California Intercontinental University

COLLEGE OF BUSINESS

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California Intercontinental University
June 2021

LEADERSHIP STRATEGIES TO PREVENT EMPLOYEE RELAPSE

Abstract

Leadership Strategies to Prevent Employee Substance Abuse Relapse

and Optimize Business Viability

by

JOHN MITCHELL NARINE

MBA, Everglades University, 2017

BA, Florida Atlantic University, 2016

Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Business Administration

in

Global Business and Leadership

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Abstract

Employees, who relapse from substance abuse, precipitate unnecessary costs to employers through absenteeism, production loss, turnover, and health care. Addicted employees who relapse are becoming a growing concern as substance abuse relapse and overdose rates have significantly increased during the COVID-19 Pandemic. The purpose of this qualitative phenomenological study is to explore strategies leaders use to understand the needs of addicted employees during a crisis, reduce employee substance abuse relapse rates, and ensure business viability. The conceptual framework for this study is Maslow's hierarchy of needs, Goleman's emotional intelligence theory, and emotional sobriety. The population for this study includes 10 leaders located in the United States. The participants were chosen using purposeful snowball sampling and were asked 11 open-ended questions via qualitative interviews to gather rich and detailed data to saturate this study. Through data analysis, the researcher uncovered four themes: (a) meeting employees where they are; (b) building personal connection through vulnerability; (c) diversity and inclusion; (d) strategies formed through education and practical experience. Analysis of the findings revealed that leaders who participated in addiction education and utilized individualized consideration prevented relapse and improved organizational performance by addressing employee needs. The results of this study may be adopted by leaders to effectively retain an engaged and performing workforce by enhancing corporate policy and practices related to addicted employees.

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Dedication

I exercise the primary purpose of my 12 step program by carrying the message to the addict who still suffers. Therefore, I wholeheartedly dedicate this study to the employee that needs help and the leader willing to be of service.

Acknowledgments

This completed study was not possible without the love, encouragement, and support of others. I acknowledge my principal committee chairperson, Dr. Lakisha Aldridge-Anthony, for the unequivocal candor and feedback, which grew me stronger to persevere through this process. My appreciation to the committee members for their commitment and rich suggestions to progress this study is profound. My gratitude to the many leaders who supported the researcher through personal struggles and setbacks is boundless. Dave and John – your patience and belief in me picked me up when I needed it. To my Father, Mother, Brother, and Sister-in-Law – thank you for never giving up on me. I hope you are proud of me. To my soul sister – your connection to my heart strengthens my passion. To my close family and friends – your reassurance and confidence help my purpose.

To God, for carrying me though.

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Chapter 1: Introduction

Employees, who identify as alcohol or drug addicts, and relapse become a principal concern for many organizations. Substance abuse relapse creates expensive problems as it interferes with the business through lost production, absenteeism, and increased healthcare costs (NORC, 2020). Studies find that leaders who invest in substance abuse relapse prevention strategies can avoid between $3,200 and over $8,400 in unnecessary costs per employee annually (Goplerud et al., 2017; "National Safety Council," 2020). In 2020, the COVID-19 Pandemic produced an extraordinary global calamity, impacting many employees who identify as an addict (Bartsch et al., 2020). The COVID-19 Pandemic influenced quarantine conditions and limitations in access to care, both precipitating relapse and unnecessary costs to employers (Hammani et al., 2020). No business can recover without healthy employees who are productive (Oakman et al., 2020). Therefore, developing realistic and beneficial strategies is critical to reduce employee substance abuse relapse rates and understand the needs of addicted employees for business sustainability. Identifying successful strategies to support leaders in reducing employee relapse rates to ensure business viability is the aim of this qualitative phenomenological study.

Background of the Problem

Employee relapse is a growing crisis for organizations as it results in decreased work productivity, increased absenteeism, higher rates of errors, increased workplace criminal behavior, and worker complementation claims (Valentic, 2020; Smook et al., 2018). Alexander (2015) states that triggering events can lead to a relapse. The effects caused by the COVID-19 Pandemic were one of the top reasons that triggered employees to relapse in 2020 (Bartsch et al., 2020; Hammani et al., 2020). Valentic (2020) states that the COVID-19 Pandemic increased restrictions and self-isolating measures, making access to supportive

resources difficult for individuals with a history of addiction or those potentially subject to substance abuse.

According to a recent study regarding those with opioid use disorder, Alexander et al. (2020) cite that addicts, who are already vulnerable and marginalized, rely on face-to-face support and health care. COVID-19 has sparked a pandemic within the opioid pandemic affecting individuals in early recovery and long-term recovery as they depend on 12 step-based meetings, fellowships, counselors, and other face-to-face recovery support groups to stay sober. Individuals who suffer from mental health issues cannot easily get the aid they need, perpetuating new mental health issues (Valentic, 2020). Without the necessary care, employees who relapse can interfere with their co-worker's attention and concentration, negatively affecting their job performance (NORC, 2020). With the recovery of millions of employees at risk, the results of this study may contribute to leadership's assessment of potential employee relapse. Researchers may use the results of this study to increase their understanding of an addicted employee's needs, which can help establish effective strategies to decrease employee relapse rates and improve organizational performance.

Problem Statement

Employee substance abuse relapse places unnecessary costs on organizations that employ individuals subject to substance abuse (Valentic, 2020). In 2020, the National Safety Council reported 30 states that encountered significant increases in fatal employee overdose cases during the COVID-19 global pandemic (NSC, 2020). Employees that depend on attending addiction supportive resources in person are now encountering disruptions in services to help keep them sober. In 2020, employee substance abuse relapse cost organizations and taxpayers about $696 billion annually in production loss, absenteeism, and medical treatment (NORC, 2020). The general business problem is that some managers lack strategies to effectively monitor and support employees who relapse, resulting in decreased

profitability and increased expenditures. The specific business problem is that some managers lack effective strategies to meet their addicted employees' needs during a crisis to ensure business viability, resulting in decreased organizational performance.

Purpose of the Study

The purpose of this qualitative study is to discover the successful strategies business leaders use to understand the needs of an addicted employee during a crisis, reduce employee substance abuse relapse rates and ensure business viability. The researcher will employ a phenomenological design to conduct the study. The phenomenological design focuses on subjective experiences and will involve qualitative data collection and analysis (Rodriguez & Smith, 2018). The researcher will focus on business leaders' lived experiences as this study aims to determine implementable strategies to prevent employees from relapsing, meet their needs during a crisis, and increase organizational performance and effectiveness. The researcher will interview business leaders in organizations located in the United States. The interview for the research will entail a summary of the purpose of the study and 11 open-ended interview questions. The researcher will create the interview questions to gather information regarding the leaders' knowledge about strategies used to manage their employees who have a history of addiction effectively. The researcher will analyze the answers to the open-ended questions separately. The data collected will potentially describe what the respondents feel they could do to decrease addicted employee relapse rates that place unnecessary costs on the workplace.

Nature of the Study

The researcher will conduct a qualitative study that exercises phenomenological methods involving organizational leaders because of the social constructivist assumptions. In qualitative research methods, the researcher seeks to discover and understand the meaning behind a human experience or people belonging to a particular sect experiencing a human or

social problem (Creswell, 2017). The selected business leaders selected are managers, directors, and senior-level executives at various businesses located in the United States. Participants will engage in interviews containing open-ended questions to assess the respondents' personal experiences and perspectives. Further, this study ensures the data's saturation and reliability by replicating information and data consistency.

Significance of the Study

Given that substance abuse relapse and overdose cases increased by 42% in 2020, precipitating expensive consequences for employers, this study may benefit business leaders, from managers to high-level executives (Valentic, 2020). The 2019 global pandemic is the most recent triggering event that has caused significant disruptions in supportive face-to-face treatment and job security, leading to increased alcohol use, substance misuse, and mental health unrest (Bottan et al., 2020; Alexander et al., 2020; Chodkiewicz et al., 2020). Research recognizes these disruptions as long-lasting, severe, and persistent psychological stressors resulting in financial and mental consequences (Hamouche, 2020). This study contributes to a growing body of literature by questioning the executives' current techniques to address addicted employee's individualistic needs. This investigation can employers develop supportive solutions to help their employees who identify as an addict prevent relapse and improve their performance.

Research facilitates discovering successful strategies that organizational principals can use to effectively identify and meet addicted employees' needs to reduce work stressors and unnecessary costs. This study's findings may help business leaders learn successful relapse prevention strategies to increase occupational efficiency. Discoveries from this investigation may also contribute to organizational policies and practices that can enhance leadership education on addiction and improve employee engagement and retention.

Research Questions

The research questions that guide this study are:

Research Question 1: What strategies do leaders use to reduce employee substance abuse relapse rates to ensure business viability?

Research Question 2: What strategies do leaders use to understand their addicted employees' needs during a crisis?

Interview Questions

The interview questions used in this research are:

1. What strategies do you use to determine the impact employee relapse has in your organization?
2. What strategies have you used to try and reduce employee relapse rates that were not successful?
3. What strategies do you use to reduce employee relapse rates that are successful?
4. How do you measure the effectiveness of the employee relapse strategies you implement, and what changes do you see?
5. How do you determine performance metrics for employees who actively relapse compared to employees who stay in recovery, and what changes do you see?
6. How does your company evaluate the leader’s capabilities to implement strategies regarding employee relapse?
7. What strategies do you use to determine factors in the workplace that can trigger an addicted employee towards a relapse?
8. What strategies do you use to reduce factors in the workplace that can trigger an addicted employee towards a relapse, and what changes do you see?

9. What strategies do you use to determine what a crisis means to an addicted employee?
10. What strategies do you use to understand the needs of addicted employees during a crisis?
11. What other information can you add to benefit this study?

Brief Review of the Literature

The brief literature review is a synopsis of Chapter 2's presentation of the peer-reviewed academic literature review in this study. This review examines the problem of employee substance abuse relapse and the negative influence of COVID-19 on addicted employees. Adopted within this section is the exploration of the psychological impairment addicted employees endure during a crisis. Additionally, the review pinpoints the specific workplace challenges caused by employee substance abuse relapse and leadership inadvertence.

Context of the Problem

The purpose of this qualitative study is to explore the strategies business leaders use to understand and meet the needs of their employees subject to substance abuse, prevent relapse, and improve bu. Goplerud et al.'s (2017) study cites that substance misuse amongst workers leader to lost production, absenteeism, turnover, and high health care expenses to employers. Bottan et al.'s (2020) and Dubey et al.'s (2020) study focused on Coronavirus Pandemic's implications, resulting in increased substance abuse relapse rates, including employees. Alexander et al.'s (2020) research centers on the experience of individuals with opioid use disorder and the disruptions within medication access and supportive face-to-face treatment. Amid the global crisis, some of the leading psychological stressors that need attention are the perception of care, confusion, anger, social exclusion, boredom, fear of the unknown, and stigma (Brooks et al., 2020; Hamouche, 2020). Acute stress exposure, anxiety,

and emotional distress are common psychological factors that lead to a relapse in addiction (Torres-Berrio et al., 2018). The above-referenced studies are essential because they provide insight into how organizations and individuals subject to substance abuse experience a crisis, which may lead to relapse and decreased productivity.

Contribution of the Study to the Literature

This study attempts to contribute to the body of knowledge base by exploring the strategies leaders utilize to aid addicted employees who experience threats to their sobriety (SAMHSA, 2020). Current research suggests that employees with mental health problems and their impact on organizations need attention (Gao et al., 2020; Hamouche, 2020). The conclusions found in this study can inform the development of valuable leadership strategies that ascertain the relationship between the phenomenon of addiction struggles during a crisis and the financial concerns it places on businesses.

Contribution to the Context of the Problem

This study may contribute to the problem by understanding the baseline needs of employees subject to substance abuse. Unfortunately, the available peer-reviewed research claim methods for addressing the issues addicted employees endure are currently minimal. Further studies are needed to explore the impact and practical strategies to increase workplace productivity (Appiah et al., 2017; K & M, 2020). The discovery of how business leaders prevent employee relapse and understand the needs of their addicted employees during a crisis is the essence of this research; this may help employers formulate and execute beneficial strategies that guide employees through beneficial outcomes and fall in line with the company's vision.

Similar and Related Studies

Current research exists concerning the effects a crisis places amongst the business world and addicted employees (Alexander et al., 2020; Bottan et al., 2020; Camp-Flores &

Kamp, 2020; Chodkiewicz et al., 2020; Micallef, 2020; Valentic, 2020; Wan & Long, 2020). Many studies agree that the COVID-19 Pandemic negatively disrupts necessary social support, contributing to the current mental health crisis (Brooks et al., 2020; Gao et al., 2020; Hamouche, 2020; Xiao et al., 2020). A recent study conducted by the Department of Occupational and Environmental Medicine found that addiction increases absentee rates, onsite injuries causing financial burden, and unproductive work hours (K&M, 2020). Corporate addiction training to raise awareness in the workplace could prevent addictive behaviors and improve supervisory support (K & M, 2020). Researchers from Northwest University linked ignorance, insensitivity, stigmatization, and indifference to why employers may not help employees suffering from addiction (Smook et al., 2018). The study found that partnerships between companies and supportive addiction recovery facilities might be a promising solution in supplying addicted employees with the tools and resources they needed to stay in recovery (Smook et al., 2018). Both publications are vital because they illustrate a sector in need of research and solutions to remain employed and optimize performance.

Gap in the Literature

There is an inadequate amount of peer-reviewed research offering potential solutions for approaches employers employ to address the needs of addicted employees and successfully reduce employee relapse rates. There is an agreement that more research regarding the addiction phenomenon is needed as the global crisis continues (Chodkiewicz et al.'s 2020; Gavin, 2020). Additionally, there are studies available that depict the organizational cost of substance abuse relapse; however, there is insufficient current research dedicated to strategies applied to help addicted employees prevent relapse and remain engaged in the workplace (Goplerud et al., 2017, Soeker et al., 2016). This literature gap needs research to address and establish sound business practices to prevent relapse and increase organizational performance.

Conceptual Framework

Maslow's hierarchy of needs theory officiated the conceptual framework for this study. Research confirms that business leaders apply Maslow's hierarchy of needs as a model to determine how to effectively motivate employees by satisfying their needs (Khairnar & Patil, 2021; Celik et al., 2016; Maslow, 1943). The following employee needs are considerably hierarchical: physiological, safety, love and belongingness, esteem, and self-actualization. Maslow (1943) states that employees have individual needs based on their experiences and circumstances in life, and when individuals have their needs met, they are motivated to accomplish specific goals.

For the purpose of this business study, the application of Maslow's theory can allow leaders to understand and address the needs and goals of employees who identify as addicts and motivate them to prevent relapse, stay sober, and improve their performance. Thus, Maslow's hierarchy of needs aligns with strategies leaders implement to prevent relapse in employees subject to substance abuse to ensure business viability.

Assumptions, Limitations, and Delimitations

The qualitative research methodology structure requires the researcher to reflect on theoretical perspectives and integrate limitations, assumptions, and delimitations (Peterson, 2019). A qualitative phenomenological research design permitted the researcher to be mindful of assumptions and exclude any biased perspectives, hence, increasing the validity of this study. A description of the assumptions, limitations, and delimitations this study holds follows.

Assumptions

Assumptions are implications that can or cannot be proven and are necessary to conduct and enable studies (Creswell, 2017). In this study, assumptions authorized the researcher to define and review every viewpoint from the beginning of the study to the final

report (Antigoni et al., 2019). Assumptions for this study were defragmented and assessed using critical analysis to determine authenticity. The assumptions that encompass this study are: (a) the knowledge gap that is present between business leaders and employees subject to substance abuse; (b) the factual and honest experience relayed by the participants of this study's phenomena; (c) the precise collection and dictation of the data constructed from the respondents of this study. Emphasis is placed on anonymity, diversity, equity, and inclusion to control implicit bias. The qualitative phenomenological methodology permits the researcher to acquire the participants' perspectives and formalize an understanding of the existing disparity in knowledge.

Limitations

Limitations of a study concern probable weaknesses outside of the researcher's control (Queiros et al., 2017). By evidently articulating the limitations of a study, the researcher reduces the distortion and misinterpretation of the results (Antigoni et al., 2019). The primary limitation to acknowledge is the researcher's experience with the topic as an individual who identifies as an addict. It is imperative to reveal this truth and outline the researcher's steps to eliminate bias and maintain objectivity. First, the researcher will collaborate with the dissertation committee members to prepare the open-ended questions the participants will answer. Next, the researcher will ask the respondents to review the results and confirm if the interpretations represent their beliefs. The researcher will also review all findings with the dissertation committee members to identify gaps in the argument and confirm neutrality. A second limitation is the total individual experience each leader has acquired from managing employees subject to substance abuse. As discussed in this study's assumptions section, the emphasis is placed on inclusion to diminish bias. Therefore, all business leaders, irrespective of the amount of time spent in leadership roles, were invited to participate in this study, for they may have valuable knowledge to contribute.

Delimitations

Delimitations are defined boundaries and limitations established by the researcher so the study can be achievable. Delimitations are within the researcher's control and appropriate because they allow leaders from various and random industries to participate in this study (Creswell, 2017). The researcher did not limit this study to one industry type since employee substance abuse relapse transpires in all industries (SAMHSA, n.d). Instead, the researcher chose to involve leadership organizations that include members from various organizational levels and companies worldwide. The researcher will not ask business leaders who have not experienced managing employees who identify as addicts to partake in this study since they will not have the relevant experience required to identify helpful strategies to prevent relapse and increase business viability.

Definition of Terms

Absenteeism: A practice of missing work days due to substance abuse relapse or other health-related illnesses (Dyrbye et al., 2019).

Addict: A person subject to recurrent use of alcohol, drug(s), or other matters(s) such as gambling, food, and sex, and that causes his or her life to become unmanageable ("American Addiction Centers," 2020).

Crisis: A perceived threat that affects people in one way or another (Body et al., 2020).

Leaders: Agents placed in a fundamental position in an organization to support other people, care for others' needs, and take an active co-responsibility in solving problems (Potts, 2016).

Motivation: A set of forces that influences a person's desire to repeat a specific behavior one way rather than another (Sabir, 2017).

Presenteeism: The practice of being impaired and attending or being present at work (Dyrbye et al., 2019).

Recovery: A state of sustained abstinence from substance use (Karr, 2017).

Relapse: A transgression of an addiction that can begin months before engaging with drugs, alcohol, or other addictive behaviors commencing with an emotional relapse, followed by a mental relapse, which can ultimately lead to physical relapse (Melemis, 2015; Menon & Kandasamy, 2018).

Strategy: A process that involves gathering knowledge and understanding perspectives so that employers can implement realistic decisions and expectations (Rettberg, 2016).

Trigger: A stimulation from something that elicits an addict to engage in addictive behavior (Asensio et al., 2020).

Turnover: The departure of existing employees and the entrance of new employees (Ngo-Henha, 2017).

Chapter Summary

This chapter included an outline of the study, the background of the problem, problem statement, purpose statement, nature of the study, research questions, interview questions, conceptual framework, the definition of critical terms, assumptions, limitations, delimitations, the significance of the study, and a brief review of the literature. An in-depth review of the literature follows in Chapter 2, expounding upon the study's development and significance and literature. Chapter 3 includes a discussion on the data collection methodology, and Chapter 4 consists of the results and analysis of the study. Finally, Chapter 5 consists of commenting on the study combined with suggestions for future studies stemming from this research effort.

