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

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 et al., 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, 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.

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

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 Behavioural 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 et al. (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 et al., 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.

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

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

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.

Author Year	Anema & Sligar 2010	Burgess, Lennox, Sharar, & Shtoulman 2015	Clavelle, Dickerson, & Murphy 2012	Dickerson, Murphy, & Clavelle 2012
Workplace	Company within NISH	Russian Manufacturing Worksite	U.S Department of Defense	U.S Department of Defense
Workforce Size	218 (88% of whom have a disability)	Not Reported	Not Reported	Not Reported
EAP Delivery	Internal	Internal	Internal	Internal
Method	Retrospective document review	Quasi-experimental, non-equivalent groups (Intervention n=66, Control n=338).	Chart review	Chart review
	Employee satisfaction surveys		n=100	Presenting complaint work-related or non-work related, n=50/group
	Focus groups with EAP stakeholders	Pre/post completion of GAIN-SS, WOS, and AUDIT tools.	Pre-post completion of OQ-45.2 and GAF, PIR completed post counseling	Pre-post completion of OQ-45.2 and GAF, PIR completed post counseling
Study Time Frame	Not Reported	Follow-up 90 days for intervention group, 120 days for control group	Closed files between August 2009 and October 2010 (15 month period)	Retrospective
Variables Examined	Program goals identified in grant application, reasons for referral, referral concerns, employee satisfaction (both supervisory and non-supervisory employees)	GAIN-SS measures recency of experiences of behavioural health problems. WOS identifies absenteeism, presenteeism, work engagement, life satisfaction, and workplace distress. AUDIT provides measures of alcohol problems and dependence.	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 judgement of a client's overall level of functioning. PIR provides clinician's assessment of client's improvement on specific goals identified at intake.	OQ-45.2 total score estimates psychological functioning, and the social role scale estimates level of functioning at work. GAF reports clinician's judgement of a client's overall level of functioning. PIR provides clinician's assessment of client's improvement on specific goals identified at intake.

Table 3

Outcome Study Summaries

Table 3

Outcome Study Summaries Continued

Author Year	Anema & Sligar 2010	Burgess, Lennox, Sharar, & Shtoulman 2015	Clavelle, Dickerson, & Murphy 2012	Dickerson, Murphy, & Clavelle 2012
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.	Statistically significant improvements in: OQ Total Score, Social Role score, Global Assessment of Functioning Score, and Performance Improvement Rating for both groups.

Table 3

Outcome Study Summaries Continued

	Jacobson Frey, Jones, & Bowers	Li, Sharar, Lennox, & Zhuang	Mellor-Clark, John, Twigg, Elspeth, Farrell, Eugene, Kinder, & Andrew	Mintzer, Morrow, Tamburo, Sharar, & Herlihy
Author Year	2011	2015	2013	2018
Workplace	20 U.S-based companies	26 China-based companies	Undisclosed number of UK workplaces covered by 6 EAP providers	360 Federal Agencies (USA)
Workforce Size	Not Reported	Not Reported	Not Reported	More than 986,390
EAP Delivery	Not Reported	External	External	External
Method	Chart review	Pre-post completion of WOS,	Retrospective observational.	Pre-post completion of WOS
	n=572	n=670	Files from EAP services utilizing CORE System	n=4800
	GAF, Level of Functioning at Home, LOF at Work scales included at intake and/or completion of counseling.		n=28,476	
Study Time Frame	Files closed during 2007	May 2012-July 2013	Data from 2001-2011	2 years (2016 and 2017)
Variables Examined	GAF reports clinician's 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. | WOS identifies absenteeism, presenteeism, work engagement, workplace distress, and life satisfaction. | Levels of distress, Time to treatment access, Treatment completion rates, Recovery/improvement rates. | WOS identifies absenteeism, presenteeism, work engagement, life satisfaction and workplace distress. |

Table 3

Outcome Study Summaries Continued

	Jacobson Frey, Jones, & Bowers	Li, Sharar, Lennox, & Zhuang	Mellor-Clark, John, Twigg, Elspeth, Farrell, Eugene, Kinder, & Andrew	Mintzer, Morrow, Tamburo, Sharar, & Herlihy
Author Year	2011	2015	2013	2018
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 cut-off 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 = -0.81), 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 = 0.62), workplace distress (mean change = -0.26), but not work engagement.

