareness scale on the negative effects of alcoholism for the workplace and the scale measuring attitude towards the need for management initiative and action. (Table 6.3).
54. But for the worker strength and no of unions, none of the general industrial variables had any impact on the scores of the chief executives on the attitude scale measuring attitude towards the negative consequences of workplace alcoholism (Scale I). (Table 6.4).

55. As far as the attitude scale (Scale II) measuring attitude towards need for management initiative was concerned, average worker age, age of the factory, average of salary, no of unions, no of special incentives offered by the management and the number of non-statutory welfare measures were found to be positively correlated with scores of the chief executives. (Table 6.4).

56. The scores of the chief executives on Scale I and Scale II are positively correlated with each other on the awareness scale on the negative effects of alcoholism for the workplace and the scale measuring attitude towards the need for management initiative and action (Table 6.5).

57. Scores on prevention, intervention and the rehabilitation and follow up components are positively correlated (highly) with the overall checklist scores. (Table 6.6).

58. All the indicators of industrial ill-health (absenteeism, late-coming, accidents, indiscipline) were positively correlated with the detection, prevention and intervention components of the alcohol policy checklist, (while the number of accidents and the percentage of alcoholics had a high positive correlation). (Table 6.7)

59. With regard to the rehabilitation and follow-up component only three variables, absenteeism rate, no of accidents and percentage of alcoholics were positively correlated. (Table 6.7)
60. As far as the overall policy checklist scores were concerned all the indicators of industrial ill-health showed positive correlation with the overall checklist scores. High positive correlation were seen between the number of accidents and percentage of alcoholic workers and the overall scores (Table 6.7).

61. The number of special incentives and number of non-statutory welfare measures correlate positively with all components of the policy checklist and the overall policy scores (Table 6.8).

62. Number of special incentives and number of non-statutory welfare measures correlate positively with all components of the policy checklist and the overall policy scores (Table 6.8).

63. Worker strength, number of casual workers, maximum number of OT hours, turnover of the factory correlated positively with the prevention, intervention, rehabilitation components of the policy checklist (Table 6.8).

64. The percentage of alcoholics in the factories was positively correlated with all the checklist dimensions and overall scores. (Table 6.9).

65. The scores of the chief executives on both the attitude scales correlate positively with all the components and the overall checklist scores. (Table 6.10).

66. The scores on both the attitudinal scales do not correlate positively or negatively with the amount spent on prevention. There seems to exist absolutely no relationship between the variable (Table 6.11).

67. High positive correlation exist between absenteeism rate, number of chronic late-comers with the amount spent on prevention programmes (Table 6.12).
68. High positive correlation were found between turnover, number of unions, strength of workers and the amount spent by the factories on prevention programmes. (Table 6.13).

69. All the sub-components of the alcohol policy checklist and the overall checklist scores are found to be positively correlated with the amount spent on prevention (Table 6.14).

B. Findings of the Case – Study

70. Majority of the respondents in both the groups (alcoholics and non-alcoholics) are permanent employees (Table 8.1).

71. A far higher percentage of respondent groups among non-alcoholics were unmarried (Table 8.2).

72. With regard to type of family here again a statistically significant difference was observed in the distribution of respondents between the two categories (Alcoholic and non-alcoholic) (Table 8.3).

73. As far as the type of residence was concerned, no significant difference was found between the two categories (alcoholic and non-alcoholic) (Table 8.4).

74. A high majority of respondents in both the groups were union members (Table 8.5).

75. With regard to the salary being sufficient, both the groups differed much in their responses in that majority of the alcoholics found that their pay was inadequate to meet the needs of the family while only half of the non-alcoholics felt the same (Table 8.6).

76. A sizable number of respondents in both the groups did have additional / supplementary sources of income (Table 8.7).
77. While for the non-alcoholics the prime reason for incurring debt was either for construction of houses or for meeting non-routine, occasional expenditure like family functions, the prime reason for the alcoholics incurring debts was insufficient salary (Table 8.8).

78. While a high majority of non-alcoholics had savings, a similarly high majority among the alcoholics did not save. (Table 8.9).

79. As far as encashment of leave was concerned a very remarkable difference was observed between the groups in that majority of the non-alcoholics encashed their leave while a high majority of the alcoholic workers did not (Table 8.9).

80. With regard to the distribution of workers in the categories that are likely causes for which disciplinary action has been initiated against them, there is a vast difference between the alcoholics and non-alcoholics in that, as far as alcoholics were concerned action was taken against most of them for irregular attendance and faulty work performance, while in the other group, other reasons were quoted; these two forms of indiscipline did not attract much attention (Table 8.10).

81. There is a close and confirmed link between alcoholism and irregular attendance. The distribution reveals that majority of the alcoholic were advised for irregular attendance while the case was just the reverse with the other group (Table 8.11).

