Prevention of alcohol and drug abuse in the maritime sector: a behavioural approach towards maritime safety and environmental protection

Rosana de la Rosa Sevilla

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PREVENTION OF ALCOHOL AND DRUG ABUSE IN THE MARITIME SECTOR: A BEHAVIOURAL APPROACH TOWARDS MARITIME SAFETY AND ENVIRONMENTAL PROTECTION

By

ROSANA DE LA ROSA SEVILLA
Philippines

A dissertation submitted to the World Maritime University in partial fulfilment of the requirements for the award of the degree of

MASTER OF SCIENCE

in

MARITIME SAFETY AND ENVIRONMENTAL PROTECTION
(Administration)

1999

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DECLARATION

I certify that all the material in this dissertation that is not my own has been identified, and that no materials is included for which a degree has previously been conferred on me.

The contents of this dissertation reflect my own personal views, and are not necessarily endorsed by the University.

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Title of Dissertation: **Prevention of Alcohol and Drug Abuse in the Maritime Sector: a Behavioural Approach towards Maritime Safety and Environmental Protection**

Degree: **MSc**

The dissertation is a study of the training approach in the modular delivery of the course Prevention of Alcohol and Drug Abuse in the Maritime Sector (PADAMS) in compliance with the provision of the STCW Code (Section A-VI/1) on Basic Training (Table A-VI/1-4) and the recommendations in Section B-VIII/2.

The use of alcohol and drugs has advantages and disadvantages. The alcohol consumption limit as prescribed by the World Health Organization (WHO) through the International Labor Organization (ILO) should be observed and the prescription requirements of certain drugs should likewise be respected.

The rationale for the behavioural approach is presented through analytic descriptive research. The seafarer’s appreciation of the beauty of life which leads to his wholesome relationship with himself, with others and with the workplace is the lasting preventive measure against the abuse of alcohol and drugs. This is the basic principle of the behavioural approach.

The educators, psychologists, sociologists and psychiatrists whose expertise is the study of the nature and development of human behaviour, provided they undergo a familiarization programme on seafaring, are appropriately qualified to conduct the course.

International organizations (IMO, ILO, WHO, ISF, and ITF) and international social and civic associations (Alcoholics Anonymous, Al-Anon Family Groups and Ala-teen Movement) had identified preventive measures against alcohol and drug abuse before the pertinent provisions of the STCW Code became mandatory. Their relevant proposals and current endeavors are significant to the intentions of the STCW Code.

The commitment build-up between the training centers and the manning/shipping companies has to be sustained to train the highest number of seafarers on PADAMS courses.

**KEYWORDS:** Abuse, Behavioural Approach, Drug Dependence, Tolerance, and Withdrawal Syndrome
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<td>AA</td>
<td>Alcoholics Anonymous</td>
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<td>AUDIT</td>
<td>Alcohol Use Disorder Identification Test</td>
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<td>ICS</td>
<td>International Chamber of Shipping</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>IMO</td>
<td>International Maritime Organization</td>
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<td>INTERTANKO</td>
<td>International Association of Independent Tanker Owners</td>
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<td>ISF</td>
<td>International Shipping Federation</td>
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<td>ITF</td>
<td>International Transport Workers’Federation</td>
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<td>MC</td>
<td>Model Course</td>
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<td>MSC</td>
<td>Maritime Safety Committee</td>
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<td>NMP</td>
<td>National Maritime Polytechnic</td>
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<td>OCIMF</td>
<td>Oil Companies International Maritime Forum</td>
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<td>PADAMS</td>
<td>Prevention of Alcohol and Drug Abuse in the Maritime Sector</td>
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<td>PAIS</td>
<td>Post Alcohol Impairment Syndrome</td>
</tr>
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<td>PDO</td>
<td>Pre - departure Orientation Seminar</td>
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<td>STW</td>
<td>Sub - committee on Standards of Training and Watchkeeping</td>
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<tr>
<td>UNDCP</td>
<td>United Nations Drug Control Programme</td>
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<td>USCG</td>
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**Definition of Terms**

**Abuse** The repeated misuse which is the deviation from the normal, proper as well as beneficial use of alcohol.
Using too much, too frequently, for the wrong reason, at the wrong time or place, in the wrong combinations or simply wrong substance.

**Alcohol** A depressant containing ethanol or ethyl, the technical name of the drug it contains.

**Behavioural Approach** Training approach which is task-oriented and trainee-centered, participatory and leading to positive change of behaviour through an appreciation of the beauty of life.

**Drug** Any chemical which affects the control of the perceptive system of the body; can be a combination of chemicals or the by-product of the union of chemicals with other matter - mostly with plants (i.e. hemp, coca bush, mushroom, cacti and their derivatives).

**Drug Dependence** A state arising from the repeated administration of a drug on a periodic or continued basis; a term which the WHO recommends (1994) to replace both the terms drug habituation and drug addiction.

**Drug Misuse** The use of drug for medical or recreational purposes when other alternatives are available, practical or warranted or where drug user endangers either the user or those around him.

**Tolerance** The psychological phenomenon that requires the individual to use more and more of the drug in repeated efforts to achieve the same effect.

**Withdrawal Syndrome** A set of reactions when the body is abruptly deprived of a drug upon which it has physical dependence, the intensity of which will depend on the amount and length of time that the drug has been.
CHAPTER I

INTRODUCTION

1.1 Background

This dissertation has been inspired by the message from Mr. William A. O’Neil, Secretary General of the International Maritime Organization (IMO), on the celebration of the World Maritime Day 1998 and IMO’s 50th Anniversary:

“Most important of all, we have to focus our attention on people. We know that most accidents at sea are caused by human error. Any sincere effort to improve safety must therefore begin by trying to avoid accidents. This means improving training and certification standards, tackling fatigue and ensuring that new technology is developed with safety in mind.”

Equally motivating is the provision of the STCW Code (Section A – VI/1) on Basic Training, particularly the Specification of Minimum Standard of Competence in Personal Safety and Social Responsibilities (Table A-VI/1-4). It requires seafarers the competence to “contribute to the effective human relationships on board ship” through the knowledge and understanding of the “dangers of drug and alcohol abuse”. This competence is demonstrated by the “assessment of evidence obtained from approved instruction or during attendance at an approved course. The criteria for evaluating competence are the “expected standards of work and behaviour” which seafarers should observe “at all times.”
Thus, in 1994 a new training course, Prevention of Alcohol and Drug Abuse in the Maritime Sector (PADAMS), was developed by the National Maritime Polytechnic (NMP), the only government maritime training center in the Philippines. This programme has been a part of the “Development Measures to Reduce the Drug and Alcohol Problems in the Maritime Industry” executed by the International Labor Organization (ILO) with the financial assistance of the United Nations International Drug Control Programme (UNDCP). This ongoing course has been conducted at the NMP since mid-1995 for Merchant Marine Officers, Ratings and Cadets.

In anticipation of the global offering of the said course in compliance with the provision of the STCW Code, this study aims at the development of a training approach which would effect among seafarers healthier lifestyles, positive outlook and dedication to public service which would surpass the euphoria, excitement or the “good trip” resulting from the abuse of alcohol and drugs. This is the essence of the behavioural approach which is directed towards seafarers´ appreciation of life.

Learning takes place when there is positive change in behaviour. And in every training course which is in-service, task-oriented and trainee-centered, inferences about observable behaviour of the trainees and the situations in the workplace that cause this particular behaviour are well considered. This is specially applicable to the modular delivery of the PADAMS course where the limitations of the vessel which is the workplace and the home of seafarers are assumed to be among the eliciting factors towards the abuse of alcohol and drugs.

1.2 Objectives of the Study

The general purpose of this study is to present the rationale for the behavioural approach in the PADAMS courses. Specifically, the objectives are as follows:

1. To define measures for compliance with the provisions of the STCW Code (Section A-V1/1) on Basic Training (Table A-V1/1-4) and
acceptance of guidance on prevention of drug abuse and alcohol abuse (Section B-V111/2, Part 5);
2. To describe the harmful effects of excessive drug and alcohol intake to the seafarers and the resulting damage to their employment;
3. To identify training strategies for the modular delivery of the PADAMS courses;
4. To enumerate the importance of joint efforts between the maritime training centers and the manning agencies for optimum commitment build-up among seafarers with regard to the implementation of the PADAMS courses; and
5. To make proposals and recommendations for the hiring of educators, psychologists, sociologists and psychiatrists as trainers for PADAMS courses.

1.3 Theoretical Framework

The study adopts the ILO´s guiding principle in its prevention programme against the abuse of alcohol and drug: “The social and personal consequences of dependency are usually of more immediate concern and should be the focus of more preventive efforts”.

The social and personal consequences are dealt with in this study in the context of seafarer´s relationship with himself, with others, and with the workplace, and how this three-way relationship is affected by the abuse of alcohol and drug.

1.4 Research Design

The study is an analytic descriptive research using documents and related references and the opinion of the World Maritime University community. The findings from both sources were intended to be supplementary.
The respondents to the opinion survey were the members of staff (academic and non-academic) and the students of the World Maritime University.

The structured 20-item questionnaires contained current issues pertinent to the abuse of alcohol and drugs among seafarers to which the respondents had three options: “agree,” “disagree” and “uncertain”.

1.5 Difficulties and Apprehensions

The conduct of the opinion survey in May-June 1999 was a challenge because students were absent on field trips. Rigid follow-ups of the accomplished questionnaires were tedious. Students understandably had other priorities: adjustment for the new students who just arrived in May, dissertation preparations, field trip report preparations, examinations and assignments for the second year students.

The author’s apprehensions about the students’ responses were compensated by the generous and warm reception by the members of the WMU staff, the faculty in particular.

1.6 Delimitations of the Study

The discussions are limited to the primary prevention strategies specifically matters pertinent to the training strategies in the conduct of the PADAMS courses. Moreover, training which is in-service in nature is the focus of the behavioural approach. Education which is pre-service in nature is not within the scope of the discussions, hence approaches in maritime schools have not been included.

It does not include secondary prevention (guidance and counselling), nor tertiary prevention (rehabilitation) against alcohol and drug abuse.

Drug trafficking or smuggling is likewise not included.
CHAPTER 2

ALCOHOL AND ALCOHOLISM

The stereotype question often raised among seafarers across cultures is: Is there an occupation or profession which is more vulnerable to alcoholism than seafaring? As expected, the equally stereotype response is: None, but seafaring.

The seafarers, popularly labeled the men of the hour, the knights at the helm, the heroes on the high seas, are indeed the global sailors whose courage, high spirit and determinations have to be inspired to bring forth the vessel, which is their home and workplace, safely to her destination. In such a floating community where everybody knows everybody else, where limitations in space, mobility, social interactions, recreational facilities, health facilities, entertainment and limited access to information add to the boredom of routine activities, alcohol as an inroad to an altered state is most welcomed.

They accept alcoholic beverages as a means of escape, an outlet for pent up emotions, the way to Nirvana (state of bliss), and the life-saving concoction next to the air they breathe. Taken collectively, their descriptions of alcohol are associated with a kind of desire, almost an obsession to be in a place, a condition or event other than the shipboard scenario. Normally, their liberty at ports is never complete without excessive consumption of alcohol.
The International Chamber of Shipping (ICS) includes alcohol in its list of socially acceptable and freely available substances in most countries. And as a substance, it is a kind of drug which is defined as any chemical affecting the control of perceptive systems of the body (ICS, 1988, page 5). Aptly categorised by the ICS as a drug which is welcomed and accepted by society across cultures, the International Labor Organization (ILO) provides relative findings as follows (NMP, 1994, page 6):

“In most cultures there is a rapid increase in the quantity and frequency of alcohol consumption between the ages 13 – 17. Between 18 – 40 most people reach their highest intake levels and in some countries the heaviest drinking is in the age group 40 – 50. Drinking patterns tend to change and consumption generally goes down around the age 50.”

The vessel itself is a society with mixed cultures of merchant marine officers and ratings. The entry level of shipboard apprentices (Philippine experience) has been generally at about 18 years old. And by common observations, the crew comprises of workforce with age ranging from a little over 18 years to a little less than 60 years. Travelling across oceans and distant continents generally within a span of a year or more in accordance with the completion of the employment contract, the seafarers continuously combat nostalgia and homesickness. It is not surprising that permissiveness in alcohol consumption is most evident while they are off-duty or at liberty at ports. Dr. Sverre Fauske, international project co-ordinator of ILO and WHO (1989, page 9) has noted:

“It is generally agreed that a permissive attitude towards substance abuse in the workplace has a strong influence on workers’ use of alcohol and drugs in their free time. Conversely, the general level of permissiveness in society influences the availability of dependency – creating substances and the degree to which they are accepted at the workplace.”
2.1 Classification of Alcoholic Beverages

The technical name of the drug in alcoholic beverages is ethanol, or ethyl alcohol. Popularly known simply as alcohol, it is categorised as a depressant with the duration of effects lasting for 4 – 6 hours; the effects being evident in slurred speech, disorientation and drunken behaviour; and the withdrawal syndromes including anxiety, insomnia, tremors, delirium, convulsion, and possible death (NMP, 1994, pages 4 and 20).

Drinkers and non-drinkers of alcoholic beverages have been familiar with beers, wines and liquors as these are attractively bottled, canned, and abundantly displayed for sale in numerous groceries and pertinent outlets. Moreover, wines and liquors are best identified with celebrations and parties or cocktails. Hereunder is the classification of alcoholic beverages cited in *The New Encyclopedia Britannica* (1990, pages 216-217) which the author finds essential to lend credence to the attractions of a specific alcoholic beverage among seafarers.

“Beers - These are fermented from grains after the starch in them is first converted to sugar. The alcohol content varies from about 2 percent in some mild Scandinavian varieties to about 8 percent in especially strong types; most U.S. beers contain between 4 and 5 percent.

Wines - These are fermented from the sugars in fruits or berries (most commonly grapes) from various plants or their saps, from honey and even from milk.

Natural or unfortified wines (the so-called dry wines, such as burgundy, chianti and sauterne) usually contain between 8 and 12 percent alcohol, although most U.S. varieties have a somewhat higher content ranging from 12 to 14 percent. Vermouths and aperitif wines usually contain 18 percent, and dessert sweet and cocktail wines (such as sherry, port and muscate) contain 20 to 21 percent.
Some fermentation yields only 14 percent alcohol, the extra strength of fortified wines comes from the addition of alcohol or brandy.

Spirits- These are distilled from wines or beers. They include vodka, gin, and whiskies (rye, Scotch, bourbon), rum (distilled from sugarcane or molasses), brandies (distilled from fruit wines), and liquors (flavored syrupy spirits). Usually alcohol content is between 40 and 50 percent.

Cordials made of flavoured spirits, such as anissette, blackberry, curacao, maraschino, and sloe gin, usually contain between 25 and 40 percent. The Asiatic beverage kumiss (made from mare’s milk) and the Russian kvass rarely contain more than 2 percent.”

Bored seafarers in their daily routine would like to break loose from their limitations and the monotonous ambiance. Not a few are suffering from burn-out syndrome, that is, they are at the point of giving up seafaring for another means to earn a living, though at such an instance they have no better options. This condition motivates seafarers to drink alcoholic beverages, preferably liquor on account of its 40 - 50 alcohol percentage. Aimed at forgetting their current state momentarily, excessive alcohol intake becomes their ultimate recourse. The Encyclopedia of Science & Technology (1987, page 318) presents the stimulant-depressant effects of alcohol, which jibe with their wish for a change or deviation from the monotony or the unacceptable lot they are in.

