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EAP evaluation 2010-2019: What do we now know?

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ABSTRACT

Five electronic databases were searched using the key words "Employee Assistance." "research" and "evaluation" for articles published from 2010 to 2019 along with a manual search of the two prominent journals in the Employee Assistance field. Twenty-six evaluations were found which were categorized using Macdonald's evaluation typology into four groups: needs assessments (n = 1), program development [case study] (n=3), outcome (n=15) and process (n=7). There were as many international as American studies (n = 13). While most evaluations were conducted by organizations with internal models (n = 9) they were not the majority as there were eight evaluations examining external EAPs and five that examined hybrid internal/external models. A broad range of methodologies were employed that demonstrated that the EAPs that were reviewed produced positive outcomes including both saving organizations money as well as in producing positive changes. What was also witnessed during this time period was a greater use of standardized tests to collect data led by a new instrument developed during the decade, the Workplace Outcome Suite, though several studies still did not use any type of standardized assessment tool in their evaluation process. The article concludes by comparing changes that have occurred with reported peer-reviewed EAP evaluation over the past 40 years.

ARTICLE HISTORY

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KEYWORDS

Employee assistance program; case study; needs assessment; outcome evaluation; process evaluation

Introduction

In the beginning days of earnest Employee Assistance Programming evaluation, the 1980s, there were many active dialogues in the field as it grew and expanded (Battle, 1988; Durkin, 1985; Jerrell & Rightmyer, 1982; Kurtz, Googins, & Howard, 1984; Lynch, 1980; Masi & Goff, 1987). What type of programming is the best: internal, external, hybrid? Who should sponsor the program: occupational health services, management, labor, joint committees? What type of outcome measures should be considered in evaluating programs? Do we even need to bother evaluating EAPs as we know they are important and they work, so let's just practice? Fortunately,

Table 1. Types of evaluation by decade: 1980–1989 to 2000–2009.

	1980–1989	1990–1999	2000–2009
Needs Assessments	3	4	2
Case Studies	4	12	21
Outcome Studies	7	14	10
Process Evaluations	5	9	9
Total:	19	39	42

Note: Csiernik, 1995, 2005, 2011.

evaluators did not go away, and had the foresight to realize that knowledge always has a place in practice: to document, to critique, to commend, and most importantly to improve. This was even before the major push for evidence-informed practice and before the corporatization of EAP by large conglomerates.

Over the past decades there has been a regular examination of peer-reviewed EAP evaluations (Csiernik, 1995, 2005, 2011). Table 1 summarizes the frequencies of the various forms of peer-reviewed evaluations reported in those articles, indicating an overall increase in published studies from the 1980s to the 2000s, though not across all forms of evaluation. This current article adds to the existing literature, examining the last decade of published peer- reviewed evaluations, 2010–2019, to continue to build on our knowledge regarding this aspect of EAP.

Method

Five electronic databases; Google Scholar, Psych Info, Medline, Scholars Portal, and Social Work Abstracts, were all searched using the key words Employee Assistance, research, and evaluation for articles published from 2010 to 2019. As well, manual searches of the two prominent publications in the employee assistance field, Journal of Workplace Behavioral Health and Employee Assistance, were conducted to maintain consistency with previous studies. Studies were excluded if they: did not include EAP programs, did not satisfy Macdonald's criteria, were published as private business reports, were not original research, were published only as part of a thesis, or were not written in English. A total of 26 different publications were found and classified using Macdonald's (1986) five steps in a comprehensive evaluation:

- 1. Needs assessment: to determine the overall program goals and direction
- 2. Program Development (case studies): to describe the program, its rationale, and objectives
- 3. Input Evaluation: to determine if the program components have been correctly implemented



- 4. Outcome Evaluation (including cost-benefit analysis): to determine if the program objectives have been achieved
- 5. Process Evaluation: to determine what the program is actually doing and how well.

Results

Needs assessment

One peer-reviewed needs assessment was published between 2010 and 2019, compared to two between 2000 and 2009, four between 1990 and 1999 and three between 1980 to 1989. Street, Lacey, and Somoray (2018) completed a survey of employees within an Australian mining company to assess levels of stress in the workplace, absenteeism and presenteeism, and employees' desire and readiness to manage stress. Street et al. (2018) reported that stressed employees were associated with an average of 33.6% work impairment and impaired productivity costs of over \$45,000 per employee (AUD). Of the employees who identified as feeling stressed all the time, 36% wanted assistance with managing their stress, while 52% of employees experiencing stress most of the time, and 33% of day shift employees experiencing permanent stress identified wanting assistance with managing their stress. This information was of use not only to the organization conducting the needs assessment, but also to others in designing responsive workplace stress management services. However, no specific discussion of actions to be taken by the evaluated company was included in the published study's discussion.

Program development (case studies)

Only three peer-reviewed cases studies were published between 2010 and 2019, the lowest number during any decade examined, and a sharp decrease compared to 21 in the decade before. One case study examined an external EAP provider (Wang, Lin, & Sha, 2014), while the remaining two focused on hybrid programs involving both internal and external resources (Hood & Csiernik, 2017; Rakepa & Uys, 2013). While only three cases studies were published in the last decade, they still gave insight into a variety of workplaces and countries (Table 2). The sectors that were examined included technology, retail, and education. Similarly, each of the case studies examined an organization from a different country, representing EAPs providing services in Canada, South Africa, and Taiwan. Two of the three studies included information on workforce size of the organization, one with 5000 and another with an estimated 6500 employees supported by the EAP.

Table 2. Case study summaries.