Chapter 2: Literature Review

This qualitative phenomenological study aims to discover strategies business leaders exercise to help their employees who are subject to substance abuse prevent relapse and improve organizational performance. The population selected for this study will consist of business leaders who have managed addicted employees who have relapsed at least once under their supervision. Upon completing this study, the results might modify business practices and promote organizational change by utilizing the results of this study to implement effective substance abuse relapse prevention strategies and decrease unnecessary costs associated. Findings from this research may promote constructive social change by enhancing corporate social responsibility through practices that involve accountability and learning through lived experiences, thereby reducing employee substance abuse relapse rates and increasing business viability.

This study presents components that leaders can utilize to understand the problem of active addiction in the workforce and the benefits of retaining a team of employees in recovery. A literature review is essential in this study because it provides an overview of the research problem, assesses the state of knowledge on the subject, identifies gaps in knowledge, and establishes a foundation further to understand a conceptual theory (Snyder, 2019). This literature review is evidence-based and incorporates various peer-reviewed research articles to provide an informative, unbiased narrative on the topic (Salji & Winchester, 2016). The literature review includes over 100 sources gathered through the following academic libraries: Wiley Online Library, ProQuest Central, Google Scholar, National Center for Biotechnology Information, Science Direct, and Academia.

Historical Development of the Topic

The historical development subsection of this literature review provides a relevant and visible evolution of employee relapse, including essential contributing factors related to

employee substance abuse relapse. Leaders can benefit from understanding that addiction has a longstanding history. The effects of addiction felt on society are relevant in this qualitative phenomenological study as it contributes to the strategies that managers exercise to effectively monitor and support addicted employees who relapse, increasing organizational effectiveness.

Opioid Crisis

There are accounts of addictive behaviors throughout history for thousands of years. In ancient lower Mesopotamia, Sumerians cultivated opium poppy for its euphoric effects, and ancient Egyptians recorded their use for opium to treat pain (Bandyopadhyay, 2019). In the early Roman Republic, several cases portray people addicted to gambling who experienced slavery due to an inability to pay back their creditors (Bandyopadhyay, 2019). Among these recorded events is one of the most significant pandemics for addicts, the opioid crisis. The current opioid crisis has affected over 10.3 million people of all ages and backgrounds (Campisi, 2019). According to the Centers for Disease Control and Prevention (2020), the first opioid epidemic wave commenced in the 1990s, involving overdoses to prescription opioids; the second wave started in 2010 with an increase in overdose to heroin; the third wave began in 2013 with increasing overdoses in synthetic opioids, such as fentanyl and other counterfeit pills. In 2016, over 46 people died each day in the United States from overdoses involving opioids, and the US declared the opioid crisis a nationwide public health emergency on October 26, 2017 (Campisi, 2019; "Cancer Law Weekly," 2019). The opioid crisis remains a serious issue due to the inappropriate use and abuse of prescriptions, misuse of other drugs, lack of understanding of the benefits of recovery, and chemical dependence (Vadivelu et al., 2018). A summary of the opioid crisis history is crucial to this study as it provides an overview of the impact addiction has placed on society, thereby affecting businesses.

Effects of Opioid Use.

While the reasons people inappropriately use opioids vary, it is essential to consider the effects of the drugs and possible unintended harm from opioid abuse (Bonnie et al., 2017). A 2014 study by the National Survey on Drug Use and Health found that respondents reported 564 million days of opioid misuse for the experience of the feeling it caused ("SAMHSA," 2014). According to Hoffman et al. (2019), opioids affect the central nervous system with an increased sense of euphoria and reduce feelings of pain. Opioids activate the release of endorphins in the brain, a feel-good chemical that can disrupt pain perception and increase pleasure sensations ("Mayo Clinic," 2018). When the opioid dose subsides, abusers find themselves wanting the good feelings to come back as soon as possible, which elicits the continuation of addiction and relapse behaviors ("Mayo Clinic," 2018). According to the National Institute on Drug Abuse (2018), many medicines contain opioids due to their pain-relieving effects; however, long-term abuse of opioids can lead to people developing a tolerance, compelling higher doses and frequent use to obtain the desired results or to function the body normally. Further, it can be challenging and dangerous for someone to quit opioid addiction because of the possible dependence and correlating withdrawal symptoms ("National Institute on Drug Abuse," 2018). Gladych (2021) states that employees may not seek help for substance abuse because they are concerned their employers will find out about their addiction and negatively impact them. Employers must educate themselves regarding the pleasurable and harmful effects substance abuse produces and the fears that prevent their employees from asking for support.

Public Health Crisis.

Though the opioid crisis has established itself as a public health crisis, the impacts affect all areas of the workforce. According to the National Safety Council (2017), 71% of US organizations in 2017 reported being affected by an employee using prescription drugs

through absenteeism or compromised work performance. Caverly (2020) informs the total economic cost that employers burdened due to the opioid crisis from 2015-2018 was approximately $631 billion. According to the Administration for Children and Families (2018), employees who fall under the opioid crisis have cost employers about $25.6 billion annually in lost work production and have a direct correlation to higher workers compensation claims, absenteeism, and employer health care costs (Rhee & Rosenheck, 2019). Caverly et al. (2020) report that employers also deal with increased long-term disability, short-term disability claims, and workers' compensation claims from employees with opioid use disorder. The total cost to companies from these benefits was $702 million in 2015 and increased to a total of $3.4 billion in four years (Caverly et al., 2020). The significant economic impact the opioid crisis burdened employers with as productive workforce participation decrease is essential in this study to understand the importance companies must place on workplace addiction.

Lack of Employer Strategies.

Another contributor to the opioid crisis is a lack of national prevention strategies (Christie et al., 2017). Gladych (2021) cites that companies agree that employee opioid and alcohol addiction place high costs to the employers each year; however, "addressing the opioid crisis in the workplace is good for business" (para. 18). According to the National Business Group on Health, President Donald Trump's declaration of the opioid crisis as a public health emergency persuaded employers to progressively search for methods that can reduce opioid abuse as it could result in increased production from employees and lower the employer's cost for health care (Miller, 2017). A panel of experts in a joint hearing between the United States House Education and Workforce Committee advocated for several employer strategies that can aid employees struggling with addiction (Druley, 2018). Some organizations are working with their health care benefits managers to formulate strategies that

can mitigate workplace opioid issues, such as limiting pill quantities, providing alternatives to pain management, and increasing workplace awareness of the opioid issue (Miller, 2017). However, a recent study found that just limiting prescriptions will not single-handily solve the problem because much of the issue stems from non-prescription, illegal use ("ECN," 2019). Several employers are placing the appropriate importance on the opioid crisis, focusing on developing strategies that will benefit the employee and workplace productivity to combat employee addiction and prevent relapse.

Economic Conditions That Contribute.

Inappropriate opioid usage and overdose correlate to economic conditions in the community surrounding opioid abusers (Sumell, 2019). Carpenter et al. (2017) and Hollingsworth et al. (2017) discovered that in communities encountering economic downturns, such as unemployment, the opioid death rates increased by 3.6% for every unemployment percentage that grew. Case and Deaton (2017) observed a relationship between Caucasian working-class adults with no college degree and the increased availability of opioids; within this group, the mortality rate was higher than in other groups. According to Sumell (2019), while opioid usage has resulted in high unemployment rates across the board, prevailing in opioid use could lead to increasing self-employment rates. According to the Centers for Disease Control and Prevention (2020), the recent COVID-19 Pandemic has accelerated the number of overdoses and deaths within the opioid crisis. The isolation remote work restrictions the pandemic has placed on society attributes to one of the main reasons for increased overdoses and deaths ("Centers for Disease Control and Prevention," 2020). Employers need to recognize that other conditions, such as the recent COVID-19 Pandemic, exacerbate the addiction crisis and inappropriate drug use and are critical to notate when establishing strategies to help addicted employees in need.

COVID-19 Pandemic.

One of the more recent economic disruptions that employers and employees are affected by is the COVID-19 Pandemic that has hit countries worldwide (Busch, 2020). The COVID-19 Pandemic, also known as the "Coronavirus" or "global crisis," is said to be transmitted through the respiratory system, which indicates that if an infected person coughs, sneezes, or breaths on someone, the disease is likely to spread ("Center for Disease and Control Prevention," 2020). People must maintain a distance of six feet apart from each other while wearing a mask to cover their nose and mouth ("Center for Disease and Control Prevention," 2020). The afore-mentioned guidelines set by the Center for Disease and Control Prevention (2020) impacts businesses as remote work becomes more prevalent due to additional restrictions and limited space. In a recent publication, Bansal (2020) cites that many retail stores are shutting down due to governmental guidelines requiring lockdown. According to a survey conducted by Watson (2020), 23% of the companies surveyed proclaim they will not survive the reduction in business, while 57% cite a need to lay off and furlough their employees. As of June 2020, about 40 million Americans lost their job due to the COVID-19 Pandemic despite stimulus checks and small business assistance from the government (Kohl, 2020). Bloom et al. (2020) found that many businesses base spending decisions on their expectations of the future and the degree of uncertainty surrounding the expectations. The economic disturbance the recent global crisis has inflicted on enterprises is critical to this study in synthesizing the current situation employers and addicted employees endure.

Impact on Business Models.

The global pandemic has caused companies to evaluate their external and internal environment to sustain operations (Ritter and Pedersen, 2020). Organizations are encouraged to look inward at their immediate and long-term business models (Ritter and Pedersen, 2020). According to Markovits (2019), a crisis can disrupt a company's income as customers may

pause in purchases from specific industries. The Federal Reserve halted banks from coin production, prompting companies to change their business model to cashless payments (Hill, 2020). Assessing business models can help executives and leaders evaluate the opportunities a pandemic presents (Ritter and Pedersen, 2020). A crisis can create new safety concerns, which may transcend into a shift in delivery channels (Ritter and Pedersen, 2020). Instacart is a company that delivers items to its client's doorstep, and the global pandemic has caused safety concerns in encountering the customer in person and their purchases (Grashuis et al., 2020). Gloves and face masks are mandatory for employees of Instacart, and customers have the option of choosing 'no contact' delivery (Grashuis et al., 2020). Most organizations transitioned to remote work and found it necessary to invest in better technology to support their needs (Brynjolfsson et al., 2020). In this study, a situational assessment can be an effective method to formulate strategies for leaders gathering that the global pandemic has led to business model changes.

Impact on Mental Health.

A global crisis in the economy can strain the people in a business, and companies may need to assess its impact on their employees. According to a recent study conducted by Herriford and Sharp-Page (2020), the COVID-19 Pandemic has affected employees' mental health and found that poor employee mental health negatively impacts well-being and production. One in every five Americans face mental health or substance abuse problems and collectively miss 217 million workdays a year, subjecting employers to unnecessary costs; therefore, employers cannot afford to ignore any issues concerning poor employee mental health (Herriford and Sharp-Page, 2020). Rai (2020) cites that with mental health unrest rising due to the global crisis, suicide cases have increased as "employees struggle with anxiety, depression, frustration, burnout, trauma, and PTSD" (para. 03). Bousinakis and Halkos' (2016) research illustrates a direct relationship between a crisis's impact on

employers and an employees' decrease in job satisfaction and productivity. According to Bousinakis and Halkos (2016), a crisis imposes negative stress and anxiety on employees and leads to a slower work pace, high amounts of mistakes, and accidents. According to a recent study by Place (2020), returning to work with "business as usual" might be counterproductive and challenging as the global crisis has revealed a disconnect between leaders and employees. Closing the empathy gap between leaders and employees is necessary to increase communication in the workforce, streamline operations, and ensure business success (Place, 2020). Clary (2018) conducted a study in Kentucky where the researcher found that businesses that value employee mental health decreased healthcare costs and increased revenues. Employee mental health improves a business's success; therefore, the relationship between the global crisis and employees' psychological distress and related work performance is an essential component of this study for leaders to consider.

Impact in the Addiction Community.

The COVID-19 Pandemic is causing a tremorous disturbance and psychosocial impact on the addiction community (Baldacchino et al., 2020; Dubey et al., 2020). Approximately 20 million Americans have a substance use disorder (Heimer et al., 2020). According to a study, internet alcohol sales increased by 240% when the global crisis began (Chodkiewicz et al., 2020). Increased alcoholic trends in psychoactive substances as coping strategies for mental stress during the global crisis are also reported (Chodkiewicz et al., 2020). A recent survey conducted by Stanton et al. (2020) found 1,941 adults with unfavorable physical activity changes, sleep, alcohol consumption, and smoking since the ongoing pandemic. In a study published in the International Journal of Environmental Research and Public Health, Lin (2020) conducted a cross-sectional study with 1060 participants and found 24.4% with a prevalence of internet addiction with the COVID-19

outbreak. Leaders must be willing to acknowledge that the global crisis has influenced a negative seismic impact on the addiction community, which they also employ.

Restrictions, social distancing regulations, and health service limitations placed by the United States Government interrupted the practices addicts use to obtain alcohol and drugs (Volkow, 2020). Consequently, the disruption has also heavily affected how they receive adequate treatment to stay sober (Dubey et al., 2020). According to Farhoudian et al. (2020) and Kar et al. (2020), for addicts treated for opioids in a dispensing program, not receiving or missing a dose may trigger a relapse for that individual. In-person therapy sessions, which effectively support those in the addiction community, were canceled due to the COVID-19 restrictions, and web-based support sessions are not sufficient for some individuals (Columb et al., 2020). Usual places designated for physical and mental health benefits, such as indoor and outdoor recreational facilities, no longer have the same accessibilities and further reinforce social confinement conditions (Stanton et al., 2020). Cenikor Foundation treatment facility in Texas struggled as COVID-19 spread before notifying all clients that the doors must be closed (Walter, 2020). Treatment facility closures can trigger relapse and overdose while leaving people more vulnerable to the Coronavirus (Walter, 2020). Baldacchino et al. (2020) state that addicts are prone to relapsing in these types of isolation conditions. COVID-19 restrictions have affected access to reliable resources for people who relapse, such as substance treatment programs and face-to-face meetings central to recovery (Heimer et al., 2020). If employers are to create strategies that can aid their employees subject to substance abuse, understanding what currently affects the sobriety of addicted employees is essential in this study.

Contemporary Perspectives

In this subsection of the literature review, the researcher systemized the current perspective to provide an in-depth look into employee substance abuse relapse and costs

associated. The researcher organized the relevant components of employee relapse that drive this study into the following themes: absenteeism, production loss, turnover, healthcare costs, triggering events (such as global crisis and other stressors), and codependency.

Employee Relapse

Employee substance abuse relapse is becoming a costly and prevalent problem for employers (Valentic, 2020). Goplerud et al. (2017) computed the expense billed to employers and taxpayers for absenteeism, turnover, health care, disability, worker's compensation, law enforcement, and medical treatment to be over $400 billion due to employee relapse. The University of Chicago partnered with the National Safety Council and created a substance abuse calculator, which found the cost of employee relapse to employers and taxpayers to be about $696 billion in the year 2020 (NORC, 2020). The Substance Abuse and Mental Health Services Administration (2014) conducted a National Survey on Drug Use and Health on approximately 67,000 participants and found that 75% of adults subject to substance abuse, between 18 and 64, are in the workforce. The Substance Abuse and Mental Health Services Administration (SAMHSA) uses the data from the 67,000 participants to produce the following chart.

Table A1

Industry Representation of Addicted employees

Industry	**NSDUH(%)**	**NSDUH(#)**
Agriculture, forestry, fishing, and hunting	1.4	1,254
Mining	0.6	605
Construction	7.5	15,357
Manufacturing	10.5	7,380
Utilities and Transportation	5.0	3,032
Information Technology	2.3	1,386

Wholesale Trade	2.5	1,697
Retail Trade	10.5	10,452
Financial Activities	6.5	4,022
Professional and Business Services	11.9	8,214
Educational Services, Health	22.3	17,294
Leisure and Hospitality	9.3	11,125
Government and Public Administration	4.6	3,118
Other Services	5.6	4,193

Note. NSDUH = National Survey on Drug Use and Health.

The table above illustrates the highest number of addicted employees fall within the manufacturing, retail trade, professional and business services, and educational and health services sector (Goplerud et al., 2017). In this study, leaders must recognize that employees who identify as addicts make up ample space in the workforce, and the costs associated with relapse are astronomical yet preventable.

Absenteeism and Production Loss.

Absenteeism is one of the leading impacts organizations experience due to employee relapse. The National Safety Council (2017; 2021) found that employees with substance abuse disorders were absent approximately 50% more days from work than their co-workers and averaged about 24.6 missed workdays a year due to substance use; however, employees in recovery are reported to miss the fewest days per year of any group, including the general workforce. Employees absent from work cost US employers billions of dollars annually in production loss and sick pay (Lohela Karlsson et al., 2015). In a study, Doki et al. (2016) found that the awareness and presence of a sick pay system were related to absenteeism in employees experiencing mental health problems. According to research, a strong relationship exists between absenteeism, production loss, and the health status of employees, proclaiming that employees who fail to attend work due to health issues can significantly affect business

productivity (Zhang et al., 2017). Other considerations that may affect employee absenteeism from work are motivation, dedication, health-related issues, and office stress (Kocakulah, et al., 2016). Marzec et al. (2015) found that reducing employee absenteeism can improve employee health and well-being. Hence, reducing absenteeism in the workplace can decrease unnecessary organizational costs and improve productivity.

Employees absent from work cause employers to become short-handed; employers need to reallocate workers or pay them overtime to complete the necessary work duties (Badubi, 2017). Overtime duties consist of carrying out a peer's tasks in the event of an absence, a costly activity that employers are responsible for (Kocakulah et al., 2016). In a study, Jinnett et al. (2017) found that with absenteeism and production loss, there are direct and indirect costs due to production delays, the utilization of replacement workers, extra duties given and needed from co-workers, and overtime. Ogbonnaya and Valizade (2016) found that when employees are absent from completing their work duties, it negatively affects organizational relationships as it adds pressure on other employees and takes away from management's time because of coverage needed. On the contrary, researchers also discovered that presenteeism could result in higher production loss (Jinnett et al., 2017). There can also be an abuse of work hours as employees misusing substances may manifest tardiness, increase the number of breaks, taking more extended lunches, and have unaccounted time (Guenzel & McChargue, 2021). Organizational leaders must apply appropriate strategies to reduce absenteeism rates associated with substance abuse relapse to increase productivity and viability.

Employee absenteeism can negatively impact employers from executing effective strategies. According to Bankert et al. (2015), employers experiencing employee absenteeism devote fewer resources to develop strategies and tend to achieve fewer profits. Leaders must understand the root cause; however, understanding the root cause becomes challenging when

the employee is not at work (Senyametor et al., 2018). Researchers find that understanding addiction relapse can lead to prevention strategies (Melemis, 2015). After a relapse, an employee may not be capable of learning new tasks, handling stress, or performing; therefore, if the employee returns to work, the employer must implement a strategy for proper re-engagement (SAMHSA, 2021). Leadership strategies for returning to work and substance abuse relapse prevention can only be effective if the employee is present, capable, and able to participate in them.