82. More than half of the alcoholic workers had met with accidents at the workplace while the percentage was considerably less in the other group of workers (non-alcoholics) (Table 8.12).
83. More than half of the alcoholic workers had met with accidents at the workplace while the percentage was considerably less in the other group of workers (Table 8.13).

84. There is a statistically significant difference between the groups with regard to existing debt with most of the alcoholics (a high majority) having accepted to this, while the case was almost reverse as far as the non-alcoholics were concerned. (Table 8.14).

85. As far as the superior subordinate relationship is concerned, while most of the non-alcoholics had a good relationship with their superiors, a considerably high percentage of alcoholics did not have a pleasant relationship with their superiors (table 8.15).

86. As far as the age distribution was concerned, the alcoholic workers had a higher mean age than the non-alcoholic workers (Table 9.1).

87. Since all the workers belong to the same category of employees there is not much difference in their salary (Table 9.2).

88. The alcoholic workers have put in more OT hours than the non-alcoholic workers on a single day. The difference in their means is statistically significant. (Table 9.3).

89. The difference in the mean loss of pay leave taken by the two groups is very distinct and is statistically significant. The mean loss of pay leave taken by the alcoholic workers is almost double that of non-alcoholics (Table 9.4).

90. There is a vast difference in the mean debt amount of both the groups the alcoholic workers having a very high mean debt compared to non-alcoholics (Table 9.5).
91. There are more hazardous drinkers than harmful drinkers among the alcoholic workers (table 10.1).

92. Most drinkers have had their first drink after becoming majors but quite a considerable proportion (30%) have been introduced to alcohol in their adolescent age. (Table 10.2).

93. A high majority of the drinkers have had alcoholic fathers (82.6%) (Table 10.3)

94. Most of the initiation process and introduction to alcohol has been due to peer influence (Table 10.4).

95. While most of the workers cited physical fatigue as responsible for their drinking behaviour, a considerable percentage regard as peer influence and overcoming depression as major reasons (Table 10.5).

96. While nearly one half (47%) of the respondents preferred to drink alone the other half preferred to drink in company (a slightly higher percentage) (Table 10.6).

97. Most of the respondents drink more than 3 times in a week (Table 10.7).

98. Most of the alcoholics consume more than 5 drinks on a single occasion, which is quite high (Table 10.8).

99. The above correlation table shows that a high positive correlation exists between the loss of pay leave availed by the alcoholic workers and their AUDIT scores (overall scores) indicating that workers with a higher AUDIT score have availed more leave than those with a lower score on the AUDIT (Table 11.1).
100. Age was found to have significant positive association with the AUDIT scores indicating that the problem of drinking becomes more severe as age progresses (Table 11.1).

101. The number of OT put in by the workers was also positively correlated with the AUDIT scores (Table 11.1).

102. Salary and family size and amount of outstanding debt did not correlate with the drinking behaviour (Table 11.1).

103. OT hours and loss of pay leave are found to be positively correlated with the frequency of drinking (1st question in the AUDIT scale) (Table 11.2).

104. Age, OT hours and loss of pay leave are positively correlated with the frequency and amount of alcohol consumed on a single day (Table 11.3).

105. Maximum OT hours and loss of pay are positively correlated with item 3 in the AUDIT i.e. (consumption of more than 6 drinks on one occasion) (Table 11.4).

106. Maximum OT hours and loss of pay leave were found to be positively correlated with uncontrolled drinking behaviour (Question 4 of the AUDIT scale) (Table 11.5).

107. Age correlates positively (and significantly) with the number of occasions when one has failed to perform normal duties) (Question 5 of the AUDIT scale) (Table 11.6).

108. Age and loss of pay leave are positively correlated with the no of occasions when one has felt the need to have a drink as first thing in the morning (Questions 6 of the AUDIT questionnaire) while the year of joining is negatively correlated. (Table 11.7).
109. The number of occasions when one has felt guilt or remorse after drinking is positively correlated with maximum OT hours and loss of pay leave (Table 11.8).

110. Only one variable loss of pay leave correlates positively with frequency of blackouts (Table 11.9).

111. With regard to causing injury to self and others scores on this item are positively correlated with age, maximum OT hours, loss of pay leave and outstanding debt. (Table 11.10).

112. Over Time work, loss of pay leave and outstanding debt amount are positively correlated on the last item on the AUDIT (medically advised to cut down drinking). (Table 11.11).

113. Age is significantly correlated (positively) with the scores of the alcoholic workers on the scale measuring attitude towards the negative consequences of alcoholism. (Table 12.01).

114. As far as the awareness regarding the company's alcohol policy is concerned but for age all the other variables did not show any significant correlation with the scores on this scale (Table 12.04).

115. All the items in the AUDIT correlate positively with each other and the overall scores indicating that the AUDIT is highly valid and sensitive tool in diagnosing alcohol problems and problem drinking (Table 13.2).