Table 3

Outcome Study Summaries Continued

Author Year	Nunes, Richmond, Pampel, & Wood 2017	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 providers (USA)
Workforce Size	28000 (est)	28000 (est)	28000 (est)	Not Reported
EAP Delivery	Internal	Internal	Internal	Internal/external
Method	Quasi-experimental	Quasi-experimental	Quasi-experimental	Single group pre-post completion of WOS
	Sick Leave Time assessed pre-post EAP access	Pre-post completion of PHQ-8, GAD-2, AUDIT, and WOS tools.	Pre-post completion of WOS, PHQ-8, GAD-2, AUDIT, Seeking Social Support Scale form Revised Ways of Coping measure, and a single item on days of marijuana use in past year.	n=3187
	n=145 receiving EAP and n=145 not receiving EAP	Intervention group n=156, control group n=188		
			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 GAD-2 assesses severity of anxiety AUDIT screens for hazardous and harmful alcohol use WOS assessed absenteeism, presenteeism, and workplace distress.	Three WOS scales assessed levels of Absenteeism, Presenteeism, Workplace Distress.	WOS assesses absenteeism, presenteeism, work engagement, workplace distress, and life satisfaction.

Table 3

Outcome Study Summaries Continued

Author Year	Nunes, Richmond, Pampel, & Wood 2017	Richmond, Pampel, Wood, & Nunes 2016	Richmond, Pampel, Wood, & Nunes 2017	Sharar & Lennox 2014
Outcomes	No statistically significant difference between groups. EAP group had 4.8% fewer hours lost per month. EAP services assisted workers move from moderate time loss to low time loss, but did not significantly assist those with high amounts of time loss.	Employees in the EAP group showed statistically significant reductions in depression and anxiety No statistical significance was found for risky alcohol use. Effect sizes (as defined by Cohen's d) were small.	EAP group showed statistically significant differences In presenteeism (d= -.23) and absenteeism (d=-.25), but not for workplace distress. EAP program improved scores on AUDIT, PHQ-8, and the GAD-2 EAP intervention shows more favorable results when baseline scores in depression and anxiety are lower.	Statistically significant changes were found for each measurement. Mean changes for each category are as follows: absenteeism (mean change = -43.6%), presenteeism (mean change = -25.3%), work engagement (mean change = 6.3%), work distress (mean change = -24.2%), and life satisfaction (mean change = 13.3%). Effect sizes were most practically relevant for absenteeism, work presenteeism, and work distress.

Table 3

Outcome Study Summaries Continued

Author Year	Sharar, Pompe, & Lennox 2012	Spetch, Howland, & Lowman 2011	Waeher, Miller Hendre, & Galvin 2016
Workplace	2 Fortune 100 companies (USA)	Canadian Retail Company	1405 Non-agricultural establishments within the USA
Workforce Size	Not Reported	3448	Not Reported
EAP Delivery	External	External	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, presenteeism, 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.

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 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 et al., 2015; Mintzer et al., 2018; Nune et al., 2017; Richmond et al., 2017; Sharar & Lennox, 2014; Sharar et al., 2012) 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 et al. (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 et al. (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; Sieberhagan 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 Sieberhagan 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 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

Table 4

Process Evaluation Study Summaries

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	50500	11 487 (2006) to 12949 (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 counselling in Australian Organizations. Determine the extent and appropriateness of evaluation of EAP counseling.	Evaluate if EAP was meeting the current employee and employer requirements and able to continue to meet future needs of workplace. Review EAP advisory committee governance model, EAP organization structure, and reporting relationships, and make recommendations for improvement.	Examine the overall performance of EAP in the RMG sector of Bangladesh.	Assess the effectiveness, and challenges associated with EAP program implementation from the point of view of employees.
Methodology	15-item questionnaire administered by phone with organization's HR representation or other manager in charge of EAP program operation.	Review of best practice literature and utilization data. Survey of employees and managers. Interviews with program stakeholders, members of EAP Advisory Committee, EAP counselors, and employees who had used the program.	15-item questionnaire administered to a random sample of employees who had received EAP services. n=100	Cross -sectional survey with semi structured interviews.
Total Methods Used	1	4	1	2