Author	Year	Workplace	Workforce Size	Program Initiated	EAP Delivery	Theme
Hood & Csiernik	2017	United Food and Commercial Workers Local 12R24, Ontario, Canada	6500 (est)	1990s	Internal/ External	Union developed program
Rakepa & Uys	2013	Department of Education, Motheo District, South Africa	5000	2001	External	Employee Assistance Consulting Model/ Program Development
Wang, Lin & Sha	2014	Six Technology companies in Central Taiwan Science Park	n.r	n.r	External	Employee Reasons for Seeking Care

The themes covered by each of these three case studies were diverse. Hood and Csiernik (2017) described an EAP that provides support for employees through union funding and oversight, separate from the organization that the unionized employees work for. Addressed in the case study by Rakepa and Uys (2013) were the inefficiencies present in the existing EAP supporting employees in South Africa's Motheo Districts Department of Education, as well as improvements that could be made to improve the existing services. Finally, Wang et al. (2014) explored the various reasons that employees may seek assistance, providing insight into the problems facing employees in the technology industry in Taiwan.

Input evaluation

As seen in previous decades (Csiernik, 1995, 2005, 2011), there were no input evaluations found during this review of the literature from 2010 to 2019. Input evaluations are most commonly used to ensure that a program is doing what it was intended to (Macdonald, 1986), and are thus utilized most frequently as an internal device. While these evaluations can be valuable to organizations as a way to ensure the EAP they have in place is operating in the ways that they believe it to be, they do not typically generate adequate information for a formal academic review. Therefore, it is not surprising that there was again no input evaluations in the peer-reviewed literature between 2010 and 2019.

Outcome evaluation

Historically, studies classified as outcome evaluations have focused on the financial benefits of EAPs with cost-benefit reports and return on investment analyses (Csiernik, 2011). Among the fifteen outcome evaluations that were published between 2010 and 2019, no study included a specific

evaluation of any direct financial benefits associated with EAP use. Anema and Sligar (2010) recommended that future research evaluating the National Institute for the Severely Handicapped Internal EAP that was the focus of their study should include a cost- benefit analysis of the specific EAP, but no such study was found in the literature. Of the fifteen studies classified as outcome evaluations, ten examined organizations based within the United States, though one program accounted for three different studies, one was from each of Canada, China, Russia, and the United Kingdom, while one evaluation did not clearly identify where the evaluated organization was based (Table 3). Seven of these studies reported on internal EAPs, five on external EAPs, two evaluated internal/external hybrid programs, and one study did not describe the type of EAP utilized by the organization. The size of the workforces supported by the evaluated EAPs were also diverse. Though nine of the included studies did not report the workforce size, the reported populations ranged in size from 218 to over 986,000 with an average of 179,000, median and mode of 28,000 employees across the six studies that reported workforce data.

The methods most frequently used in the outcome studies were single group pre-post test analysis (n=4) and quasi-experimental pre-post test with control group (n=4). Retrospective document and chart reviews were also used. Information regarding timeframe for study completion was not consistently described across the various studies. Three studies described a 90 day follow up period between pre and post test, three studies described a ten month recruitment/study time frame, two studies included case studies closed in a fifteen month period, while one included cases closed in a single year. Other retrospective studies examined data from two up to ten years, one study was described solely as retrospective, and one did not include a complete timeframe for the study.

Of importance however, was the increased use of a variety of standardized tools in the outcome evaluations during this decade with the Workplace Outcome Suite (WOS) appearing most frequently (n=7). The Alcohol Use Disorders Identification Test (AUDIT), and the Global Assessment of Functioning (GAF) were each used in three studies. The Outcome Questionnaire - 45.2 (OQ-45.2), the Problem Improvement Rating (PIR), General Anxiety Disorder- 2 item (GAD-2), and the Patient Health Questionnaire- 8 item (PHQ-8), were each used in two studies, though five studies did not use any standardized assessment tools at all. A total of 23 different variables were included across the 15 outcome studies. Absenteeism appeared most frequently and was included in nine of the studies. The next most common variables examined were presenteesim (n=7), workplace distress (n=7), workplace engagement (n=5) and life satisfaction (n = 5). Each of these variables is included as scales in the

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Author (Year)	Anema & Sligar (2010)	Burgess, Lennox, Sharar, & Shtoulman (2015)	Clavelle, Dickerson, & Murphy (2012)	Dickerson, Murphy, & Clavelle (2012)
Workplace Workforce Size EAP Delivery Method	Company within NISH 218 (88% of whom have a disability) Internal Retrospective document review Employee satisfaction surveys Focus groups with EAP stakeholders	Russian Manufacturing Worksite Not Reported Internal Quasi-experimental, nonequivalent groups (Intervention $n=66$, Control $n=338$). Pre/post completion of GAIN-55, WOS, and AUDIT tools.	U.S. Department of Defense Not Reported Internal Chart review n = 100 Pre-post completion of OQ-45.2 and GAF, PIR completed post counseling	U.S Department of Defense Not Reported Internal Chart review Presenting complaint work-related or non-work related, n = 50/group Pre-post completion of OQ-45.2 and GAF, PIR completed
Study Time Frame Variables Examined	Not Reported Program goals identified in grant application, reasons for referral, referral concerns, employee satisfaction (both supervisory and non-supervisory employees)	Follow-up 90 days for intervention group, 120 days for control group GAIN-S5 measures recency of experiences of behavioral health problems. WOS identifies absenteeism, presenteeism, work engagement, life satisfaction, and workplace distress. AUDIT provides measures of alcohol problems and dependence.	Closed files between August 2009 and October 2010 (15 month period) OQ-45.2 estimates subjective distress, quality of interpersonal relationships, level of adjustment and effectiveness at work, and overall level of psychological functioning. GAF reports clinician's judgment of a client's overall level of functioning. PIR provides clinician's assessment of client's improvement on specific goals identified at intake.	Retrospective OQ-45.2 total score estimates psychological functioning, and the social role scale estimates level of functioning at work. GAF reports clinician's judgment of a client's overall level of functioning. PIR provides clinician's assessment of client's improvement on specific
Outcomes	All goals set out in grant application were met. increased number of FTE positions past goal, increased average weekly wage past goal, attained job retention rate past goal, had multiple employees complete voluntary self-determination training, obtained feedback from employees through survey Absenteeism dropped from 28% in first year of the program to 7% in the second year. 80% "strongly agreed" that they would recommend the EAP to others, 66% "strongly agreed" that the EAP was helpful. EAP was accepted as part of the company, and there was a decrease in disciplinary referrals from 28% to 14%.	Statistically significant changes in AUDIT score for intervention group, post-test scores similar to control group. Improvements in presenteeism among intervention group but results were not statistically significant.	Based on pre/post-test analysis of the OQ, 86% of clients reported less dysfunction, while 13% reported more dysfunction at outcome. Mean scores for subjective distress, quality of interpersonal relationships, and level of adjustment and effectiveness at work all decreased with statistical significance, demonstrating improvements in functioning. Mean GAF scores improved with statistical significance, 60% of clients deemed to have shown positive change in functioning by clinicians. Problem Improvement Rating demonstrated that 70% of clients clearly improved, 2% clearly worsened.	Statistical to an more a manage of a manage of a manage in: OQ Total Score, Social Role score, Global Assessment of Functioning Score, and Performance Improvement Rating for both groups.

