

Workplace Outcome Suite[©] (WOS)

EAP Industry Global Report No. 6:

Use and effectiveness for over 140,000 counseling cases from 2010 to 2022



**Work
Absenteeism**



**Workplace
Distress**



**Work
Presenteeism**



**Work
Engagement**



**Hours of Lost
Productive
Time at Work**



**Life
Satisfaction**

Executive Summary

The Workplace Outcome Suite[®] (WOS) was developed in 2010 for use by employee assistance programs to assess the impact of counseling services. It is a measure of change that requires collecting self-report data at two time points at before and after program use. The WOS measures work absenteeism, work presenteeism, workplace distress, work engagement and also general life satisfaction. The five outcomes can also be combined into a single scale and two of the measures can be combined to estimate the employee's specific number of hours of lost productive time. This report is the sixth in a series of EAP industry global benchmarks on the WOS. It is the largest and most comprehensive applied study ever done to profile EAP use and to test the longitudinal work outcomes of counseling. The report features data contributed by 61 different EAP vendors and internal staff programs operating in 15 countries.

The study begins with a profile of 141,297 users of counseling services across a wide range of contexts during a 13-year period (2010 to 2022). Use factors include: year, country, region of the US, industry of employer, EAP delivery model, EAP provider, gender, age, employee benefit status, depression risk severity, job performance, marketing source, referral source, modality of use, type of presenting issue, number of sessions of use, duration of use and longitudinal data collection design (last session or follow-up at post).

Results based on over 106,000 cases revealed that over three-fourths of all cases (78%) started counseling at-risk (problem level) on one or more of the four work outcome measures. Thus, work-related outcomes were below normal for a large majority of the employees who used EAP counseling.

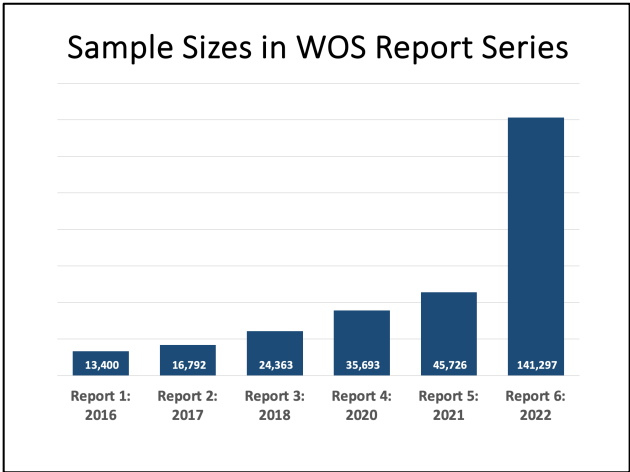
The sample size for having WOS data at both before and after EAP use ranged from 62,804 to 67,762 cases depending on the measure. Each outcome had statistically significant change results with the work presenteeism and life satisfaction outcomes improving the most. The extent of improvement on each measure was mostly consistent across all but 2 of the 18 context factors tested. This lack of moderator effects is robust evidence that the brief counseling successful to roughly the same degree for a wide variety of clients living in different countries, of different ages and genders, who worked in different industries, used either in-person or remote online or phone delivery options over a 13-year period (including before, during and after the COVID-19 pandemic). However, there was a significant range in the level of improvement on each of the WOS outcomes achieved by different specific EAP vendors or internal staff programs and also by initial level of depression symptoms (clinical severity). New data on a 0-10 rating of job performance from 1,696 cases found average improvement of 7.0 to 7.6 from before to after EAP use.

A financial return on investment was estimated using this derived outcome using typical use, outcomes and cost conditions for an employer in the United States with 1,000 employees. The result was an ROI of \$5.11:1 (over five dollars returned for every 1 dollar invested in the EAP for all services – not just the counseling).