116. There is no statistically significant relationship between marital status and the type of drinking (13.3)

117. The difference in the mean audit scores of those who have and have not been subjected to disciplinary action is statistically significant. (Table 13.7).
118. Those who have not been advised for irregular attendance have a highest AUDIT score (Table 13.8).

119. A vast difference is found in the mean AUDIT scores of those alcoholic workers who have met with accidents and those who have not (Table 13.9).

120. Those alcoholic workers who’ve had alcoholic fathers have a higher scores on the AUDIT. The difference in the mean scores is statistically significant (Table 13.11).

121. The four groups in the factory the alcoholic workers, non-alcoholic workers, trade union leaders and the executives vary vastly among themselves with regard to their scores on the attitude scale measuring attitude towards the negative consequences of alcoholism (Table 14.1).

122. With regard to scores on Scale II which measures the need for management action and initiative in controlling worker alcohol problems, here the highest scores are the union leaders, followed by the executives. (Table 14.2).

123. The table shows that as far as the scores on the scale measuring the level of awareness regarding the company’s alcohol policy is concerned, the highest scorers were the executives followed by the Trade union leaders. The workers have scored low. (Table 14.3).

124. The four groups vary significantly with regard to their attitudes towards the existing company policy. The highest scorers were the executive, followed by the trade union leaders and the workers (both alcoholic and non-alcoholic) scored the least (Table 14.4).
HYPOTHESIS FINDINGS

The following are the findings of the testing of hypothesis.

**Hypotheses 1:** Higher the age of the factory, higher will be the percentage of alcoholic workers.
Test Used: Karl Pearson’s Correlation
Result: High positive correlation was seen (significant at .01 level) Research hypothesis is accepted (Table 6.2).

**Hypotheses 2.** Higher the absenteeism rate in a factory, higher will be the percentage of alcoholic workers.
Test used: Karl Pearson’s Correlation
Result: High positive correlation was seen (significant at .01 level) Research hypothesis is accepted (Table 6.1).

**Hypotheses 3.** Higher the number of cases of indiscipline in a factory higher will be the percentage of alcoholic workers.
Test used: Karl Pearson’s Correlation
Result: Low positive correlation (not significant) Research hypothesis is rejected.

**Hypotheses 4.** Higher the number of accidents in a factory, higher will be the percentage of alcoholic workers.
Test used: Karl Pearson’s Correlation (Table 6.1)
Result: High positive correlation. (significant at .01 level) Research hypothesis is accepted
Hypotheses 5. Higher the number of permitted OT hours in a factory higher will be the percentage of alcoholic workers.
Test used: Karl Pearson’s Correlation
Result: High positive correlation (significant at .01 level) Research hypothesis is accepted.

Hypotheses 6. Higher the average age of the workers in a factory higher will be the percentage of alcoholic workers.
Test used: Karl Pearson’s Correlation
Result: High positive correlation (significant at .01 level) Research hypothesis is accepted. (Table 6.2)

Hypotheses 7. Factories that have in-house hospital facilities score high on the alcohol policy checklist
Test used: Student’s t test
Result: Significant difference observed in the mean scores (significant at .05 level) Research hypothesis is accepted. (Table 4.3).

Hypotheses 8. Higher the turnover of the factory, higher will be the score on the alcohol policy checklist.
Test used: Karl Pearson’s Correlation
Result: High positive association (significant at .01 level) Research hypothesis is accepted. (Table 6.8).

Hypotheses 9. There is a significant relationship between ownership of the factory and its score on the alcohol policy checklist.
Test used: Chi-square test
Result: No significant association (p>.05). Research hypothesis is rejected. (Table 3.7).
**Hypotheses 10.** Higher the amount spent on alcoholism awareness programmes for workers by the factory higher will be the score on the alcohol policy checklist.
Test used : Karl Pearson's Correlation
Result : Positive association (significant at .05 level) Research hypothesis is accepted. (Table 6.14).

**Hypotheses 11.** Problem drinkers are likely to work for more number of OT hours than the abstainers.
Test used : Students Z test.
Result : The difference in their means is statistically significant (P<0.01). The research hypothesis is accepted. (Table 9.3).

**Hypotheses 12.** Problem drinkers are more likely to have a higher amount of outstanding debt than the abstainers.
Test used : Students Z test.
Result : The difference in their means is statistically significant (P<0.01). The research hypothesis is accepted. (Table 9.5).

**Hypotheses 13.** Problem drinkers are likely to take more leave with loss of pay than the abstainers.
Test used : Students Z test.
Result : The difference in their means is statistically significant (P<0.01). The research hypothesis is accepted.

**Hypotheses 14.** Problem drinkers are more likely to be involved in accidents than abstainers.
Test used : Chi-square test.
Result : significant association (P<0.01). The research hypothesis is accepted. (Table 8.13).