Author (Year)	Jacobson, Jones, & Bowers (2011)	Li, Sharar, Lennox, & Zhuang (2015)	Mellor-Clark, Twigg, Farrell, & Kinder (2013)	Mintzer, Morrow, Back- Tamburo, Sharar, & Herlihy (2018)
Workplace	20 U.S-based companies	26 China-based companies	Undisclosed number of UK workplaces covered by 6 FAP providers	360 Federal Agencies (USA)
Workforce Size EAP Delivery Method	Not Reported Not Reported Chart review n = 572	Not Reported External Pre-post completion of WOS, $n=670$	Not Reported External Retrospective observational. Files from EAP services	More than 986,390 External Pre-post completion of WOS $n = 4800$
Study Time Frame Variables Examined	GAF, Level of Functioning at Home, LOF at Work scales included at intake and/or completion of counseling. Files closed during 2007 GAF reports clinidan's	May 2012–July 2013 WOS identifies absenteeism,	utilizing CORE System $n=28,476$ Data from 2001 to 2011 Levels of distress, Time to	2 years (2016 and 2017) WOS identifies absenteeism,
	judgment of a client's overall level of functioning. LOF scales assess activities of daily living and quality of life changes, as rated by a clinician.	presenteeism, work engagement, workplace distress, and life satisfaction.	treatment access, Treatment completion rates, Recovery/ improvement rates.	presenteeism, work engagement, life satisfaction and workplace distress.
Outcomes	Only 50 case files obtained complete pre-post data. EAP services demonstrated a statistically significant effect on all three scales. Adults of older age (40 and over) were more likely to have statistically significant higher scores for the LOF-Home scale.	Statistically significant changes in absenteeism, presenteeism, workplace distress, and life satisfaction. No significant change in workplace engagement from before EAP counseling to after.	EAP service users were accessing treatment in an average of 9 days, well below the established norms for other UK services. 88% of clients reported above the clinical cutoff of the CORE measurement tool for levels of distress. 52% recovery and 18% improvement rates. Almost 75% of EAP clients completed their treatment, well above UK norms.	In 2016, statistically significant changes were found in absenteeism (mean change = -7.11), presenteeism (mean change = 0.031), work engagement (mean change = 0.09), life satisfaction (mean change = 0.78), and workplace distress (mean change = -0.85). In 2017, statistically significant changes were found in absenteeism (mean change = -7.34), presenteeism (mean change = -0.88), life satisfaction (mean change = -0.88), life satisfaction (mean change = -0.26), workplace distress (mean change = -0.26), but not work engagement.

Author (Year)	Nunes, Richmond, Pampel, & Wood (2018)	Richmond, Pampel, Wood, & Nunes (2016)	Richmond, Pampel, Wood, & Nunes (2017)	Sharar & Lennox (2014)
Workplace	Colorado State Government	Colorado State Government	Colorado State Government	20 EAP services from 20 different
Workforce Size EAP Delivery	28,000 (est) Internal	28,000 (est) Internal	28,000 (est) Internal	Not Reported Internal/external
Method	Quasi-experimental Sick Leave Time assessed pre-post EAP access	Quasi-experimental Pre-post completion of PHQ-8, GAD- 2, AUDIT, and WOS tools.	Quasi-experimental Pre-post completion of WOS, PHQ-8, GAD-2, AUDIT, Seeking Social	Single group pre-post completion of WOS $n = 3187$
	n=145 receiving EAP and $n=145$ not receiving EAP	Intervention group $n = 156$, control group $n = 188$	Support Scale form Revised Ways of Coping measure, and a single item on days of marijuana use in	
			past year. Intervention group $n=156$, control group $n=188$	
Study Time Frame	10 months (October 1, 2013–July 31, 2014)	10 months (October 1, 2013–July 31, 2014)	10 months (October 1, 2013–July 31, 2014)	90 days between pre and post analysis
Variable Examined	Absenteeism (sick leave, leave due to worker's compensation)	PHQ-8 assesses severity of depressive symptoms	Three WOS scales assessed levels of Absenteeism Presenteeism	WOS assesses absenteeism,
		GAD-2 assesses severity of anxiety	Workplace Distress.	workplace distress, and life
		harmful alcohol use WOS assessed absenteeism,		
		presenteeism, and workplace distress.		
Outcomes	No statistically significant difference between groups.	Employees in the EAP group showed statistically significant reductions	EAP group showed statistically significant differences In	Statistically significant changes were found for each measurement.
	EAP group had 4.8% fewer hours lost	in depression and anxiety	presenteeism (d $=$ 23) and	Mean changes for each category
	per month. EAP services assisted workers move	No statistical significance was found for risky alcohol use.	absenteeism (d =25), but not for workplace distress.	are as follows: absenteeism (mean change $= -43.6\%$), presenteeism
	from moderate time loss to low	Effect sizes (as defined by Cohen's d)	EAP program improved scores on	(mean change $= -25.3\%$), work
	time loss, but did not significantly assist those with high amounts of	were small.	AUDIT, PHQ-8, and the GAD-2 EAP intervention shows more	engagement (mean change = 6.3%), work distress (mean change
	time loss.		favorable results when baseline	= -24.2%), and life satisfaction (moss change = 13.2%)
			are lower.	(illean change = 13.3.70). Effect sizes were most practically
				relevant for absenteeism, work
				presenteershii, and work distress.