Turnover.

Employee turnover is another possible result of employee substance abuse relapse (Goplerud et al., 2017). Researchers have found that replacing an employee can cost approximately 200% of the annual salary in recruitment, hire, and onboarding (Lee et al., 2018). The National Safety Council (2021) reports that each employee that leaves a job within a year due to untreated substance use can cost employers over $14,000 in turnover costs. Bufquin et al. (2021) conducted a study and found a relationship between employees' mental health status and high turnover intentions during COVID-19. Lee, Fernandez, and Lee (2020) show that changes in work attitude, such as job involvement and changes to the psychological climate such as employer support and role manageability, can predict turnover. Evidence suggests that if employee work attitude declines and notices spikes in absences and extended breaks, turnover rates may increase as well (Lee, Fernandez, & Lee, 2020; Lee, Hom, et al., 2018). Managers must properly assess employee work attitudes and behaviors to identify any indicators that can point to turnover.

Healthcare Costs.

Employee healthcare costs are a rising concern for organizations as the healthcare costs associated with substance abuse relapse increase (Goplerud et al., 2017). In *Facing Addiction in America*, the Surgeon General notates that US healthcare costs allocated to treat

substance use disorders are approximately $35 billion annually while healthcare costs to treat injuries, turnover infections, and illnesses linked to substance use disorders are approximately $85 billion ("U.S. Department of Health and Human Services," 2016). The National Safety Council (2021) states that employers pay an average of 83% of the employee's premiums and 73% of the employee's family premiums. Analysis of health insurance premiums indicates that employer costs for an employee who do not have a history of addiction are approximately $2,918 annually ("National Safety Council," 2020). In comparison, the price for health insurance premiums for an employee with substance use disorder is roughly $4,770 per worker ("National Safety Council," 2020). In addition, research cites that employees with substance use disorders utilize their plans to claim hospital nights, emergency departments, and ambulatory care visits (Goplerud et al., 2017). Research indicates that workers in recovery cost the least in healthcare, lower than the general workforce (Goplerud et al., 2017). Implementing effective leadership strategies can help employees who struggle with an addiction prevent relapse and decrease employer healthcare costs.

Triggering Events.

Employees addicted to substances are more likely to relapse during a recession or crisis (Nagelhout et al., 2017). During a crisis, an employee's work hours and responsibilities are not guaranteed, which can collectively trigger and lead to substance abuse relapse (Nagelhout et al., 2017). The Coronavirus is one of many triggering events that is considered a crisis (Alexander, 2015). Coronavirus-associated relapses are estimated to be between 40% and 60% (Hudson, 2020). Greece experienced an economic recession that limited public health services and caused many organizations to cut their annual budgets (Theodoratou, 2017). Companies found that it was harder for addicted employees to keep a job during the financial crisis in Greece and substance abuse relapse rates increased (Theodoratou, 2017).

Leaders must note that substance abuse relapse rates of addicted employees are likely to increase during an economic crisis.

Workplace Stressors.

Stress exposure can trigger substance abuse relapse for addicted employees (Torres-Berrio et al., 2018). A study conducted at Dalhousie University found that stress endured by pregnant women, lack of stable housing, dehumanizing work environments, and existence in a corrupt political system were triggers or a crisis in the addict's mind (Alexander, 2015). Poor relationships with management and co-workers, bureaucracy atmospheres, too high or too low-performance demands, professional life, and personal life imbalance are all types of stressors that can trigger addicted employees (Asensio et al., 2020). Triggering work stressors and unclear boundaries on performing and interacting with other professionals effectively can lead to high burnout, relapse, and turnover rates (Sriharan et al., 2020). Therefore, detecting and recognizing key triggering workplace stressors is necessary to understand a crisis through the lens of an addicted professional.

Codependency with Addiction.

Enabling addicts can lead to negative consequences; therefore, leaders must learn how to efficiently support their addicted employees while averting enablement and codependency ("Washington State Department of Enterprise Services," 2016). The WA State Employee Assistance Program identifies that leaders can enable employees they decide to limit the duties of, makes excuses for, covers up the mistakes of, financially bail out addicted employees because of substance abuse relapse; continued relapse without any associated repercussions and can lead to an inability to face their problems and improve ("Washington State Department of Enterprise Services," 2016). The most common form of codependency displayed by addicted employees is the reliance on others for approval and a sense of identity ("News Bites – Private Companies," 2019). Employers who seek to establish successful

strategies for addicted professionals must not enable any codependent behavior as this does not serve the company or the employee successfully.

Historical Development of Theory

This qualitative phenomenological study presents two main theories as a lens to determine how leaders address addicted employees' needs and motivate substance abuse relapse prevention. Maslow's (1943) hierarchy of needs is the framework for understanding an addicted employee's needs and how met needs encourage improved behavior. Second, leaders influence employee behavior and attitudes; therefore, Goleman's (2020) emotional intelligence theory also conceptualized this study. This study outlines the concept of emotional sobriety, which is comparable to emotional intelligence theory, as a principle used in many organizations for effective leadership and 12 step-based communities (Friedman, 2016; Rajakumar et al., 2019). The conceptual framework for this qualitative study may provide a unique lens that employers can use to detect the motivational needs of an addict that can contribute to productive work behavior and assess if their leaders possess skills and abilities to decrease substance abuse relapse rates and increase overall organizational performance.

The Conceptual Framework: Maslow's Hierarchy of Needs

The researcher established a connection between Maslow's hierarchy of needs and employee substance abuse relapse to conceptualize this study. Maslow (1943) developed a theory of human motivation, claiming that all humans have the following needs: physiological, safety, love and belongingness, esteem, and self-actualization. Human motivation theory illustrates human needs in a hierarchy, based on causes that are apt to result in or lead to certain behaviors; in other words, an unmet need can either positively or negatively influence employee behavior (Balraj, 2017; Kotler & Keller, 2016). Maslow

(1943) provides specific references and examples of how this theory can apply to employees and their motivators.

Research portrays Maslow as an iconic figure in the history of management ideas, and several management studies mention Maslow's hierarchy of needs theory as a method that helps leaders satisfy employee needs to increase motivation (Bridgman et al., 2019). When skilled managers can understand and address their employees' needs, it increases job satisfaction, work commitment, and company performance (Bridgman et al., 2019). According to Lussier (2019), Maslow's hierarchy of needs provides a paradigm for supervision and performance management in addressing the needs of addicts to create a solution-based action plan for quality and functionality improvement.

Maslow understood that motivation depends on an individual's realization of their needs and goals as each employee is different (Alajmi & Alasousi, 2018). Each level of needs directly correlates to a specific goal that can motivate employees; when leaders address each group of employees' needs and attempt to satisfy them, it results in better performance and commitment to the organizational goals (Moss, 2020). According to a study conducted by Rakic and Zivkovic (2017), if an employee felt a low satisfactory level in each of the five sets of needs, it decreased employee performance and motivation. Researchers assessed motivation and satisfaction levels at work using Maslow's hierarchy of needs and found that employees with a high satisfactory level result in increased motivation and occupational improvement (Rakic & Zivkovic, 2017). Organizations can utilize Maslow's hierarchy of needs to assess what motivates their addicted employees to stay sober and improve performance.

Organizations must develop strategies to understand what their employees need to sustain motivation because if employees stay motivated, they are more productive and responsible for their performance at work (Sabir, 2017). According to Maslow (1943), the

basic principle and most appropriate point of any motivation theory is to focus on "the functions, effects, purpose, or goals, of the behavior" (p. 392). Specific goals related to each need in Maslow's (1943) theory motivate employees. Maslow (1943) states a new need emerges, dominates, and serves as a motivator for behavior when a previous need is reasonably satisfied. An employee's most critical and immediate needs and level of inspiration depends on their history and circumstances (Maslow, 1943). Maslow's theory also recommends exploring an employee's exposure to situations as a considerable explanation for certain behaviors, including disruptive behaviors to work productivity (Maslow, 1943). Certain conditions can trigger a threat to basic needs, and any psychological threat felt to the employee's basic needs or goals related to the needs may bring about emergency reactions, such as relapse, from the employee subject to substance abuse (Maslow 1943). Therefore, leaders must take an active role in understanding the needs of an addicted employee and what is a considerable threat in an addicted employee's mind, which may constitute disruptive work behavior and production loss.

The researcher used Maslow's hierarchy of needs to address the concept of identifying how an employee subject to substance abuse perceives needs and how a leader may help satisfy those needs. Maslow (1943) states the five sets of needs are also goals. First, physiological needs relate to the survival of an employee; the absence of this need can lead to an inability to operate to capacity, and problems in this area relate to dependence on alcohol, drugs, and other unmanageable health problems (Maslow 1943, Maslow 1954; Lussier, 2019; Nodoushani et al., 2018). Employee wages and salary can appease physiological needs (Maslow 1943, Maslow 1954; Lussier, 2019; Nodoushani et al., 2018). Next, safety needs protect an employee against potential threats; a lack of financial security due to an economic crisis may manifest a need for job security, and problems in this area correlate with legal issues, mental health management, and personal safety (Maslow 1943, Maslow 1954;

Lussier, 2019; Nodoushani et al., 2018). According to Maslow (1943, 1954), job security and stability, freedom from fear, law, order, and protection can fulfill physical and mental safety needs.

Love and belongingness are emotional components that allow addicted employees to feel accepted by family, co-workers, associates, professional organizations, and teams (Maslow 1943, Maslow 1954; Lussier, 2019; Nodoushani et al., 2018). Problems in this area associate with deficits in interpersonal skills, trauma, and other interpersonal relationship issues; this need can be satisfied through interpersonal relationships, such as between a manager and an addicted employee (Maslow 1943, Maslow 1954; Lussier, 2019; Nodoushani et al., 2018). Maslow (1943, 1954) cites that positive employee relationships and connections can placate esteem needs (Lussier, 2019; Nodoushani et al., 2018). Self-actualization unlocks an employee's full potential with a desire for personal or professional development to accomplish anything and is achievable through active employee engagement and motivation (Maslow 1943, Maslow 1954; Lussier, 2019; Nodoushani et al., 2018). Employers can support their addicted employee's needs by providing them with proper working conditions, financial security, and encouragement to work together as a team (Akinyetun, 2016). Generally, people have their needs partially met and can still make progress (Hopper, 2020). However, Southern Connecticut State University researchers depict that undermining one need can impair other needs and influence defensive employee behavior (Nodoushani et al., 2018). Companies can implement the concepts central to Maslow's hierarchy of needs to gauge individualistic needs and motivators of employees subject to substance abuse to recognize strategies that contribute to work progress and business sustainability.

Emotional Intelligence Theory

Emotional intelligence is beneficial in this study as a framework for evaluating leadership capabilities to implement supporting structures to help employees establish

meaningful behavior change for occupational improvement (Panait, 2017). Leaders have a responsibility to be an example and influence change; according to a study conducted by Issah (2018), the change process involves emotions, so there is an increased focus on emotional intelligence in the 21st century. Goleman (2020) claims leaders must develop themselves if they expect others to change and grow. Initially conceived by Mayer & Salovey (1997), emotional intelligence proclaims an ability to identify, understand, and regulate emotions to guide one's thinking and actions and promote emotional and intellectual growth. Goleman (2020) formalized emotional intelligence theory in the business realm, arguing that leaders who effectively regulate their emotions, respect the emotions of employees, and use this knowledge to guide their thinking and actions. People with high emotional intelligence control their emotions and perform well at work; the benefits that organizations gain from workers who have high levels of emotional intelligence include increased productivity, increased employee satisfaction, and fewer defects (Goleman, 2020). The benefits that employees gain from a high level of emotional intelligence include increased adaptability and a greater sense of well-being (Khaket, 2019). Upadhyaya (2017) conducted a study with 12 marketing managers, followed by all company employees, and observed that utilizing emotional intelligence as a system to measure leadership effectiveness improved occupational performance, leadership, and organizational productivity. According to Goleman (2020), studies have shown that when organizations invest in programs that increase their employees' emotional intelligence, their return on investment multiplies by four. Employers must understand the importance of using emotional intelligence to assess their leaders' ability to identify their own emotions and effectively manage their emotions to effectuate behavioral change and increase overall organizational productivity.

Emotional intelligence theory is a conceptual framework in this study directly related to business leadership, management, and their influence on improving addicted employees'

performance and behaviors. In the workplace, Goleman (2020) asserts optimism within emotional intelligence and labels this to be a crucial skill to aid an employee to achieve self-efficacy by staying motivated and persevering through frustration despite any setbacks. Optimism helps people see setbacks as opportunities to learn and succeed in the future (Dacre-Pool & Qualter, 2018). Emotional intelligence permits employees to control impulse behaviors, regulate moods, and increase the ability to think, empathize, and hope (Khaket, 2019). Dacre-Pool and Qualter (2018) state the application of emotional intelligence in the workplace helps measure the needs of an organization, the employee, advises learning from relapses and mistakes to prevent further employee relapses, and evaluate lasting behavior change that results in absenteeism, grievances, health status, and other performance measures. Meta-analysis shows a leader's emotional intelligence relates to "job performance, job satisfaction, organizational commitment, turnover intentions, mental and physical health, life satisfaction" for the leader and their subordinates (Miao et al., 2017, p. 145). Studies have found that organizations can reduce counterproductive work behavior and increase overall leadership effectiveness and performance by hiring leaders with high emotional intelligence (Miao et al., 2017). Managers and leaders can use emotional intelligence to establish methods that manage their emotions to connect with their employees and work together towards productive and profitable work behavior (Goleman, 2020). Organizations can use leaders who exhibit high emotional intelligence to connect and influence addicted employees to identify successful practices that reduce costly counterproductive behaviors, such as relapse.

The researcher used Goleman's (2020) emotional intelligence theory as a lens to view the four dimensions of emotional intelligence that drive leadership and employee performance, leading to increased employee effectiveness within an organization. Self-awareness is the keystone of emotional intelligence, wherein leaders recognize how their feelings can affect their job performance (Goleman, 2020; Landry, 2019; Khaket, 2019;

Alaei, 2017). Employees who lack self-awareness contribute to work stress and decrease team success and motivation. Individuals with self-awareness can associate feelings with thoughts and actions, acknowledge their strengths and weaknesses, reflect and learn from past experiences, are open to candid feedback and self-development (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei, 2017). Self-management allows employees to manage their emotions to control disruptive impulses (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei, 2017). According to Goleman (2020) and Landry (2019), employees with low self-management are inflexible at work and poorly manage stress, while workers who exhibit a sense of self-management stay optimistic, can focus under pressure, build trust through accountability and reliability, admit their own mistakes, face unethical actions, meet commitments, are careful in their work, adapt responses and views according to circumstances, and seek and accept new ideas as solutions to problems

Social awareness allows employees to understand others' needs, feelings, and perspectives with concern (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei, 2017). A lack of empathy can disable effective communication and collaboration with co-workers (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei, 2017). Leaders with empathy and who lead from their heart perform 40% higher in coaching, engagement, and decision-making (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei, 2017). Leaders and addicted employees with an increased sense of empathy can help each other through the understanding of their needs and feelings, can offer helpful feedback with the identification of development needs, respect varied backgrounds, create opportunities for diverse groups to prosper, and accurately read situations and realities (Goleman, 2020; Landry, 2019). Relationship management embodies the ability to influence and manage conflict effectively (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei, 2017). Leaders with this competence lead by example and build rapport to orchestrate win-win solutions (Goleman, 2020; Landry, 2019; Khaket, 2019; Alaei,

2017). According to Goleman (2020), leaders who effectively manage relationships can deal with difficult situations realistically through open communication, acknowledge a need for change, share information and resources, and protect the group and reputation of others. Emotional intelligence mechanisms can influence employers to recognize the importance of evaluating leadership competencies to foster addicted employee behavioral change for overall performance and efficiency.

Emotional Sobriety.

Rajakumar et al. (2019) and Alaei et al. (2017) have linked 12 step methodologies and the principles of emotional intelligence. Wilson (1958) co-founded Alcoholics Anonymous in 1935, a 12 step-based recovery program that has saved millions of lives worldwide, and claimed emotional sobriety is as indispensable as abstinence from substances. According to Wilson (1958), emotional sobriety is the ability to face, cope, and manage emotions effectively. Emotional sobriety can translate mental convictions into appropriate dynamic results, and addicts become functional and productive in society (Wilson, 1958). Wilson (2001) devotes an entire chapter within the Alcoholics Anonymous book to employers, and the author provides several suggestions for how leaders can handle addiction in the workplace.

Several studies have shown that applying 12 step-based teachings, such as emotional sobriety, in the organizations' day-to-day functions can improve emotional growth and emotional intelligence, resulting in increased leadership effectiveness (Friedman, 2016). Furthermore, emotional sobriety and other 12 step-based principles are not limited to addicted employees; managers who practice 12 step-based principles, such as emotional sobriety, effectively increase their management capacity, professional growth, and team performance (Rajakumar et al., 2019; Alai et al., 2017). With the understanding that emotional sobriety exhibits a vital role in the addiction community along with proven data

that supports the valuable contribution emotional sobriety adds to organizations and their leaders, employers must consider utilizing emotional intelligence along with this 12 step-based principle to guide leadership strategies that prevent employee substance abuse relapse and ensure organizational effectiveness.

Importance of the Study and Implication for Practice

This importance of the study and implication for practice subsection of the literature review contains relevant information from the lens of Human Resources. Human Resource is a necessary business function that focuses on employee development (Balueva & Snopenki, 2020). Leaders must understand the role that Human Resources holds in an employee's substance abuse relapse and the rights employees are subject to. The contribution to practice subsection discusses how this phenomenological research study can educate leaders on addiction in the workplace and invest in relapse prevention practices to retain a workforce that increases business viability.

Human Resources Strategies.

Employee substance abuse relapse is a challenge that human resource managers face. The human resource function goes beyond hiring, training, and retaining employees; a critical element of human resources is developing employees to align with the mission and vision of an organization (Balueva & Snopenki, 2020). According to Özpeynirci and Yucekaya (2021), employers desire high-performance and policies and practices to facilitate individuals in aligning their goals to organizational goals. The Society for Human Resource Management (2018) states that because addiction negatively impacts the workplace through safety, productivity, and costs, human resource professionals perform an integral role in addressing addiction through policies, procedures, and training. Furthermore, the Society for Human Resource Management (2018) asserts that human resource managers assume a vital role in managing addicted employees, training leaders who manage addicted employees on

appropriate actions to take, and establishing strategies to guide addicted employees to available accommodating resources.

Addiction Policy.