“Alcohol can act as stimulant at lower doses and as a depressant at higher doses. Even at very low doses alcohol can impair the sensitivity to odor and taste. Also low doses are known to alter motor coordination and time and space perceptions… (about 50% of all fatal traffic accidents are caused by intoxicated drivers).

Pain sensitivity is diminished with moderate doses.

In some individuals, alcohol is known to diminish feeling of self-criticism and to inhibit fear and anxiety, effects which are probably related to an alcohol-induced sociability.”
Such impaired senses and weakened perceptions among seafarers are contributory to human errors in sea maneuvering, which the STCW 1995 has accordingly addressed.

Alcohol serves as reinforcers to increase further the seafarers’ alcohol intake as the rebel in them or that part of themselves that would want to get off from the shipboard situations dominates. This may also be what the behaviourists refer to as the pleasure-seeking “self” (child ego estate) in each of us, which becomes domineering as an individual seeks to be free from existing constraints.

In reference to the aforementioned classification of alcoholic beverages, liquor which presents the highest alcohol percentage is the favorite of seafarers on account of its state-altering effects.

Meanwhile, the Report of the ILO Inter-regional Meeting of Experts (1992, page 131) highlighted the finding that in many cases, individuals doing heavy work have the habit of consuming alcoholic drinks for anaesthetic and mood improvement. The participants of the meeting, mostly medical practitioners and those involved in alcohol and drug rehabilitation programmes concurred that although muscular and sensory capacities are weakened, the individual under the influence of alcohol feels better and stronger. And later on, however, fatigue reappears followed by dietary disorders and an increased risk of accidents at work. The working groups in the said meeting were emphatic that undoubtedly, the nature of the work itself is a contributory factor to alcoholism.

In brief, the seafarers’ choice for higher alcohol percentage in their alcoholic beverages is job-related. The strong factors that influence them to prefer liquors to beer and wine are as follows: pressure/stress, boredom and routine (repetitious) activities, too much time away from home, long hours of work, job fatigue, shift-work, heat, cold, noise, climatic variations and types of vessel/cargoes (ILO, 1993, page 13). The alcohol-drawing influence of these factors is further compounded by the different nationalities/culture of shipmates, access to supply market and the financial capability to purchase alcoholic beverage.
2.2 Signs of Alcoholism

The Encyclopedia Britannica (1990, page 215) traces the origin of the term “alcoholism” as initially included in the classical essay “Alcoholismus Chronicus” (1849) by the Swedish physician Magnus Huss. Since then the phrase chronic alcoholism has rapidly become a medical term for the condition of habitual ebriety conceived as a disease; and the bearer of the disease has been called an alcoholic or alcoholist (e.g. Italian alcoolisto, French alcoolique, German alkoholiker, Spanish alcoholico, and Swedish alkoholist).

In harmony with the ILO finding that the heaviest drinking is in the group of 40-50 years old, the International Shipping Federation (ISF) which was represented at the ILO Inter-regional Meeting of Experts in 1992 reported that alcoholism is a problem prevalent among older crews and the crews from developed countries. This report is confirmed by Dr. Sverre Fauske, international project coordinator of ILO/WHO in his lecture in Turin, Italy in November 1993:

"In most cultures there will be accelerating change in alcohol consumption between 13-20 years. The peak alcohol consumption, and even drug abuse will be between 20 and 30 years of age, a period in life where most people have to cope with family life, life at work, their own health and quality of life. The most alcohol consuming 30 years in life between 20-50 are also the main productive years in man."

At the National Maritime Polytechnic (NMP) in the Philippines where the training course Prevention of Alcohol and Drug Abuse in the Maritime Sector (PADAMS) has been conducted since mid-1995, classic signs of alcoholism are discussed. These signs are as follows:

- heavy drinker – often has 9 or more drinks a day (120 g ethanol)
- morning drinker
- blackouts
- memory lapses when drinking
- impaired control over alcohol consumption
- craving for more when drinking
- compulsive drinking style
- frequently thinks about drinking
experiences severe alcohol withdrawal reaction
repeated attempts to cut down on drinking have failed
gross cognitive deficits (e.g. alcohol amnesia)
social degeneration (e.g. lost job, family problems)
legal convictions related to drinking

2.3 Indicators of Alcohol Abuse

The term “abuse” is often associated with “excess, “beyond limits, “exploits” and “exaggerations” among others. Defining it simply in relation with the use of alcohol, it would mean that abuse is the repeated misuse which is the deviation from the normal, proper, as well as beneficial use of alcohol.

The meaning of abuse may mean using too much, too frequently, for the wrong reason, at the wrong time or place, in the wrong combination, or simply the wrong substance (Heller and Robinson, 1992, page 21).

“Abuse” is a relative term. As global continents become industrialized and modernized, people’s behaviour in alcohol intake is often described as excessive, troublesome and inappropriate because norms and standards of etiquette emerge with the varying life styles. Parallel to this, the vessel is a mini-globe where mixed crewing puts together crews with differing alcohol drinking pattern. “How much is too much alcohol drinking?” gives rise to a variety of answers as well.

Alcohol abuse which means to go beyond the maximum intake is discussed in details in Chapter 4 as the author recounts the actual modular delivery of PADAMS course at NMP Manila.

Perhaps “abuse” is best captured in the Japanese proverb “First the man takes a drink, then the drink takes a drink, then the drink takes the man.” To be under the influence of alcohol often takes a gradual exposure to drinking spree until the peak is reached and the plateau or too much drinking habit becomes an integral part of one’s system. The maritime industry has been popularly called the “wet” industry as coined by the PADAMS trainees in the Philippines. It is wet in the sense that
seafarers have been exposed to hundreds of thousands of volumes of varieties of alcoholic beverages.

The constant exposure of seafaring workforce to alcoholic beverages according to Thorne (1998, page 28) is part of the tradition:

"Navies have rum rations, the officers’ messes serve drinks to the members and guests, and wine on many ships is served with meals. The accounts of one seafarer reveals that drinks before lunch and before dinner were often served and those who developed a problem were carried until the bitter end, when they no longer perform their jobs at all”.

According to the ILO (NMP, 1994, page 31) the indicators of alcohol abuse are as follows:

- heavy drinker – often has 4 or more drinks a day (60 g ethanol)
- increased tolerance to alcohol
- drinks quickly and gulps the first drinks
- eats lightly or skips meals
- concern or worry about drinking by self and/ or family
- intellectual impairment
- accidents where alcohol was involved
- tardiness/absenteeism from work due to drinking
- most friends are heavy drinkers
- most leisure activities involve drinking
- frequent use of alcohol to relieve stress, anxiety and depression
- has attempted to cut down on drinking with limited success

2.4 Advantages of Alcohol

2.4.1 Stimulant - Alcohol serves as stimulant when taken at lower doses, which arouses physiological and mental alertness. Thinking, learning, remembering and making judgments are mostly positively affected by the stimulating effects of moderate alcohol drinking as illustrated in the two experiments in The New Encyclopedia Britannica (1990, page 218):

“One group of experiments revealed that at low blood alcohol concentrations, after the equivalent of two drinks (two ounces of spirits), well-trained and highly intelligent young men performed
better at solving problems in symbolic logic than they had without alcohol.

At medium concentrations, the equivalent of four drinks, their performance was about normal. But at concentrations equivalent to six drinks, their ability to solve such problems definitely deteriorates.

Similar effects were observed in tests of memorizing. More recent experiments indicate the dependence of learning on the state in which it occurs, - i.e. what is learned under the influence of alcohol is better recalled under the influence of alcohol than when recalled when sober.”

Meanwhile, a very recent research published in the International Herald Tribune on January 8, 1999 revealed that neurodegenerative disease such as Alzheimer’s and Parkinson’s could be staved off with the help of a glass and a half of wine a day. According to Italian scientists, a natural chemical produced by vines and concentrated in both grapes and wine triggers a seven-fold increase in the activity and effectiveness of an enzyme called mapkinase. Mapkinase stimulates and regenerates nerve cells.

2.4.2 Depressant - When taken in high doses, alcohol causes a degree of drowsiness and sedation or pleasant relaxation, which is at times needed by the weary minds and tired bodies. A shot of wine or liquor induces the much needed sleep for someone who may be suffering from insomnia. This is a preferred alternate to sleeping pills.

2.4.3 Psychoactive and Socioactive Drug - A sufficient amount of alcohol reduces tension, relieves feeling of anxiety and oftentimes lead to gaiety and exhilaration.

2.4.4 Medicinal and Therapeutic Drug - The author has experienced that alcoholic beverages can remedy ailments like gas pain, sore throats, constipation, and restrained menstrual flow.

The New Encyclopedia Britannica (1990, 219) contains helpful information as follows:
“Whiskey is popular for treating colds and snakebites, brandy for treating faintness, wine for alcohol building, beer for lactation, and any alcoholic beverage for treating sleeplessness or over-excitement.

Alcohol is administered by physicians in hospitals, usually by vein, sometimes for anesthesia before minor surgery; more often it is given for sedation after surgery and as source of easily absorbed calories when it is desirable to bypass the patient’s digestive system.

Physicians often prescribe “a drink” for a variety of purposes: to stimulate a sluggish appetite, as vasodilator (an agent used to widen the lumen of the blood vessels) in arteriosclerosis, to relieve the vague aches and pains that beset the elderly, and as a supplement to special diets.”

2.4.5 Machismo (Masculinity) Effects - Generally, males are fond of drinking especially in gatherings and celebrations. A non-drinking seafarer is a rare individual because at ports during liberty, it is a custom among seafarers to be in entertainment centers or disco houses where varieties of alcoholic beverages are served by beautiful and charming hospitality ladies.

The overall benefits derived from moderate consumption of alcoholic beverages may have influenced the IMO Conventions to increase the allowable blood alcohol content (BAC) from 0.04% (STCW 78) to 0.08% (STCW 95) before seafarers serve onboard.

The Oil Companies International Marine Forum (OCIMF) in its published Guidelines for Amount of Drugs and Alcohol Onboard Ship (1990) recommends that officers and ratings may drink alcoholic beverages provided the period of abstinence is observed – this may be either a fixed period (e.g. the U.S. Coast Guards requires 4 hours) or a period based upon prior alcohol consumption (e.g. one hour of abstinence for each unit of alcohol consumed). In Appendix 1 alcohol “units”equivalents are presented.
2.5. Disadvantages of Alcohol

2.5.1 Medical/Clinical

1. Regular intake of excessive amount of alcoholic beverages may lead to prolonged high alcohol concentration in the body system, and this has been associated to many impairments or injuries of body organs.

As a PADAMS trainer at the NMP Manila, the author recalls the alcohol related impairments cited by the Filipino seafarer-trainees, as follows: body imbalance, nausea, headaches, gastritis, hepatitis, poor memory, stomach aches, poor eyesight, and diminished alertness.

2. In an American – Danish Study cited in the *Encyclopedia of Science & Technology* (1987, page 316), it is revealed that children of alcoholic parents are more likely to develop alcoholism (18%) than children of non-alcoholic parents (4%) when both children were adopted by non-relatives.

3. The aforementioned source likewise informs that alcoholics have increased rates of testosterone destruction by the liver. Feminization signs are often seen in the male alcoholics, while impotence and testicular atrophy are also found frequently.

4. Although most, if not all, of the alcohol is processed through the body during the 14 hours following intake, the residual effects are contributing to performance deterioration because alcohol interferes with the ability of the body to utilize oxygen (i.e. for airplane pilot, the lower oxygen availability at altitude, along with the lower capability of the brain under the influence of alcohol, to use what oxygen is there, adds up to a deadly combination (Basi, 1998, pages 6-7).

5. Apart from the state of intoxication, the harmful effects of alcohol have been called Post Alcohol Impairment Syndrome (PAIS) which makes the individual unable to cope with stressful or problematic situations due to lower responses, clumsy movements, blurred vision, loss of concentration, and impaired logical thinking (NMP, 1994, page 9).
2.5.2 Social and Personal Consequences

The PADAMS in NMP Manila has been conducted based on the ILO principle that “the social and personal consequences of dependency are usually of more immediate concerns and should be the focus of more preventive efforts.”

The alcoholic seafarers may lose their loved ones and friends who cannot stand their emerging unbecoming behaviour. They may be ostracized by their peers and colleagues. However, when they consult the physician about their health, everything is sound and normal. In a nutshell, the physical body may tolerate further the intake of excessive alcohol, however, those with whom the alcoholic seafarers personally and socially interact may not have enough tolerance or patience to withstand their unacceptable actions (i.e. tantrums, misjudgments, stubbornness, cruelty, forgetfulness, etc.).

Dr. Fauske of ILO and WHO stresses that many chronic drinkers may lose their family and/or their job before the liver is ruined which simply means that the liver often has a higher tolerance towards alcohol abuse compared with those with whom they personally or socially interact.

2.6 Alcohol Related Problems

Abuse of alcohol has led to deaths and hospitalizations, police arrests, broken families, loss of jobs, and uncertainties (i.e. school dropouts, physical and mental disabilities, etc).

In the maritime industry, the risk is tremendous because it involves lives, limbs and properties whose safety during the voyage depends so much on the capability of alcohol-free crew.

The ill-fated Exxon Valdez has been a typical example (Cahill, 1990, page 219): “Hazelwood had a few drinks ashore that afternoon and early evening. How many is unknown, but enough for the odour to be detectable by the pilot. It was also noticeable to the USCG officers who boarded Exxon Valdez about three hours after the grounding. The media shortly discovered the fact that Hazelwood...
had two convictions for drunken driving, and had undergone
treatment for alcohol rehabilitation in 1985.”

There is also the possibility that fatigue on watch which currently alarms the
industry is among the medical consequences of alcohol abuse.

Stubbornness and disobedience of seafarers with regard to maneuvering
instructions which undoubtedly led to sea mishaps may also be among the symptoms
of PAIS (Post Alcohol Impairment Syndrome).

Acquired Immune Deficiency Syndrome (AIDS) among seafarers may also
be an indirect consequence of alcohol abuse, the effect being gradually slow since
this involves the weakening of the body defense or immune system.
CHAPTER 3

DRUG AND DRUG DEPENDENCE

The sailing vessel is the seafarers’ workplace and home dependent on the duration of the voyage specified in their Standard Employment Contract (SEC). While on board, their status does not allow them enough room to move about, socialize, entertain, or spend the off-duty period in unlimited space within the acceptable limits of their whims and caprices. Their physical, social, and psychological environment is short of space except for their routine tasks which have been allotted priorities in time and space.

Such limitations are at times compounded by unsavory news from home or loved ones. Unable to confront the problems head-on, they seek refuge in the “tripping” effects of drugs.

Not a few have turned to drugs as the prime recreational alternative. Energizing and tranquilizing drugs eventually emerge as their deliberate means to disrupt the way things are on board – to escape from their own consciousness.

3.1 Classification of Drugs

Drug is any chemical which affects the control of the perceptive system of the body (ICS, 1998, page 5). At the PADAMS class in the National Maritime Polytechnic, drug refers to any chemical substance that causes physical, mental, emotional, or behavioural change in an individual. It can be a combination of
chemicals or the by-product of the union of chemicals with other matter – mostly with plants (i.e. hemp, coca bush, mushroom, cacti and their derivatives).