Statistical tests found strong support for the psychometric validity and reliability of the WOS measures. Updated industry-wide norms for interpreting the scores on each WOS measure are provided for pre and post use periods, after adjusting for other factors, for each of six different global locations and for each of four different types of EAP delivery models (large vendor, small vendor, internal staff or hybrid programs). Updated norms are provided for the specific hours of absenteeism used as defaults for each level of the 1-5 categorical rating single-item version for work absence based on over 133,000 cases who reported specific numbers of hours of missed work on the fill-in-the-blank response version. Updated norms are also provided for how to recode the WOS work presenteeism 1-5 ratings into different levels of work productivity on 0 to 100% scale.

Chapter 10. Summary of key findings

This report is the sixth in the series on the Workplace Outcome Suite. The project features data collected from 61 different EAP vendor companies or internal programs at employers between the years 2010 and 2022. In total, 26 EAPs provided new additional data for this report. The size of the cumulative project dataset more than tripled from the 45,726 EAP users (counseling and users of other EAP services) in the previous annual report to now include over 141,000 valid users just for the counseling services. This number is far more than the roughly 10,000 new cases that were typically added to the total in past reports. Five EAPs new to the project contributed almost two-thirds of the total cases now in the study, which included one US vendor with over 36,000 cases, one US vendor with over 33,000 cases; one global vendor with over 10,000 cases, one US vendor with over 5,300 cases and one health system internal EAP in the US with over 5,300 cases.



Profile of counseling use at EAPs

This report presents a profile of EAP use based on **141,297** users of counseling services across a wide range of contexts during a 13-year period (2010 to 2022). This study sample is characterized by:

EAP client profile at start of use:

- 43 different countries globally (85% of cases from United States)
- Within the United States, all four major geographic regions were represented
- 8 major types of industries
- 67% female client gender / 32% male / <1% other
- 38 years average client age
- 95% covered employee / 5% person other than employee (family, spouse)
- 94% self-referral / 5% formal referral from manager at work / 1% family/other
- 56% at-risk for clinical depression
- 62% below normal level of job performance

EAP counseling use profile:

- Primary presenting issue mix: 47% mental health; 3% alcohol/drug; 19% personal stress; 20% marital, romantic or family relationships; and 11% work-related

- 5.4 sessions of counseling used (range 1 to 10+)
- 31% counseling sessions delivered in-person at a local office and 69% delivered using remote technology (online video, phone, text, e-mail)
- 60 days clinical treatment episode duration

EAP provider profile:

- 61 different EAP providers in 15 countries
- EAP business model:
 - 68% of cases from national/global large external vendors
 - 21% of cases from regional smaller external vendors
 - 11% of cases internal staff at one employer (half also with vendor support; hybrid EAPs)

WOS data collection methodology profile:

- Versions of WOS: 38% of cases had the WOS 5-item version with absenteeism 1-5 rating (hours estimated), 37% used with 5-item WOS with hours of absence filled in by employee; 24% of cases had used the 9-item WOS with hours of absence filled in by employee for five kinds of absence events and less than 1% of cases had the original 25-item WOS.
- Longitudinal Study Design: 88% of cases had data collected using Pre to Post study design with follow-up (range 30 to 90 day depending on the EAP) and 12% involved a shorter data collection design involving first and last counseling session and no follow-up post measurement (from 3 EAPs).

WOS Measures at problem level when starting counseling

Results based on between 104,000 to 140,000 EAP users found that work presenteeism was the most prevalent work-related risk factor with 60% of cases at a problem level when starting counseling. This was followed by 36% of cases having a work engagement problem, 35% of cases having a life satisfaction problem, 32% of cases having a work absenteeism problem, and 31% of cases having a workplace distress problem. The average case had two WOS outcomes at a problem level when first seeking support.