The US Department of Labor recommends that organizations write a drug-free workplace policy that clearly defines expectations and regulations regarding alcohol and drug use and share it with all employees ("National Drug-Free Workplace Alliance," n.d). The Founder and CEO of Working Partners, a service-oriented company that creates drug-free workplace programs, found that leaders play a critical role in addressing employee addiction ("PR Newswire," 2017). Developing drug-free workplace policies assists leaders in preventing and responding to issues regarding addictive behaviors in a sound and meaningful way ("PR Newswire," 2017). The National Drug-Free Workplace Alliance (n.d.) provide the six components to establish a drug-free workplace: assessing company and employee needs, creating a written drug-free workplace policy with clear expectations, educating employees on the practice of a drug-free workplace, training leaders on how to carry a work environment free substance abuse, providing helpful resources, and drug testing. The Oregon Employer Drug-Free Initiative (n.d.) provides a *Drug-Free Workplace Business Toolkit* that states a company's drug-free workplace policy must meet the organization's needs, explain why the company will implement the policy, clearly describe the behaviors that are prohibited, and clearly explain the consequences for policy violation. Implementing and providing employees with a detailed, written addiction policy as a guideline to manage appropriate work behaviors and expectations is necessary for organizational effectiveness.

Recognizing Warning Signs.

Leaders must possess the ability to detect characteristics or warning signs that could lead to employee substance abuse relapse. In a study, Melemis (2015) notates that relapse can transpire gradually, sometimes over months, before individuals act out. Melemis (2015)

breaks down the stages of a relapse into three phases. Emotional relapse occurs individuals isolate, miss meetings, not share their strugges, focus on the problems of others, and have poor self-care; mental relapse arises when individuals crave a substance or addictive behavior, lie, romanticize addictive behavior, and plan or seek relapse opportunities; physical relapse transpires when individuals finally act out with a substance (Melemis, 2015). The Society for Human Resource Management (2018) provides other early warning signs that could indicate a relapse arising, such as absenteeism, improbable excuses, unreliability, change in performance, increased errors, confusion, difficulty concentrating, exhaustion, poor judgment, and accidents on the job. Identifying early warning signs may open the door for the employee and leader to communicate and aid the employee away from a substance abuse relapse and poor performance.

Confronting Employees.

Leaders must understand the appropriateness of engaging employees who are suspect of substance abuse relapse. According to research, Deitchler and Littler (2018) assert employers must be careful in approaching employees with suspicion because legitimate reasons may exist for any assumed relapse symptoms. Discrimination and medical privacy prohibitions protect the employee in illegitimate interventions (Deitchler & Littler, 2018). The Society for Human Resource Management (2018) recommends addressing any performance issues or conduct concerns, and if the employee chooses to do so, this may open the door for further discussion regarding addiction. Matthews et al. (2017) found that society stigmatizes addiction, approaches addicted employees with judgmental, accusatory, and negative attitudes, and thereby causes harm and exacerbates addictive behaviors. According to Deitchler and Littler (2018), employers need to be proactive and offer reasonable and genuine expressions of support with available resources to aid the employee.

Employee Assistance Programs.

Employee Assistance Programs (EAPs) are programs offered to help employees address addiction problems that negatively affect the organization (SAMHSA, 2021). EAPs provide valuable and cost-effective insights for organizations regarding addiction in the workplace and offer services for addicted employees, such as preventive relapse assistance, counseling, referral to treatment, and other behavioral health interventions (SAMHSA, 2021). According to Soeker et al. (2016), EAPs can effectively facilitate an addicted employee with the process of re-engaging with work after a relapse. Soeker et al. (2016) add that managers can promote the accessibility and benefits of EAPs so addicted employees can obtain the assistance they need and improve their performance.

Family and Medical Leave Act.

The Family and Medical Leave Act (FMLA) is a United States Federal law that requires organizations to provide eligible employees leave for a health condition while protecting their job (Kornfeld, 2018). Employees enrolled in treatment for addiction may qualify to be covered under FMLA, improve their health, and performance at work (Kornfeld, 2018). If leaders believe that an employee may need to attend treatment, it may be beneficial to consult the possibility of FMLA.

American Disabilities Association.

The American Disabilities Association is a United States Civil Rights Law that guarantees equal employment opportunities for eligible employees with disabilities ("US Department of Justice," 2020). According to the United States Department of Justice (2020), employees "who are addicted to drugs, have a history of addiction, or regarded as being addicted have an impairment under the law" may qualify for disability under the ADA, which protects the employee from being denied a job because of their addictive history (para. 07). Managers may need to refer addicted employees to consult the benefits of the ADA.

HIPAA.

HIPAA, or the Health Insurance Portability and Accountability Act, is a United States Federal Law that protects the privacy of an employee's medical record and personal health information from unwanted disclosure and use (Oyeleye, 2021). The US Congress has recognized that health information from individuals with addiction is sensitive; HIPAA privacy breaches can severely impact an employee's health, health insurance, job employment, and legal rights (Oyeleye, 2021). Employers must understand that it is illegal to expose an addicted employee's health information without their consent.

Accommodations.

The Job Accommodation Network (JAN) (2021) is a division of the United States Department of Labor's Office of Disability Employment Policy and recommends that employers provide special accommodations to addicted employees to perform their job successfully. In *Accommodation and Compliance Series: Employees with Drug Addiction*, JAN (2021) recommends employers ask questions that consider the individual employee's limitations and accommodations needs and contact JAN to discuss the situation in detail.

Contribution to the Practice

Employee substance abuse relapse has a significant impact on employers as it negatively affects the organization's productivity through absenteeism and turnover while substantially increasing healthcare expenses (Goplerud et al., 2017). Organizations can benefit from establishing a healthy and productive work environment (Hafee et al., 2019). The potential increase in productivity and profits encourages employers to help employees stay healthy (Haddon, 2018). Research has found that employees with a history of addiction and who are now in recovery cost significantly less healthcare than the general workforce ("National Safety Council," 2020). Employees in recovery also take off the fewest days per year, fewer than the general workforce ("National Safety Council," 2021). Leaders who practice 12 step-based principles can efficiently manage various responsibilities and improve

organizational performance (Friedman, 2016). Business leaders can use the information and results of this study to develop and promote effective ways to decrease employee substance abuse relapse rates and implement change that can immensely increase business viability.

Directions for Future Research

This phenomenological study explores effective strategies that can successfully reduce employee substance abuse relapse rates to increase productivity and reduce unnecessary costs associated with employee relapse. The researcher encourages future studies to include employees who are addicted to other behaviors outside of drugs and alcohol since these behaviors can negatively impact work. The inclusion of all addicts can provide a variety of perspectives leaders may use to understand the needs of an addicted employee, which can lead to more successful employee substance abuse relapse reduction strategies. The researcher will conduct this study in the United States, therefore, encourages international research. An in-depth study of the effectiveness of strategies used to reduce employee relapse rates from the employee's perspective can help develop future leadership strategies.

The researcher encourages futures studies by business organizations outside of substance abuse treatment facilities. For example, Sammer (2018) notates that Belden Inc., a St. Louis based company that develops signal transmission, established a system for job candidates that failed a drug test. If a candidate or current employee failed a drug test, they have the option to attend treatment; once complete, they can begin working in a limited role until the employers deem them ready to move onto a more prominent job role (Sammer, 2018). Different industries provide many viewpoints that can develop future strategies to lessen employee substance abuse relapse rates and ensure occupational effectiveness.

Qualitative data collection procedures involve engaging the participants to capture helpful information for this study (Creswell, 2017). This study will utilize interviews via web interfaces because of the current face-to-face restrictions that the COVID-19 Pandemic has

placed. The researcher recommends future research utilize face-to-face interviews as this may provide deeper rich data. By identifying and establishing strategies to reduce employee substance abuse relapse rates, leaders may increase productivity, profits, job satisfaction, job performance, work relationships and decrease employee relapse.

Chapter Summary

This chapter included an in-depth review of the literature commencing with a historical perspective of employee substance abuse relapse and factors contributing to the problem. The researcher thoroughly examined the effects and costs of employee relapse on employers in the contemporary perspectives section. Maslow's hierarchy of needs, Goleman's emotional intelligence theory, and emotional sobriety are expounded upon in the historical development of the theory subsection as a lens for this research study. This study's importance, implications for practice, and directions for future research conclude this section of this research. Chapter 3 is next and includes a detailed discussion on the methodology of the data collection.

Chapter 3: Research Method

This chapter addresses the research method, research design, the participants, population and sampling methodology, data collection, instrumentation choice, data analysis, human participants and ethics precautions, and contributions to organizational change. The research methodology selected for this study creates a system to satisfy each research question and collect relevant data that supports this study's intention. The first intention is to research and ascertain strategies leaders employ to understand their addicted employees' needs during a crisis. The second intention is to determine strategies leaders utilize to reduce substance abuse relapse rates and ensure business viability. The researcher adopts a qualitative phenomenological design to collect the necessary data to saturate this study.

Purpose Statement

The purpose of this qualitative study is to discover the successful strategies business leaders use to understand the needs of an addicted employee during a crisis, reduce employee substance abuse relapse rates and ensure business viability. The researcher will employ a phenomenological design to conduct the study. The phenomenological design focuses on subjective experiences and will involve qualitative data collection and analysis (Rodriguez & Smith, 2018). The researcher will focus on business leaders' lived experiences as this study aims to determine implementable strategies to prevent employees from relapsing, meet their needs during a crisis, and increase organizational performance and effectiveness. The researcher will interview business leaders in organizations located in the United States. The interview for the research will entail a summary of the purpose of the research and 11 open-ended interview questions. The researcher will create the interview questions to gather information regarding the leaders’ knowledge about strategies used to manage their employees who have a history of addiction effectively. The researcher will analyze the answers to the open-ended questions separately. The data collected will potentially describe

what the respondents feel they could do to reduce addicted employee relapse rates that place unnecessary costs on the workplace.

Research Method and Design

Research Method

Research methodology is a concept describing how an investigation must proceed and encompasses principles and procedures organized in such a way to approach the inquiry (Durdella, 2017). This study aims to unearth strategies leaders implement to reduce employee relapse rates and effectively manage addicted employees to ensure business viability. To achieve this investigation, the researcher uses a qualitative methodology in this study. Qualitative methodologies concentrate on the participants' perceptions and experiences to examine themes, patterns, and interpretations as a means to explain human behavior (Sutton & Austin, 2015). A qualitative methodology in this study provides the researcher a system to collect data from participants that share similar lived experiences and explore their perspectives to establish themes and patterns relevant to this study.

Research Design

Research design articulates how the research study is feasible (Durdella, 2017). The design selected for this study must act as vital measures in addressing research questions (Creswell, 2017). This study uses a phenomenological research design. Phenomenological study designs allow the researcher to examine the meaning of phenomena from the individuals who have experienced the phenomena (Frechette et al., 2020). This phenomenological study design aims to explore the lived experience of business leaders who have managed addicted employees who have relapsed and the strategies they used to reduce the phenomena of employee relapse rates. The phenomenological study will include participant interviews for the researcher to capture in-depth descriptions of leadership experiences of employee substance abuse relapse.

Appropriateness of Design

Creswell (2017) proposes research design methods that establish investigation in a study. A process of elimination procedure permitted the researcher to confirm an appropriate design compatible with this study. Quantitative methodologies test theories by assessing the relationship between variables (Rahman, 2016). The researcher rejected this methodology because this study is not pursuing to determine, verify, or authenticate relationships between any variables.

The following qualitative designs were deemed incompatible with this study and rejected by the researcher. Narrative research is a type of study that requires the researcher to investigate participants' lives and make sense of others' behavior (Wolgemuth & Agosto, 2019). The researcher rejected this design because this research does not intend to study the participants' lives. Grounded theory involves examining a process, action, or interaction that involves many individuals (Ray, 2018). The researcher rejected this theory because this study requires obtaining the perspectives of many individuals that have shared the experience of relapse. The researcher rejected ethnography because this study does not seek to interpret ethnic, cultural, or social groups from analyzing people in a natural setting (Gherardi, 2018). The researcher rejected case study design because the researcher will not study an event in a definable framework (Chowdhury et al., 2020). Thus, the researcher selected a qualitative phenomenological design for this study.

Qualitative research is most appropriate for this study to investigate strategies leaders utilize to decrease employee substance abuse relapse rates and understand the needs of addicted employees. In qualitative approaches, the researcher seeks to establish the implication of a phenomenon from the participants' perspective (Creswell, 2017). The phenomenon subject to this study is employee relapse. Qualitative methods explore and describe how participants interpret their experiences, what meaning they ascribe to their

experiences, and how to use those experiences to uncover effective strategies and practices (Edwards & Brannelly, 2017). In this study, the researcher will use interviews to document the experience of business leaders. The researcher will use the data obtained from the interviews to explore and uncover successful strategies that can decrease employee substance abuse relapse rates, understand their addicted employees' needs, and ensure organizational effectiveness.

Phenomenological research designs depict the essence of a phenomenon experienced by exploring it from participants' perspectives; therefore, it is a suitable choice for this study (Neubauer et al., 2019). A study that incorporates phenomenological research methodologies creates opportunities for people to learn from each other and broaden the understanding of complex behaviors involved in phenomena (Neubauer et al., 2019). Additionally, phenomenological research is committed to comprehending an individual's experience of a phenomenon in its entirety rather than selected portions of an experience (Rodriguez & Smith, 2018). This study's subject matter is both a behavioral and situational phenomenon; thus, a phenomenological methodology suits this study instead of quantitative research that involves natural scientific methods. Leaders can express a descriptive experience of phenomena through engagement with the researcher, for which the researcher may analyze the perspectives. A qualitative phenomenological research design is, therefore, the methodology suitable and equipped to conduct this study.

Procedure

Selected participants for this study are leaders with personal lived experience in managing addicted employees who have relapsed at least once. The researcher will contact and recruit potential participants who meet this study's qualifications via phone or e-mail. Once confirmed, the researcher will provide potential participants with a consent form indicating interest in conducting this research study. All participants in this study are to sign

the consent form. The researcher will interview the participants online using a web-based video-conferencing platform. The interviews will consist of 11 open-ended questions. The researcher constructed the open-ended questions to gather comprehensive leadership perspectives concerning employee substance abuse relapse and the needs of addicted employees. Based on the participants' responses during the interviews, the researcher may form and probe additional questions to collect further rich data. Data collection procedures will include responses from the interviews. The researcher will store the data in an electronic journal that the researcher only maintains and examine the data collected to develop emerging themes.

The Role of the Researcher

In qualitative research methods, the researcher seeks to discover and understand the meaning behind a human experience or individuals belonging to a particular sect experiencing a human or social problem (Creswell, 2017). In this study, the researcher serves as the primary data collection instrument. The researcher is in recovery and has personal experience of being an addicted employee who has relapsed. In the limitations section of Chapter 1 in this study, the researcher outlined every effort to reduce bias and maintain objectivity when interpreting the data collected. The researcher's role in this qualitative phenomenological study includes probing questions to gain in-depth insights into the participants' lived experience, collecting answers to saturate the data, and protecting the participants' privacy by adhering to the ethics of data collection and consent form signed by the participants. The researcher will analyze and interpret the data collected to form a perspective that pinpoints personal meaning and the importance of informing the situation's complexity (Baksh, 2019). The researcher in this study aims to understand strategies business leaders employ to monitor and support addicted employees effectively while ensuring business viability by reducing employee substance abuse relapse rates.

Research Questions

The research questions that guide this study are:

Research Question 1: What strategies do leaders use to reduce employee substance abuse relapse rates to ensure business viability?

Research Question 2: What strategies do leaders use to understand their addicted employees' needs during a crisis?

Population and Sample

Population

A population refers to a group with a set of defined characteristics in which the researcher requires the discovery of information (Creswell, 2017). In phenomenological research, the researcher can use criterion sampling in which participants meet predefined criteria (Moser & Korstjens, 2017). The researcher applied specific criteria in the selection process of the population in this research study. This study's population involves employees in a leadership role, from lower-level leaders to upper-level leaders, who have managed an addicted employee who has relapsed at least once under their supervision. No demographic factors, such as age, race, ethnicity, gender, marital status, income, and education, are considered in the selection process to reduce any possibility of bias.

Sample

A sample is representative of a wholly defined population (Creswell, 2017). In qualitative research, the most commonly applied principle for choosing sample size is saturation (Vasileiou et al., 2018). Saturation occurs when the data collected no longer sparks new insight or themes in a study (Saunders et al., 2017). Researchers suggest that a sample size of 3–10 participants will saturate the data (Moser & Korstjens, 2017). The researcher will attempt to saturate the data with a sample size of eight participants. If the researcher can saturate the data with less than eight participants or if more than eight participants are needed

to saturate the data, the researcher will adjust the sample size accordingly. The researcher will implement a purposive snowball sampling, wherein participants make recommendations of other potential participants, as a technique in this study to meet the required sample size for research (Etikan & Bala, 2017). The researcher will ask participants in this study to recommend leaders they know who meet the selection criteria. This study adheres to ethical precautions to protect the anonymity and confidentiality of participants and prevent any potential harm.

Geographic or Virtual Location

This study will take place virtually via Microsoft Teams©, a web-based videoconferencing platform. The researcher will conduct this study from a home office computer located in Brighton, CO. Study participants will meet the following criteria: an employee in a leadership role who has managed or supervised an addicted employee who has relapsed at least once under their supervision. The researcher will obtain eight leaders based on participation criteria.

Instrumentation

Instrumentation is the process of appropriately comprising tools and methods used to obtain data in a study (Creswell, 2017). The researcher serves as the primary data collection instrument in this study because a qualitative researcher has access to the participants and is the principal instrument to collect and analyze data (Clark & Vealé, 2018). Interviews represent another data collection instrument in this investigation. In qualitative research, interviews are the most common method utilized for data collection because they permit the researcher the opportunity to collect actual and meaningful data (McGrath, Palmgren, & Liljedahl, 2018). The researcher will conduct individual interviews using Microsoft Teams© videoconferencing. Microsoft Teams© offers a platform to conduct internet-based videoconferencing. The business plan provided by Microsoft Teams© allows the ability to

transcribe recordings into verbatim text. The transcription ability is necessary for this study's validity. The interviews are approximately 60 minutes in length to allow enough time for the participants to provide substantial perspectives on their lived experiences for this phenomenological study. The researcher will analyze the data collected from the participant's answers to generate themes and interpretations of their workplace experience in managing addicted employees.

All participants will sign a consent form and have an opportunity to share any artifacts they believe will be meaningful to this study. In qualitative research studies, artifacts could include public records, documents, and physical materials made available by the participants to the researcher for analysis (Mohajan, 2017). The researcher will accept artifacts relevant to this study and retain the artifacts in the researcher's journal for analysis. Furthermore, the researcher will return any artifacts to the participants upon the participants' request.

Data Collection

Upon receipt of the IRB approval number 41621-0001, the data collection process commenced. The researcher's data collection method is essential in qualitative research because it determines how the information is collected and the explanations it can generate (Paradis et al., 2016). Interviews are a method for data collection in which the researcher gathers information 1-on-1 with the participant, using predetermined questions both recorded and transcribed (Creswell, 2017). After receiving IRB approval from California Intercontinental University, the researcher will obtain a signed consent form from each participant to proceed with data collection. The researcher will interview participants in this study, asking them 11 open-ended questions using Microsoft Teams©, a web-based videoconferencing platform. Depending on the answers provided by the respondents, the researcher may ask follow-up questions to probe additional insight.