Drugs are generally classified according to a) various routes of administration b) social acceptance and availability and c) effects on the user.

3.1.1 By Various Routes of Administration
- oral (drinking, e.g. alcohol)
- intravenous (injected into a vein, e.g. heroin)
- inhalation (smoking, e.g. marijuana)
- intranasal (snorting, e.g. cocaine)

3.1.2 Social Acceptance and Availability
- socially acceptable and freely available substances (tea, alcohol, and tobacco)
- socially unacceptable and freely available substances (glue, methylated spirit, petrol, solvents, and cleaning fluids)
- socially acceptable and freely available pharmaceuticals (aspirin, paracetamol, vitamin tablets)
- socially acceptable and controlled pharmaceuticals (barbiturates, diazepam, and numerous other "prescription drugs")
- socially unacceptable and controlled pharmaceuticals or substances (cannabis, LSD, cocaine, morphine, heroin, amphetamines, opium)

According to the International Chamber of Shipping (1988, page 5) many of the substances in each category carry some risk of drug dependence, but those in the last category carry by far the greatest. Although some of these latter substances may be used under strictly controlled medical supervision, total dependence still occurs within a short period when these drugs are abused.
3.1.3 Effects on the Users (Seafarers)

1. Prescription drugs or over-the-counter (OTC) drugs are considered valid and legal and may be permitted on board. However, it is important that the holder keeps the doctor’s prescription to show to authorities during inspection.

2. Dangerous drugs are the illegal drugs (illicit) which pose threat to individual and society when misused and abuse. However, these may include drugs legally produced and prescribed by doctors.

3.2 Illegal and Illicit Drugs

The drugs under this category have been duly identified by a) the International Chamber of Shipping (ICS), published in its booklet *Drug Trafficking and Drug Abuse – Guidelines for Owners and Masters on Recognition and Detection* (1988, pages 11-18), b) the report of the ILO Inter-regional Meeting of Experts on Drugs and Alcohol in the Maritime Industry (1993, pages 125-127), and c) the NMP *Training Handbook on Prevention of Alcohol and Drug Abuse in the Maritime Sector* (1994, pages 17-20).

The term “illicit” has been associated with the more familiar words as unlawful, prohibited, forbidden, etc. There are five (5) categories of illicit drugs: narcotics, stimulants, depressants (sedatives), hallucinogens, and cannabis (NMP, 1994, page 17). Prominent characteristics of these drugs are as follows:

1. Narcotics: The effect lasts for 3-6 hours causing euphoria, drowsiness, respiratory depression, constrained pupils and nausea. These are highly addictive and tolerance is developed quite rapidly and completely (i.e. morphine and heroin).

   Withdrawal syndrome is manifested by watery eyes, running nose, yawning, loss of appetite, irritability, tremors, panic, chills and sweating, cramps and nausea.
The average life expectancy of a heroin or morphine addict is about 6-8 years. Some can survive much longer; many die within 4 or 5 years. Aids can be transmitted by using infected needles or syringes.

2. Depressants: There are varying duration of effects: barbiturates (1-16 hours), benzodiazepines (4-8 hours), alcohol (4-6 hours), and other sedatives (4-8 hours).

   Generally, these are used for immediate relaxation. Possible effects of excessive intake include slurred speech, disorientation, and drunken behaviour while withdrawal syndrome is signalled by anxiety, insomnia, tremors, delirium, convulsions, and possible death.

   The depressing ambiance of the environment (e.g. isolation at sea, stormy weather) is compounded by continuous intake of these drugs.

3. Stimulant: Cocaine and amphetamines have duration effects of 1-2 hours and 2-4 hours, respectively. These drugs facilitate attention, maintain wakefulness, and sustain mental works.

   The use is evidenced in increased alertness, excitation, euphoria, increased pulse rate and blood pressure, insomnia, and loss of appetite.

   Absinence from these drugs (after rigorous use of them) leads to apathy, long periods of sleep, irritability, depression, and disorientations.

   Cocaine is addictive mentally and it eats away the nasal bones whereas amphetamines cause instances of renal failures and affect other internal organs.

4. Hallucinogens: Lysergic Acid Diethylamide (LSD) has enduring effect of 8-12 hours. Illusions, hallucinations, poor perception of time and distance, and assorted visual experiences are suffered by the users.
Physical dependence or withdrawal syndrome has not been reported though those who are psychologically dependent on this drug may change their life-style once deeply pre-occupied with its use.

More often the “trips” are sad and permanently scar the personality.

5. Cannabis: Marijuana (herbal), hashish (resin) and hashish oil exhibit 2-4 hour-duration of effects. Manifestations of use are euphoria, relaxed inhibitions (slow reactions, increased appetite, disturbances in co-ordination and movement, and inability to follow reasoned argument. User’s abstinence may lead to insomnia, hyperactivity and decreased appetite.

It reduces sperm count and fertility. It lowers the intelligence rating because the drug is stored in the brain (ICS, 1988, page 12).

3.3 Addiction, Habituation and Dependence

In Chapter 2, the term “abuse” has been explained as a relative term and it poses difficulties in coming up with precise definitions. Similarly, the term addiction as discussed in the New Encyclopedia Britannica (1990, page 230) with the editorial advices of the University of Chicago states that “no one view or one definition could possibly embrace all the medical, psychiatric, psychological, social-logical, cultural, economic, religious, ethical, and legal considerations that have important bearing on addiction.”

3.4 Distinction between Habituation and Addiction

The traditional distinction between these terms centers on the ability of a drug to produce tolerance and physical dependence. Tolerance has been commonly understood as the physiological phenomenon that requires the individual to use more and more of the drug in repeated efforts to achieve the same effect. Physical
dependence as earlier discussed manifests itself by the signs and symptoms of abstinence when the drug is withdrawn.

The degree or extent of the body’s cellular adaptation to the challenge posed by the drugs to the human body draws the line of difference between habituation and addiction. Such challenge causes readjustment of the body system to the stress that it experiences. At this point, the cellular response has so altered itself as to require the continued presence of the foreign substance (drug) to maintain normal function. During withdrawal, the cellular response becomes abnormal for a time until a new adjustment is made. The *New Encyclopedia Britannica* which included in its list of advisers the faculty of the German Max Planck Institute for Biological Chemistry elaborates (1990, page 231):

> “Drugs such as caffeine, nicotine, bromide, the salicylates, cocaine, amphetamine and other stimulants, certain tranquilizers and sedatives are normally not taken in sufficient amounts to present the challenge. They typically but not necessarily induce a strong need or craving emotionally or psychologically without producing the physical dependence that is associated with hard addiction.”

Drug users are often mistaken in their assessment of some drugs, as being less dangerous. Hence, intentional and continued use makes them expect that the consequence as a matter of habituation, but not addiction. And the continued use of the drugs ultimately results in addiction.

In 1994 the World Health Organization recommended the term drug dependence to replace both the terms drug habituation and drug addiction. Drug dependence is defined as “a state arising from the repeated administration of a drug on a periodic or continued basis.”

### 3.5 Forms of Drug Dependence

1. Physical Addiction – The body develops craving for progressively larger doses of the drug to achieve a target level of intoxications or
“high. The quicker the increase in dosage is, the higher the body tolerance is. When the drug is withheld some of the visible symptoms are excessive sweating, constant desire for liquids, scratching, twitching of muscles, irritability, diarrhea, muscles spasm and in extreme cases, convulsions, coma and death.

2. Psychological Addiction – The mind develops a dependence on the drug although there may be no physical dependence. Withdrawal symptoms are not as pronounced as in physical addiction, such as irritability, fits of uncontrolled anger, fixation on taking a further dosage, irrational behaviour, feelings of victimization, etc.

3. Environmental Addiction – A particular life-style or place may be conducive to addiction since drugs circulate in these environments (i.e. opium den, hippy squat, housewives’ coffee morning, school playground).

3.6 Cardinal Signs of Drug Dependence

The Training Handbook on Prevention of Alcohol and Drug Problems in the Maritime Sector (NMP, 1994, pages 18-19) contains the nine (9) cardinal signs of drug dependence. Diagnosis should be in place if three or more of these signs are present. Each sign is a marker that loss of control has occurred.

1. The substance is taken in larger amounts or over longer periods of time than originally intended.
2. Attempts to reduce use of the substance are made, but they are unsuccessful.
3. Considerable time is spent in activities that are necessary to acquire the drug.

4. Intoxication or withdrawal symptoms occur during times when, they are hazardous, or when they interfere with everyday responsibilities.

5. Important activities are given up in order to obtain and use drugs.

6. Drug use continues despite the development of psychological, social, or physical problems that are caused or aggravated by the drug use.

7. Tolerance occurs and greater amounts of the drugs are taken to achieve the same effect.

8. Withdrawal symptoms occur upon abrupt discontinuation of the drug. Remember that this is not the case with all drugs of abuse.

9. The person resumes regular drug use, even after stopping the drug and having experienced serious adverse consequences as a result of its use.

3.7 **Legitimate Use of Drugs**

There are two broad categories of legitimate use of psychoactive drugs: medical and recreational (NMP, 1994, page 14).

3.7.1 Medical Use

1. There are drugs used for treatment or prevention of diagnosed disease or for alleviation of physical or mental discomfort. Others are useful in overactive state such as epilepsy and Parkinsonism.

2. Depressants reduce the incidence of misbehaviour, hyperactivity, agitation, anxiety. The mild calming or sedative effect often result in sleep.

3. Drugs continue to be the popular tool among psychologists in their study of the human body, particularly the control of
mental states and behaviour. It is a tool to investigate psychosis and study the retention of learning.

3.7.2 Political Use

Nowadays, sophisticated combat employs drugs as potential instruments, and this has been described as chemical and biological warfare. It has been exploited as truth serum and brainwashing technique or any other utilization of man’s mental capacity which may be against his conscience and consciousness.

3.7.3 Recreation

Relative to the euphorizing and energizing effects of drugs, expansion of creative capabilities, achieving a state of inspiration for endeavor, being in a state of inhibition, reaching the completeness of being anew or refreshed are among the positive outcomes of drug intake. Some seafarers attest to their capability to sing in public or demonstrate the latest dance craze without inhibition under the spell of drug.

3.8 Drug Misuse

The term “misuse” simply put, means deviation from the prescribed use, or from what the drug is intended to serve or remedy. As discussed in PADAMS classes at the NMP in the Philippines, “it is the use of drug for medical or recreational purposes when other alternatives are available, practical or warranted or where drug user endangers either the user or those around him. This is best illustrated by the typical shipboard incidents hereunder presented.
A Rating is suffering from insomnia for three days. He approaches his immediate Officer on board. To speed up his work input, the Officer gives him sleeping pills. Subsequently, the Rating can sleep, he can work, and he appreciates what the Officer does to him.

Taking in sleeping pills is not the ultimate solution to insomnia. An effective maritime Officer will resort to “available, practicable or warranted” course of action. A short interview with the rating could have revealed the personal or social problem that causes insomnia. The “talking cure” which most psychologists employ is within the capacity of maritime Officers who have been trained in shipboard management. A sweeping jump into the use of available drugs maybe a second, third or last option when other behavioural approaches (analysis about the person in a particular situation) fail.
CHAPTER 4

THE MODULAR DELIVERY OF PADAMS

PADAMS has been developed by the National Maritime Polytechnic (NMP) as part of the project "Development Measures to Reduce the Drug and Alcohol Problems in the Maritime Industry", executed by the International Labor Organization (ILO) with the financial assistance of the United Nations International Drug Control Programme (UNDCP).

This module focuses on the vessel as the seafarers´ home and workplace, and recognizes that alcohol and drug problems on board could be effectively addressed through demand reduction and subsequent supply reduction.

Demand reduction is carried out through prevention via education and training (i.e. PADAMS). And supply reduction is undertaken by discouraging or preventing seafarers from getting involved in drug trafficking. Discussions on dangers and risks of transporting and/or selling illicit /illegal drugs have been included in the PADAMS module.

PADAMS is a 12-hour course aimed at encouraging and promoting alcohol and drug –free vessel.
4.1 PADAMS Framework (Design)

The scope includes the nature and the extent of the alcohol and drug problem among officers and ratings on board, and the pertinent preventive measures and policies.

The course is trainee-oriented conceptualized from behavioural objectives: to identify and describe the main components of the alcohol and drug problems, to comply with existing laws, policies and regulations on alcohol and drugs, and to appreciate the importance of the effects of alcoholic beverages on the seafarers´ behaviour in the workplace or elsewhere. It is noteworthy that the seafarers are not discouraged from intake of alcoholic beverages provided that they are guided by the discussions on moderate drinking and the hazard or harm of excessive drinking (beyond maximum limit).

The programme is intended for merchant marine officers, ratings, cadets and individuals or representatives of agencies involved in education, recruitment, selection, training, and development of maritime manpower.

The maximum number of trainees is thirty (30). The study group or small working group is composed of four to five trainees only.

The trainer is required to have adequate background on shipboard setting and he/she must have taken a course on the prevention of alcohol and drug abuse in the maritime sector.

In this study the writer proposes that the trainer is behaviour-oriented (i.e. educator, psychologist, psychiatrist, or sociologist) since the course involves learning (preventive measures) and unlearning (corrective measures) which both deal with behavioural change.

Justifications for the choice of behaviour-oriented trainers for PADAMS are discussed in Chapter 5.

The PADAMS training rooms are normally equipped with whiteboard, projector, television (film viewing), and enough space for group dynamics.
Other training aids that complement the PADAMS manual are the posters, video materials, ILO/IMO references, and brochures/pamphlets from rehabilitation centers.

4.2 PADAMS Training Handbook

It follows the format of the model courses of the International Maritime Organization (IMO). It consists of five essential parts: Part A (course framework), Part B (course outline and course timetable), Part C (detailed syllabus), Part D (trainer’s manual) and Part E (evaluation).

Since the module is intended for use by maritime training centers and maritime schools, Part F (use of the training programme) has been added to the manual for flexibility in the delivery of the module and integration to ongoing related programmes.

Part A: Course Framework

As cited earlier, this portion informs the handbook users about the scope, objectives, entry standards, course certificate, course intake limitations, staff requirements, training facilities and equipment, training aids, ILO/IMO references and textbooks.

Part B: Course Outline and Course Timetable

The outline shows the three main components of the programme: 1) nature and extent of alcohol and drug problem 2) prevention of alcohol and drug abuse in the maritime sector, and 3) policies and programmes on alcohol and drug in the maritime sector.
Part C: Detailed Syllabus

Specific learning objectives are enumerated for each topic in the syllabus. The objectives have been carefully worded to be Specific, Measurable, Attainable, Realistic and Time-bound (SMART). To ensure that objectives are SMART, the course has evaluation components for the continuous assessment of activities.

Part D: Trainer’s Manual

Typical of IMO model course, this manual guides the regular trainer or his alternate on the delivery of PADAMS. The trainer is free to modify and/or enrich the outline without deviating from the objectives set forth in the detailed teaching syllabus (Part C).

Part E: Evaluation

Feedback from trainees signals to the trainers the need for the latter’s flexibility and the adaptation of course content to meet the trainees’ needs and those of the organizations they represent.