Relevance of WOS Measures to EAP counseling

Tests indicated that the WOS measures are relevant to employees who use EAP counseling in several meaningful ways. When considered together as a set, at the start of EAP use 4 out of every 5 counseling cases (81%) experienced one or more of the WOS outcomes at a problem level. When excluding the life satisfaction item, 78% of all cases had at least one of the four work related WOS outcome at a problem level when starting counseling. This high prevalence rate for having problems on WOS outcomes is interesting when only 11% EAP users sought assistance for an issue related directly to work. Thus, employee concerns were impacting work-related outcomes even when work was not a clinical treatment focus.

As many people use EAP counseling for mental health issues, the level of depression risk was explored. Greater initial severity of depression symptoms was associated with more absenteeism, more presenteeism, more workplace distress, less work engagement and less life satisfaction. The strongest correlation was between depression severity and the combined measure of all five of the WOS outcomes.

Lower job performance (rated on a 0 to 10 scale) was significantly but weakly associated with more absenteeism, more presenteeism, more workplace distress, less work engagement and less life satisfaction. The strongest correlation with job performance was with the combined measure of all five WOS outcomes.

Few correlates of WOS measures at start of counseling

Exploratory tests revealed that most of the context factors that describe this large and very diverse sample of EAP counseling users were not related in meaningful ways to differences in starting levels of the WOS outcomes. But several factors did have some interesting relationships with certain WOS measures, including a wide range of starting scores on the WOS for different EAP providers, presenting issues, industry and country (particularly for absenteeism).

Longitudinal results for improvement after counseling

The WOS scores were collected longitudinally at the first session and again after use. The sample size for paired WOS data at both before and after EAP use was **over 62,000 cases** depending on WOS measure.

- **Work Presenteeism** (*not being able to concentrate on work because of personal problems*) was reduced from 57% of cases at before use to 34% of cases at follow-up. Tests of mean scores on the 1-5 rating of work presenteeism indicated significant change with a large size statistical effect. The estimated hours of lost productive time associated with presenteeism per month was reduced from 42.8 hours missed per employee before counseling to 33.1 hours after use.
- **Work Absenteeism** (*hours missed from work during the past month due to a personal concern*) was reduced from 7.9 hours missed per employee before counseling to 4.3 hours missed after use. Tests of mean scores indicated a significant change with a medium size statistical effect. By comparison, other research shows the typical employee misses less than 4 hours of work a month. When defined as missing 4 or more hours of work as a “problem level” of this outcome, the percentage of EAP cases with an absenteeism problem was reduced from 32% at before to 17% after counseling.
- **Work Engagement** (*being eager to get to work the start the day*). Not being engaged in work was reduced from 33% of cases at before use to 24% of cases at follow-up. Tests of mean scores on the 1-5 rating of work engagement indicated significant change with a small size statistical effect.
- **Workplace Distress** (*dreading going into work*) was reduced from 26% of cases at problem level before use to 18% of cases at follow-up. Tests of mean scores on the 1-5 rating of workplace distress indicated significant change with a small size statistical effect.
- **Life Satisfaction** (*feeling that life overall is going very well*). Not being satisfied with life overall was reduced from 35% of cases at before use to 17% of cases at follow-up. Tests of mean scores on the 1-5 rating of life satisfaction indicated significant change with a large size statistical effect.
- **Combined SuperScore** (*all five WOS outcomes*). Tests of mean scores on the overall measure across all five outcomes indicated significant change of 13% improvement with a large size statistical effect.
- **Lost Productive Time** (*hours of work absenteeism combined with estimated hours of lost productivity associated with work presenteeism*). The hours of LPT per month per case was reduced from 43 hours at the start of EAP use to 33 hours at the follow-up. Tests of mean scores on the hours of LPT indicated significant improvement with a large size statistical effect.

The conclusion is that brief counseling from EAPs improves multiple aspects of work functioning for many users of the service. All of the WOS outcomes showed statistically significant results, although there were

different degrees of impact and improvement. The work presenteeism and life satisfaction outcomes had the greatest deficits at the start and thus improved the most after counseling.