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Author (Year)	Sharar, Pompe, & Lennox (2012)	Spetch, Howland, & Lowman (2011)	Waehrer, Miller, Hendre, & Galvin (2016)
Workplace	2 Fortune 100 companies (USA)	Canadian Retail Company	1405 Nonagricultural establishments within the USA
Workforce Size EAP Delivery	Not Reported External	3448 External	Not Reported Internal/external
Method	Single group pre-post completion of WOS $n = 197$	Retrospective longitudinal study $n = 2584$	Secondary Analysis
Study Time Frame	90 days	3 year period	1988 Bureau of Labor Statistics Survey on Employer Anti-Drug Programs 1989 Annual Survey of Occupational Injuries and Illnesses
Variables Examined	WOS assesses absenteeism, presenteeism, work engagement, workplace distress, and life satisfaction	Utilization Rates Absenteeism	EAP sponsorship and staffing Establishment's use of drug testing, formal drug policy Establishment Size, Gender and Occupational composition Number of injuries (classified as either lost- workday or no lost work)
Outcomes	Statistically significant changes in absenteeism, life satisfaction, and workplace distress. EAP services most likely contributed to changes in presenteeism, and Life Satisfaction.	Mean utilization = 9.4% No statistically significant difference between absenteeism of EAP users and non-users. In years where EAP usage was higher, there was more absenteeism, but this number would then decrease the next year, demonstrating that EAP usage led to a decrease in absenteeism the subsequent year following use.	Establishments with EAPs had 14% lower no lost work injury rates. EAPs that were management sponsored, and company staffed were associated with lower rates of lost-work injuries.

Workplace Outcome Suite, which was used in seven of the studies, explaining the frequency of these five variables in this sample.

While the vast majority of reported outcomes were positive, including reductions in absenteeism (Li, Sharar, Lennox, & Zhuang, 2015; Mintzer, Morrow, Back-Tamburo, Sharar, & Herlihy, 2018; Nunes et al., 2018; Richmond, Pampel, Wood, & Nunes, 2017; Sharar, Pompe, & Lennox, 2012; Sharar & Lennox, 2014) and high levels of employee satisfaction (Anema & Sligar, 2010), some of the included studies reported some negative findings as well. In a review of 100 charts from the United States Department of Defense's Internal EAP, Clavelle, Dickerson, and Murphy (2012) found that 13% of clients reported increased dysfunction via the OQ-45.2 and 2% of clients were deemed to have clearly worsened from before intake to after EAP counseling completion via the PIR.

Process evaluations

Seven process evaluations were found in the peer-reviewed literature between 2010 and 2019, two from South Africa, two from the United States, and one each from Australia, Bangladesh, and Canada. Four were based upon EAPs with an internal model, two using exclusively external services, and one which utilized a hybrid internal/external EAP model. As has been seen in previous reviews (Csiernik, 1995, 2005, 2011), a variety of data sources were used within these seven process evaluations. In past reviews of literature, multiple methods of data have been included in each evaluation, however, the average number of different methods used in studies published between 2010 and 2019 was only 1.7 (median = 2, mode = 1). Csiernik, Chaulk, and McQuaid (2012) used the greatest number of different data collection methods with four. Six of the studies included a survey of employees or EAP users as one of their data collection methods. Other data collection methods included survey or interview with EAP representatives or stakeholders, review of best practice literature, and review of EAP's utilization data (Table 4). Four of the studies (Compton & McManus, 2015; Huda, 2018, Pollack et al., 2010; Sieberhagen et al., 2011) evaluated multiple organizations across a region or a sector of business. Of the remaining three articles classified as process evaluations, one evaluated a Canadian public sector EAP which encompasses multiple linked workplaces, one evaluated a South African municipal public sector EAP, and one evaluated two EAP providers for the United States military. Both Compton and McManus (2015) and Sieberhagen et al. (2011) reported that a large number of the organizations included in their evaluation did not adequately track data related to program success. While Compton and McManus (2015) found that over 50% of organizations did not currently track EAP

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Author (Year)	Compton & McManus (2015)	Csiernik, Chaulk, & McQuaid (2012)	Huda (2018)	Mugari, Mtapuri, & Rangongo (2014)
Workplace	44 organizations across Australia	Canadian Public Sector	Ready-Made Garments (RMG) sector of Bangladesh	Makhado Municipality—Public government (South Africa)
Workforce Size	50,500	11 487 (2006) to 12,949 (2010)	2.8 million	800
EAP Delivery	External	Internal/External	Internal	Internal
Study Time Frame	Data from 2010, 2011, 2012	2005-2006 to 2009-2010	Cross-sectional—1 month	Cross sectional survey—no timeline
Study's Purpose	Determine usefulness of EAP	Evaluate if EAP was meeting	Examine the overall performance of	Assess the effectiveness, and
	counseling in Australian	the current employee and	EAP in the RMG sector	challenges associated with EAP
	Organizations.	employer requirements and	of Bangladesh.	program implementation from the
	Determine the extent and	able to continue to meet		point of view of employees.
	appropriateness of evaluation of	future needs of workplace.		
	EAP counseling.	Review EAP advisory		
		committee governance		
		model, EAP organization		
		structure, and reporting		
		relationships, and make		
		recommendations for		
		improvement.		
Methodology	15-item questionnaire administered	Review of best practice	15-item questionnaire administered	Cross -sectional survey with semi
	by phone with organization's HR	literature and utilization	to a random sample of employees	structured interviews.
	representation or other manager	data.	who had received EAP services.	
	in charge of EAP	Survey of employees and	n = 100	
	program operation.	managers.		
		Interviews with program		
		stakeholders, members of		
		EAP Advisory Committee,		
		EAP counselors, and		
		employees who had used		
		the program.		
Total Methods Used	-	4	_	2

