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## COMPANIES WRESTLE WITH ADDICTION

By Dina Medland

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Addiction is a phenomenon that affects companies as well as individuals. It can impose significant costs across industry sectors – yet there can also be times when businesses are tempted to exploit its effects.

This is because some personality traits exhibited by those with addictive behaviours match the attributes deemed as helpful in the achievement of business targets and goals.

Organisations can even become reliant on high-performing individuals with addictions, who might be in very senior roles.

[Addictions UK](#) is an organisation established in 2002 by a group of recovering addicts, alcoholics and carers to offer treatment, training and support, including help for employers in dealing with problems arising from staff addiction in the workplace. “Every organisation, regardless of size and sector will encounter problems relating to alcohol and drug dependency,” says its website.

James Spearpoint, occupational psychologist at [Saxton Bampfylde](#), the executive search firm, says businesses can struggle to cope with addictions of various kinds. He says: “Some pretty poor behaviour is tolerated in organisations I know of. This can be because an individual brings in business, or obsessively drives down costs, or takes compulsive risks which pay off. If the addict is left alone then the side effects might be minimised. Often, however, it’s the addict’s staff that bear the brunt – as with any poorly performing leader.”

He is also sceptical about the positive impact of addictions. “It means a lack of control,” he says. Although he adds: “Some people with obsessive compulsive disorders can become very successful if they target their behaviour into something productive – for example, obsessively practising a musical instrument.

“Also, many addicts ‘live among us’ without their addiction causing harm to themselves, colleagues or families.”

Dr Mike McPhillips, a consultant psychiatrist and authority on the treatment of psychiatric and addictive disorders, says: “The most obvious positive thing to say about addiction is that people with addictions often overwork, and are often very highly functioning individuals.

“The most common drug in the UK is alcohol. Functioning alcoholics will mention that alcohol has never affected their work – and only come to me at the end of their career. “Their compulsive working habits mean they find it emotionally difficult when they stop working, and one compensatory mechanism is to drink more.”

“Well over 50 per cent of addiction in the UK is to alcohol, especially in financial services,” says Dr McPhillips, who is in independent private practice in London’s Kensington and Chelsea borough and also works abroad.

He says that although there has been an “extraordinary rise” in the use of cocaine and other stimulant drugs, the popular image of a “fanatic trader” who chooses cocaine because it “speeds you up” is false: “There are cocaine users in every walk of life” and every industry sector, he says.

Half of the work carried out by Manj Weerasekera, international performance coach at [Lotus Coaching](#), is in the financial services sector. He is typically called in by a human resources department, or by a senior executive, and has known businesses be willing to pay large sums of money not to lose an individual with an addiction problem, be it alcohol, drugs or sex.

“I can’t guarantee results – there is always the question of why they don’t just sack the individual and save the £30,000-£40,000 fee,” he says.

“Ultimately every employer tries to find a balance between a focus on key performance indicators and a focus on the behaviour of employees. But the problem remains one of getting something from an activity that produces a mental, as well as a physical, response that is addictive – ie, you want more of it. So if you do it in the name of ‘work’, and work goes well, and you feel good, too, why would you stop?

“If I am working with someone, I am asked to contain the behaviour, not cure the addiction,” says Mr Weerasekera, before adding: “Never hire an addict – if someone is addicted to something they are out of control.”

Following this advice might not be easy, however. Mr Spearpoint says: “Spotting an addict at the hiring stage can be very difficult. They have developed tactics to avoid detection by their families, meaning detection during a typical interview will be difficult.”

He draws a distinction between someone with an “addictive personality”, who might transfer their addiction from one object to another, and OCD, which usually involves behaviours not damaging to the person’s health or family – obsessive hand-washing, for

example.

“OCD can be detected using psychological assessment, and may well emerge as obsessive attention to standards of grammar, for example, akin to perfectionism,” he says. “However, inferring drug addiction from over-fussing about split infinitives would be an inference too far.”

Individuals who are aware of their problem and seek help might also have to face the costs: many insurance companies in the UK are reducing their cover in this area. Dr McPhillips says it is far more common for people with addiction problems to “self-refer and self-pay” when they visit him in search of a cure.

“The US is ahead of the UK in this,” he says. “It sees alcoholism as a disease rather than a social problem. In the UK, if your employer chooses to dismiss you because of an alcohol or drug problem they are exempt, under the law, from discrimination bias.”

Dr Kevin Dutton, a research associate of Cambridge University’s Faraday Institute with a background in psychology, has written a book – *The Wisdom of Psychopaths* – about “addictive personalities” and their lure for business.

“It’s not that all psychopaths are great – but in certain contexts psychopathic characteristics can help with success,” he explains. “In everyday life they have a number of traits useful for business – being assertive, not procrastinating, focused, cool under pressure, they don’t take things personally, are very goal driven – and don’t beat themselves up when things go wrong.”

If some of these sound like stereotypically male traits, Dr Dutton does not disagree: “Women could do a lot more of this in training – it is a lot of the reason why men do well in business,” he says.

Dr McPhillips argues that there is “a huge amount of hypocrisy” about addictions. He gives the example of alcohol use: “UK society as a whole has a very ambivalent relationship with alcohol and with those who use it, speaking of teetotallers as being almost priggish or righteous, and treating episodic drunkenness with tolerance and humour – as something almost to be encouraged.

“Yet it becomes judgmental and rejecting when drunkenness becomes habitual – ‘We love you until you lose control and then we reject you and cast you out when you lose control.’ But the only difference between one person and another is time.”

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