Workplaces and Substance Use: Construction Industry

Summary

- **In the construction industry, about 3 in 10 (33%) workers and managers in safety-sensitive positions,[1] and 2 in 10 (18%) workers and managers in non-safety-sensitive positions[2] reported consuming alcohol or other drugs within two hours before or during work, or being hungover, intoxicated[3] or feeling high while at work.**
- Around 1 in 5 construction workers and managers thought that **it was generally acceptable in their work culture to consume alcohol (22%) or cannabis (18%)** before or during work.
- Nearly 4 in 10 (39%) construction managers did not feel adequately trained to intervene with a worker who they thought might be working impaired.
- To reduce workplace substance use risks, it is essential for managers in construction to provide regular education, reduce stigma, change work culture, update policies, and offer appropriate supports and training.
- **The Canadian Centre on Substance Use and Addiction (CCSA) can provide employers and partners with resources, guidance, training** and tailored services for managing workplace and substance use risks as well as introduce protective factors.

The Issue

Forming part of a workplace series, **this brief provides key context, data, and suggestions on substance use health for employers and other partners (e.g., unions, associations, health professionals) in the construction industry**.

Where we work, the type of work we do, and the workplace culture surrounding us can have a significant impact on our well-being, including the use of alcohol or other drugs (i.e., substance use). Workplace risk and protective factors that impact substance use health[4] can affect workers from any industry; however, these factors often differ across industries (Frone, 2006; European Monitoring Centre for Drugs and Drug Addiction, 2022).

[1] Safety-sensitive positions pose potential physical risks to self, co-workers, the public or the environment (e.g., heavy equipment operators, medical practitioners).
[2] Non-safety-sensitive positions pose low or no physical risk to self, co-workers, the public or the environment (e.g., office staff, retail clerk, website designer).
[3] Note that the original survey language used "drunk" to be readily understood by a broad range of participants.
[4] Like mental health, substance use health occurs along a spectrum and includes no use, beneficial use, lower risk use, up to substance use disorder (Community Addictions Peer Support Association, n.d.).

For people working in safety-sensitive positions, risks for using substances can be higher due to factors such as coping with stress, not seeking help, shift work, or managing pain or injuries (Canadian Apprenticeship Forum, 2023; Public Health Ontario, 2022).

For employers, contractors, unions and other partners, lost productivity due to injuries, absences and disabilities related to substance use in Canada cost $22.4 billion in 2020 (Canadian Substance Use Costs and Harms, 2024).

Understanding the context of substance use among workers, managers and industry-specific risks is key to improving protective factors and worker health and safety.

The Study

We conducted a national study (that involved a survey, focus groups and interviews) of workers and managers from various industries, including natural resources industries, construction, education, health care, accommodations and food services, retail, recreation and entertainment, legal services, and government agencies.

Overall, we surveyed 1,120 people spanning five regions in Canada: The Atlantic provinces (7%), Quebec (30%), Ontario (34%), the Prairies (16%) and British Columbia (13%, including the Yukon and Northwest Territories, due to small numbers).

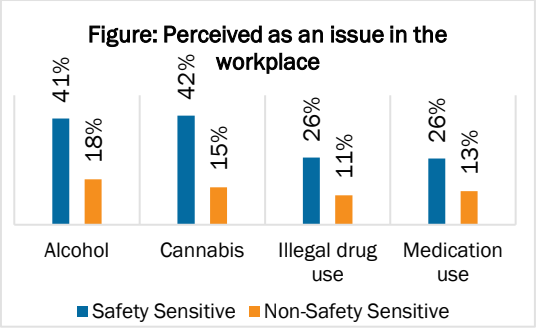
We additionally conducted focus groups with 130 people working in these industries and interviewed 16 people with lived and living experience of substance use issues.

From construction, we surveyed 203 workers and 130 managers and conducted focus groups with 22 workers and 22 managers. The information and insights gathered from the construction industry are presented below.

Key Findings

Extent of Substance Use

About 3 in 10 (33%) construction workers and managers in safety-sensitive positions, and 2 in 10 (18%) construction workers and managers in non-safety-sensitive positions reported consuming alcohol or other drugs within two hours before or during work, or being hungover, intoxicated or feeling high while at work.



Additionally, between 11% and 42% of participants in construction thought that substance use was an issue in their workplace (refer to the figure). These results indicate there is a need for better workplace prevention, education and supports on substance use.

Risk and Protective Factors

There are different risk and protective factors in the workplace that can influence substance use among workers and managers. Appropriately addressing these factors can benefit workers and workplaces.

The following are some of the most common risk and protective factors raised by participants from construction:

1. **Workplace culture:** About 1 in 5 participants thought it was generally acceptable in their work culture to consume alcohol (22%) or cannabis (18%) before or during work.

"I have had former [managers] that offer drugs and booze to their crew and nothing ever happens." (Participant)

---

2. **Stigma**: About 6 in 10 (58%) participants felt that they could safely and confidentially tell their managers if they were experiencing alcohol or drug use issues without fear of discrimination, stigmatization or discipline. Among participants who reported working after consuming alcohol or drugs, about 5 in 10 (55%) said that they usually worked and tried to hide their use.
3. **Pain and stress:** Focus group participants empathized with others who use substances to cope with job-related anxiety and stress, or to manage pain and injuries. For some individuals, substances were used to help with their well-being, while for others, substance use became problematic when they were not aware of alternative options or supports.