Author (Year)	Compton & McManus (2015)	Csiernik, Chaulk, & McQuaid (2012)	Huda (2018)	Mugari, Mtapuri, & Rangongo (2014)
Outcome	Top rationales for EAP are support	86% of survey respondents aware of	Of 16 variables studied, 8 variables	81% knew of the EAP
	for employee health and well-	the EAP, 84% aware of the	(stress, conflict, helpfulness,	program.
	being (18%), implement best	confidential counseling services	behavior, seriousness, suggestion,	83% spoke positively of the
	practice (15%), perceived duty of	offered. Only 41% were aware	productivity, job satisfaction) were	EAP program.
	care (12%).	services were available for family	negatively associated with using	76% felt the program was
	42% considered EAPs an important	members.	EAP, though none reached	easily accessible.
	part of occupational health, safety,	Respondents indicated that	statistical significance. May	17% of employees surveyed
	and wellness initiatives.	confidential counseling helped	indicate that EAP did not make a	actually used EAP services.
	Only 23% reported operating in	them (39%) or a family member	meaningful effect.	Supervisors felt that employees
	normal expected rate for healthy	(47%) with a problem in the last	Considerate listening, priority	showed improvement
	EAP (4.1-8%).	three years, half of whom	realization, and reducing family	following EAP services.
	51% had no relevant records for	indicated that this problem	problems had positive	Employees suggested that the
	utilization rates by employee type,	impacted their work.	relationships, though these too	availability of EAP needed
	52% had no record of age range	Increased manager/supervisor	did not meet statistical	to be made more regularly
	of usage of services.	training led to increased informal	significance.	known in the workplace.
	Most common reason for using EAP	referrals, and a subsequent	Qualification and skill of the	Services only provided at
	was personal relationship or	decrease in self-referrals.	counselors had no contribution to	one location, employees at
	family problems.	Lack of awareness about program	the EAP program maximizing	other locations were not
	EAP was most beneficial for	among newer employees.	productivity and job satisfaction.	aware of the location
	improved employee relations	Lack of time and resources for the		of services.
	(20%), improved morale (13%),	provision of workplace education		
	and less stress in the workplace	programming, as EAP counselors		
	(13%).	must prioritize individual		
	Perceived EAP effectiveness most	counseling. Identified need for		
	commonly measured by employee	increased resources to ensure		
	feedback (31%), and	training and support		
	surveys (22%).	for managers.		

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Author (Year)	Pollack, McKay, Cumminskey, Clinton-Sherrod, Lindquist, Lasater, Hardison Walters, Krotki, & Grisso (2010)	Sieberhagen, Pienaar, & Els (2011)	Trail, Martin, Burgette, May, Mahmud, Nanda, & Candra (2018)
Workplace Workforce Size	28 EAPs Variety of different corporations across multiple industries	16 organizations in South Africa Five organizations had between 1001 and 3000 employees, four had between 5001 and 100,00, remaining 7 organizations workforces, were not reported	US Military Not Reported
EAP Delivery Study Time Frame Study's Purpose	External August to December 2008 Describe the services that are delivered to employees whom contact the EAP and are identified as victims of Intimate Partner Violence (IPV). Determine the satisfaction of women experiencing IPV with both EAP services and representatives. Identify challenges for IPV service delivery, as reported by both EAP providers and women impacted by IPV.	2 years Define employee wellness as it currently exists in selected South African organizations. Determine reasons organizations introduce Employee Wellness Programs (EWPs), problems with implementation, employee needs and participation in EWP, and how EWPs are funded by organizations. Investigate how managers are involved in managing EWPs, how organizations present the results and rate the success and effectiveness of their EWPs.	Internal Cross-sectional Describe the effectiveness and satisfaction of each non-medical counseling program at addressing individuals' problems. No specific outcome (e.g., grief, depression) was specifically measured.
Methodology	Semi-structured phone interview with EAP representatives regarding policies. National web-based survey with IPV victims who accessed EAP services for IPV-related assistance.	Cross-sectional survey was administered, the Employee Wellness Survey, to assess for what was being done as part of these workplace programs	Cross-sectional survey that utilized a logic model, and regression analysis. Comparison of two providers (MLFC and OneSource).
Total Methods Used	2		1

Table 4. Continued.			
Author (Year)	Pollack, McKay, Cumminskey, Clinton-Sherrod, Lindquist, Lasater, Hardison Walters, Krotki, & Grisso (2010)	Sieberhagen, Pienaar, & Els (2011)	Trail, Martin, Burgette, May, Mahmud, Nanda, & Candra (2018)
Outcomes	All EAPs call for their users to access services via telephone intake. 18% reported using standard IPV screening questions, 76% reported that counselors ask a range of screening questions to determine if someone is experiencing IPV. 760 Women sampled had experienced IPV and contacted their EAP; 66% of survey respondents reported being extremely or very satisfied with services received. Those who reported higher income were more likely to report being extremely or very satisfied with EAP IPV related services. Challenges reported included difficulty identifying victims of IPV due to lack of standardized screening, or reluctance to disclose, concern about confidentiality on part of the individuals accessing their EAP, and a lack of providers with expertise in the area of IPV. Lack of referrals for local IPV services was a barrier to seeking assistance.	No consensus reached between organizations on the definition of employee wellness. The main reason to introduce an EWP was to address high sick leave, absenteeism and social responsibility. Organizations presented their results in house and did not use the results to attract employees or stakeholders; very few organizations objectively measured the success of their programs. Organizations did not often or programs. Organizations did not often or programs work their employees. Most EAP workers at these organizations felt supported by upper management.	Most common reason for seeking counseling was family or relationship problems (68% MLFC, 74% OneSource), followed by stress, anxiety, or emotional problems (55% MFLC, 43% OneSource). Following counseling in both groups, self-rated severity of issues in family or relationship problems decreased significantly (32% to 3% for "severe" cases in MFLC, and 29% to 6% in "severe" cases for OneSource in the short term. Similar numbers were maintained in the secondary follow up. 80% of MFLC users and 71% of OneSource users reported less frequent bouts of anxiety. Overall, 79% of participants in MFLC, and 65% of OneSource users said their problems improved in the

short term.