Table 4

Process Evaluation Study Summaries Continued

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

Table 4

Process Evaluation Study Summaries Continued

	Pollack, McKay, Cumminskey, Clinton-Sherrod, Lindquist, Lasater, Hardison Walters, Krotki, & Grisso 2010	Sieberhagen, Pienaar, & Els 2011	Trail, Martin, Burgette, May, Mahmud, Nanda, & Candra 2018
Author Year			
Workplace	28 EAPs	16 organizations in South Africa	US Military
Workforce Size	Variety of different corporations across multiple industries	Five organizations had between 1001 and 3000 employees, four had between 5001 and 10000, remaining 7 organizations workforces were not reported	Not Reported
EAP Delivery	External	Internal	Internal
Study Time Frame	August to December 2008	2 years	Cross-sectional
Study's Purpose	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. | 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. | 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 wellness programs. | Cross-sectional survey that utilized a logic model, and regression analysis.
Comparison of two providers (MLFC and OneSource). |
| Total Methods Used | 2 | 1 | 1 |

Table 4

Process Evaluation Study Summaries 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 counsellors 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 properly perform needs assessments with their employees. Most EAP workers at these organizations felt supported by upper management.	Most common reason for seeking counselling was family or relationship problems (68% MLFC, 74% OneSource), followed by stress, anxiety, or emotional problems (55% MFLC, 43% OneSource). Following counselling 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.

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 et al. (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 counselling 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 2010-2019, 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 counsellor 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 2010-2019 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, 2017) to a 43.6% decrease in absenteeism (Shar & 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 2010-2019 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.

Table 5: Types of Evaluation by Decade: 1980-1989 to 2010-2019

	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
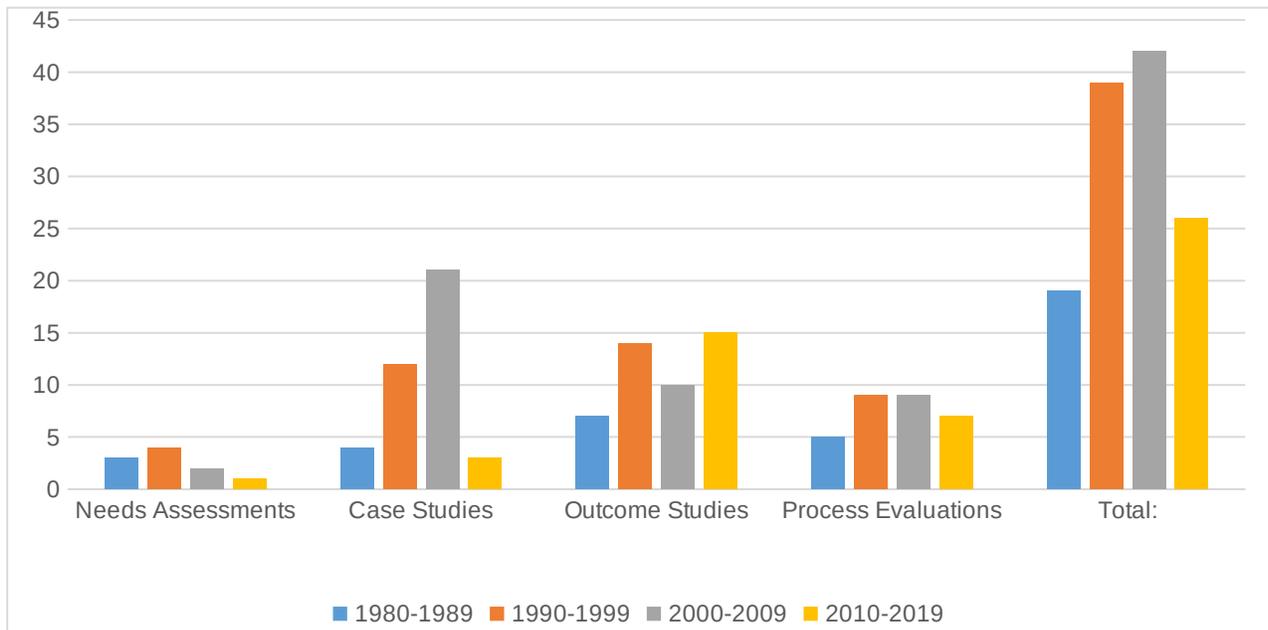
The nascent nature of EAP evaluation during the 1980s is apparent from the table and figure. This was followed by two decades of far more study though and, while the last decade has seen an overall decrease in the number of peer-reviewed published evaluations, the number of more sophisticated outcome 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 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 1986; Shain et al., 1989) 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 towards 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.

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