In data collection, fidelity ascertains the level to which a procedure is delivered as intended (Haynes et al., 2015). The researcher ensures fidelity in this study through semi-structured interviews approximately 60 minutes in length with 11 open-ended questions. Data collection procedures include recording and transcription of interviews through Microsoft Teams©. If the researcher collects any artifacts during the interview process, the researcher will collect the artifact via mail or e-mail, and the researcher will retain the artifacts in the researcher's journal. NVivo® is a software that offers the researcher the opportunity to import the interview videos and transcriptions recorded through Microsoft Teams©. After completing the interview, the researcher will promptly import the video recording of the interviews and corresponding transcripts into NVivo®.

Data Analysis

In qualitative studies, the researcher sees the world from the participants' perspective; therefore, the most critical part is for the analysis to be true to the participants (Sutton & Austin, 2015). According to Creswell (2017), data analysis must co-occur with data collection, in which the researcher seeks to interpret patterns and themes from the information collected through a coding process. The researcher will organize the data categorically during data analysis while continuously reviewing and coding the information collected (Hays, 2021). This qualitative study will permit the researcher to collect answers to 11 open-ended interview questions related to leaders' in-depth employee relapse experiences through video recording and transcription.

The researcher will utilize a coding process to identify topics, patterns, and themes discovered through the participants' interviews and interpreted by the researcher (Queiros, 2017). The researcher will service NVivo® to analyze the data collected for patterns and themes. NVivo® permits the researcher to code the source data and parts of the source data into meaningful identities, organize the codes, and query text searches across all data.

Human Participants and Ethics Precautions

Qualitative studies involve the researcher and participants' interaction and require the researcher to adhere to human participants' ethical precautions (Reid et al., 2018). California Intercontinental University requires researchers to obtain certification before conducting interviews with participants. The researcher received accreditation from the Collaborative Institutional Training Initiative on February 05, 2021, which provides training to researchers in human research ethics and compliance. In this study, the researcher will respect and protect the participants' rights and guard against misconduct (Creswell, 2017). The participants in this study are leaders who have managed addicted employees.

Ethical precautions and guidelines are vital in research to protect the participants' rights (Cypress, 2018). The researcher will send all participants an informed consent form via e-mail. The consent form will include a description of the study, the purpose of the study, an outline of the study's procedure, data collection activities such as recording and transcription, risks and benefits of the study, and methods to retain confidentiality. The researcher will require each participant to provide a written signature on the consent form and e-mail the signed consent form back to the researcher to proceed to an interview. The researcher will provide all participants with the proper e-mail address and phone number for any questions or concerns. The researcher will make any transcriptions and artifacts available to the participants upon request. The data collected from the interview will remain anonymous with no identifying marks, such as name, e-mail address, or other identifiers related to the participants. The participants will use an alias for the interview, and the researcher will store the data using the alias to ensure privacy and confidentiality during this study.

Validity and Reliability

Validity and reliability are associated with the credibility of qualitative research (Rahman, 2016). The researcher’s goal for the study’s validity is to remain neutral and

accurately articulate the participants' experiences and perspectives (Noble & Smith, 2015). Creswell (2017) offers the following strategies the researcher will employ to ensure validity and trustworthiness: (a) triangulation of data, in which the researcher will collect data through interviews, observation, notes, and peer-reviewed journals to gather a comprehensive view of the phenomenon; (b) member checking, in which the researcher will supply the participants will specific themes found and confirm accuracy; (c) detailed, thick descriptions, in which the researcher will offer many perspectives about themes found; (d) clarify bias, in which the researcher provides an honest narrative of any personal connection to the research; (e) present discrepant information, in which the researcher will discuss contrary perspectives identified; (f) peer examination, in which a California Intercontinental Dissertation Chair will serve as an external auditor for this research. The researcher will also obtain trustworthiness by engaging directly and interpersonally with the participants through recorded interviews.

Reliability refers to the trustworthiness of the methods employed by the researcher, wherein the processes are transparent and allow replication to arrive at similar findings (Reynolds & Lee, 2018). A qualitative research study must be credible to depict the data's truth, participants' perspectives, and the researcher’s interpretations and representations of the data (Cypress, 2017). Cypress (2017) and Creswell (2017) suggest that researchers maintain an audit trail, wherein the researcher collects materials and notes used in the research and documents as many steps of the procedure as possible to increase credibility and reliability in research. In this study, the researcher will collect transcripts and provide a detailed report of the steps and coding methods used to analyze and interpret the data collected. In the coding process, the researcher will ensure the codes' meanings remain consistent to avoid any drifts or changes in the codes' meaning. The researcher plans to avoid code drifts through constant comparison of the data and codes used.

Contribution to Social, Practice, or Organizational Change

This study's contribution to social, practice, or organizational change relies on addressing employee substance abuse relapse, which leads to absenteeism, turnover, decreased productivity, and increased healthcare costs. Employee substance abuse relapse has a significant impact on employers as it negatively affects the organization's productivity through absenteeism and turnover while substantially increasing healthcare expenses (Goplerud et al., 2017). Organizations can benefit from establishing a healthy and productive work environment (Hafee et al., 2019). When employees are healthy, organizations experience increased productivity and profits (Haddon, 2018). Research has found that companies increase organizational performance and decrease unnecessary expenses by employing individuals with a history of addiction and are now in recovery ("National Safety Council," 2020). Exercising 12 step-based principles to guide organizational leadership increases organizational effectiveness and performance (Friedman, 2016). The information and results contained in this study can support business leaders in cultivating effective systems that reduce employee relapse rates and increase business performance.

Chapter Summary

This chapter aims to develop and establish a design and methodology to utilize in this research study. The purpose of this qualitative study is to uncover successful strategies leaders employ to reduce employee relapse rates, understand the needs of addicted employees during a crisis, and ensure operational efficiency. This chapter also justified the research design and methodology by providing the data collection and analysis process. The next chapter will show the results found in this study, including a data analysis presentation. Chapter 4 includes a general description of the participants, research questions, sample size, data collection, unit of analysis and measurement, data analysis, coding and codebook generation, qualitative findings, group differences, outliers, validity and reliability, and summary.

Chapter 4: Results

The purpose of this phenomenological qualitative study is to discover strategies leaders use to reduce employee substance abuse relapse rates and understand the needs of addicted employees during a crisis to ensure business viability. This chapter reports the findings from the research conducted in this study. Chapter 4 comprises of the following sections: (a) a general description of the participants; (b) research questions; (c) sample size; (d) data collection; (e) unit of analysis and measurement; (f) data analysis; (g) coding and codebook generation; (h) presentation of qualitative results; (i) validity and reliability of findings. The information and results in this study can help leaders adopt successful methods to decrease employee relapse rates and execute change that can sustain business operations.

General Description of the Participants

Demographic data in qualitative research portray a study's population in narrative or table format (Maxwell, 2020). This study includes a total of 10 participants. Table A2 presents a summary of the demographic data for the participants engaged in this study.

Table A2

Interview Participant Demographics

Name of Position	Year(s) in Position	Name of Industry	Geographic Location
Senior Property Manager	14	HOA Property Management	Colorado
Executive Director	4	Human Services	Colorado
Sole Proprietor/Owner	33	Healthcare	Colorado
CEO and President	33	Wellness Medical Spa	Colorado
COO and Vice President	5	Staffing and Recruiting	Kansas
CEO and President	16	Staffing and Recruiting	Kansas
Operations Manager	1	Substance Abuse Treatment Services	Colorado

Director of Healthcare Services	11	Healthcare Consulting	California
IT Senior Network Engineer	7	Information Technology	Colorado
Executive Director	5	Non-Profit Organization	Colorado

Note. CEO = Chief Executive Officer; COO = Chief Operating Officer; HOA = Homeowner's Association

C-level executives represent 30%, directors represent 30%, managers and senior managers represent 30%, and sole proprietor/owners represent 10% of participants interviewed from diverse industries. All participants reside within the United States, seven in Colorado, two in Kansas, and one in California. The median leadership experience is 12.9 years, with 50% holding their leadership position for over a decade.

A study presents demographic data or identifiers associated with participants as group data to no compromise the privacy and confidentiality of respondents (Sumiak, 2018). According to the 12th tradition of 12 step recovery programs, "anonymity is the spiritual foundation of all our traditions, ever reminding us to place principals before personalities" (Alcoholics Anonymous, 2014, p. 184). Seventy percent of leaders who participated in this study have personal lived experience with addiction, are in recovery and averaged 11 years of leadership experience. Thirty percent of study participants reported no history of addiction and averaged 18 years of leadership experience. This study's 10 participants' pseudonyms are Participant 1 – 10. Each participant's pseudonyms replaced their real name to preserve the confidentiality of personal information, and the researcher did not link the pseudonyms to their respective demographics in this study. In addition, the researcher presented the pseudonyms and recovery information for each participant as group data to respect the 12th tradition of 12 step recovery programs. Finally, the researcher did not collect additional

demographics to protect the anonymity and privacy of participants engaged in this study and eliminate any potential bias.

Research Questions

Intrinsically, the research questions that guide this study was:

Research Question 1: What strategies do leaders use to reduce employee substance abuse relapse rates to ensure business viability?

Research Question 2: What strategies do leaders use to understand their addicted employees' needs during a crisis?

Sample Size

The sample size is directly related to the concept of saturation in qualitative research (Taherdoost, 2017). The researcher achieved saturation with 10 participant interviews in this study.

Recruitment and Selection

Recruitment strategies intend to acquire individuals who qualify a research study's criterion (Roulston, 2017). The population for this study includes business leaders located in the United States who met the following requirement: (1) you are an employee in a leadership role, (2) who has managed or supervised an addicted employee; (3) and that addicted employee has relapsed at least once under your supervision. The researcher did not apply any additional criteria in the recruitment selection process to circumvent potential bias. The researcher contacted business leaders via phone and e-mail with the participation criterion, study purpose, and scope to solicit potential participants.

The researcher's rolodex of professional network contacts was the first resource in the selection process. A purposive snowball sampling strategy, where participants recommended other potential participants who meet the selection criteria, navigated the researcher to additional participants selected in this study (Etikan & Bala, 2017). The researcher e-mailed

an invitation letter (Appendix B) to request participation in this study and enclosed the researcher's contact information for any questions or concerns that may arise before the scheduled interview. In addition, the researcher attached an informed consent form (Appendix C) to the invitation e-mail. The consent form encompassed this study's description and purpose, procedure outlines, recording, transcription, and other data collection activities, the risks and benefits of participation, and an overview of the confidentiality retention process. All participants in this study signed, dated, and e-mailed the signed consent form back to the researcher to proceed to an interview.

Sample Size Determination

The sample size represents a population from which the researcher will collect data and draw conclusions (Creswell, 2017). The research sample appropriately represents the researcher population: employees in a leadership role who has managed an addicted employee, and that employee has relapsed at least once under their supervision. Out of the 22 potential participants, the researcher obtained a sample size of 10 participants, representing a diverse population of leaders, professional experiences, and industries. Continuous repetition of themes and patterns occurred in the data after 10 interviews, thereby achieving saturation and determining the sample size.

Data Collection

The researcher practiced triangulation of data by collecting data through interviews, observation, and notes to gather a comprehensive view of the phenomenon (Flick, 2018). Data collection procedures involved compiling transcriptions from qualitative interviews, and the researcher served as the primary data collection instrument in this study.

Semi-structured Interviews

Semi-structured qualitative interviews are the principal method for data collection selected in this study and utilize open-ended questions to elicit detailed, rich data containing

perspectives from participants (Barrett & Twycross, 2018). The researcher advised participants that this study's data collection includes recording and transcription of interviews. After participants signed the consent form, face-to-face interviews commenced using Microsoft Teams©, a web-based videoconferencing platform. The researcher provided the participants a copy of the 11 open-ended interview questions to help the participants better understand the questions in the interview. According to Creswell (2017), the researcher develops interview protocols as a guide for asking questions and recording notes during interviews. In this study, the researcher developed and utilized interview protocols (Appendix D) as a pre-written dialogue for each interview to ensure flow, precision, and quality. The interview protocols incorporated an opening script, the interview questions, and probable follow-up questions. Based on the availability of participant schedules, the interviews lasted six weeks long and were approximately 60 minutes in length.

Transcription

The practice of transcription is fundamental to qualitative research and involves collecting a verbatim written account of words spoken in interviews (Moore & Llompart, 2017). The researcher transcribed each interview using Microsoft Teams©. The data collected from the interviews remained anonymous with no identifying marks, such as name, e-mail address, or other identifiers related to the participants. The researcher downloaded the transcriptions from Microsoft Teams© as a VTT file, converted them into a Microsoft Word© document, and uploaded the transcripts to NVivo®. Furthermore, data collection included critical points journaled by the researcher and follow-up answers and clarification participants provided post-interview. The researcher transcribed all additional data in NVivo® with annotations to notate the date, time, and delivery method. All collected data securely remain on a password-protected USB flash drive with a password-protected backup file on the researcher's personal computer. Only the researcher has access to and maintains

the data collected from the participants, including recordings, transcriptions, and informed consent forms, to ensure privacy and confidentiality during this study.

Saturation

Saturation concludes the data collection process in qualitative research (Vasileiou et al., 2018). After importing the data into NVivo®, the data analysis process initiated. Data collection and analysis transpired simultaneously; wherefore, the researcher monitored saturation throughout the entire process. After the ninth interview, the researcher recognized a redundancy of themes and concluded that data collection achieved saturation (Kiger & Varpio, 2020). For verification, the researcher resumed data collection for one more interview to confirm thematic redundancy and identified no new themes. While the principal saturation threshold occurred after the ninth interview, the researcher included all 10 participants in the study sample.

Unit of Analysis and Measurement

Unit of analysis is the entity that the researcher will analyze in a study (Creswell, 2017). In qualitative research, individuals are among the most common units of analysis (Kiger & Varpio, 2020). The researcher selected business leaders as the unit of analysis in this study, located within the United States. The selection of business leaders involved the following criteria: an employee in a leadership role who has managed or supervised an addicted employee who has relapsed at least once under their supervision.

Data Analysis

Qualitative data analysis procedures specify the researcher's steps to interpret and uncover themes and patterns from the information collected (Sutton & Austin, 2015). The purpose of this study is to explore strategies leaders practice to discern the needs of addicted employees during a crisis and decrease substance abuse relapse rates to ensure business viability. The researcher compiled peer-reviewed journals, publications, and websites to

synthesize a comprehensive academic literature review through data triangulation (Fick, 2018). Organized by themes, the researcher analyzed the academic literature to confirm the findings uncovered during data analysis, thus increasing the validity and credibility of this study.

Data analysis co-occurred with data collection, in which the researcher continuously reviewed and coded the information collected while monitoring saturation. Participants' responses to the 11 open-ended interview questions produced 250 pages of raw transcribed data. Post-interview follow-up answers and clarification provided additional rich, in-depth data the researcher transcribed and included for analysis. After compiling the information, the researcher utilized NVivo® as a housing database to assist in coding, pattern-matching, and thematic grouping. The researcher examined each transcript line by line in NVivo® while the audio recording of the transcript played. Throughout the review, the researcher disassembled the data by identifying portions of the transcript representing strategies applied by the respondents to extract codes. The researcher observed patterns in the data and carefully proceeded with reassembly by assigning descriptive code labels and reviewing the developed codes for emerging themes and patterners. The researcher continuously engaged in the data analysis process while categorically arranging the generated codes to represent strategies leaders use to reduce employee substance abuse relapse rates and understand an addicted employee's needs during a crisis. Interpretation of the data uncovered four themes and four subthemes in this study. The researcher provides an overview of the codebook and coding process in the following subsection of this study.

Coding and Codebook Generation

Codes are descriptive labels assigned to data or portions of data that best represent the information and are classified by similar meaning to reveal and support themes and patterns in qualitative research (Lester et al., 2020). The researcher utilized the software NVivo® for

the coding and code categorization process. The answers respondents supplied to the 11 open-ended questions and follow-up questions provided in-depth information as raw data that contributed to the development of codes. During data analysis, the researcher reviewed the raw data and searched for strategies expressed by the participants. Open coding was employed by breaking down the information into identifiable portions and assigning the most descriptive codes to those portions (Creswell, 2017). The researcher simultaneously applied a hand-coding technique by manually going through each transcription line by line and used annotations as thematic references that helped the researcher organize the developed codes (Schreier, 2020).

After the first round of coding, axial coding was employed by uncovering relationships between the codes developed and organizing them into groups capturing the strategies described by the participants (Abd Gani, 2020). In the coding process, the researcher discovered that several of the developed codes held similar meanings. For confirmation, the researcher developed a codebook using Microsoft Excel© and produced definitions to represent statements made by the participants accurately. After performing a thorough review of code definitions, the researcher consolidated codes by merging the similar meaning codes into a single code. The researcher's use of code consolidation decreased the total number of codes to 37. Appendix E of this study includes a copy of the finalized consolidated codebook. The researcher presents this study's themes and patterns found in the following subsection.

Presentation of Qualitative Results

Theme development is at the core of qualitative data analysis and is one of the most vital tasks in this research study (Kiger & Varpio, 2020). A theme unites and organizes repeating ideas under a centralized concept (Creswell, 2017). Theme composition may contain subdivisions, known as subthemes, that share the same central idea yet focuses on

one specific element of the theme (Vaismoradi et al., 2016). Explanation of a subtheme's connection to the core theme stabilizes the presentation of findings (Kiger & Varpio, 2020). In this study, the researcher's creativity is fundamental in presenting the qualitative results as a narrative (Creswell, 2017). The researcher presents the themes and subthemes uncovered through data analysis in this subsection and supports them with evidential quotes from the participants engaged in this study.

Themes Discovered

This qualitative phenomenological study integrates 10 interviews, which led the researcher to uncover four themes and four subthemes by analyzing the respondents' answers. Participants described their lived experiences as leaders who have supervised employees who have relapsed from substance abuse and the strategies applied to decrease employee relapse rates, recognize what an addicted employee needs during a crisis, and ensure organizational viability. Table A3 catalogs the themes and subthemes identified by the researcher in this study.

Table A3

Catalog of Themes and Subthemes

Theme Number	Theme/Subtheme	Descriptive Title
1	Theme	Meeting Employees Where They Are
1(a)	Subtheme	→ Constructive Confrontation
1(b)	Subtheme	→ Recognizing Relapse Warning Signs
2	Theme	Building Personal Connection Through Vulnerability
2(a)	Subtheme	→ Leading by Example
3	Theme	Diversity and Inclusion
3(a)	Subtheme	→ Providing Equitable Benefits

4	Theme	Strategy Formed Through Education and Practical Experience

Direct quotations from participants support the researcher's interpretations, deepen the understanding of a study, and serves as evidence in the accuracy of its findings (Eldh et al., 2020). The researcher supported the emerging themes and subthemes with direct quotes from the participants, thereby enrolling their voice in the narrative presented.

Theme 1: Meeting Employees Where They Are

The first theme revealed through coded data is meeting employees where they are to understand individual needs, decrease relapse rates, and increase organizational effectiveness. Study participants' responses incorporate the codes: (a) individualized consideration, (b) action based on willingness, (c) balancing needs, (d) dealing with triggers, (e) establishing boundaries.