utilization by employee type or by age, their open-ended questions also revealed that organizations were still expressing a desire for support in developing standards and processes for collecting data that would be helpful for continuing internal evaluation. Huda's (2018) evaluation demonstrated a lack of positive change associated with participating in the EAP that is currently serving employees in Bangladesh's ready-made garment sector, but the study was limited in its ability to offer clear areas where change is necessary to improve outcomes, or any solutions. There may be a need for more robust data collection methods that allow for deeper insight regarding the effectiveness and/or shortcomings of an EAP, and recommendations for improvements. In contrast, Csiernik et al. (2012) were able to identify that there is a need for greater resources to support workforce education initiatives and manager training within the Canadian public section EAP. Mugari, Mtapuri, and Rangongo (2014) and Pollack et al. (2010) were also able to identify and describe existing barriers to service access that could then be acted upon and resolved by the EAP being evaluated. In reviews of the literature regarding EAP evaluations from past decades, process evaluation studies have included discussion of modifications made to EAPs as a result of the evaluation process (Csiernik, 2011). This was not the case with the literature from this most recent decade, potentially indicative of a change in relationships between organizations whose EAPs are being evaluated and the researchers completing the evaluations.

Discussion

When Employee Assistance Programming was still only Welfare Capitalism it was already known that there was value to the initiative but what kind of value? Evaluation studies are intended to be a systemic assessment of the merit of the time, resources, and effort placed into achieving a goal. This of course has always been the dilemma for occupational assistance programming for it has historically served competing stakeholder groups with different goals. Is it a humanitarian effort to bring counseling to enhance employee's, and their families, lives, or is it a cost-saving mechanism to decrease absenteeism, employee illness claims, and workers' compensation costs? Based upon the evaluation studies published between 2010 and 2019, the answer is yes; to both.

Among the 26 peer-reviewed evaluations published between 2010 and 2019 there were examples from nine different nations from four continents. Peer-reviewed articles examined both internal and external programs along with hybrid and peer counselor initiatives. Multiple evaluative criteria were used in the outcome and process studies demonstrating a robustness of collected data. The single published peer reviewed needs assessment, from Australia, was attempting to determine what type of EAP would aid with employee stress but likewise, how best to decrease stress in order to address absenteeism. The three case studies, from three different countries, Canada, South Africa, and Taiwan, discussed not only the development of the respective EAPs but also the rationale for the programs which, in all three instances, examined how the EAP served or could better serve employee needs within three different sectors: education, retail, and technology.

The majority of the evaluations published between 2010 and 2019 were outcome studies (57.7%). In contrast to the themes of the needs assessment and case studies, the focus of these 15 studies was not only on changes or potential changes employees experienced due to EAP involvement, but also on the amount of money each EAP was saving the organization. This is of course an important consideration in that private sector organizations need to be profitable to exist whereas public service agencies need to be prudent with their expenditures given it is tax dollars that pay for the program and thus there is a need for public accountability. Reported cost savings across the 15 evaluations ranged from modest, a 4.8% decrease in hours lost/month (Nunes et al, 2018) to a 43.6% decrease in absenteeism (Sharar & Lennox, 2014).

Process recordings tend to provide the most in depth analysis typically employing triangulation to study the EAP. However, with the seven studies published between 2010 and 2019 four only used one methodological approach whereas two used two and one used four. While three were cross-sectional studies, three were longitudinal in design, with all providing detailed insights into the program.

However, this review does not only allow for an examination of evaluation over the past decade but also provides data that allows for an examination of published peer reviewed EAP evaluations over the past 40 years. Table 5 adds the findings of this study to those summarized in Table 1 enabling us to examine trends across four decades as further illustrated in Figure 1.

The nascent nature of EAP evaluation during the 1980s is apparent from the table and figure. This was followed by two decades of far more study though and, while the last decade has seen an overall decrease in the number of peer-reviewed published evaluations, the number of more sophisticated outcome and process evaluations has remained relatively steady. However, less than one evaluation per year in each category still speaks to the relative dearth of empirical information we have about the nature of Employee Assistance Programs. While most evaluations were conducted by organizations with internal models between 2010 and 2019 (n=9), for the first time in forty years they were not the majority as there were eight evaluations examining external EAPs and five that examined hybrid internal/external modals during this time period. As well, this was the first time that there were as many international as American studies (n = 13) with evaluations from a total of nine

Table 5.	Types of	evaluation	bν	decade:	1980-1989 to	2010-2019.
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	1980–1989	1990–1999	2000–2009	2010–2019
Needs Assessments	3	4	2	1
Case Studies	4	12	21	3
Outcome Studies	7	14	10	15
Process Evaluations	5	9	9	7
Total:	19	39	42	26

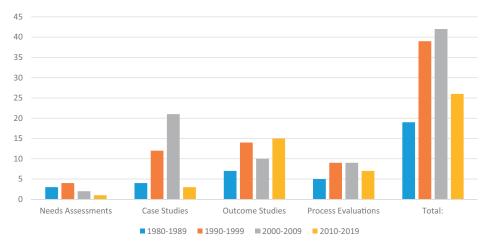


Figure 1. Types of evaluation by decade: 1980-1989 to 2010-2019.

different nations being published in the peer-reviewed literature. What was also witnessed in this most recent era of evaluation was a greater use of standardized tests being employed to collect data led by a new instrument, the Workplace Outcome Suite, though several studies still did not use any form of standardized assessment tool in their evaluation process.

What do these new findings combined with previously published data tell us? It is evident that the Employee Assistance Programming field has changed dramatically since its evolution from Occupational Assistance Programming and this change is not just reflected in anecdotal information, but rather has been formally documented by dozens of evaluations over 40 years. Thus, we have a rich history of programs and what they have, and in part, have not provided employees. We have a robust empirical history indicating that EAP enhances not only two constituencies, the organization and its public or private responsibilities, and employees, but because of this intersection, EAPs also serves a third; our communities. The idea of EAPs creating healthier communities has long been argued in Canada (Csiernik, 1993, 1998; Mental Health Commission of Canada, 2013; Mowry, 1996; Shain, 1989; Shain, Suurvali, & Boutlier, 1986). The importance of and need for healthy communities has been further underscored in an incredible manner by the devastation COVID-19 brought to all three constituencies who have a vested interest in EAP.