Evaluation tool (questionnaire) is administered to the trainees at the end of the session to determine the extent of accomplishing the SMART objectives in the detailed syllabus (Part C) and to plan and develop related course and instructional materials.

Part F: Use of the Training Programme

The manual is explicit that “As a training resource, it is modular in construction … parts may be removed or added to fit the purpose of the user “(1994, page 16).

As a training programme, PADAMS addresses three major needs of the industry: 1) Pre-departure orientation sessions (i.e. 30-minute sequence), b) formal training sessions (the focus of this study), and c) informal step when no formal class or training time is available (i.e poster/brochure distribution, captain’s constant reminders to the crew, video tapes on board, and posting newspaper clippings ).
4.3 Training Methodology

Training is the in-service aspect of the seafarers´ professional growth. It is job-oriented, and to be particular, it is task-oriented.

In the training class the seafarers share their experiences and integration (comprehension of its application to one´s life) in cases of a heterogenous batch.

The guiding principles in the modular delivery of PADAMS are: 1) there is no problem trainee but a trainee with a problem, 2) learning takes place in the trainee-oriented atmosphere and not in a subject matter-oriented ambiance and 3) learning is effective when there is positive change of behaviour among the trainees.

Lectures are least utilized because the trainers are oftentimes the facilitators who motivate, direct, orchestrate activities (group works, mini-panel discussions, role play, group dynamics, reporting, mini-symposium, debate and problem-solving among others). The choice of training technique to sustain the interest of the trainees depends on serious assessment of their specific needs and their differences (age, sea experience, rank, length of service, etc.). Moreover, trainees are encouraged to share their maritime experiences which often serve as the springboard for discussions.

The Big Brother – Small Brother approach is a popular training technique particularly for the computations for maximum alcohol intake.

Appendix 1 gives the standard unit of alcohol resulting from the study conducted by the World Health Organization (WHO) in 1987, which has been adopted at the PADAMS classes in NMP, duly recognized by the International Labor Organization (ILO). The findings of the WHO emphasize “there is no guarantee of safe drinking … risk is reduced by drinking less and by reducing the number of drinking days per week or per month” (NMP, 1994, page 9).

The NMP trainers have constantly reminded the trainees of the ILO slogan: "Drink less, live better" and "Count your drinks."
Respect for the consumption limits is exercised through computations for maximum limit. Hereunder are examples of problem-solving situations given to the trainees. Computations are presented in Appendix 2.

1. If you have a bottle of red wine (dessert wine, 75cl), compute for the maximum daily consumption. Give the minimum or the least number of days that this bottle of wine may be consume. The computed least number of days indicates that you do not have to consume the said bottle of wine less than such number of days in consideration of the consumption limit. It is recommended that you go beyond such number of days.

2. For a 24-man crew in a ten-month voyage, suppose the wine supply is item 1 above, compute for the maximum number of bottles of the said red wine for the entire duration of the voyage in reference to the consumption limit.

Since trainers are expected to have taken IMO Model Course 6.09 (Training Course for Instructors), the different techniques in training methodology are employed.

The Senior Officers particularly those with the highest number of sea experience in mixed crewing take the lead role in the discussions about drugs on board while the cadets orient the class on their related experiences on and off the school campus.

### 4.4 Course Requirements

Attendance for the whole duration of the course is exigent, with 15-minute allowable tardiness. Active participation in class activities, computation outputs, seatworks on decision-making exercises, and oral reports are among the requirements for issuance of the PADAMS certificate.
4.5 Constraints and Difficulties

1. Generally, the discussions are skewed to the disadvantages of alcohol and drugs, brought about by the clinical or medical approach to the subject matter.

2. The behaviorists’ popular concept, supported by the ILO, that the abuse of alcohol and drugs is a symptom of deeper personal or social problems is often overlooked by the trainer.

3. A number of trainers have not taken IMO Model Course 6.09 which highlights among others the formulation of behavioural training objectives.

4. Support from the international communities (IMO, WHO, ILO, etc.) is still inadequate in terms of fellowships for trainers, information materials, training aids, and financial assistance.

5. Recruitment/Selection of PADAMS trainers favors those with seafaring experiences, oftentimes seafarers who opt for land-based jobs.

6. Statistics on abuse of alcohol and drugs among seafarers is not available.

7. Experts on alcohol and drug abuse who have to join maritime course developers for further improvements of existing module prefer to work in different service areas (police force, investigation agencies, military, hospital, etc) due to low salary.

8. Female trainers who normally dominate behaviour-oriented professions (education, psychology, sociology, and psychiatry) are few.

9. Prevention, guidance and counselling, and rehabilitation are the three important phases of concentrations toward alcohol and drug-free seafaring. However, only preventive measures are presently being prioritized.

10. Follow-up on the status of graduates of PADAMS has not been established.
CHAPTER 5

PERSONHOOD AND PERSONALITY

A modern merchant ship, with a multinational crew, presents a situation in which difficulties and problems will arise stemming from the way in which the ship must operate with a group of people from different cultural backgrounds, with a high probability of communication problems involving language being present. It should be remembered that it is a “whole person” who is employed, not one with certain separate, but desirable characteristics. When dealing with personnel, the whole person must be taken into account and an attempt made to develop a better person through growth and fulfillment. Motivation should be encouraged by demonstrating how by following specified courses and by certain action, a person’s sense of fulfillment can be increased (MC 1.21, 1991, page 2).

In a multinational crew or mixed crew, the seafarer’s sense of fulfillment is challenged by his varied experiences caused by cultural differences onboard the vessel. The family’s upbringing, the early social relationships, the customs and traditions in one’s country, all these providing roots to the seafarer’s personhood come into strong interplay to keep him stable and enduring. Meanwhile, his role (Officer or Rating) and understanding of himself (self concept) are two strong factors that direct his performance, his behaviour and his social interactions which ultimately make up the impressions his crewmates have about him. Such impressions often lead to branding of “labels” which are associated to the seafarer’s personality as observed and perceived by others onboard the vessel.
Personality is responsible for features of behaviour (Skinner, 1965, page 284) and it is not surprising that despite the quasi-military nature of shipboard life, it is likewise an organization of personalities.

Marsella and Hsu (1985, pages 24-27) contend that “personality is shaped by society and culture … and that the concept of personality originated from the Greek word persona, a mask. They both associated personality with interpersonal relationship which gives meaning to being human.

5.1 How to Relate with Yourself

“Charity begins at home” is a popular saying that has been interpreted that you cannot give what you do not have. A seafarer therefore has to be organized before he becomes an integral part of this floating organization.

“ The Child is Father to the Man “ is basically a significant input of Sigmund Freud in the understanding of one’s self. He emphasized the strong influence of childhood when the man grows into adulthood. Though psychologists are with him in this belief, they also uphold that current developments could still change a person “even though our past basically forms the structure from which our personality begins. (Tan, 1992, page 16).

Every individual is like an “iceberg”. This analogy which has become popular in the field of psychology is among the basic principles upon which the PADAMS is conducted. A seafarer who drinks alcohol in excess and abuses drugs is an iceberg. His alcoholism and drug abuse which are part of the tip of the iceberg may signal the presence of personal and social problems (the portion of the iceberg which is under water) which will only be discovered by social interactions with him or sincere discussions with him. "Talking cure" is a natural remedy which has become popularly practised so that the seafarer could unleash himself of the pent up emotions and forgo his brooding moments. It is along this understanding that it becomes exigent that Merchant Marine Officers should be equally effective in managing the technical operation of the vessel and the management of the human input into the technical operation.
Michael Stadler’s *Psychology of Sailing* (1987, page 3) positively describes life at sea as:

“Life at sea has remarkable positive effects … the activities of finding one’s identity, gaining self confidence, learning diverse skills and working of necessity as part of a team engaged in a common activity and sharing a common goal – and still managing to hold one’s own – show that a ship provides a remarkably beneficial environment for character building.”

Inside his cabin, on the deck, or in the engine room, the seafarer’s interest in his job, his pleasant attitude towards the duration of the voyage could be sustained by being at peace with himself, that is he is possessed by positive self concept. And this inspiring self concept or knowledge of himself evidenced by control of emotions, being on top of the situations at stressful events, camaraderie, and sound decisions are enhanced through ample time for self confrontation, self awareness, self acceptance and self investment. The shipboard environment which could best give the much needed time for self analysis is the off duty period which is alcohol - and drug – free.

### 5.2 How to Relate with Others

“The stereotypes we hold about others are usually wrong and always highly dangerous. There are, for example people who believe “all” Arabs are Muslims; “all” Italians belong to the Mafia”; “all” Australians drink nothing except beer. There are even some people who believe “all” Norwegians are good seamen” (MC1.21, 1991, page 2).

It has been easy to generalize and make assumptions about people around us. People easily fall prey to “judging the book by its cover “ as the old adage says. It is human nature to attach labels from the immediate information we get about those within our reach.

In this study, it has been repeatedly pointed out that the vessel is the seafarer’s home and workplace. As familiarity develops among the crew on board, spontaneity and being candid become evident. Relating experiences, unfolding
one’s private life, forming “clique” or groups with common secrets, expressions of criticisms in good faith, and having a “buddy” to depend on, among others, mark the social climate on board.

In reference to Maslow’s hierarchy of needs (Tennant, 1988, page 13), people behave according to satisfaction of needs which are categorized as follows:

Level 1 – Physiological needs (hunger, thirst, sex, sleep, etc.)
Level 2 – Safety needs (predictable and orderly world, safe, reliable, just and consistent)
Level 3 – Social needs (love and belongingness)
Level 4 – Self esteem needs (strength, achievement, adequacy, mastery, competence, confidence, independence and freedom, reputation and prestige)
Level 5 - Self actualization needs (full use and exploitation of talents, capacities and potentialities)

Gage and Berliner (1984, page 384) interpreted Maslow to mean that “higher needs arise only after lower needs, such as needs for food and safety, have been met, and in cases where a lower need conflicts with the higher one of equal strength, the lower one will predominate.”

Each seafarer looks forward to security (safety needs) or the assurance of belonging to a group. Confident that crewmates care for him, then boredom, homesickness, anxiety, job-related difficulties can become bearable if not totally diminished.

Ships are operational for 24 hours and seafarers need to relate to each other for companionship, a normal demand of man’s social nature. And in mixed crewing where the work environment is marked by harmonious interactions, understanding and respect for cultural differences is sustained. Amid the pleasant shipboard atmosphere, enhancement of the seafarer’s self esteem (self worth, self confidence, adequacy, pride for being productive) is propelled. At the apex of the hierarchy of needs is self-actualization which Maslow defines as "the desire to
become more and more what one is, to become everything one is capable of becoming." (Pilar and Rodriguez, 1981, page 25).

JOHARI window (named after two psychologists: Joseph and Harry who came up with this concept) is the self disclosure tool (Hurlock, 1982, pages 232-233) that explains the extent by which an individual reveals himself to others. Relating this tool to shipboard setting, each seafarer is a square window with four openings of differing sizes.

Window 1 is the Open Arena (OA) which when widely open indicates that the seafarer is transparent and easy to deal with.

Window 2 is the blind spot (BS) which when widely open reveals his blindness to his shortcomings and therefore he would not accept criticisms no matter how constructive these are.

Window 3 is the façade (F) which reflects insincerity and the camouflage attitude that lends to one-sided friendship and exploiting relationship.

Window 4 is the Unknown which indicates man’s inability to explain his behaviour nor understand his mood, temperament, etc. Professional help is needed in case this is the window most widely opened. A seafarer with this most widely opened window may be a threat on board. Manning agencies normally administer personality tests, interviews and background investigations to ensure that the seafarer is fit for service.

To effectively relate with others, particularly with other nationals on board international vessels with mixed crew, familiarity with one’s mode or style of self disclosure or communication is a major factor. A wide window 4 for every seafarer enhances camaraderie. However, being transparent has its limitations which are dependent on how well you know the other person. And understanding the culture of a crewmate contributes much to the extent with which one has to exercise self disclosure and how he will communicate with the other seafarer so that the latter will be willing to be transparent as well.

Pre-departure orientation seminars for seafarers have emphasized the value of reading about people and places in the other parts of the globe. An example of
culture familiarity through reading is to have a copy of *Understanding the Filipino Seaman: His Values, Attitudes and Behaviour* authored by Dr. Tomas Quintin Andres. On attitude towards alcohol intake and drug use, he says (1991, page 9):

“…Westerners may drink five bottles of beer and still be not drunk while for a Filipino one bottle of beer may be enough to make him drunk.”

### 5.3 How to Relate with the Workplace

Safety culture is a must in the seafaring industry particularly on board the vessel. The limitations of the seafarer’s lifestyle while at sea as earlier discussed in this study could lead him in "attempts to organize his world so as to provide the greatest possible degree of safety and security" (Tennet, 1988, page 13). At this instance, the attraction of alcohol and drug abuse becomes inevitable.

Michael Stadler describes the situation at sea (1987, page 91) as:

"Sociologists have described such living conditions as total institutions. The lives of the members are completely bound up in the institution. There is no separation of the desperate areas of life which are found normally elsewhere: work, leisure and sleep. All activities are carried out within the same living space, with the same objective and under the same single authority – the ship’s captain."

Stadler gives the impression of a stressful existence of shipboard environment. His observations are parallel with Warm’s discussions on environmental stressors (1984, pages 104-106). He defines stressor as "those environmental conditions which act to change the comfort of the performer in his attempt to sustain attention." He further elaborates that social isolation may cause performance of an individual to grow progressively poorer “with prolonged exposure to monotonous environmental conditions” (1984, page 129).

Meanwhile, Druckman and Swets both opine that “stress is reduced by giving an individual as much knowledge and understanding as possible regarding future events” (1988, page 21). In the light of this observation, it becomes
comprehensible that the unpredictability of the sea, the weather, the instability of the job after a contract expires, and the lifestyle limitations are the recurring stressors on board.

Moreby believes that leadership on board has significant influence on the smooth interpersonal relationship of the crew, and that the pleasant social climate is among the results of each seafarer’s respect and positive attitude towards the person in authority (1991, pages 21-22). On board the vessel, authority and pleasant personality can make the subordinate work at his best. And the best performance emanates from a confident and trusting seafarer. The officers are in the strategic position to be the multiplier factor so that the crew carry out their respective functions with utmost co-operation and co-ordination.

The essence of relating with the workplace calls for two essential skills: blending and redirecting (Brinkman and Kirschner, 1994, pages 38-39):

“Blending is any behaviour by which you reduce the differences between you and another in order to meet them where they are and move to common ground. The result of blending is an increase in rapport.

Redirecting is any behaviour by which you use the rapport to change the trajectory of that interaction.”

Blending and redirecting among the crew of different nationalities take place in the course of the voyage. And ultimately the “cliques” and “small circles” of similar nationalities in mixed crewing gradually disappear, and through pleasant interactions even the crew of 24 emerges as one unified clique … a camaraderie that boosts productivity. Such camaraderie becomes a “valuable release valve for otherwise pent-up concerns and backed-up energy” according to Brinkman and Kirschner (1994, page 172). In a shipboard situation like this, excess in alcohol intake or abuse of drugs becomes less likely to be the outlet or “release valve” for whiners, the burnt-out (seafarers at the verge of giving up the job), the discontented and the insecure, among others.
CHAPTER 6

ASSISTANCE AND SUPPORT FOR PADAMS

The practical approaches to promote the Prevention of Alcohol and Drug Abuse in the Maritime Sector (PADAMS) have gained popular multi-level assistance and support from agencies (shipping/manning companies and training centers), related associations (Alcoholics Anonymous, Al-Anon and Ala-teen Movement), national government and international communities (IMO, ILO, WHO, UNDCP, ISF and ITF).