All 10 participants indicated that meeting employees where they are is heavily rooted in individualized consideration. Participants preclude assumption-making and proceed with direct inquiry to addicted employees, asking what their needs are. Individualized consideration refers to leaders who carefully listen to and address employees' individualized personal needs (Ayub et al., 2019). Participant 9 stated, "Not the same thing works for everybody. There is no cookie-cutter formula" (Personal Communication, May 27, 2021). Participant 7 agrees and mentioned that "it's about recognizing that this is another human being who has their own needs. I have a conversation with them and ask how I can support them" (Personal Communication, May 8, 2021). Participants stated that through open dialogue, they learned each individual conceptualizes crisis and triggers differently. Employees who conveyed their triggers and perception of crisis to employers found leaders were willing to meet them where they were and coach them through. When leaders address employees' needs and satisfy them, it results in better performance and commitment to the organizational goals (Moss, 2020). Participants who individualized their supportive

approaches recognized individual needs, decreased employee relapse rates, and increased organizational effectiveness.

Ninety percent of participants cited their actions and methods of support center on how willing the employee is to stay sober. Participants stated their support is of no value if the addicted employee is not ready or willing to receive it. Participant 9 said:

> If they are willing, the door is always open. That means help finding a treatment facility, listening, providing guidance, and communicating my experience. So, if they're willing, my policy would be a lot of support and a lot of assistance. If they can't accept the help that's currently there for them, my experience is they're not ready to be helped, and the business at that point has to be the priority (Personal Communication, May 8, 2021).

An employee's most critical needs and motivation levels depend on their past and circumstances (Maslow, 1943). Participants expressed that some employees were new to recovery while others had years of sobriety; therefore, an awareness regarding what stage of addiction or recovery the employee is in determines the support needed to motivate improved performance and their willingness to stay sober. Participant 9 added that "For some people, it is hospitalization or treatment programs. For others, it is allowing them extra time for meetings or counseling" (Personal Communication, May 8, 2021). Identifying how willing the addicted employee is to pursuing relapse prevention and improving performance distinguishes the appropriate leadership approach and the employee's success in the workplace.

Participants believe that meeting employees where they are requires establishing boundaries and balancing company and employee needs. According to participants, it is essential to meet the needs of their employees and the organization to sustain operational practicality. Participant 2 indicated that "we try to, in crisis and important needs type

situations, find compromises (Personal Communication, April 26, 2021). To achieve this, participants mentioned that knowing their limits in providing support is critical in establishing boundaries. According to Participant 8, "taking a professional HR approach keeps the business focused on business and treatment providers focused on treatment. The employee gets to focus on recovery and return to work in good health (Personal Communication, May 13, 2021). A balance of needs ensures the employee can get the support required to improve while the organization remains functional and profitable.

Subtheme 1(a): Constructive Confrontation

The subtheme, constructive confrontation, formed as a strategy participants utilize in meeting addicted employees where they are because it requires individualized consideration based on circumstances. Constructive confrontation decreases relapse rates and increases organizational performance. Study participants' answers encompass the codes: (a) confronting, (b) radical candor, (c) clear expectations, (d) accountability with grace, (e) not enabling.

Seven out of 10 participants indicated that constructive confrontation is a successful strategy for helping their employees prevent relapse and be productive at work. Constructive confrontation is a concept applied by leaders to address poor work performance, mentor on ways to improve, motivate addicted employees to resolve their problems, advise the use of employee assistance programs, and explicate the consequences of continued poor performance (Sonnenstuhl & Trice, 2019). Study participants mentioned that one of the focused methods they employ within constructive confrontation is honest and direct feedback through radical candor. Scott (2019) argues that radical candor requires excellent listening skills; when employees trust and believe that leaders care about them, they are more likely to receive criticism and focus on getting results. Participant 3 confirms that "when expectations are clear and there's good communication, they are more willing to ask pertinent questions or

get more guidance when needed" (Personal Communication, April 28, 2021). Participant 5 and 6 experienced success with radical candor and clear expectations with an addicted employee in that "we told her that going to a treatment facility was the only way she could keep her job. So, she did go and did really well" (Personal Communication, May 5, 2021). Communication delivered in a caring, honest, and direct manner resulted in positive changes for addicted employees and increased productivity for the organization.

Enablement is a component that can permit ongoing poor performance and lead to substance abuse relapse if not addressed. Participants cited that supporting an employee's recovery means holding the individual accountable, allowing them opportunities to progress their performance, and eliminating enablement. When employees relapse from substance abuse and are not held accountable, participants experienced excessive absenteeism with an inability to meet job demands. For Participant 10, allowing addicted employees to make progress means to "co-create solid next steps and expectations. They still have a job and work to do, but let's actually identify what can get done together" (Personal Communication, May 28, 2021). According to Participant 6, " when consequences are in place, he followed them and later said *'I needed that.'* That's when we really learned that [addicted employees] need to have that kind of structure and accountability" (Personal Communication, May 5, 2021). Participants stated that constantly saving employees from consequences as a strategy to address substance abuse relapse may seem helpful; however, they enable and are hurtful to an employee's recovery. Participant 5 cited:

> We sometimes save them from the consequences, which would be a very abrupt and clear teacher. A leader who does not enable is not making excuses for the person who's making mistakes, is willing to have radical candor, is willing to hold people to the standards, and has to really guard against being naïve or gullible or emotionally biased (Personal Communication, May 3, 2021).

Participant 6 affirms that "if I kept her from hitting rock bottom every time, she wasn't going to do what she needed to do to change" (Personal Communication, May 5, 2021). Thus, depending on the individual's history and circumstances, leaders exert consequences to improve employee performance and organizational effectiveness.

Subtheme 1(b): Recognizing Relapse Warning Signs

Participants cited that recognizing relapse warning signs is a vital strategy in relapse prevention and occurs through individualized consideration. The developed codes uncovered that participants prevent relapse, decrease productivity, and avoid unnecessary related costs through checking-in, listening, and observation.

When employees are actively relapsing, the cost for employers significantly increases through decreased productivity and increased healthcare expenses. The U.S. Substance Abuse and Mental Health Services Administration (n.d.) suggest leaders become familiar with red flags for successful substance abuse relapse prevention and intervention. By recognizing employee individuality, participants become aware of noticeable signs that tell them an addicted employee is heading for a relapse. Participant 2 experienced two employee substance abuse relapses and relayed:

> You need to have very good observation skills, because individuals are not always willing to talk about something personal that's going on. However, you can tell by certain nonverbal cues such as facial expressions, body language, posture, and the way they carry themselves, that they may not be giving you the whole story. You need to be able to spot that, and say *"Hey. I feel like you may not be telling me everything, and that's ok. I want you to know that when you are ready to, I'm available"* (Personal Communication, April 26, 2021).

Participants stated that engaging with their employees through compassion fatigue check-ins are essential in preventing burnout, substance abuse relapse, and turnover. According to Participant 7:

> When the conversations are much more based in gratitude and solution, the [addicted employee] is in a very good mental space. When the conversations are much more rounded, like a complaining and victimizing mentality, I know that they're going down the wrong path (Personal Communication, May 8, 2021).

Familiarity with and observing individual employee behavior helped participants identify red flags they could address, prevent substance abuse relapse, and avoid unnecessary costs associated.

Theme 2: Building Personal Connection Through Vulnerability

Building personal connection through vulnerability is the second theme revealed through coded data that reduces relapse rates, increases teamwork and organizational performance. Study participants' feedback includes the codes: (a) encouraging honesty and vulnerability, (b) minimizing fear, (c) extending empathy, (d) active listening, (e) personal and meaningful relationships, (f) sharing relatable experiences.

Seven out of 10 participants believe that honest and vulnerable conversations between leaders and addicted employees are crucial because they lead to better relationships, organizational commitment, and decreased employee substance abuse relapse rates. According to Participant 5, "the alternative to addiction is intimacy. When people have meaningful relationships and communication, they get that sense of being alive; the very thing they're looking for in substance abuse (Personal Communication, May 3, 2021). Participants specified that it is their responsibility to establish a safe environment where addicted employees feel safe and comfortable enough to share any issues that may be present and not need to resort to substance abuse relapse. According to Participant 8, "it's deeply

important to us that everybody coming to work feels safe, nurtured, and not in any fear because fear is at the root of so many of reasons why people would relapse (Personal Communication, May 13, 2021). Participant 2 agrees and added that "what we try to do is provide a safe environment for them to be able to share their feelings without fear of repercussion, losing their job, losing status amongst the employees or a drop in value in that individual's contributions (Personal Communication, April 26, 2021). In the form of addicted employees trusting leaders with their thoughts and feelings, communication is effective and essential in relapse prevention. Employees who honestly communicated their problems to leaders were successful at pursuing assistance and improving performance.

Participants indicated that actively listening to and empathizing with addicted employees builds trust, connection and results in practical leadership guidance. Leaders who empathize and lead from their hearts operate 40% higher in mentoring, engagement, and decision-making (Goleman, 2020). Participants 2's experience is that "I have to be an active listener, and while I may not be able to sympathize because I haven't had the exact experience, I need to be able to empathize with what that person is going through (Personal Communication, April 26, 2021). Participant 3 builds trust and connection with empathy by being "emotionally supportive, non-judgmental about what's going on in their life for them, and just being compassionate and supportive of their overall health and well-being." Through empathy and aiding with information, support from leaders plays a principal role in interpersonal relationships because it helps employees reach the demands of the job (Turner & Allen, 2018). In addition, participants reported a higher ability to provide better guidance when employees feel like their leaders understand.

Five out of 10 participants share a common belief that connection and personal relationships form when they relate to what their addicted employees are going through. Interpersonal relationships between employees and supervisors exist because employees need

to relate and connect with their leaders, are a source of mental well-being at work, and determine turnover, motivation, productivity, engagement, and support from leaders (Turner & Allen, 2018). Participant 4 mentioned:

> I'll share with people about my struggles as a single [parent]. By sharing my story, I show that I'm not above them. I show them that I'm there and I understand struggles in life. That's how we help each other. By sharing my story, they know that "*Ok, she understands, she's been there, she's walked in our shoes"* (Personal Communication, April 30, 2021).

When participants discover ways to relate with addicted employees by sharing similar experiences and struggles, it opens the door to understanding needs and motivation to improve. Building connections and providing guidance helps motivate the employee away from substance abuse relapse, desire to perform better and increase organizational productivity.

Subtheme 2(a): Leading by Example

Several participants quoted that to build connections with their employees and encourage vulnerability, they must set the example they want their employees to follow. Participants reported that emotional intelligence and core values guide their influential leadership examples. The codes discovered through the participants' feedback are: (a) modeled behavior, (b) guiding principles, (c) emotional intelligence.

Five out of 10 participants mentioned that when they model the behavior they want to see exhibited, their addicted employees are more apt to be vulnerable, resulting in increased productivity and organizational effectiveness. Being a role model includes the participants' ability to manage their emotions, attitudes, and behavior through emotional intelligence. Emotional intelligence is a system to measure a leader's capability to implement effective strategies, and leaders use this emotional intelligence to lead by example and motivate and

influence employee behavior (Downing, 2016; Goleman, 2020). For Participant 1, “the leaders are going to create the example of an effective work environment, and everyone is going to need to follow that example (Personal Communication, April 21, 2021). Participant 7 mentioned that “by being vulnerable and honest with my team, I’m showing that I'm human. I'm showing them that I don't expect perfection. I expect them to be human and allow me and their coworkers to come in and help (Personal Communication, May 8, 2021). Participant 7 provided a specific example of when employees noticed their leader’s willingness to sacrifice personal time to cover shifts and go above and beyond the job description. Thereafter, addicted employees witnessed this and became more inclined to go above and beyond their job description. Participants shared that addicted employees began to simulate their leaders' attitudes and behaviors, and this led to increasing their performance capacity, dedication to the job, and retention rates.

Fifty percent of participants cited that because they influence employees in the workplace, a reliance on principles and core values to guide workplace employee behavior is necessary. Leaders who embody values in their approaches and decisions inspire and motivate employees to support their organization’s vision (Souba & Souba, 2018). Participants specifically cited the use of 12 step principles as a model they follow. According to Participant 2:

> I just brought the 12 step principles into the work environment, and it worked. Each of the 12 steps and traditions has associated principles intended to make the individual or me a better human being above and beyond, keeping them from drug and alcohol use. I never told the employees I would do this. I just did it. As I embodied them, it started to improve the employees, and I would recognize it. It is something that I, as the ultimate leader, model in my behavior with the director-level staff. (Personal Communication, April 26, 2021).

Participant 7 implements the same strategy as Participant 2 and quoted that "my leadership style is heavily based out of the 12 traditions and the 12 concepts (Personal Communication, May 8, 2021). Through the embodiment of core values, participants influence the organization's vision and motivate employees away from substance abuse relapse. Participants who emulate principles to guide their leadership decisions and styles directly and positively influence employee attitudes and behaviors while increasing performance and decreasing turnover.

Theme 3: Diversity and Inclusion

Diversity and inclusion is the third theme discovered that reduces relapse rates, increases engagement, and improves organizational effectiveness. Data analysis of participant interviews developed the codes: (a) inclusion, (b) recruiting and preferences, (c) non-discrimination, (d) positive reinforcement, (e) set up for success.

All 10 participants in this study recognize the importance of inclusive leadership practices by incorporating a diverse and inclusive work environment where addicted employees feel accepted, supported, and valued. Diversity is a critical factor in workplace inclusion because leaders who value employees regardless of their differences increase employee engagement, which leads to increased loyalty, performance, profits, and retention (Goswami & Goswami, 2018). Participant 3 cited that "a person who is struggling really needs to feel that they are valued and supported" (Personal Communication, April 28, 2021). Participant 10 indicated that "the workplace should be a place where people feel safe, where they feel included, and they feel like they belong (Personal Communication, May 28, 2021). For inclusivity, Participant 7 solicits participation from addicted employees so that they "share an equal voice with anyone else there" (Personal Communication, May 8, 2021). Participants made their employees feel accepted and secure by seeking their input and encouraging them to express themselves. Employees who felt accepted participated more,

and the organization experienced an overall increase in employee performance and work productivity.

Six out of 10 participants specifically mentioned that addicts in recovery are considered an asset to the organization because of their abilities to improve their engagement, performance, and productivity. The National Safety Council (2020) reports that employees in recovery cost less to employ. Participant 2 described that "when employees are in recovery, we see a more positive and willing employee, employee morale is up, and there is a willingness by the employees to do whatever's necessary within the organization." (Personal Communication, April 26, 2021). Participant 4 stated that "the people that are in recovery, I almost prefer to have them. I love to support them because they're really wanting to perform and do their best for you (Personal Communication, April 30, 2021). Participant 2 believes:

> The first step for any employer is to create an environment where it's ok for someone to come out and say they are recovering from the disease of addiction. That should start with the hiring process. When you post a job description, state, *"equal opportunity employer – being in recovery from the disease of addiction is preferred."* We know that a person working a [recovery] program will be a much better employee (Personal Communication, April 26, 2021).

Participant 7 employs addicts in recovery and has succeeded in maintaining a relapse-free environment, thereby ensuring business viability. Supplying addicted employees with a work environment that encourages their recovery decreases unnecessary expenditures associated with relapse and increases organizational performance.

Several participants attested that prohibiting discrimination and delivering positive reinforcement supported their addicted employees in remaining sober and productive. Participant 2 indicated:

> What we have found that works is when an individual is [actively] working [or has completed] a 12 step program, we positively reinforce that and give them the flexibility to maintain that. We saw an increase in productivity and motivation, and we saw that behavior rub off on other employees. (Personal Communication, April 26, 2021).

Leaders who apply positive reinforcement encourage positive behaviors, eliminate negative behaviors, improve employee motivation, values, decision-making, and performance (Asadullah et al., 2019). Participant 2 indicated that because the workplace proscribes discrimination, they congratulate sobriety accomplishments openly. "As people hit their annual [sobriety] marks, we will make a big deal out of it. We will give them gift cards and thank you cards, positively reinforcing that accomplishment" (Participant 2, Personal Communication, April 26, 2021). Participant 8 cited "addiction is like any other medical condition" and added:

> We do not discriminate between [addiction or an issue with other] parts of the body. It's none of our business. However, it is our business that people feel like they are recognized and appreciated not only for their output but for who they are and their health and wellness (Personal Communication, May 13, 2021).

Non-discrimination ensures fairness in employment practices and motivates culture change that focuses on inclusion (Johnson & Lamber, 2020). Participants mitigate discrimination because it is unlawful and would have prevented their employees from attaining specific roles in the company, attributing to their success and improved performance.

Subtheme 3(a): Providing Equitable Benefits

Participants acknowledged that to establish a diverse workplace, they recognize that disparities exist amongst employees and require different accommodations. Hence, participants practice inclusivity and non-discrimination by providing equitable benefits

supportive to an addicted employee's individual needs. Their responses developed the codes: (a) promoting recovery and recovery tools, (b) accommodations that support recovery, (c) mental health days, (d) partnering with EAPs, (e) work-life balance, (f) assurance of confidentiality, (g) fair compensation and benefits.

Treating employees equally disregards the needs of a diverse workforce. Eight out of 10 participants practice employee equity by offering accommodations that focus on individual needs. To help a diverse range of employee types, interests, and backgrounds, Tapps et al. (2016) found that leaders must evaluate unique and specific need requirements of the employee "to serve, accommodate, and build successful programs that can have a lasting effect on their employees' wellness" (p. 02). For example, participants offer mental health days alongside PTO, and employees are not required to provide a reason to take the day off. Employers found that employees responded positively by using mental health days and taking less time off because of illness. In addition, upon the employee's return to work from mental health days, participants witnessed that addicted employees' focus on work and productivity increased.

Participants found that encouraging their employees to prioritize their recovery motivated them to stay sober and improve their performance, especially during the COVID-19 Pandemic. According to Participant 2, "we're empowering our employees to put their recovery first. Because, with their recovery first, you have a better employee" (Personal Communication, April 26, 2021). COVID-19 upsurged a need for equitable benefits by employers (Jensen et al., 2021). Participants assessed their capacity to provide equitable benefits to their addicted employees during COVID-19 and decided to invest in them because employees in recovery are considered organizational assets. For example, Participant 2 noted:

> We did something very unusual during the crisis. We kept them employed and paid them a full-time salary. We told them it's important that you stay employed with us

> because when we reopen, we want you to step right back into this job, not for us to have to go find or train new employees (Personal Communication, April 26, 2021).

While many businesses suffered through the global crisis, the participants stated that investing in their addicted employees with equitable benefits reduced turnover, intentions for turnover, and increased morale and employee commitment.

Some employees are uninformed of the equitable accommodations accessible to them. Participants who actively promote appropriate tools conducive to recovery find that it decreases employee relapse rates and increases organizational effectiveness. Participant 9 voices options for addicted employees to prioritize their recovery and stated that "depending on how many people are currently in recovery at work, we let them know they can have a break and hold an impromptu 12 step meeting for their recovery (Personal Communication, May 27, 2021). Participants stated that employees engage with their work better after recovery breaks. One of the recovery resources participants partner with and promote is employee assistance programs (EAPs). According to Radzi et al. (2020), EAPs are experts in helping addicted employees persevere through struggles, re-engage in the workforce, boost motivation, and increase organizational performance. According to Participant 8:

> Many employees may not know that they have an EAP. It can help them with their emotional problems or behavioral problems, or addiction. What has worked is not to be a passive voice but to be a very active voice for behavioral, mental, emotional wellness. Promoting that has been very effective (Personal Communication, May 13, 2021).