Where will EAPs evolve to in the future? The evaluation literature indicates a growing global interest in knowing the effects of program outcomes. As EAP becomes a mature field in North America, there remain many nations where it is just becoming established as highlighted by studies from Taiwan (2014), China (2015), and Bangladesh (2018). Unfortunately, it is most likely that going forward there will still not be an adequate number of evaluations conducted to provide us with a comprehensive empirical understanding of the field, though this is not unique to EAP. However, what is evident in the literature is a move toward more systemic outcome measures, such as provided by the Workplace Outcome Suite, that enhances the measures we have been using from the onset of evaluating EAPs: absenteeism, compensation costs, and sick leave. Outcome and process studies are now also regularly considering employee outcomes along with cost-benefit findings such that the answer of yes remains. Yes, EAP serves multiple masters but that is tolerable for in doing so this dynamic tension that has existed in occupational programming since its onset in the 19th century will hopefully continue to lead to program evolution and not devolution, and hopefully evaluators will continue to document this process for decades to come to build upon this established baseline of knowledge.

References

- Anema, J. C., Jr, & Sligar, S. R. (2010). Innovation in the workplace: Evaluation of a pilot employee assistance program serving persons with disabilities. *Journal of Rehabilitation*, 76(4), 9–17. https://www.researchgate.net/profile/Steven-Sligar/publication/289068102_Innovation_in_the_Workplace_Evaluation_of_a_Pilot_Employee_Assistance_links/591f5f4 10f7e9b99793c5529/Innovation-in-the-Workplace-Evaluation-of-a-Pilot-Employee-Assistance-Program-Serving-Persons-with-Disabilities.pdf
- Battle, S. (1988). Issues to consider in planning Employee Assistance Program evaluations. *Employee Assistance Quarterly*, 3(3–4), 79–93. doi:10.1300/J022v03n03_07
- Burgess, K., Lennox, R., Sharar, D. A., & Shtoulman, A. (2015). A substance abuse intervention program at a large Russian manufacturing worksite. *Journal of Workplace Behavioral Health*, 30(1–2), 138–153. doi:10.1080/15555240.2015.1000159
- Clavelle, P. R., Dickerson, S. J., & Murphy, M. W. (2012). Counseling outcomes at a US Department of Defense employee assistance program. *Journal of Workplace Behavioral Health*, 27(3), 127–138. doi:10.1080/15555240.2012.701166
- Compton, R. L., & McManus, J. G. (2015). Employee assistance programs in Australia: Evaluating success. *Journal of Workplace Behavioral Health*, 30(1–2), 32–45. doi:10.1080/15555240.2015.998971
- Csiernik, R. (1993). The value of Employee Assistance Programming. *Canadian Review of Social Policy*, 32(1), 68–73. https://www.researchgate.net/profile/Rick-Csiernik/publication/256082492_The_value_of_Employee_Assistance_Programming/links/55251bc10cf2caf11bfd11b0/The-value-of-Employee-Assistance-Programming.pdf



- Csiernik, R. (1995). A review of research methods used to examine Employee Assistance Program delivery options. Evaluation and Program Planning, 18 (1), 25-36. https://doi. org/10.1016/0149-7189.(94)00043-w doi:10.1016/0149-7189(94)00043-W
- Csiernik, R. (1998). A profile of Canadian Employee Assistance Programs. Employee Assistance Research Supplement, 2 (1), 1-8. http://hdl.handle.net/10713/5904
- Csiernik, R. (2005). A review of EAP evaluation in the 1990s. Journal of Employee Assistance and Workplace Behavioural Health, 19(4), 21-37. doi:10.1300/j022v19n04_02
- Csiernik, R. (2011). The glass is filling: An examination of Employee Assistance Program Evaluations in the first decade of the new millennium. Journal of Workplace Behavioural Health, 26(4), 344-355. doi:10.1080/15555240.2011.618438
- Csiernik, R., Chaulk, P., & McQuaid, S. (2012). A process evaluation of a Canadian public sector employee assistance program. Journal of Workplace Behavioral Health, 27(3), 160-180. doi:10.1080/15555240.2012.701169
- Dickerson, S. J., Murphy, M. W., & Clavelle, P. R. (2012). Work adjustment and general level of functioning pre-and post-EAP counseling. Journal of Workplace Behavioral Health, 27(4), 217–226. doi:10.1080/15555240.2012.725586
- Durkin, W. (1985). Evaluation of EAP programming. In S. Klarreich J. Francek, & C. E. Moore (Eds.), The human resources handbook (pp. 243-259). Toronto: Prager Press.
- Hood, L., & Csiernik, R. (2017). Union matters: United Food and Commercial Workers Local 12R24 members assistance program. American International Journal of Social Science, 6(2), 11-18. http://hdl.handle.net/10713/7250
- Huda, K. N. (2018). Measuring the effectiveness of employee assistance program in the RMGs of Bangladesh: An evaluative study. International Journal of Business and Technopreneurship, 8(1), 55-66. http://dspace.unimap.edu.my/bitstream/handle/ 123456789/52273/Measuring%20the%20Effectiveness%20of%20Employee%20Assistance% 20Program%20in%20the.pdf?sequence=1
- Jacobson, J. M., Jones, A. L., & Bowers, N. (2011). Using existing employee assistance program case files to demonstrate outcomes. Journal of Workplace Behavioral Health, 26(1), 44-58. doi:10.1080/15555240.2011.540983
- Jerrell, J., & Rightmyer, J. (1982). Evaluating employee assistance programs: A review of methods, outcomes and future directions. Evaluation and Program Planning, 5(3), 255-267. doi:10.1016/0149-7189(82)90077-5
- Kurtz, N., Googins, B., & Howard, W. (1984). Measuring the success of occupational alcoholism programs. Journal of Studies on Alcohol, 45(1), 33-45. doi:10.15288/jsa.1984.45.33
- Li, P., Sharar, D., Lennox, R., & Zhuang, W. (2015). Evaluating EAP counseling in the Chinese workplace: A study with a brief instrument. Journal of Workplace Behavioral Health, 30(1-2), 66-78. doi:10.1080/15555240.2015.1000143
- Lynch, J. (1980). Variations in program usage in different occupational settings. Labour-Management Alcoholism Journal, 10(3), 85-96.
- Macdonald, S. (1986). Evaluating EAPs. Toronto: Addiction Research Foundation.
- Masi, D., & Goff, M. (1987). The evaluation of Employee Assistance Programs. Public Personnel Management, 16(4), 323-327. doi:10.1177/009102608701600404
- Mellor-Clark, J., Twigg, E., Farrell, E., & Kinder, A. (2013). Benchmarking key service quality indicators in UK Employee Assistance Programme Counselling: A CORE System data profile. Counselling and Psychotherapy Research, 13(1), 14-23. doi:10.1080/14733145.2012.728235
- Mental Health Commission of Canada. (2013). National standard of Canada for psychological health and safety in the workplace. Canada: Mental Health Commission of Canada.
- Mintzer, J., Morrow, V. Y., Back-Tamburo, M., Sharar, D. A., & Herlihy, P. A. (2018). Demonstrating value: Measuring outcome & mitigating risk: FOH EAP study utilizing the