6.1. Commitment Build-up between Maritime Training Centers and Shipping/Manning Companies

The National Maritime Polytechnic (NMP), the only government maritime training center in the Philippines, pioneered in offering the new training course PADAMS. Since mid-1995, the NMP has certificated 9,729 Filipino seafarers as of First Quarter of 1999. Most of these international seafaring trainees are company-sponsored (as of September 1998 only, since PADAMS was offered free prior to this date). At present the NMP charges a very minimal training fee of P200 (6 US dollars) for each seafarer.

To date, private maritime training centers in the Philippines are offering PADAMS courses upon certification of their Trainers who are graduates of Trainers Training for PADAMS which the NMP conducts twice a year. These training centers likewise conduct the modular delivery of PADAMS using the NMP
PADAMS Manual and related information materials. Their trainers may consult with the NMP Trainers in this regard.

All shipping/manning companies and private maritime training centers in the Philippines have been given complimentary copies of the ILO-approved NMP PADAMS Manual.

Ideally, it is expected that shipboard training on awareness about alcohol and drug abuse and the preventive measures has to be conducted by the ship officers who are graduates of PADAMS.

“To ensure that they get the right man to do the right job on board ship, some manning agencies conduct pre-employment training in addition to the standard pre-departure orientation seminars (PDOs)” (NMP, 1994, page 28). Part F (Use of Training Programme) of the NMP PADAMS Manual outlines the main points of the handbook and related approaches which could be integrated to their PDOs.

6.2 Role of Educators, Psychologists, Psychiatrists and Sociologists in the Conduct of PADAMS

_The Webster´s Third New International Dictionary of the English Language_ (1980) defines the above-mentioned professions as follows.

“Educator is a specialist in the act or process of providing with knowledge, skill, competence or usually desirable qualities of behaviour or character.

Psychologist is a specialist in one or more branches of psychology which is the science of behaviour, the mental, attitudinal, motivational, or behavioural characteristics of an individual or of a type, class, or group of individuals.

Psychiatrist is a specialist in the branch of medicine that deals with the science and practice of treating mental, emotional or behavioural disorders especially as originating in endogenous causes or resulting from faulty interpersonal relationship.

Sociologist is a specialist in the systematic study of the development, structure and function of human groups
conceived as processes of interaction or as organized patterns of collective behaviour.”

The aforementioned definitions share a common area of service – study of human behaviour. According to John Watson who published in 1913 the *Psychology as the Behaviourists View* It “most of our behaviour is acquired, through learning … the result of environmental rather than biological influences” (Tennant, 1988, page 107.

Skinner the renown advocate of behaviourism argued that our own behaviour is environmentally controlled. He invoked the concept that favourable outcome of behaviour can be a reinforcer for such behaviour to occur again in a similar situation. However, internal states and biological based drives or needs have been considered by other behaviourists.

Integration of the three (3) above-mentioned factors in behaviour development, namely: Watson´s environmental influence, Skinner´s reinforcer concept from the environment and the other behaviourists´consideration of internal and biological based drives or needs, relates to the behavioural approach in the modular delivery of PADAMS which is the focus of this study.

### 6.3 Behavioural Approach

It involves inferences about observable behaviour and the situations that elicit this particular behaviour. It considers the individual´s capacity to learn from other´s experiences and to be motivated (reinforced) towards the achievement of personal or social objectives.

This study deals with the shipboard situation and focuses on the limitations and difficulties in this “ floating multi-cultural community, the use of alcohol and drugs as seafarer´s coping strategy, the effects of alcohol and drugs in their biological makeup, and how the training course – PADAMS could best impart that life is worth living. And thus, if seafarers have positive attitude, their forward-
looking disposition would prevail over the temptations of the abuse of alcohol and drugs.

6.4 Prevention is better than Cure

The “kingship of positive thinking “ is a reinforcer of behavior modification to relate better with one’s self, with others and with the work environment. It surpasses the tranquilizing, mood-elevating and energizing effects of alcohol and drugs. By looking at or living at the bright side of life, the seafarers do not need alcohol nor drugs under stressful conditions.

Prevention of the abuse of alcohol and drugs in the context of positive behaviour development has its long term effect. The services of professionals whose expertise is on human behaviour plays a significant role. The Faculty of the University of Chicago in Publishing “ Alcohol and Drug Consumption “in the New Encyclopedia Britannica (1990, page 230) has pointed this out as:

“The emphasis tends to be shifted in the direction of the psychological or psychiatric makeup of the individual and the pattern of use of the individual and his subculture …There is the concept of psychological reliance in terms of both a sense of well-being and a permanent or semi-permanent pattern of behaviour. Terms such as hunger, need, craving, emotional dependence, habituation, or psychological dependence tend to connote a reliance on a drug as a substitute gratification in the place of adaptive behaviour.”

6.5 Personal Safety and Social Responsibility (PSSR): a Mandatory Course under STCW ´95

Section A – VI/1, paragraph 2 of the STCW Code provides that seafarers undergo basic training with four (4) components, namely: Personal Survival Techniques, Fire Prevention and Fire Fighting, Elementary First Aid and Personal Safety and Social Responsibility. The latter component which has been popular by its acronym PSSR has five (5) components, namely: emergency procedures, prevention of pollution of marine environment, safe working practices, human relationships and
prevention of alcohol and drug abuse in the maritime sector. This study addresses the needs of the fifth component of the PSSR.

The Specification of Minimum Standard of Competence in Personal Safety and Social Responsibility (Table–VI/1-4) of the STCW Code includes the knowledge and understanding of the “danger of drug and alcohol abuse” as contributory to the seafarer’s competence “to contribute to effective human relationship on board ship.

Section B VIII/2 (Guidance on the Prevention of Drug and Alcohol Abuse) of the STCW Code recommends that Administrations consider prescribing a maximum blood alcohol level of 0.08% for seafarers keeping watch, and prohibiting the consumption of alcohol within four (4) hours prior to serving as a member of a watch. Screening programmes to identify drug and alcohol abuses are likewise recommended.

The percentage of alcohol content of beer, wine and spirits is discussed in Chapter 2.

6.6 Role of International Communities

6.6.1 International Maritime Organization (IMO)

During the 29th session of the Sub-Committee on Standards of Training and Watchkeeping on 12-16 January 1998, it was agreed to draft amendment to the STCW Code Section VIII/2 to include reference to the ILO publication Drug and Alcohol Prevention Programmes in the Maritime Industry (A Manual for Planners) and its annex III, “Guiding principles on drug and alcohol testing for world wide application to the maritime industry. The said reference material was adopted by the joint ILO-WHO Committee on Health of Seafarers in 1993.

On account of this amendment, the MSC circulars on the subject (MSC/Circs. 595 and 634) will be revoked. The draft amendments to the STCW Code will be put forward to MSC 69 for adoption (IMO News, 1998).
MSC /Circ. 595 (Principles and Guidelines Concerning Drug and Alcohol Abuse Programmes) was considered in its 16th session on 6-10 April 1992. The circular "is meant to serve as an interim report on the issue of alcohol and drug abuse before the Committee finalizes its considerations of these matters." Member governments were invited to submit relevant information as the IMO has been collecting and collating casualty statistics which include the role of the human element in maritime casualties.

MSC /Circ. 634, concluded in the 63rd session on 16-25 May 1994, instructed the Secretariat to invite member governments to consider developing national legislation prescribing a maximum of 0.08% blood alcohol level (BAC) during duty as a minimum safety standard on their ships and to improve their programmes for the prevention of drug misuse.

MSC circulars 595 and 634 are in Appendices 3 and 4 respectively.

The IMO participated as observers in the ILO Inter-regional Tripartite Meeting of Experts on Drugs and Alcohol in the Maritime Industry 29 September –2 October 1992 in Geneva.

6.6.2 International Labor Organization (ILO)

The ILO working paper on alcohol and drug problems as presented in the above-mentioned tripartite meeting was focused on the following:

1. A basic foundation of an alcohol and drug abuse programme for seafarers already exists and any new initiatives must link up with and build upon existing services (i.e. training programmes, occupational health and safety, welfare, etc.) in order to be cost-effective.

2. Different attitudes that must be taken into account before policy and programmes are developed include variation in responses to use of alcohol and drugs, responses to testing and the tradition of its use in some sectors of the maritime industry.

3. Policy and programme development is further complicated by issues of ownership, registration and management.
4. The gap between the shipowners and the seafarers is widened by the former’s subcontract to professional ship management companies, thus causing separation between financial ownership of the vessel and the management of the vessel.

5. The division of country of ownership and registration, compounded by the different types of registers often poses difficulty to link company and the flag-state based programmes with public and private support services and programmes in the seafarers’ home countries.

6. Many seafarers come from developing countries, many of which have limited resources and therefore limited support services for people with drug and alcohol problems.

7. Programmes and policy cannot be left up to individual companies because a seafarer may only work for a company for a limited period before changing employment.

8. Adoption guidelines on testing alone by all members of the maritime community will be difficult to achieve. A compromise has to be reached with the conditions that testing is a part of a total prevention programme (not as the only program) and that strict measures are taken to ensure that the rights of the seafarers are upheld.

9. National policies, company policies and union-based policies have all been developed but these policies and programmes are not focused in the same direction.

10. National policies and programmes which tend to emphasize legislative and enforcement solutions do not address specific programming issues other than the encouragement to develop appropriate programmes.

11. Replacement of or a complement to testing is not considered in the development of prevention programme (i.e. education and training). Union-based policies and programs tend to be directed toward education and treatment and are less supportive of drug and alcohol testing.
12. Only a minority of maritime workers have alcohol and drug problems. Based on this reality, programmes should be designed to give appropriate attention and resources to both prevention and assistance.

The working paper containing the foregoing salient features is accompanied by the proposed “Action Plan to Address Drug and Alcohol Problems in the Maritime Industry” which is among the references used by the NMP in developing the course PADAMS.

6.6.3 World Health Organization (WHO)

As an offshoot of the inter-regional meeting of experts as earlier mentioned, WHO co-ordinated with UNDCP and ILO in developing a “Model Programme of Drug and Alcohol Abuse Prevention among Workers and their Families.” The PADAMS Manual being used at NMP in the Philippines contains researches undertaken by WHO.

In 1987 a WHO study developed a valuable instrument for assessing alcohol-related problems in a tripartite scale: social damage, physical injury and degree of dependency (Fauske, 1989, page 49). This instrument is known as Alcohol Use Disorder Identification Test (AUDIT) and it is considered to be the most promising self-assessment test available for secondary prevention (guidance and counselling) in the context of early identification.

The WHO in its 1987 study on harmful drinking concluded that “men drinking more than 21 units of alcohol per week and women drinking more than 14 units per week had a significantly increased risk of medical complications, social problems, and increasing dependency” (NMP, 1994, page 8). Respect for consumption limits and the importance of imposing certain conditions on drinking habits are upheld by WHO.

The Sub-Committee on Standards of Training and Watchkeeping (STW) of IMO’s Maritime Safety Committee participates in WHO meetings to ensure that
measures taken by the IMO are compatible with those taken by the Organization and vice versa.

6.6.4 International Shipping Federation (ISF)

The ISF, an international non-government organization presenting its paper in the inter-regional tripartite meeting of experts cited their undertakings as hereunder presented.

1. In conformity with ILO Minimum Standards Convention, No. 147, the seafarers are medically examined at regular intervals to determine their fitness for sea service.
2. Many, if not most, individual companies have prepared guidance for their masters concerning the consumption of alcohol (if allowed) on board ship.
3. Individual companies have disciplinary policies with regard to drug use or alcohol misuse.
4. Some national shipowner associations, such as the United Kingdom have produced drug and alcohol policies for implementation by their members.
5. Some national shipowner associations, such as Denmark, have recommended that each company should draw up its own policies which can reflect the particular circumstance of the company’s operations.
6. Some national associations have assisted their member companies to prepare such policy papers as have been required by charterer but have not given any advice about acceptance or rejection of the charterer’s requirements.
7. International shipowner bodies, such as OCIMF and INTERTANKO have also produced guidelines on drug and alcohol for their members, which are widely adopted.
8. Certain major oil companies introduced strict requirements concerning drug and alcohol abuse by seafarers and included these requirements in their charter parties. These requirements included a provision that seafarers serving on ships owned or chartered by the company should be subject to regular and random testing procedures to detect substance abuse.
9. The United States administration introduced in 1988 strict requirements concerning drug and alcohol abuse by seafarers including standard testing procedures and permitted substance levels in blood and urine samples.

10. Some employers also considered that in order to comply with the requirements without risk, it was necessary to prohibit all alcohol consumption on board.

The ISF expressed the need for ILO’s assistance in the development of drug and alcohol policy of shipping companies.

6.6.5. International Transport Workers’ Federation (ITF)

The policy paper presented by ITF which also participated in the said tripartite meeting contained the following salient points.

1. Trade unions have attempted to achieve a balanced approach aimed at a) safeguarding individual worker’s rights not to suffer unwarranted intrusions into their private lives or violations of their basic human rights either by employers or by government agencies, while at the same time b) protecting the worker against the safety and health consequences of drug and alcohol abuse as well as safeguarding the worker, his/her colleagues, transport users in general and the environment from the risk of accidents taking place because an employee in a safety sensitive position has attempted to work while under the influence of drugs or alcohol.

2. Where drug and alcohol abuse exists, it should be treated as a medical, rather than a disciplinary problem. Disciplinary sanctions should only be used in cases where safety sensitive workers deliberately report for work in an unsafe condition and even here they should be part of an overall employer-union policy and accompanied by adequate safeguards to protect the worker against unfair behaviour by employers.

3. Drug and alcohol policies should:

   3.1. provide general education and assistance to workers about risks of drug and alcohol abuse to health;
3.2. identify workers who have a drug or alcohol problem in a non-threatening way which does not violate the rights of workers in general;

3.3. act as a deterrent to safety sensitive workers attempting to do their jobs under the influence of alcohol or drugs; and

3.4. provide programmes of rehabilitation and counselling to workers identified as having a problem.

4. The central principle of all drug and alcohol policies should be “prevention not punishment.” Primary objective of the programme should be the prevention of health and safety problems related to the use of drugs or alcohol, not the identification and punishment of workers.

5. Action to cope with drug and alcohol abuse should be based on detailed policy statements drawn up jointly by employers and trade unions at national, industry and company or workplace level as appropriate, preferably with the involvement of government health and safety experts.

6. Agreed drug and alcohol policies should cover both positive (education, guidance and counselling, improving the working environment) and negative measures (regular and random testing).

7. Education on drug and alcohol issues should be given as part of employee education programmes so that new workers start with a clear understanding of the issues involved and the company’s policy.

The ITF policy paper likewise included secondary prevention (guidance and counselling) and tertiary prevention (rehabilitation). This study however, is limited to primary prevention strategies.

The activities and/or issues cited above are contained in the proceedings of the ILO Inter-regional Meeting of Experts on Alcohol and Drug Problems in the Maritime Industry held in Geneva 29 September-2 October 1992 which to the best knowledge of the author has not convened since then.
6.6.6 Social and Civic Groups/Associations

There are international organizations operating as therapeutic programs to help alcoholics and their relatives.