Participants indicated that some employees did not engage with EAPs because they were unaware of their confidentiality and privacy rights. Participant 8 explained:

> Without the reassurance that EAP participation is confidential, they likely would not use it. Our intent is to keep good folks in our employment. When they need help, we

> make the referral and the promise of confidentiality. Then, they get help, feel better, and improve their work-life. It's a win-win. (Personal Communication, May 13, 2021).

As described by Participant 8's quotations, publicizing accessible accommodations and reassuring its confidentiality and privacy motivates addicted employees to pursue assistance from resources, such as employee assistance programs. As a result, addicted employees who sought help from EAPs stayed sober, successfully re-engaged in the workplace, and increased organizational performance.

Theme 4: Strategy Formed Through Education and Practical Experience

The fourth theme recognizes that participants utilize education and practical experience to understand what an addicted employee needs to prevent relapse and ensure business viability. Data analysis of participant responses revealed the following codes: (a) trial and error, (b) professional development, (c) surveys and feedback, (d) personal lived experiences, (e) learn from lived experiences.

Employers can learn from relapses and mistakes to prevent further employee relapses (Dacre-Pool & Qualter, 2018). Several participants cited that they learned how to help and support addicted employees through practical experiences and introspection of failed attempts. For Participant 8, an ineffective strategy is "ignoring the problem. Because when I choose to ignore the problem, the problem gets worse" (Personal Communication, May 13, 2021). Employers cannot afford to ignore any issues concerning poor employee mental health (Herriford and Sharp-Page, 2020). Participant 10 stated that *"*if I knew then what I know now, I would have handled it differently. After the person came back to work and we started to have some conversations about what was going on, it was really at that moment that I learned (Personal Communication, May 28, 2021). Suharnomo et al. (2020) find that through experience, leaders learn from their mistakes, adapt to new situations, and optimize

organizational performance. By reflecting on previous unsuccessful strategies attempted, participants avoid making the same mistake twice and perpetuating additional unnecessary costs to the organization associated with substance abuse relapse.

Seven out of 10 participants shared that they engage in professional development or educational programs to improve their leadership practices and awareness of addiction in the workplace. According to Participant 8, "training supervisors and implementing programs like drug-free workplace policies and employee assistance programs (EAP)" are essential in the workplace to meet employee needs, prevent relapse, and increase organizational effectiveness. Further, Participant 8 revealed that "to get over the stigma, people in all levels of an organization require re-education (Personal Communication, May 13, 2021). Therefore, leaders must participate in any training or education activities made available by employers to appropriately implement substance abuse prevention strategies (SAMHSA, 2020). Participant 8 also indicated that "without having lived experience of addiction or some solid education, most supervisors, managers, and HR still think of addiction as bad behavior, poor choices, and a moral failing" (Personal Communication, May 13, 2021). For further relevant education, participants stated that chapter 10 of Alcoholics Anonymous devotes suggestions for employers to manage addicted employees effectively. Participants reported a better understanding of employee needs and effective substance abuse relapse prevention through proper education and training, contributing to an overall increase in organizational performance.

Seventy percent of participants are in recovery and reflect on their personal lived experiences as a resource for strategies to understand needs and reduce employee relapse rates. Participants utilized their lived experiences to recognize supportive methods for guiding addicted employees through struggles and improve their performance. Participant 2 mentioned, "we have first-hand knowledge because we are in recovery ourselves" (Personal

Communication, April 26, 2021). Participant 5 cited, “that’s my first resource. I look back on my own experience” (Personal Communication, May 3, 2021). Participant 7 revealed that “to get through to someone who is struggling, it takes someone else saying ‘hey, I’ve been there. Let me show you how to get out of that.’ It can only be a person who is in recovery to do that” (Personal Communication, May 8, 2021). A study conducted by Honey et al. (2020) found that individuals benefited from learning the knowledge, strategies, challenges, and success of their lived experience or others' lived experiences regarding mental health issues. Several participants reported solicitation of other lived experiences in recovery to formulate effective relapse prevention strategies. Participant 5 indicate that:

> A leader needs to be humble enough to know what they don't know. They need to ask people who would have a reason to know more about these scenarios and be willing to listen. You need to find people who have those areas of expertise, have been there and dealt with it in ways that you haven't (Personal Communication, May 3, 2021).

Participant 6 agrees and stated, “I learned a lot from my co-worker, [an addict in recovery] because I would quickly enable her not realizing I was” (Personal Communication, May 5, 2021). Most participants find that capitalizing on the lessons learned from personal lived experiences in recovery is one of the most reliable resources available in educating leaders on attestable strategies to understand needs, prevent relapse, and strengthen employee performance.

Validity and Reliability

Internal Validity

Internal validity is equivalent to credibility and concerns the truthfulness of a qualitative study (Korstjens & Moser, 2017). The researcher increased this study’s validity by exercising triangulation of data (Creswell, 2017). The researcher collected data through interviews, observation, notes, journaling, and peer-reviewed literature to gather a

comprehensive view of the phenomenon, thereby enhancing validity (Lemon & Hayes, 2020). The researcher employed member checking to strengthen internal validity by supplying study participants with specific elements from the narratives they contributed during interviews (Cloutier & Ravasi, 2020). The participants verified the particles for accuracy and offered elaborations to portions of the records provided. The researcher echoed the information collected to avoid any data misrepresentation and ensure accurate transcription. The member checking process was recursive, indicating the researcher repeatedly requested and confirmed clarifications post-interview and optimized internal validity in this study.

External Validity

External validity discusses the extent to which a qualitative study's results are generalized and transferrable beyond the study sample to the population (Cohen et al., 2018). Qualitative researchers are responsible for assisting future researchers with replicating a study under similar conditions and arriving at similar findings applicable to different groups or settings (Creswell, 2017). The researcher utilized a peer debriefing procedure to reinforce the truthfulness and accuracy of the conclusions (Rose & Johnson, 2020). The researcher employed two rounds of peer debriefing, where two disinterested persons reviewed and questioned this qualitative study. The disinterested peers' responsibility was to provide honest and unbiased feedback regarding the researcher's ability to present appropriate and lucid theme identification and interpretations. As a result, this study underwent deeper analysis, and the researcher improved the semantics of codes and pursued additional code consolidation and recategorization**.** Additionally, the researcher utilized peer examination (Goodwin, 2017) by receiving feedback from an external auditor. The researcher's California Intercontinental Dissertation Chair served as an external auditor providing constant review and feedback, boosting external validity and credibility in this study.

Reliability

Reliability is the degree to which a qualitative study is repeatable, and if another researcher were to conduct the same research, consistent findings would result (Mustafa, 2021). In this study, the researcher supplied replicable methods to allow future researchers to arrive at similar conclusions through transparency. First, the researchers maintained an audit trail, wherein the researcher collected materials and notes used in the study and documented as many procedure steps as possible to increase the reliability of this study (Eldh et al., 2020). Second, the researcher clarified bias by providing an honest narrative of any personal connection to the research and provided an unbiased perspective on the themes and patterns found in this study (Creswell, 2017). Finally, the researcher delivered an accurate and detailed report of the steps and coding methods employed to analyze and interpret the data collected, increasing this study's reliability.

Chapter Summary

This chapter explored participants lived experience implementing effective strategies practiced to decrease employee substance abuse relapse rates and understand what an addicted employee needs during a crisis to ensure business viability. Chapter 4 examined the general description of participants and study sample size. Next, the researcher presented data collection and analysis methods, code generation, and the study's validity and reliability. Finally, this chapter presented the four emerging themes and subthemes uncovered through data analysis with direct participant quotations as supporting evidence. Chapter 5 discusses ethical dimensions, limitations, suggestions for future research, evaluation of the findings, recommendations, implications for practice and organizational change, and study reflections.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this qualitative phenomenological study was to explore strategies leaders operate to decrease employee substance abuse relapse rates and understand the needs of addicted employees during a crisis to ensure business viability. Chapter 5 expresses dimensions regarding adherence to ethical standards, study limitations, the population, sampling method, synopsis of data collection, and analysis methods employed. Next, the researcher summarizes the findings in this study with a comprehensive explanation. Finally, this chapter closes with recommendations for action, reflections upon this study, suggestions for future research, implications for change, and a concluding summary.

Ethical Dimensions

Ethical dimensions, in qualitative research, concern the rights and protection of study participants (Reynolds & Lee, 2018). The researcher adhered to strict ethical standards provided by California Intercontinental University, confidentiality agreements signed by both the researcher and participants, and all institutional review board recommendations in this study. The researcher treated all 10 study participants with equity, upholding their rights, needs, values, and desires. The study participants received an informed consent form with the researcher's contact information, allowing them to voice any questions or concerns regarding this research. All study participants signed the informed consent form and returned it to the researcher via e-mail before their respective scheduled interviews. The study participants' anonymity, confidentiality, and privacy were critical to the researcher, just as they were essential to the participants themselves. The researcher protected the identity of study participants by replacing their names with pseudonyms and including demographics as group data within their general description. The data collected and presented did not contain and identifiable information linking the data back to the participant.

Bracketing is a technique applied in qualitative research, which directs the researcher to suspend presuppositions, biases, and assumptions in study conduction (Baksh, 2019). While the researcher has a personal connection to the research topic as an individual who identifies as an addict in recovery, the researcher brackets bias in this study. The data only reflects study participants' responses through direct quotations to ensure the accuracy and truthfulness of the findings. The researcher secures the validity and credibility of this study through engagement in member checking and peer debriefing processes. Full disclosure of the findings produced an intrinsic ethical consideration of this research effort.

Limitations

Limitations are shortcomings within a study's design that impact or influence the application or interpretation of the study's results (Hays & McKibben, 2021). Presenting limitations strengthens a study as it addresses the potential weaknesses within (Quieros et al., 2017). The first limitation is the researcher served as the primary data collection instrument in this study. The next limitation noticed by the researcher is within the recruitment process employed. At the start of the recruitment process, the researcher attained a reasonable number of scheduled participant interviews. However, the researcher noticed that potential participants would not respond with confirmations in a timely manner. Participants began to cancel interviews scheduled without notice. Reflecting on this process, the researcher then started to stress the importance of the study, its deadlines, and specifically requested confirmations moving forward. Clear communication resulted in a positive outcome of the research conducted.

This study's third limitation regards the researcher's amount of context to help readers understand the interview questions. During interviews with Participant 4 and 9, the respondents asked the researcher for clarifications because the questions and the context provided were confusing. Hence, the researcher needed to rephrase the questions and

condense the context provided to achieve successful understanding. Participants advised that the researcher could have worded the interview questions in a much simpler language so that the interviews sounded more like conversations, which would increase participant comfortability. Finally, the COVID-19 Pandemic produced another limitation in this study as it prevented the researcher from physical engagement with participants. The conduction of web-based video interviews may have restricted the richness of the data collected.

Overview of the Population and Sampling Method

The population for this study included business leaders located in the United States who met the following requirements: an employee in a leadership role who has managed or supervised an addicted employee who has relapsed at least once under their supervision. The purpose of this criterion was to engage leaders who have experienced the phenomenon of employee relapse and expound upon practiced strategies that decrease employee substance abuse relapse rates. The researcher employed a purposive snowball sampling technique for selecting participants in this study. The researcher chose participants from a personal rolodex of professional network contacts. Participants offered recommendations for supplementary potential participants who meet the selection criterion in this study. The sample in this study characterizes a diverse population of professional leaders, experiences, and industries. Out of the 22 potential participants, the researcher successfully achieved a sample size of 10 through data saturation.

Data Collection and Analysis

The data collection process commenced with semi-structured qualitative interviews. Each participant signed and returned a consent form before their scheduled interviews. Subsequently, the researcher conducted 10 interview sessions and inquired participants with 11 open-ended questions. Reliant on the answers supplied, the researcher probed respondents with follow-up questions to extract additional in-depth, rich data to achieve data saturation.

The interviews were approximately 60 minutes in length, lasting six weeks due to the availability of participants. The researcher used interview protocols for flow in gathering the participants' lived perspectives and experiences regarding the researcher phenomenon of employee substance abuse relapse. Participant interviews remained anonymous with no identifying marks to link the information collected back to the participants. The researcher collected data through transcriptions downloaded from Microsoft Teams© and imported into NVivo® for coding and analysis. The researcher stored all data collected from study participants in a password-protected USB drive, only accessible by the researcher, to ensure privacy and confidentiality during this study.

Data analysis coincided with data collection to achieve saturation. The researcher incessantly examined and coded the data collected while monitoring saturation. Elements of the transcript were coded with labels that best-described strategies mentioned by the interview participants. The researcher utilized the codes developed from the data to create a codebook. The codebook includes definitions established from direct participant quotations. The researcher categorized the codes into similar groups and examined the developed codes for emerging themes and patterners. Data analysis uncovered four themes and four subthemes representing strategies leaders practice to decrease employee substance abuse relapse rates, understand an addicted employee's needs during a crisis, and ensure organizational viability.

Summary of Findings

This qualitative research study consisted of 10 professional leaders from various industries located in the United States. Each study participant is an employee in a leadership role who has managed or supervised an addicted employee who has relapsed at least once. The researcher performed semi-structured interviews with 11 open-ended questions. The findings are a truthful representation of the 10 study participants' lived experiences as leaders who have supervised employees who have relapsed from substance abuse.

Centered on the participants' lived experiences, the researcher ascertained the following four themes and four subthemes in this study: This study's first theme is meeting employees where they are. The second theme is building personal connection through vulnerability. The third theme uncovered is strategy formed through education and practical experience. Finally, the fourth theme identified is diversity and inclusion. Analysis of the findings revealed an alignment with the research questions to elicit strategies utilized to reduce employee substance abuse relapse rates, understand the needs of an addicted employee during a crisis, and ensure business viability. The findings concluded business leaders who educated themselves on addiction prevented relapse through effective leadership strategies that influence and motivate addicted employees to pursue assistance and improve their performance. In addition, the research results found that leaders utilized individualized consideration to address the needs of addicted employees during a crisis and increased organizational effectiveness. This study's research findings proved the significance of effective leadership strategies to ensure organizational viability when employing addicted workers.

Explanation of Findings

The first theme uncovered in this study was meeting employees where they are to improve organizational performance by addressing individualistic needs and designing a plan that motivates addicted employees to prevent substance abuse relapse. The second theme was providing guidance that leads to effective business functioning by building personal connections through vulnerability. The third theme was retaining an engaged and operational workforce to enhance productivity and organizational effectiveness through diversity and inclusion. The final theme was drawing from personal lived experiences in recovery to educate leaders on effective relapse prevention strategies that improve company policies, operational efficiency, and employee performance.

Meeting Employees Where They Are

Meeting employees where they are refers to leaders who address employee's individual needs and goals. If an employee relapses from substance abuse or is in a crisis and does not have supportive leaders, employers will experience a disruption in productivity and operations. Leaders create a collaborative plan of action to successfully re-engage addicted employees in the workplace and meet business demands. Leaders must understand that each addicted employee's needs, goals, and situation are distinct. Therefore, no singular relapse prevention strategy is suitable for all employees and circumstances. This study reveals that leaders must assess each situation as it is and employ individualized consideration. Leaders must carefully listen to the employees' individual needs and provide support, encouragement, and mentorship to help them grow through personal challenges. Through individualized consideration, leaders address and satisfy needs by co-creating goals, supplying recovery resources, and motivating addicted employees to seek help and improve performance.

Many leaders center their actions and support methods on how willing the employee is to stay sober. If addicted employees do not demonstrate a genuine willingness to staying sober, leaders may have to consider interventional methods or reconsider their employment altogether. However, if the employee is willing to do whatever it takes to stay sober, leaders are committed to supporting, encouraging, and guiding as much as possible. Leaders highlighted that recognizing their limits and establishing boundaries is essential to meeting business demands while employees seek help. The results demonstrate that leaders who supported willing employees balanced relapse prevention with business needs and helped their addicted employees remain in recovery, become better employees, and meet the needs of the business.

Building Personal Connection Through Vulnerability

The research in this study signifies that developing a personal connection with addicted employees increases employee engagement, motivation, and productivity. Fear of many forms, including being stigmatized and loss of employment, is a formidable component that can lead employees to substance abuse relapse and prevent employees from communicating with their leaders. Vulnerable communication and expression of emotions are necessary for building connections with employees. The findings reveal that the leader is responsible for establishing an environment suitable for vulnerable communication. Actively engaging in conversation with compassion, empathy, and a prohibition of judgment assists addicted employees in trusting their leaders with their struggles and seek help. This study confirms that through empathy, employees gain the support leaders offer, and the employees' job satisfaction, engagement, and productivity increase.

Meaningful interpersonal relationships are supportive to an employees' recovery and correlate to decreased turnover, job commitment, performance, and teamwork (Turner & Allen, 2018). For leaders to establish personal relationships with addicted employees and build trust strongly relies on a leader's ability to share similar struggles and relate with similar feelings. When addicted employees believe that their leader understands their position, the tendency to admit struggles and request support increases. Through relation, leaders create a connection where mentorship is widely accepted. The findings demonstrate that when addicted employees relate with their leaders, they trust their guidance, are more likely to ask for help, attain sobriety, and meet the job's demands.

Diversity and Inclusion

The concept of inclusion means organizations are hiring and creating a diverse workforce and focus on valuing differences through diversity management. Because employees who actively work or complete 12 step programs cost less to employ, organizations desire to recruit and retain individuals in recovery. This study indicates that

when addicted employees share an equal voice with any other employees in the organization, they feel included, and engagement increases. When addicted employees are in recovery, they become better workers and thrive with more responsibilities. The results show that leaders must positively reinforce good work performance and behaviors and any milestones in sobriety to show inclusive recognition. Leaders who apply positive reinforcement encourage positive behaviors and eliminate harmful behaviors. When leaders make their employees feel recognized by soliciting their participation and encouraging them to express themselves, there is an overall increase in employee morale, performance, and productivity.

Addicted employees need to feel accepted by their leaders to increase employee engagement and organizational performance. Ignorance, judgment, and stigma are prevalent regarding addiction in the workplace. This research reveals that organizations prohibit discrimination against addicts in the workplace. Leaders must understand that addiction is like any other medical condition, such as cancer or diabetes. This understanding equips leaders to prevent relapse and retain valuable employees by dealing with the disease and any accommodations professionally. Competitive integrated employment and placement are priorities for leaders and keep the addicted employees' occupations consistent with their pay and capabilities. Leaders who practice diversity and inclusion motivate addicted employees to connect with their work, pursue equitable accommodations, prevent relapse, re-engage in the workplace, meet business demands, and increase organizational effectiveness.

Strategy Formed Through Education and Practical Experience

Uneducated leaders weaken the potential to implement effective strategies concerning addicted employees and leads to unmet employee needs, substance abuse relapse, and unproductive business operations. The research findings confirm that leaders who acknowledge and reflect on mistakes and unsuccessful strategies attempted as a tool for learning improve best practices for organizational performance. Education in the form of

training and executing programs such as drug-free workplace policies and employee assistance programs (EAP) are imperative to leaders at all levels of an organization (SAMHA, 2020). Engaging in professional development programs to educate leaders on substance misuse and prevention must be ongoing for strategic improvement and organizational effectiveness.