ROI for EAP counseling based on reductions in WOS absenteeism and presenteeism

The return on investment (ROI) for EAP services from an external vendor provider was estimated using WOS absenteeism and presenteeism outcomes from the full study applied to use and cost conditions estimated for a typical large employer in the United States with 1,000 employees. The conditions included a low program utilization rate of 5% for clinical cases only per 100 covered employees per year, 94% of the cases being employees (6% spouses), average hourly compensation of \$43 (US national average in December of 2022) and a productivity value multiplier of 1.3. The difference in hours of lost absenteeism and presenteeism per month from before to after use of the EAP was considered to represent an excess amount of LPT. This excess amount of LPT was expected to last for at least a 6-month period of time had the EAP not intervened. A third of the cost-savings results were deducted from the final savings total to account for possible causal factors other than use of the EAP that also may have influenced the improvements found in the study. The result was an **ROI of \$5.11:1**. Based on these results, an annual program use rate of only 1% is all that is needed to cover the full investment cost in the EAP.

Moderators of improvement after counseling are few

The exploratory moderator tests were conducted using a more sophisticated analysis approach than in past reports. This time we statistically controlled for several other major context factors that all cases had data on (year, country, WOS version, EAP delivery model, timing of longitudinal data collection) to isolate the impact on outcome change associated with the one factor being tested (e.g., age of the client). We found that the extent of improvement over time on WOS measures was mostly consistent across almost all of the 18 context factors tested. This is very good news as it is robust evidence that the brief counseling used at different kinds of EAPs in many countries over 13 years has been successful to roughly the same degree for a wide variety of clients of different ages and genders, who work in different industries and used a range of different service delivery operational features.

More severe depression symptoms before use predicted relatively greater improvement on all of the WOS outcomes (particularly for life satisfaction), but these were only small size statistical effects. The other factor with consistent and more meaningful differences in the rates of improvement for the average service user was the specific EAP service provider. The 45 external vendors and internal staff programs with relevant data and at least 100 cases varied substantially from each other with a range of 1% to 36% for the improvement level on the WOS SuperScore composite measure for the average counseling case at their business or program (vs. the total study average of 13% improvement). A wide range in improvement between EAP providers was also found for each of the five individual WOS measures.

A new context factor examined for the first time in this report involved the timing of when the longitudinal data after EAP use was collected. We discovered that the study design option of collecting data just after the last session of counseling had improvement results on all of the WOS measures that were close to the findings when WOS data was collected using the more popular Pre and Post option involving a follow-up at one to three months after the last clinical session. Thus, the start of case vs. end of case study design of appears to have minimal bias compared to the findings obtained with the traditional pre vs. post study design. This is good news considering that collecting outcomes at the end of case dramatically increases the number of cases with longitudinal data available to analyze as this response rate is often in the 80% to 90% range - compared to the 5% to 20% range usually obtained with the follow-up method. However, it is premature to conclude that results from the start of case to end of case data method are equivalent to the

standard Pre-Post design with true follow-up. We need an EAP to collect WOS data at all three time points in a large sample to properly examine these methodological differences.

Norms for WOS scores by six global locations and four types of EAP delivery models

This report provides normative scoring for all of the WOS and LPT measures for groups based on country or global region (7 types) and for different EAP delivery models (4 types of vendors or internal programs). These norms are adjusted findings after controlling for other relevant context factors.

Updated norms for default specific hours of absenteeism for the 1-5 rating version of WOS

The specific default hours for each of the five categories of the 1-5 rating version of the absenteeism question are also updated (based 100,000+ cases).

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Project Financial Sponsor

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Suggested Citation

Attridge, M. (2024). *Workplace Outcome Suite® (WOS) EAP Industry Global Report No. 6: Use and Effectiveness for Over 140,000 Counseling Cases from 2010 to 2022*. [White paper]. TELUS Health & the Employee Assistance Professionals Association (EAPA).

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