1. Alcoholics Anonymous (AA)

This organization was started in 1935 by Dr. Bob and Bill W. in Ohio. Bill W. recovered from alcoholism through a “fundamental spiritual change” and immediately sought out Dr. Bob, who, with his assistance, achieved recovery. Both in turn began to help other alcoholics (NMP, 1994, page 23).

Members of the AA share experiences from which they draw mutual help and reassurance to boost their morale.

2. Al-Anon Family Groups

This is “an allied to AA, but independent organization for spouses and other relatives and friends of alcoholics” (New Encyclopedia Britannica, 1990).

Relatives of alcoholics understand from their sharing of experiences the nature of alcoholism and the “best techniques for helping their alcoholic mates, as well as themselves” (NMP.1994, page 24).

3. Ala-teen Movement

This is an offshoot of the Al-Anon aimed at helping adolescent children of alcoholics to understand alcoholism, to understand themselves better, and to learn how to support an alcoholic or at any event, how to live with one (Encyclopedia Britannica, 1990).

6.7 Influence of PADAMS Graduates

Each graduate of PADAMS is expected to be an influential factor or multiplier factor on board the vessel. He can spread “the good news” or the profitable prevention measures he has learned so that his crewmates who have not enrolled in PADAMS will be oriented as well.

Ashore, he can disseminate the knowledge gained to his relatives and friends. Unlike the shipboard scenario where there is limited social interactions, he and those
whom he has informed about PADAMS could in turn further relay this to a greater number of individuals.

During the pre-departure orientation seminars (PDOs) where normally only a few minute-sequence may be allotted to PADAMS, he can further brief his fellow participants through casual conversation about preventive measures against abuse of alcohol and drugs.

In case he is a union member, he can take advantage of his membership as the inroad to influence others to practise PADAMS.

As an organic member of a maritime agency or company, he has to be vocal about PADAMS especially during staff development meetings when suggestions and opinions are solicited. He can be a preventive program advocate in the context of what he has learned in PADAMS.
CHAPTER 7

OPINION SURVEY AT THE WORLD MARITIME UNIVERSITY

In anticipation of the global offering of the PADAMS courses in compliance with the provisions of the STCW Code the general opinion of the World Maritime University (WMU) community was solicited.

The results of the survey were intended to supplement the author’s research through the use of references or secondary materials in her attempt to obtain meaningful insights into the effective modular delivery of the PADAMS courses.

7.1 Questionnaire Fielding

During the first four (4) weeks of the survey, the author personally distributed the questionnaires to the respondents, with the intention of introducing herself and to establish rapport. She was successful in this regard with the members of the World Maritime University staff (academic and non-academic). However, this was not so in the case of the students.

When the students had their field trips simultaneously and the author herself had to join the field trip to Finland, she sought the co-operation of the Filipino students in the WMU to distribute the questionnaires particularly at the Skyline Hotel where they were staying. The author was residing at the Henrik Smith Hostel where she made from room to room visit to the students in May until mid-June after which she had to simply drop the questionnaires in some rooms and retrieved same the following day. Some accomplished questionnaires were posted on the doors.
7.2 The Respondents

There were 250 target respondents comprising of 200 students and the 50 members of the staff of the WMU (academic and non-academic).

However, only 239 (96%) questionnaires had been fielded of which 216 (90%) were retrieved. The survey was conducted in May-June 1999 when students had their field trips by courses almost simultaneously. The new students who arrived in mid-May were included in the survey. And apparently, they had other priorities because they were in their adjustment period in the university. There were students who did not reside in the Henrik Smith Hostel nor in the Sky Bridge Hotel and unfortunately, their class schedules were in conflict with the author’s. Thus, meeting with them posed difficulty. There were occasions when respondents either misplaced or lost the questionnaires which the author had to replace.

The members of the university staff (academic and non-academic) were very supportive and co-operative in responding to the survey. Each showed sincere interest in the undertaking by expressing concern and wishing the author good luck about the outcome. The faculty were the most punctual in returning the accomplished questionnaires. The author was fortunate to have met all of them personally.

7.3 The Instrument (Opinion Survey Form/Questionnaire)

The 20-item questionnaire in Appendix 5 consisted of personal information about the respondents and relevant issues on the abuse of alcohol and drugs in the maritime sector. To these issues, the respondents had three options to choose from: “agree, “disagree” and “uncertain.

To ensure the absence of “grey areas” or vagueness of the questionnaire entries, the author had a dry-run of the survey with a small circle of friends. The rationale for the conduct of the survey which included reasons for the inclusion of the non-seafarers as respondents was likewise fielded.
7.4 The Post Retrieval Phase

The accomplished questionnaires were divided into two (2) major groups: from respondents with seafaring experience and from those without seafaring experience.

The seafarers have been included as respondents because their opinion will influence, to a significant extent, the input in terms of training approaches of the PADAMS courses.

Meanwhile, it is assumed that seafaring experience is a strong factor to yield realistic findings about alcohol and drug use on board the ship.

7.5 The Survey Results

7.5.1 Personal Information

The data on personal information yielded discrepancy from the records of the Registrar of the World Maritime University, particularly on the number of respondents who have "seafaring experience."

The survey had nearly fifty percent (50%) more than the number of those with seafaring experience per the Registrar’s record. Hereunder are the author’s assumptions which could have significant bearing on the said discrepancy.

- The respondents wanted their opinion to be more convincing having identified themselves as "with seafaring experience."
- "seafaring experience" was interpreted to be as encompassing as maritime experience.
- The question, "Do you have seafaring experience?" should have been "Do you have shipboard experience?"
- There are students who did not inform the WMU Registrar about their "seafaring experience" which they had prior to the issue of their deck or engine officer licence.
- Respondents’ short stint onboard the vessel (fishing vessel,
domestic vessel, etc.) may have been considered in the survey but same have not been officially reported for the WMU Registrar’s record.

Notwithstanding the divergence of the personal information data from the WMU Registra’s records, the author gave due merit and respect to the respondents´ reason for the data they had provided.

1. Respondents with seafaring experience

The respondents totalled 123 (57%) comprising of 18 members of the staff (academic and non-academic) and 105 students.

With regard to their sea experience, 94 (44%) had more than 10 years, 16 (7%) had 5-10 years, and 13 (6%) had less than 5 years.

The age range was from 25 to above 35 years and 32 (15%) were from 25 to 35 years old and 91 (42%) were above 35 years old.

The married totalled 111 (51%) and 12 (6%) were single.

There was only one (1) female respondent with seafaring experience.

2. Respondents without seafaring experience

The respondents numbered 93 (43%). This was composed of 28 members of the staff and 65 students of the university.

Only one (1) was below 25 years of age, 49 (23%) were from 25 to 35 years old, and 43 (20%) were above 35 years old.

The married were 56 (26%) and 37 (17%) were single.

There were 37 (17%) female and 56 (26%) male.

7.5.2 The Issues and the Respondents’Opinion

1. **Seafarers have easier access to alcohol than most other professions.**

   □ Respondents with seafaring experience

   agree: 90 (73%)   disagree: 24 (20%)   uncertain: 9 (7%)
Respondents without seafaring experience
agree: 59 (63%) disagree: 14 (15%) uncertain: 20 (22%)

With or without seafaring experience, the respondents opined that seafarers have easier means of obtaining alcohol compared with most other professions.
Among those with seafaring experience, there were more who “disagree” than those who were “uncertain”. This may indicate that though majority of them were affirmative on the issue, this may not be true in all places and to all seafarers.
Among those without seafaring experience, those who were “uncertain” were greater than those who opted to “disagree.” This may signal that the issue has not been much of their concern or there has been scarcity of pertinent information.

2. The percentage of alcohol addicts is bigger amongst seafarers than amongst most other professions.

Respondents with seafaring experience
agree: 76 (62%) disagree: 30 (24%) uncertain: 17 (14%)

Respondents without seafaring experience
agree: 30 (32%) disagree: 14 (15%) uncertain: 49 (53%)

The opinion of the two groups relates to their opinion in item 1 above about seafarers’ “easier access to alcohol.”
The respondents were apparently consistent in their observations that “easier access to alcohol” is directly proportionate to the percentage of alcohol addicts among seafarers.
3. **A seafarer who does not drink alcohol is rare today.**

- Respondents with seafaring experience
  - agree: 77 (63%)  
  - disagree: 32 (26%)  
  - uncertain: 14 (11%)

- Respondents without seafaring experience
  - agree: 44 (47%)  
  - disagree: 20 (22%)  
  - uncertain: 29 (31%)

The two groups’ opinion about seafarers’ attraction to alcohol prevails. Among those with seafaring experience, the majority were positive. They could have applied the issue to themselves or to their close acquaintances considering that 91 in this category were above 35 years old. The heaviest drinking pattern is in the age range of 40 - 50 (NMP, 1994, page 6) as discussed in Chapter 2.

So far the opinion of those without seafaring experience is skewed to “uncertain” although by comparison, the greater percentage were amenable to the issue. It is worth noting that 43 in this group were above 35 years old. It is possible that the others did not have ample opportunities to associate with seafarers particularly in drinking spree.

4. **Seafarers have easier access to drugs than most other professions.**

- Respondents with seafaring experience
  - agree: 17 (14%)  
  - disagree: 32 (26%)  
  - uncertain: 74 (60%)

- Respondents without seafaring experience
  - agree: 26 (28%)  
  - disagree: 25 (27%)  
  - uncertain: 42 (45%)

Generally, they were uncertain about it. However, among those with seafaring experience those who “disagree” were almost twice the number of those who “agree.” In reference to the issue on seafarers’ “easier access to alcohol, this is almost opposite observation from both groups. The figures may also mean lack of pertinent information about the issue.
5. There are drug addicts among seafarers.
   ⊞ Respondents with seafaring experience
       agree: 34 (28%)       disagree: 14 (11%)       uncertain: 75 (61%)
   ⊞ Respondents without seafaring experience
       agree: 42 (45%)       disagree: 8 (9%)        uncertain: 43 (46%)

   The uncertainty of opinion is very strong among those with seafaring experience whereas in the other group those who “agree” and those who were “uncertain” are almost at par in number. Drug addiction seems to be not so alarming among seafarers as the figures yield.

   The data further signal the need for related research.

6. The percentage of addicts is bigger amongst seafarers than amongst other professions.
   ⊞ Respondents with seafaring experience
       agree: 4 (3%)       disagree: 46 (37%)       uncertain: 73 (59%)
   ⊞ Respondents without seafaring experience
       agree: 9 (10%)        disagree: 23 (25%)        uncertain: 61 (66%)

   Both groups were strongly “uncertain” about the issue followed by the “disagree” opinion about it. This is an optimistic observation considering the safety sensitive nature of seafaring.

7. There are more alcohol addicts amongst seafarers than drug addicts.
   ⊞ Respondents with seafaring experience
       agree: 103 (84%)       disagree: 2 (2%)       uncertain: 18 (15%)
   ⊞ Respondents without seafaring experience
       agree: 59 (63%)       disagree: 4 (4%)        uncertain: 30 (32%)
The figures support the earlier observations about the attraction of alcohol among seafarers. So far, the data point to the vulnerability of seafarers to alcoholism. Their opinion on parallel issues about drugs registered the opposite findings.

8. **Prevention is better than cure.**
   - Respondents with seafaring experience
     - agree: 120 (98%)  disagree: 1 (0.8%)  uncertain: 2 (2%)
   - Respondents without seafaring experience
     - agree: 91 (98%)  disagree: 0  uncertain: 2 (2%)

   “Prevention is better than cure” is a popular saying about which the respondents are in unanimous agreement. Their general opinion lends support to the aim of the study: the need for effective training approach.

9. **Preventive training against alcohol abuse will help seafarers.**
   - Respondents with seafaring experience
     - agree: 105 (85%)  disagree: 2 (2%)  uncertain: 16 (13%)
   - Respondents without seafaring experience
     - agree: 86 (93%)  disagree: 2 (2%)  uncertain: 5 (5%)

   The data reflect the finding on the immediately preceding issue. The respondents expressed hope and confidence in preventive measures against alcohol abuse. Their prominent opinion about the seafarers’ vulnerability to the attraction of alcohol seems to be as striking as their stance that prevention could save seafarers from the threatening consequences.

10. **Preventive training against drug abuse will help seafarers.**
    - Respondents with seafaring experience
      - agree: 116 (94%)  disagree: 1 (0.8%)  uncertain: 6 (5%)
Respondents without seafaring experience  

agree: 86 (93%)  disagree: 1 (0.8%)  uncertain: 6 (6%)

Though in the earlier findings, the respondents were “uncertain” about the extent of drug addiction among seafarers, this issue is popular, an expression of being proactive. Their opinion reflects their cautious nature and understanding that in seafaring, preventive measures should always be in place. There is no room for taking chances.

11. What organization/institution should hold these courses?

Respondents with seafaring experience  

<table>
<thead>
<tr>
<th>Rank</th>
<th>Organization/Institution</th>
<th>Votes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Maritime Education and Training Institute</td>
<td>47</td>
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<tr>
<td>2</td>
<td>Maritime Administration</td>
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<td>3</td>
<td>Shipping Companies</td>
<td>28</td>
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<tr>
<td>4</td>
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<td>22</td>
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<td>5</td>
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Respondents without seafaring experience  

<table>
<thead>
<tr>
<th>Rank</th>
<th>Organization/Institution</th>
<th>Votes</th>
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<td>3</td>
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<td>28</td>
</tr>
<tr>
<td>5</td>
<td>Others</td>
<td>7</td>
</tr>
</tbody>
</table>

The respondents made more than a choice. Both groups gave priority to the Maritime Education and Training Institute to hold the PADAMS.
courses. This is corollary to their earlier support to the need for preventive training with regard to the abuse of alcohol and drugs.

Those with seafaring experience lodged the Maritime Administration in second rank whereas those without seafaring experience placed shipping companies as their second preference.

It is a common knowledge that the Maritime Administration has the widest jurisdiction among the choices above. The seafarers are specially familiar with this agency. It is to be expected therefore that they would want an influential body to effect the training course for it would involve certification and documentation.

The respondents without seafaring experience preferred shipping agencies next to schools and training centers. They seemingly considered that these companies have direct control of ship operation and would therefore be responsible in maintaining alcohol- and drug-free environment on board. And since they are the ones in business, certainly a healthy maritime workforce is an utmost concern.

Those who selected the Specialized Medical Institutions most probably had in mind the risk and hazard to health of abusing the use of alcohol and drugs. This is the “clinical approach” which considers that alcoholism is a disease and drugs are a threat to life. However, the said risk and threat to life may be avoided through prompt preventive measures.