Leaders who are in recovery, grounded in recovery education, and reflect on their lived experiences through addiction and sobriety recognize what an addict needs, reduce relapse rates, increase teamwork and productivity. Utilizing mental health lived experience as a resource for learning promotes hope, encourages employees to seek assistance, decreases feelings of loneliness, and aids individuals in explaining their situation to someone else (Honey et al., 2020). The research results reveal that addicted employees positively respond to leaders who understand their position because of their lived experience. Addicted employees are more inclined to trust and accept guidance and direction from leaders with lived experiences who can mentor them to become better employees. The findings confirm that leaders who do not have a history of addiction learn from those who do. This strategic learning method precludes leaders from enabling addictive behavior, leading to an eventual downfall of their sobriety and the organization's performance. A leader who is willing to learn from their mistakes, participate in training, and take the suggestions of individuals in recovery improve best practices to manage addicted employees and improve organizational effectiveness.

Recommendations for Action

Practice recommendations incite specific actions regarding the study's implications for change (Creswell, 2017). Business leaders will have positive outcomes and quantifiable value if they capitalize on the strategies concluded in this study to address needs and reduce employee relapse rates. Confirmed by research, scholars, and study participants, undeniable

evidence exists detailing the impactful costs employees who relapse from substance abuse afflict on employers. However, the cost of turnover for an employee that separates from their job within a year due to untreated substance use can be over $14,000 (National Safety Council, 2021). This research urges against letting employees go and recommends that leaders create a foundational supportive environment by appropriately establishing competitive integrated employment and an individualized approach that addresses specific needs to retain addicted employees in the workplace. Depending on the industry, leaders who capitalize on substance abuse relapse prevention strategies for their addicted employees can save employers anywhere between $3,200 and over $8,400 in unnecessary and unproductive costs per employee annually (Goplerud et al., 2017; "National Safety Council," 2020). Therefore, the researcher recommends that leaders partner with vital resources, such as employee assistance programs (EAP), to train their staff on substance misuse and prevention and offer their addicted employees services to address needs and prevent relapse. Dynamic leaders will decrease unnecessary costs associated with employee substance abuse relapse by implementing integral strategies focused on retaining an engaged, productive and sober workforce.

Based on the results of this study, the researcher strongly recommends that leaders build on the established foundational environment to motivate and influence organizational improvement and progress. Leaders must encourage vulnerable communication, solicit participation, and reinforce positive behaviors to inspire addicted employees in improving their performance and transcending recovery. Furthermore, business leaders need to adopt and embody core principles to guide behaviors and organizational culture. The researcher recommends that leaders embrace 12 step-based principles as this study reveals its success in maintaining effective leadership and influencing organizational efficiency. Moreover, the researcher will communicate the results of this study through several channels by way of

scholarly publications, corporate seminars, training, and conferences because utilizing the strategies explored in this study will cultivate increased performance, streamlined operations, improved culture, and productive employees.

Study Reflections

Reflectivity is a crucial practice in qualitative research, used to legitimate and validate research procedures through transparency of the researcher's lived experience (Mortari, 2015). The researcher obtained a broad comprehension of research methodology and software(s) to conduct a study. Preceding this study, the researcher possessed no knowledge regarding conceptual frameworks, research design, data collection, and analysis procedures, NVivo® and Microsoft Teams©. Nevertheless, the California Intercontinental University's dissertation process allowed the researcher to learn the process, academically grow, and improve composition skills. The researcher gained a better understanding of why a qualitative phenomenological study best suited the study's objective. In gathering a leader's lived experience of employee substance abuse relapse as a method to report effective strategies utilized, the researcher became acquainted with 10 new business leaders and expanded the professional network of contacts. The interview procedure exposed the researcher to improved interviewing skills, unbiased questioning, and truthfulness reporting.

In performing this study, the researcher learned about diversity, equity, and inclusion. Prior to this dissertation, the researcher was exposed to organizational policies and concepts aligning with non-discriminatory practices, a drug-free workplace, and standard employee accommodations. After conducting this research and through participant engagement, the researcher acquired knowledge of equitable accommodations based on individualistic needs. Employee assistance programs particularly interested the researcher, including the detailed understanding of employee confidentiality provided by the EAP and employer. Based on this study's findings and the researcher's lived experiences and personal connection with the

addiction community, the researcher uncovered a new career path with employee assistance programs. The researcher plans to support employees who suffer from addiction and offer them the same opportunities freely given to me.

Suggestions for Future Research

Through the progression of this study, the researcher offers several suggestions for future research. One limitation presented in this study is due to the COVID-19 Pandemic for the reason that it inhibited the researcher from physical engagement with participants. The researcher conducted interviews via a web-based video platform, and this limitation may have limited the richness of the data collected. Future research may benefit from more decadent data collection from engaging with participants in face-to-face physical interviews. This research study consisted of 10 professional leaders located in the United States. Future research might expand the geography beyond the United States to gather a more comprehensive overview.

This study explored strategies leaders utilize to reduce employee substance abuse relapse rates to ensure business viability. The researcher recommends future researchers engage a case study methodology to determine if a specific employee role within a company, assigned to assist and report performance metrics of addicted employees, can reduce costs, turnover, and job duty gaps. Additionally, future research might benefit from evaluating each industry's social rules and norms that proliferate the problem of substance abuse. The researcher recommends replication of this study's methodology using leaders from different sectors for validating this issue. This study defined the addicted employee as an individual who is subject to recurrent use of alcohol and drugs. The inclusion of all addicts can offer perspectives leaders may use to understand employee needs, which can lead to more successful employee substance abuse relapse prevention strategies. Future researchers may wish to conduct a study that includes employees who are addicted to process behaviors such

as gambling, food, and sex. Finally, future studies may find it beneficial to replicate this study's methodology to focus on practical strategies to understand the needs of an addicted employee from the employee's perspective.

Study Implications for Practice and Organizational Change

Implications for practice refer to the influence a study can devise towards future research or institute organizational change relevant to the field and audience of interest (Creswell, 2017). This qualitative study contributes to a growing body of academic literature and is fundamental to business leaders as it can help them manage addicted employees who may be struggling. The research implications direct business leaders to utilize the study's findings to address what an addicted employee needs during a crisis and reduce employee substance abuse relapse rates to ensure business viability. The conclusions of this study contribute to increased organizational productivity, decreased healthcare costs, and improved performance.

Employee substance abuse relapse considerably affects business leaders and organizational productivity through absenteeism and presenteeism (Goplerud et al., 2017). Ignoring the problem, enabling addictive behavior, propagating stigma, and insufficient education and practical experience perpetuate adverse effects on employee substance abuse relapse and organizational performance. Organizations benefit from leaders who educate themselves while regulating a healthy, supportive, and productive work environment by exercising the strategic practices argued in this study. Addicted employees who actively work or complete a recovery program can save companies an average of $8,500 in turnover, replacement, and healthcare ("National Safety Council," 2020). Additionally, employees who recover from substance abuse are more inclined to handle multiple complex responsibilities, increase organizational performance and productivity ("National Safety Council," 2020). Hence, leaders are encouraged to establish and leverage a collaborative work environment

that supports employees in recovery because organizations will benefit through increased productivity and operational execution.

The COVID-19 global crisis produced an upsurge in employee substance abuse relapse, substantially increasing avoidable healthcare expenses for employers and a need for equitable benefits (Jensen et al., 2021). An employer's investment for equitable services and accommodations to provide access to and preserve an addicted employee's recovery improves productivity and decreases healthcare costs. Partnering with employee assistance programs and supportive recovery accommodations provides addicted employees with the tools needed to maintain their sobriety and improve their performance. Business leaders can adopt the information and results of this study to promote needed recovery resources, effectively prevent relapse, improve employee performance, and increase business viability.

Summary of the Study and Conclusions

This qualitative phenomenological research study explored the lived experience of business leaders who have managed addicted employees and captured their in-depth experience of the phenomena of employee substance abuse relapse. This study intended to uncover strategies utilized to understand what an addicted employee needs during a crisis, reduce employee substance abuse relapse rates, and ensure organizational viability. Chapter 5 outlined adherence to ethical standards, the population and sampling method, the synopsis of data collection, and the analysis methods employed. Next, the researcher presented limitations experienced and suggestions for future research, followed by a summary and evaluation presentation of the four themes and four subthemes that emerged in this study, implications for change, recommendations for action, and reflections upon this study.

Chapter 5 concludes this research study. The findings aligned with the conceptual framework(s) of this study and uncovered the following four themes to support the research: (a) meeting employees where they are; (b) building personal connection through

vulnerability; (c) strategy formed through education and practical experience; (d) diversity and inclusion. The four themes identified effectively reduce employee substance abuse relapse rates, understand the needs of an addicted employee during a crisis, and ensure business viability. Business leaders who capitalize on the information and results of this study can develop and promote successful systems related to addicted employees and experience increased performance, streamlined operations, improved culture, and productive employees. The solution will require the dismantling of stigma, considerable education, and an honest, collaborative effort between leaders and addicted employees. Intrinsic leaders are responsible for building a foundational environment that influences their staff towards optimal organizational viability by exercising reliable strategic practices as contended in this study.

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Appendix A: Tables

Table A1

Industry Representation of Addicted employees

Industry	NSDUH(%)	NSDUH(#)
Agriculture, forestry, fishing, and hunting	1.4	1,254
Mining	0.6	605
Construction	7.5	15,357
Manufacturing	10.5	7,380
Utilities and Transportation	5.0	3,032
Information Technology	2.3	1,386
Wholesale Trade	2.5	1,697
Retail Trade	10.5	10,452
Financial Activities	6.5	4,022
Professional and Business Services	11.9	8,214
Educational Services, Health	22.3	17,294
Leisure and Hospitality	9.3	11,125
Government and Public Administration	4.6	3,118
Other Services	5.6	4,193

Note. NSDUH = National Survey on Drug Use and Health.

Table A2

Interview Participant Demographics

Name of Position	Year(s) in Position	Name of Industry	Geographic Location
Senior Property Manager	14	HOA Property Management	Colorado
Executive Director	4	Human Services	Colorado
Sole Proprietor/Owner	33	Healthcare	Colorado

CEO and President	33	Wellness Medical Spa	Colorado
COO and Vice President	5	Staffing and Recruiting	Kansas
CEO and President	16	Staffing and Recruiting	Kansas
Operations Manager	1	Substance Abuse Treatment Services	Colorado
Director of Healthcare Services	11	Healthcare Consulting	California
IT Senior Network Engineer	7	Information Technology	Colorado
Executive Director	5	Non-Profit Organization	Colorado

Note. CEO = Chief Executive Officer; COO = Chief Operating Officer; HOA = Homeowner's Association

Table A3

Catalog of Themes and Subthemes

Theme Number	**Theme/Subtheme**	**Descriptive Title**
1	Theme	Meeting Employees Where They Are
1(a)	Subtheme	→ Constructive Confrontation
1(b)	Subtheme	→ Recognizing Relapse Warning Signs
2	Theme	Building Personal Connection Through Vulnerability
2(a)	Subtheme	→ Leading by Example
3	Theme	Diversity and Inclusion
3(a)	Subtheme	→ Providing Equitable Benefits
4	Theme	Strategy Formed Through Education and Practical Experience

Appendix B: Invitation Letter

Dear (Name of Participant),

My name is John Narine, and I am a student at California Intercontinental University, pursuing a Doctorate of Business Administration (DBA) with a specialty in Global Business and Leadership. I am inviting you to participate in my doctoral research topic, Leadership Strategies for Employees with Addiction. I am requesting your participation you because you meet the requirements to participate and can provide valuable information for this study. The findings from this research may help leaders reduce unnecessary costs by understanding the needs of an addicted employee during a crisis and reducing employee substance abuse relapse rates.

I will conduct a 1-on-1 interview session with you via Microsoft Teams©, and it will be approximately 60 minutes in length. Your information and responses will be protected as the confidentiality guidelines provided by California Intercontinental University will be adhered to. Your participation and lived experiences will be instrumental in providing information that can help leaders develop effective strategies to reduce employee substance abuse relapse rates. If you agree to participate in this study, I will e-mail you a consent form to review and sign. The consent states the purpose of the research, the procedure for the interview, and outlines your rights during the process.

Your participation in the interview is considered voluntary. Participants have the right to decline or withdraw from the interview process at any time. Please confirm if you will participate in this study via e-mail: jnarine@student.caluniversity.edu. If you have any questions or require any additional information, please contact me via e-mail: jnarine@student.caluniversity.edu, or phone: 720-787-5802.

Thank you very much,

John Narine

California Intercontinental University, DBA student.

Appendix C: Consent Document - Interviews

Introduction:

You are being asked to take part in a research study being conducted by John M. Narine under the supervision of Dr. Steven Hess in the Department of Business at California Intercontinental University, California.

The purpose of this study is the investigate strategies leaders use that may reduce the rates of employee substance abuse relapse due to addiction that can lead to absenteeism, turnover, decreased productivity, and higher health care costs for employers. The purpose of this study is to also investigate strategies leaders use to understand the needs of an addicted employee during a crisis. You have been approached for an interview because you have met the following criteria:

- You are an employee in a leadership role who has managed an addicted employee who has relapsed from substances at least once under your supervision.

Purpose:

The goal of this effort is to answer 11 interview questions related to employee substance abuse relapse and provide your lived experience related to those employees. Your responses will supplement written records about what the needs of addicted employees are, the impact employee relapse has on the organization, the leadership capabilities of those managing addicts, workplace stress, and performance metrics of an addicted employee.

Procedures:

The interviews will be conducted and recorded on Microsoft Teams© and take approximately 60 minutes. During the interview, you will be asked 11 open-ended questions. Follow-up questions may be asked based on the answers received. Your responses will be transcribed and transformed into data for the research study. The researcher will store the transcription in an electronic journal that will only be maintained by the researcher. The results will be analyzed and generated into themes and patterns to depict effective strategies used by leaders to reduce employee substance abuse relapse rates.

Risks and Benefits:

There are no known risks if you decide to participate in this research study, nor are there any costs for participating in the study. The information you provide will help me understand factors that leaders use to reduce employee substance abuse relapse rates in the workplace. The information collected may not benefit you directly, but what I learn from this study should provide general benefits to many other leaders, employees, groups, and organizations, who are addicts or employ addicts, and encourage them to adopt effective strategies and practices to reduce employee substance abuse relapse.

Confidentiality:

All collected data will remain anonymous. No one will be able to identify you, nor will anyone be able to determine information about you.

Voluntary Participation:

Your participation in this interview is voluntary. Even if you decide to participate, you may withdraw without penalty, or request confidentiality, at any point during the interview. You may also choose not to answer specific questions or discuss certain subjects during the interview or to ask that portions of our discussion used in the study.

Contacts and Questions:

The California Intercontinental University Institutional Review Board has reviewed my request to conduct this project. If you have any concerns about your rights in this study, please contact California Intercontinental University IRB at 510.931.7318 or e-mail IRB@caluniversity.edu.

Statement of Consent:

I agree to participate in the study and to the use of this my feedback/data as described above.

Name of Participant (printed)

_____

Signature:

_____

Date:

_____

Name of Principal Researcher:

_____

Signature of Principal Researcher:

_____

Date:

_____

Appendix D: Interview Protocol

Participant's Pseudonym:	**Name of Current Position:**
Participant #	**Year(s) in Current Position:**
	Name of Industry:
Interview Date:	**Total Time:**
What the researcher will do	**What that researcher will state**
Introduction, description of study, and description of process	Hello (Name of Participant), Thank you for agreeing to participate in this study and being available to interview. The purpose of this study is to investigate strategies leaders use to reduce the rates of employee relapse due to addiction that can result in absenteeism, turnover, decreased productivity, and higher health care costs for employers. The purpose of this study is to also investigate strategies leaders use to understand the needs of an addicted employee during a crisis. The interview should take no more than 60 minutes and will consist of 11 open-ended questions. The questions are open-ended so that you may provide as much information as possible to help this study. I want to let you know that after each answer, you may hear some silence – if you do, that just means I am looking over your answer to see if I need to ask any follow-up questions. My hope is that you feel free to answer as comfortably as possible. This session is being recorded and will be transcribed. I would like to have your permission to take notes, if needed, so that I can make sure all the information you state is documented accurately. Do I have your permission to take notes? Thank you. I will adhere to the consent form that you and I both signed regarding your participation in this study. That means your responses, this recording, and everything I may observe is strictly confidential. The signed consent form will be kept in a secure and locked location that is separate from the data obtained in this interview. Only I will have access to the data obtained from this interview, and only I will maintain the data and your privacy. Just a reminder, your participation in this interview is voluntary. That means you may withdraw at any time for any reason without consequence. If at any time you need to stop or take a break, please let me know, and we can. If at any time you need

	me to repeat or reword something, please let me know, and I will be happy to do so. My goal is to have a free form discussion with you about your lived experience. At this time, do you have any questions or concerns? Thank you.
Confirm if participants are comfortable before asking any interview questions. Watch for any nonverbal queues such as facial expressions of confusion or frustration, etc. Explain what substances are (give examples if needed) Consider asking some follow-up questions to get more in-depth (if needed) State "Excuse me a moment while I think about how to word this" if needed Take any necessary notes if something sparks Provide Context from research before questions – if needed	1. What strategies do you use to determine the impact employee relapse has in your organization?
	2. What strategies have you used to try and reduce employee relapse rates that were not successful?
	3. What strategies do you use to reduce employee relapse rates that are successful?
	4. How do you measure the effectiveness of the employee relapse strategies you implement and what changes do you see?
	5. How do you determine performance metrics for employees who actively relapse compared to employees who stay in recovery and what changes do you see?
	6. How does your company evaluate the leader's capabilities to implement strategies regarding employee relapse?
	7. What strategies do you use to determine factors in the workplace that can trigger an addicted employee towards a relapse?
	8. What strategies do you use to reduce factors in the workplace that can trigger an addicted employee towards a relapse and what changes do you see?
	9. What strategies do you use to determine what a crisis means to an addicted employee?
	10. What strategies do you use to understand the needs of addicted employees during a crisis?
	11. What other information can you add to benefit this study?

Wrap-up interview	Thank you very much for taking time out of your schedule to speak with me today on this topic. You have truly helped with this study.

Appendix E: Consolidated Codebook

Individualized Consideration

Action Based on Willingness

Balancing Needs

Dealing with Triggers

Establishing Boundaries

Confronting

Radical Candor

Clear Expectations

Accountability with Grace

Not Enabling

Through Observation

Through Checking-in and Listening

Encouraging Honesty and Vulnerability

Minimizing Fear

Extending Empathy

Active Listening

Personal and Meaningful Relationships

Modeled Behavior

Guiding Principles

Emotional Intelligence

Inclusion

Recruiting and Preference

Non-Discrimination

Positive Reinforcement

Set Up for Success

Promoting Recovery and Recovery Tools

Accommodations that Support Recovery

Mental Health Days

Partnering with EAPs

Work-Life Balance

Assurance of Confidentiality

Fair Compensation and Benefits

Trial and Error

Professional Development

Surveys and Feedback

Personal Lived Experience

Learn from Lived Experiences