"I understand why people need to self-medicate sometimes with cannabis or alcohol [...] A lot of these guys have injuries, chronic pain... and [using a substance] is a way for them to actually work." (Participant)

---

4. **No snitching:** Some construction workers would not report on co-workers about their potential substance use because they did not want them to be disciplined, lose their job or because they themselves did not want to be known as a "snitch."

"In construction, the guys tend to stick together. No one's going to snitch on a friend unless things are really bad." (Participant)

---

5. **Toughness culture**: Several construction focus group participants said that men were expected to have "tough skin," to "buck up and deal with it" and to not talk about their issues. They thought this contributed to substance use and "suffering in silence."

Policies and Training

- **Policies:** About 7 in 10 (72%) managers said that policies existed on alcohol and other substances (it was not possible to assess the policies' quality). However, workers often deal with multiple and sometimes competing policies between unions, associations, regulators and employers.

- **Training:** Nearly 4 in 10 (39%) managers did not feel adequately trained to intervene with a worker who they thought might be working impaired. Among participants who reported being adequately trained, it was not possible to determine whether their training was appropriate for managing substance use–related situations.

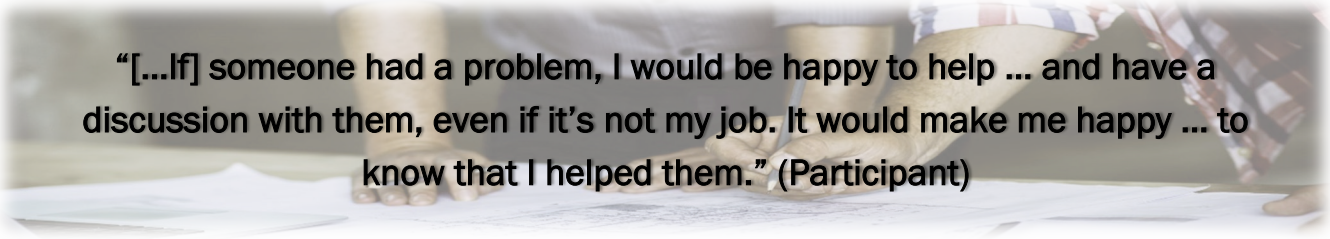
Implications and Recommendations

Although workers and managers in construction face various workplace risks that can contribute to substance use, **there are several opportunities to improve protective factors to reduce the risks**.

Risks such as stigma, workplace culture, managing injuries and pain, a toughness culture and unclear policies can be changed to improve worker well-being, safety and productivity.

Recommendations include:

1. Assessing substance use health–related needs at your workplace,
2. Educating and training workers and managers with evidence-based information on substance use,
3. Developing clear, comprehensive policies and best practices tailored to your organizational needs,
4. Establishing trusted individuals for disclosure or peer support options,
5. Providing alternatives to substances when celebrating or socializing,
6. Offering supports to manage health and well-being, and
7. Offering resources for accessible, confidential and diverse supports.
    - Consult substance use resources available at https://www.canada.ca/en/health-canada/services/substance-use/get-help-with-substance-use.html



CCSA Services to Support Implementation

To help your organization work on these recommendations, CCSA can provide training, resources, guidance, and tailored services on managing workplace and substance use risk and protective factors. For more information about the study, training and how-to resources, email us at workplace@ccsa.ca.

References

Canadian Apprenticeship Forum. (2023). *Understanding substance use among apprentices in the skilled trades*. Ottawa, Ont.: Author. https://cupe.on.ca/wp-

content/uploads/2024/01/Understanding-Substance-Use-Among-Apprentices-in-the-Skilled-Trades.pdf

Canadian Substance Use Costs and Harms Scientific Working Group. (2024). *Canadian substance use costs and harms visualization tool (Online tool, v 3.0.2)*. Retrieved May 2024 from https://csuch.ca/explore-the-data/

Community Addictions Peer Support Association. (n.d.). *Understanding substance use health: A matter of equity*. Ottawa, Ont.: Author. https://capsa.ca/2023/wp-content/uploads/2023/11/CAPSA-Substance-Use-Health-EN-1.pdf

European Monitoring Centre for Drugs and Drug Addiction. (2022). *Workplaces and drugs: health and social responses*. https://www.emcdda.europa.eu/publications/mini-guides/workplaces-and-drugs-health-and-social-responses_en

Frone, M. R. (2006). Prevalence and distribution of alcohol use and impairment in the workplace: A U.S. national survey. *Journal of Studies on Alcohol*, *67*(1), 147–156. https://doi.org/10.15288/jsa.2006.67.147

Public Health Ontario. (2022). *Construction workers disproportionately impacted by opioid-related deaths, report find (news release)*. Accessed August 26, 2024: https://www.publichealthontario.ca/en/About/News/2022/Construction-workers-opioid-related-deaths

Suggested citation: McIlwaine, S., Meister, S., Barker, B., Dassieu, L., Noorbakhsh, S., Panesar, B., and Beirness, D. (2025). *Workplaces and substance use: Construction industry* (Brief). Ottawa, Ont.: Canadian Centre on Substance Use and Addiction.

About CCSA

CCSA was created by Parliament to provide national leadership to address substance use in Canada. A trusted counsel, we provide national guidance to decision makers by harnessing the power of research, curating knowledge and bringing together diverse perspectives.

CCSA activities and products are made possible through a financial contribution from Health Canada. The views of CCSA do not necessarily represent the views of Health Canada.

ISBN 978-1-77871-230-2