12. Who should give the course?

<table>
<thead>
<tr>
<th>Respondents with seafaring experience</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educators</td>
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<tr>
<td>Psychologists</td>
<td>59</td>
</tr>
<tr>
<td>Psychiatrist</td>
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<tr>
<td>Sociologist</td>
<td>3</td>
</tr>
</tbody>
</table>

64
<table>
<thead>
<tr>
<th>Others</th>
<th>9</th>
<th>5</th>
</tr>
</thead>
</table>

- Respondents without seafaring experience

<table>
<thead>
<tr>
<th>Rank</th>
<th>Educators</th>
<th>Psychiatrist</th>
<th>Sociologist</th>
<th>Others</th>
</tr>
</thead>
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<tr>
<td>5</td>
<td>40</td>
<td>17</td>
<td>25</td>
<td>16</td>
</tr>
</tbody>
</table>

Similar to the immediately preceding concern, most of the respondents chose more than one. They were in agreement that trainers should understand the nature and behaviour of their trainees. They made unanimous choice of the educators whose expertise is to inculcate learning which takes place when there is change of behaviour. Their second choice is the psychologist who specializes on individual’s personality particularly on coping mechanism against life’s uncertainties.

However, the two groups differed in their third choice. Those with seafaring experience opted for the psychiatrist while those without teaching experience preferred the sociologist. It may be inferred that life onboard the vessel which is the seafarers’ workplace and home indeed poses difficulties. As discussed in Chapter 5, a psychiatrist "deals with mental, emotional or behavioural disorder originating from ... faulty interpersonal relationship."

And those who have not experienced life at sea, seem to opine that failure in social interactions is most damaging and may affect the productivity of the crew. Likewise defined in Chapter 5, a sociologist is a "specialist in the systematic study of the development, structure, and functions of human group..."

The respondents in both groups who chose “others” indicated that trainers should come from either manning or shipping agencies. An insight
into this preference would point to the employment considerations or the extent of responsibility that these agencies have concerning seafarers’ shipboard employment.

13. **Those who give the course should have seafaring background.**

- Respondents with seafaring experience
  
  agree: 44 (36 %)  disagree: 14 (11%)  uncertain: 65 (53%)

- Respondents without seafaring experience
  
  agree: 59 (63%)  disagree: 20 (22%)  uncertain: 14 (15%)

It is unusual that those with seafaring experience were “uncertain” about this issue. They did not consider the need for the trainers to bring into the class his or her experience in seafaring. They were confident that non-seafaring trainers have training techniques to effect preventive measures against alcohol and drug abuse. This attitude is most welcome for it ensures participatory delivery of the training program with sustained co-operation from the trainees which is an important feature of the behavioural approach.

14. **This course should become a mandatory part of the education and training programmes for seafarers.**

- Respondents with seafaring experience
  
  agree: 104 (85%)  disagree: 5 (4%)  uncertain 14%(11%)

- Respondents without seafaring experience
  
  agree: 83 (89%)  disagree: 5 (5%)  uncertain: 5 (5%)

The data present support to the pertinent provisions of the STCW Code. The respondents are from the maritime university and these figures are expected. It would be a surprise if the findings are the contrary because each respondent being part of the WMU is supposed to be an advocate of the prevention against alcohol and drug abuse.
7.6 Overall Opinion of Respondents

1. Seafarers have easier access to alcohol than most other professions.
   agree: 149 (69%)  disagree: 38 (18%)  uncertain: 29 (13%)

2. The percentage of alcohol addicts is bigger amongst seafarers than amongst most other professions.
   agree: 106 (49%)  disagree: 44 (20%)  uncertain: 66 (31%)

3. A seafarer who does not drink alcohol is rare today.
   agree: 121 (56%)  disagree: 52 (24%)  uncertain: 43 (20%)

4. Seafarers have easier access to drugs than most other professions.
   agree: 43 (20%)  disagree: 57 (26%)  uncertain: 116 (54%)

5. There are drug addicts among seafarers.
   agree: 76 (35%)  disagree: 22 (10%)  uncertain: 118 (55%)

6. The percentage of drug addicts is bigger amongst seafarers than amongst most other professions.
   agree: 13 (6%)  disagree: 69 (32%)  uncertain: 134 (62%)

7. There are more alcohol addicts amongst seafarers than drug addicts.
   agree: 162 (75%)  disagree: 6 (3%)  uncertain: 48 (22%)

8. Prevention is better than cure.
   agree: 211 (98%)  disagree: 1 (0.5%)  uncertain: 4 (2%)

9. Preventive training against alcohol abuse will help seafarers.
   agree: 191 (88%)  disagree: 4 (2%)  uncertain: 21 (10%)

10. Preventive training against drug abuse will help seafarers.
    agree: 202 (94%)  disagree: 2 (1%)  uncertain: 12 (6%)

11. What organization/institution should hold these courses?  

<table>
<thead>
<tr>
<th>Organization</th>
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<th>Rank</th>
</tr>
</thead>
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<td>Specialized Medical Institution</td>
<td>50</td>
<td>4</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td>Others</td>
<td>9</td>
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</tbody>
</table>

12. Who should give the course?

<table>
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<th>126</th>
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<tbody>
<tr>
<td>Psychologist</td>
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<td>Psychiatrist</td>
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<td>Sociologist</td>
<td>44</td>
<td>3</td>
</tr>
<tr>
<td>Others</td>
<td>25</td>
<td>5</td>
</tr>
</tbody>
</table>

13. Those who give the course should have seafaring background.

  agree: 103 (48%)   disagree: 34 (16%)   uncertain: 79 (37%)

14. These courses should become a mandatory part of the education and training programmes for seafarers.

  agree: 187 (87%)   disagree: 10 (5%)   uncertain: 19 (9%)

7.7 Overall Findings from the Opinion Survey

7.7.1 The greater percentage of the respondents agreed on the following:

1. Seafarers have easier access to alcohol than most other professions.
2. The percentage of alcohol addicts is bigger amongst seafarers than amongst most other professions.
3. A seafarer who does not drink alcohol is rare today.
4. There are more alcohol addicts amongst seafarers than drug addicts.
5. Prevention is better than cure.
6. Prevention training against alcohol abuse will help seafarers.
7. Prevention training against drug use will help seafarers.
8. Those who give the course should have seafaring background.
9. These course should become mandatory part of the education and training programmes for seafarers.
7.7.2 The greater percentage of the respondents were “uncertain” about the following:
1. Seafarers have easier access to drugs than most other professions.
2. There are drug addicts among seafarers.
3. The percentage of drug addicts is bigger amongst seafarer than amongst most other professions.

7.7.3 The respondents’ preferences with regard to the organization/institution to hold the PADAMS courses can be ranked as:

1. Maritime Education and Training Institution
2. Shipping Agencies
3. Maritime Administration
4. Specialized Medical Institution
5. Others

Two (2) of those who opted for “others” specified community civic groups and church-related associations to take charge of holding PADAMS courses.

7.7.4 The respondents’ preferences with regard to trainers of PADAMS courses can be ranked as:

1. Educator
2. Psychologist
3. Sociologist
4. Psychiatrist
5. Others

Four (4) of those who chose “others” indicated the need for a “team” or “staff” from shipping/manning companies to conduct the course.
CHAPTER 8

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

8.1 Summary of Findings

The findings are hereunder presented according to the objectives of the study:

8.1.1 Preventive measures against the abuse of alcohol and drugs in compliance with the provisions of the STCW Code.

Preventive measures against alcohol and drug abuse had been given priority concerns before the pertinent provisions of the STCW Code became mandatory. Proposals from participating international organizations as documented in the proceedings of the ILO Inter-regional Meeting of Experts on Alcohol and Drug Problems in the Maritime Industry held in Geneva, 29 September-2 October 1992 highlighted the following intentions:

1. **International Maritime Organization (IMO)**
   
   Sustain participation in WHO meetings to ensure that measures taken by the IMO are compatible with those taken by the WHO and vice versa.

2. **International Labour Organization (ILO)**
   
   Reach a compromise between seafarers and shipowners with the conditions that alcohol and drug testing is a part of a total prevention programme (not as the only programme) and that strict measures are taken to ensure that the rights of seafarers are upheld.
3. **World Health Organization (WHO)**

   Promote certain conditions on alcohol drinking habits and the respect for the alcohol consumption limit.

   Sustain co-ordination with UNDCP and ILO in developing “Model Programme of Drug and Alcohol Abuse Prevention among Workers and Families.”

4. **International Shipping Federation (ISF)**

   Coordinate with ILO for assistance in the development of drug and alcohol policies in shipping companies.

5. **International Transport Workers Federation (ITF)**

   Adopt drug and alcohol policies providing general education and assistance to workers following the central principle “prevention not punishment.”

   Social and civic group/associations like the Alcoholics Anonymous (AA), the Al-Anon Family Groups and the Ala-Teen Movement on account of their international operation as therapeutic programmes have assisted a number of seafarers and their families towards alcohol- and drug-free lifestyles.

8.1.2 **Harmful effects of alcohol and drugs which affect the seafarers’ health and employment**

1. **Fatigue**

   The possibility that fatigue while on watch, which currently alarms the industry is among the medical consequences of alcohol abuse. The anaesthetic and mood improvement effect of alcoholism is short-lived. Fatigue reappears followed by dietary disorders and an increased risk of accidents at work.
2. Impaired Judgment

Alcohol can impair an individual’s judgment as what happened to 32-year old Joseph Hazelwood, the Master of Exxon Valdez who had two convictions for drunken driving, and had undergone treatment for alcohol rehabilitation in 1985. The common view is that “the accident could not have happened if he had stayed on the bridge.”

3. Post Alcohol Impairment Syndrome (PAIS)

The manifestations of harmful effects of alcohol make the individual unable to cope with stressful or problematic situations due to lower responses, clumsy movements, blurred vision, loss of concentration and impaired logical thinking.

4. Damage to Health and Personality

- Drugs may cause “trips” which may scar the personality.
- Poor perception of time and space may result from prolonged drug misuse.
- Since drugs affect the brain, an occurring consequence is the inability to follow reasoned argument.
- Intelligence rate is lowered because drug is still in the brain.
- Drugs reduce sperm count and fertility.

5. Acquired Immune Deficiency Syndrome (AIDS)

The body defence or immune system is weakened by alcohol abuse and is disease-prone, including AIDS.

8.1.3 Training strategies for the modular delivery of PADAMS courses

1. The guiding principles in the conduct of PADAMS courses are:
   - There is no problem trainee, but a trainee with a problem.
   - Learning takes place in a trainee-centered atmosphere where he is
allowed optimum participation.

Learning is effective when there is positive change of behaviour among the trainees.

2. Lectures are least utilised because trainers are often the facilitators for group-works, group dynamics, mini-panel discussions, role play, reporting, mini-symposium, debate and problem-solving.

3. The Big Brother-Small Brother approach where two trainees help each other compute for maximum alcohol intake is a popular technique.

4. Problem-solving exercises that demand decisions and mathematical enhancement effective comprehension.

5. The different instructional techniques prescribed in IMO MC 6.09 are employed.

8.1.4 Importance of joint efforts between the maritime training centers and the manning agencies

- Seafarer-trainees may be company-sponsored and they can enroll by “batch. The company may request for special schedule, if existing schedule is not applicable to them.

- “To ensure that they get the right man to do the right job on board ship”, some manning agencies conduct pre-employment training in addition to the standard pre-departure orientation seminars (PDOs). The PADAMS curriculum and syllabus may be among their references.

- Manning agencies may conduct shipboard training on awareness about alcohol and drug abuse and the preventive measures may be conducted by ship officers who are graduates of PADAMS courses.

- Manning agencies may avail of consultation services on PADAMS course with the training centers.
For monitoring and evaluation purposes, the training centers and the manning agencies can co-ordinate for follow-ups on graduates of the PADAMS courses.

8.1.5 Reasons for the hiring of educators, psychologists, sociologists and psychiatrists as trainers of the PADAMS courses:

- These professionals share a common service area: study of the nature and development of human behaviour.
- They are appropriately qualified to inculcate “the kingship of positive thinking” which is a reinforcer of behaviour modification to be able to relate better with one’s self, with others and with the work environment.
- Provided that they undergo a familiarization programme on seafaring, they can be effective trainers of PADAMS.

8.2 Supplementary Nature of the Findings

The results of the opinion survey support the findings that positive outlook of life reflected in wholesome relationship with one’s self, with others and with the workplace is the preventive measure with lasting impact against the abuse of alcohol and drug.

The respondents’ choice of the educators to give the PADAMS courses and their preference for the educational and training institutions to hold the said courses indicate that they give priority to urgent behaviour modification or enrichment by inspiring seafarers that there is beauty in life.

Their least choice is the specialized medical institutions to hold the PADAMS courses. These institutions by their nature employ clinical approach which optimizes the use of videos and visuals showing the medical consequences of drug and alcohol abuse (i.e. loss of weight, clumsiness, balding, physical defects, illness, death, etc.). The medical consequences may only be short-term reminders which at times the seafarers feel confident would not happen to them.
Their opinion is parallel with the ILO´s principle in its prevention programme against alcohol and drug abuse: “the personal and social consequences of drug dependency are usually of more immediate concern and should be the focus of more preventive efforts.”

The respondents were generally agreeable that preventive training programmes against alcohol and drug abuse will help seafarers. Their opinion was likewise in harmony with the author’s findings that alcohol has been stronger attraction to seafarers and that the same may not be true to drugs. They were generally “uncertain” about the influence of drugs to the seafarers while at sea. The author has often mentioned in the study the lack of data about seafarers ´abuse of alcohol and drugs.

8.3 Conclusions

8.3.1 Development of preventive measures against alcohol and drugs had been the concern of international communities even before the STCW Code made this mandatory. Measures for compliance may therefore be identified and defined in reference to the proposals presented by IMO, ILO, WHO, IFS, and ITF during the ILO-Inter-regional Meeting of Experts on Alcohol and Drug Problems in the Maritime Industry held in Geneva, 29 September - 2 October 1992.

An offshoot of the above-mentioned meeting of experts is the ongoing PADAMS courses in the National Maritime Polytechnic, the only government maritime training center in the Philippines.

8.3.2 The STCW Code requires from seafarers the competence “to contribute to effective human relationships onboard the ship”through the knowledge and understanding of the ”danger of alcohol and drugs.” Hence, the PADAMS courses have been designed with flexibility and adaptations with due respect to the culture of individual countries.
8.3.3 The harmful effects of alcohol and drug abuse are better comprehended by the trainees when presented and discussed in the context of positive outlook about life which should prevail over the destructive abuse of alcohol and drug.

8.3.4 The modular conduct of PADAMS courses is participatory to further enhance the trainee’s three-phase relationship: with himself, with others, and with the workplace.

8.3.5 Joint efforts between the training centers and the manning agencies are input to the instructional cycle of the PADAMS courses. Feedback from the manning agencies lends dynamic improvements to the course contents.

8.3.6 Behaviour-oriented professionals (i.e. educators, psychologists, sociologists and psychiatrist) who have undergone seafaring familiarization programme or who have seafaring experience are most qualified to conduct the PADAMS courses.

8.4 Recommendations

8.4.1 The participating international organizations in the ILO-Inter-regional Meeting of Experts on Alcohol and Drug Problems in the Maritime Sector should convene the soonest and include in their agenda the pertinent provisions of the STCW Code. The occasion would be the opportune time to come up with preventive measures based on their proposals in 1992 and which should be updated on account of the STCW Code provisions.
8.4.2 Fellowships, grants and donations should also apply to the implementation of the PADAMS courses.

8.4.3 Respect for alcohol consumption limit must be respected and promoted through print and broadcast media.

8.4.4 Manning agencies and training centers should arrange meetings with the social and civic groups (Alcoholics Anonymous, Al-Anon Family Groups and Ala-teen Movement) as part of their alcohol and drug abuse prevention programme.