- Workplace Outcome Suite. International Journal of Health & Productivity, 10(2), 28-34. http://hdl.handle.net/10713/8963
- Mowry, S. (1996). Prince Edward Island Public Sector Employee Assistance Program Evaluation. Island: Province of Prince Edward Island.
- Mugari, E. L., Mtapuri, O., & Rangongo, M. (2014). Employee assistance programme: The case of a local municipality in South Africa. Journal of Social Sciences, 39(3), 257-263. doi:10.1080/09718923.2014.11893288
- Nunes, A. P., Richmond, M. K., Pampel, F. C., & Wood, R. C. (2018). The effect of employee assistance services on reductions in employee absenteeism. Journal of Business and Psychology, 33(6), 699-709. doi:10.1007/s10869-017-9518-5
- Pollack, K. M., McKay, T., Cumminskey, C., Clinton-Sherrod, A. M., Lindquist, C. H., Lasater, B. M., ... Grisso, J. A. (2010). Employee assistance program services for intimate partner violence and client satisfaction with these services. Journal of Occupational and Environmental Medicine, 52(8), 819-826. doi:10.1097/JOM.0b013e3181ebada6
- Rakepa, T. T., & Uys, F. M. (2013). A critical evaluation of an employee health and wellness programme of the Department of Education: A case study of the Motheo District in the Free State Province. African Journal of Public Affairs, 6(3), 24-37. http://scholar.sun. ac.za/handle/10019.1/86178
- Richmond, M. K., Pampel, F. C., Wood, R. C., & Nunes, A. P. (2016). Impact of employee assistance services on depression, anxiety, and risky alcohol use: A quasi-experimental study. Journal of Occupational and Environmental Medicine, 58(7), 641-650. doi:10.1097/ JOM.0000000000000744
- Richmond, M. K., Pampel, F. C., Wood, R. C., & Nunes, A. P. (2017). The impact of employee assistance services on workplace outcomes: Results of a prospective, quasiexperimental study. Journal of Occupational Health Psychology, 22(2), 170-179. doi:10. 1037/ocp0000018
- Shain, M. (1989). Development of a comprehensive response to prevention and treatment of substance abuse in the workplace. Shaping the future. Toronto: Addiction Research Foundation.
- Shain, M., Suurvali, H., & Boutlier, M. (1986). Healthier workers: Health promotion and Employee Assistance Programs. Lexington, MA: D.C. Heath.
- Sharar, D. A., & Lennox, R. (2014). The workplace effects of EAP use: "Pooled" results from 20 different EAPs with before and after WOS 5-item data. EASNA Research Notes, 4(1), 1-5.
- Sharar, D. A., Pompe, J. C., & Lennox, R. (2012). Evaluating the workplace effects of EAP counseling. Journal of Health & Productivity, 6(2), 5-14. http://hdl.handle.net/10713/ 7705
- Sieberhagen, C., Pienaar, J., & Els, C. (2011). Management of employee wellness in South Africa: Employer, service provider and union perspectives. SA Journal of Human Resource Management, 9(1), 1-14. doi:10.4102/sajhrm.v9i1.305
- Spetch, A., Howland, A., & Lowman, R. L. (2011). EAP utilization patterns and employee absenteeism: Results of an empirical, 3-year longitudinal study in a national Canadian retail corporation. Consulting Psychology Journal: Practice and Research, 63(2), 110-128. doi:10.1037/a0024690
- Street, T. D., Lacey, S. J., & Somoray, K. (2018). Employee stress, reduced productivity, and interest in a workplace health program: A case study from the Australian mining industry. International Journal of Environmental Research and Public Health, 16(1), 94. doi:10. 3390/ijerph16010094



- Trail, T. E., Martin, L. T., Burgette, L. F., May, L. W., Mahmud, A., Nanda, N., & Chandra, A. (2018). An evaluation of US military non-medical counseling programs. Rand Health Quarterly, 8(2), 1861. doi:10.7249/rr1861
- Waehrer, G. M., Miller, T. R., Hendrie, D., & Galvin, D. M. (2016). Employee assistance programs, drug testing, and workplace injury. Journal of Safety Research, 57, 53-60. doi: 10.1016/j.jsr.2016.03.009
- Wang, C. W., Lin, P. C., & Sha, C. (2014). Employee problems and their consequences in the technology industry: Evidence from surveys and counseling records. Psychological Reports, 114(3), 687-719. doi:10.2466/01.02.PR0.114k24w2