8.4.5 Incentives will have to be established by concerned maritime agencies to attract the services of experts in the nature and development of human behaviour (educators, psychologists, sociologists, and psychiatrists) in connection with the implementation of their alcohol and drug abuse prevention programme.

8.4.6 Important reminders should be posted or displayed in conspicuous places on board the ship and in land based maritime offices. These reminders would include “Prevention is better than cure”, “Count your drinks and live longer,” and “Respect the alcohol consumption limit.”

8.4.7 Subject matters related to education, psychology, sociology and psychiatry should be given “in roads” to WMU courses, particularly the courses for policy students.

8.4.8 The following researches should be undertaken as offshoots of this study:

- “Clinical Approach and Behavioural Approach in the Conduct of the PADAMS Courses: A Comparative Analysis”
“Constraints and Challenges of the PADAMS Courses”
“Qualification Index for the Trainers of the PADAMS Courses”
“Alcohol- and Drug-Related Sea Mishaps”
“The PADAMS Courses During the Transition Period 1997 – 2002”
“Seafarers´ Employment Assistance Programme and the PADAMS Courses”
BIBLIOGRAPHY


Thorne, B D (1986). Alcohol in the Canadian Marine Place. Canada: NIDA.

# APPENDIX 1

## STANDARD UNITS OF ALCOHOL

I unit = 1.5 cl pure alcohol=12.8 g alcohol

One (1) unit

- = ½ bottle (33 cl) of lager
- = 1 glass (12 cl) of table wine
- = 1 glass (8 cl) of dessert wine
- = 1 drink of liquor

### Consumption Level/Week

<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
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</tr>
</thead>
<tbody>
<tr>
<td>below 14 units</td>
<td>below 9 units</td>
<td>positive behavioural change</td>
</tr>
<tr>
<td>21 units</td>
<td>14 units</td>
<td>risk of medical and social problems</td>
</tr>
<tr>
<td>above 21 units</td>
<td>above 14 units</td>
<td>high statistical risk of injury and damage</td>
</tr>
</tbody>
</table>

Duration: one week

Three conditions:

1. At least three days a week without alcohol
2. No more than 4 units on drinking day
3. Never during pregnancy or while at work or driving

“Count your drinks. Drink less – live better.”

APPENDIX 2

COMPUTATION FOR MAXIMUM ALCOHOL CONSUMPTION (LIMIT)

1. Computation for the maximum alcohol consumption (limit) of 75-cl dessert wine (red wine)

   a. Convert 75 centiliters (cl) into to units (Refer to Appendix 1)
      
      1 unit (dessert wine) = 8 cl
      
      75 cl./8cl = 9.38 units

   b. Compute for daily maximum alcohol consumption (limit)
      
      7 days a week – 3 non-drinking days = 4 days
      
      13 units a week /4 days = 3.25 units/day
      
      (below 14 units)
      
      3.25 units/day x 8 cl(1 unit) = 24 cl/day

   c. Compute for the number of days that the 75 cl dessert wine (red wine) may be consumed in terms of maximum daily consumption.
      
      75cl/24cl = 3.125 days or 3 days

Note: It is recommended that the 75-cl dessert wine (red wine) be consumed MORE THAN 3 DAYS. The computed number of days is in reference to MAXIMUM DAILY ALCOHOL CONSUMPTION.
2. Computation for the number of bottles of 75-cl dessert wine (red wine) for 24-man crew in the 10-month voyage.

   a. Compute for maximum monthly alcohol consumption of a crew member
   
   one (1) month = 4 weeks = 16 drinking days/crew member
   
   3.25 units = maximum daily alcohol consumption or
   
   3.25 units/day x 16 days = 52 units/month/crew member

   b. Compute for the maximum monthly alcohol consumption of the 24-man crew.
   
   52 units/month x 24 men = 1,248 units/month

   
   1248 units/month x 10 = 12,480 units

   d. Convert 12,480 units into 75-cl bottle of dessert wine (red wine).
   
   1 unit = 8 cl. of dessert wine (Refer to Appendix 1)
   
   75cl/8 cl = 9.38 units (Refer to problem 1 above).
   
   12,480 units/9.38 units = 1,330.50 bottles of 75-cl dessert wine (red wine)

   Note: It is recommended that the 10-month voyage be provided with LESS THAN THE COMPUTED NUMBER of bottles of the 75-cl dessert wine (red wine). The computed number of bottles is in reference to the MAXIMUM DAILY ALCOHOL CONSUMPTION (limit).
1. The Maritime Safety Committee, in considering, at its sixtieth session (6 to 10 April 1992), the question of drug and alcohol abuse, agreed on the annexed principles and guidelines which Member Governments are invited to consider when establishing drug and alcohol abuse screening programmes, noting that the content of the annexed circular is meant to serve as an interim report on the issue before the Committee finalizes its consideration of these matters.

2. As the Organization has resumed the collection and collation of casualty statistics which include the role of the human element in maritime casualties, Member Governments are invited, when establishing that drug and alcohol abuse amongst seafarers has contributed in such incidents, to submit relevant information for inclusion in these statistics.
ANNEX
PRINCIPLES AND GUIDELINES CONCERNING
DRUG AND ALCOHOL ABUSE PROGRAMMES

1. Drug and alcohol abuse are considered to directly affect fitness or the ability of a seafarer to perform shipboard functions. Therefore, careful consideration must be given to the screening of seafarers prior to their employment. A seafarer under the influence of drugs or alcohol would be considered disqualified from further duties until no longer impaired in his abilities to perform his duties, or rehabilitated and found fit for sea service.

2. In recognition of the international concern for the perceived problem, it is urged that the scope of any drug or alcohol abuse amongst seafarers should be scientifically researched and monitored.

3. These conditions are properly within the purview of the Maritime Safety Committee’s work programme. Any work or research conducted by the Organization in this respect will be co-ordinated and/or shared with other competent international bodies, such as ILO, WHO and the UN International Drug Control Programme, which are also involved in developing drug and alcohol abuse prevention methods.

4. Screening is a critical element of any prevention programme. Any comprehensive work programme should also include rehabilitation, education and counselling as principal elements within a formulated policy on drug and alcohol abuse.

5. Screening serves several purposes, including identifying individuals, who, due to unfitness, are not qualified to be seafarers, detecting these individuals before
they present a threat to their own safety or the safety of others, and property; discouraging drug and alcohol abuse; and identifying seafarers in need of rehabilitation.

Drug and alcohol abuse screening programme guidelines
1. The flag State authority should ensure that adequate measures are taken to prevent alcohol and drugs causing harm on board ship. Any screening programmes should be established and implemented under flag State authority.
2. Screening should include procedures that identify drug and alcohol abuse.
3. Screening procedures should respect the dignity, privacy, confidentiality and fundamental legal rights of the individuals concerned.
4. Any specimens which might be collected should be suitably safeguarded, and analysis should be performed by competent persons or independent agencies.
5. Accuracy of testing and analysis procedures should be maintained by rigorous quality control procedures.
6. Where undertaken, positive body fluid test results should be interpreted by a medically competent person acceptable to the flag State.
7. Unless separate agreements are in effect between States, there should be no screening of mariners onboard foreign-flag ships unless the ship has been involved in a marine casualty or pollution incident in waters subject to the coastal State’s jurisdiction. Only mariners considered to be directly involved in the incident should be subject to any screening.
DRUG USE AND ALCOHOL ABUSE

The Maritime Safety Committee, at its sixty-third session (16 to 25 May 1994), noting that the Sub-Committee on Standards of Training and Watchkeeping was considering the inclusion in the relevant chapter of the STCW Convention under revision, a minimum safety standard of 0.08% blood alcohol level (BAC), instructed the Secretariat to invite Member Governments to consider developing national legislation prescribing a maximum of 0.08% BAC during duty as a minimum safety standard on their ships and to improve their programmes for the prevention of blood drug misuse.

Pursuant to the Committee’s instruction, the above request is brought to the attention of Member Governments inviting them to take action as recommended above.
Greetings, MABUHAY!

This survey is being conducted for the dissertation

“Prevention of Alcohol and Drug Abuse in the Maritime Sector: a
Behavioural Approach towards Maritime Safety and
Environmental Protection”

on the account of the growing exigency to address the alcohol and drug problems in the maritime sector.

In 1994, a new training course, Prevention of Alcohol and Drug Abuse in the Maritime Sector (PADAMS), was developed by the National Maritime Polytechnic (NMP), the only government maritime training center in the Philippines. This programme has been a part of the “Development Measures to Reduce Drug and Alcohol Problems in the Maritime Industry” executed by the International Labour Organization (ILO) with the financial assistance of the United Nations International Drug Control Programme (UNDCP). This ongoing course has been conducted at the National Maritime Polytechnic since mid-1995 for Merchant Marine Officers, Ratings and Cadets.

In anticipation of the global offering of the said course in compliance with the provisions of the STCW Code (Section a-VI/1-4 and Section B-VIII/2), the general opinion of the World Maritime University community is hereby solicited.

The non-seafarers have been included among the respondents because their opinion will influence, to a significant extent, the input (qualification of trainer, course content, entry level, etc.) of the course.
The dissertation, through the result of this survey, is expected to update and enrich the existing *PADAMS Manual* in the Philippines and to serve as among the references for the preparation of related or similar training programme in the other maritime training countries.

ROSANA DE LA ROSA – SEVILLA
MSEP (P) ’99

Please mark the pertinent information.

**Information about yourself**

1. Sex: □ Female □ Male
2. Status: □ Single □ Married
3. Age: □ below 25 years □ 25-35 years □ above 35 years
4. Status at World Maritime University:
   □ academic staff □ non-academic staff □ student
5. Do you seafaring experience? □ yes □ no
   Maritime-related work experience (sea-based or land-based)
   □ below 5 years □ 5-10 years □ above 10 years

**Could you please give your opinion on the following statements:**

6. Seafarers have easier access to alcohol than most other professions.
   □ agree □ disagree □ uncertain
7. The percentage of alcohol addicts is bigger amongst seafarers than amongst most other professions.
8. A seafarer who does not drink alcohol is rare today.
   ☐ agree ☐ disagree ☐ uncertain

9. Seafarers have easier access to drugs than most other professions.
   ☐ agree ☐ disagree ☐ uncertain

9. There are drug addicts among seafarers.
   ☐ agree ☐ disagree ☐ uncertain

10. The percentage of drug addicts is bigger amongst seafarers than amongst most other professions.
    ☐ agree ☐ disagree ☐ uncertain

11. There are more alcohol addicts amongst seafarers than drug addicts.
    ☐ agree ☐ disagree ☐ uncertain

12. Prevention is better than cure.
    ☐ agree ☐ disagree ☐ uncertain

13. Preventive training against alcohol abuse will help seafarers.
    ☐ agree ☐ disagree ☐ uncertain

14. Preventive training against drug use will help seafarers.
    ☐ agree ☐ disagree ☐ uncertain

15. What organization/institution should hold these courses?
    ☐ Maritime Education and Training Institute
    ☐ Maritime Administration
    ☐ Shipping Companies
    ☐ Specialized Medical Institution
    ☐ Other

16. Who should give the course?
    ☐ Educator
    ☐ Psychologist
    ☐ Psychiatrist
    ☐ Sociologist
    ☐ Other
17. Those who give the course should have seafaring background.
   ☐ agree ☐ disagree ☐ uncertain

18. These courses should become a mandatory part of the education and training programmes for seafarers.
   ☐ agree ☐ disagree ☐ uncertain
RESPONDENTS’ PROFILE
(Opinion Survey)

1. Sex:    Female  38
           Male     178

2. Status: Single  49
             Married 167

3. Age:    below 25 years  1
           25 - 35 years  81
           above 35 years 134

4. Status at World Maritime University
   academic staff  23
   non-academic staff  23
   students  170

5. With seafaring experience  123
   Without seafaring experience  93

6. Maritime-related work experience (sea-based/land-based)
   below 5 years  76
   5-10 years  47
   above 10 years  93
PADAMS GRADUATES AT THE NATIONAL MARITIME POLYTECHNIC
(Philippines)
June 1995 - March 1999

<table>
<thead>
<tr>
<th>YEAR</th>
<th>NUMBER OF GRADUATES</th>
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<td>1995</td>
<td>875</td>
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<tr>
<td>1996</td>
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</tr>
<tr>
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<td>2663</td>
</tr>
<tr>
<td>1999</td>
<td>375</td>
</tr>
<tr>
<td>Total</td>
<td>9729</td>
</tr>
</tbody>
</table>
GUIDELINES FOR THE CONTROL OF DRUGS AND ALCOHOL
ONBOARD SHIP

(January 1990, Oil Companies International Marine Forum)

Salient Features

1. Shipping companies should have a clearly written policy on drug and alcohol abuse that is easily understood by seafarers as well as shore-based staff. In order to enforce their policy, companies should have rules of conduct and controls in place with the objective that no seafarer will navigate a ship or operate its onboard equipment while impaired by drugs or alcohol.

2. Appropriate seafarers should be subject to testing and screening for drugs and/or alcohol abuse during routine medical examination.

3. Any use of a controlled substance which causes or contributes to unacceptable job performance or unusual job behaviour should also be prohibited.

4. The suggested list of substances to be banned should include, but not limited to: marijuana, cocaine, opiates, phencyclidine (PCP) and amphetamines.

5. A company policy should provide for control of onboard alcohol distribution and consumption.
6. The policy should support the principle that officers and ratings should not be impaired when performing scheduled duties.

7. It is recommended that officers and ratings observe a period of abstinence from alcohol prior to scheduled watch-keeping duty or work periods. For example, this may be either a fixed period (e.g. the USCG requires 4 hours) or a period based upon prior alcohol consumption (e.g. 1 hour of abstinence for each unit of alcohol consumed.

8. Seafarers should be actively encouraged not to exceed consumption levels which could affect long term health.

9. Information should be provided to crew on alcohol consumption in relation to impairment and its impact on behaviour and health, and also on the availability of rehabilitation programmes.

10. It must be borne in mind that all seafarers should be able to respond at anytime to an emergency situation. Therefore, consideration should be given to advising maximum acceptable levels of blood alcohol content.
## APPENDIX 9

### APPROXIMATE ALCOHOL UNIT CONVERSIONS

<table>
<thead>
<tr>
<th>Volume</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Beers and Lagers</strong></td>
<td></td>
</tr>
<tr>
<td>Ordinary Strength Beer or Lager</td>
<td>10 oz. 1</td>
</tr>
<tr>
<td></td>
<td>30 cl  1</td>
</tr>
<tr>
<td>Extra Strength Beer or Lager</td>
<td>10 oz. 2 1/2</td>
</tr>
<tr>
<td></td>
<td>30 cl  2 1/2</td>
</tr>
<tr>
<td><strong>Spirit/Liquor</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 oz.  1</td>
</tr>
<tr>
<td></td>
<td>3 cl    1</td>
</tr>
<tr>
<td><strong>Table Wine</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10 cl   1</td>
</tr>
<tr>
<td></td>
<td>1 litre bottle 10</td>
</tr>
<tr>
<td><strong>Sherry or Fortified Wine</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6 cl    1</td>
</tr>
<tr>
<td></td>
<td>1 litre bottle 16</td>
</tr>
</tbody>
</table>

Source: *Guidelines for the Control of Drugs and Alcohol Onboard Ship*  
(OCMIF, January 1990)