# Advancing Employee Assistance Program Research:

## *Building a Practice-Based EAP Research Network*

# EAPA Research Summit Summary Report

## 2012 Annual World EAP Conference
## Baltimore, Maryland
## October 17, 2012

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### *Building a Practice-based Research Network*

## Introduction

At its 2012 Annual World Conference in Baltimore MD, USA, the Employee Assistance Professionals Association (EAPA) convened a Research Summit, entitled *Building a Practice-based Research Network*. The purpose of the summit was threefold: 1) to assess the current state of EA Research; 2) to encourage networking among key stakeholders and 3) to build a foundation for the construction of a Practice-based Research Network (PBRN). The summit was sponsored in part by the Employee Assistance Research Foundation (EARF), the Employee Assistance Society of North America's Knowledge Transfer and Research Committee, and the Hudson Valley Chapter of EAPA. In attendance were a diverse group of 55 invited practitioners, researchers, academics, and government agency representatives. The day-long event included two keynote presentations, a panel discussion, a networking lunch, and five content-specific concurrent discussion groups. This report of the summit proceedings includes session descriptions, relevant issues discussed, and participant-generated next steps.

## I. Keynote Presentations

Jodi Jacobson, PhD, University of Maryland, School of Social Work
David Chambers, PhD, Services Research and Clinical Epidemiology Branch, National Institute of Mental Health (NIMH)

### A. Opening Keynote

Jodi Jacobson, Associate Professor at the University of Maryland, delivered a personal discussion of her journey through the world of EA Research highlighting the strengths and challenges faced by the field. Dr. Jacobson shared her early career frustrations as a substance abuse counselor and her desire to explore early preventive interventions. Following an unexpected encounter with Dr. Dale Masi, she was introduced to the EA field and became intrigued with applied research that makes a difference in the lives of real people and organizations. Subsequently, while working for an EAP, she began her graduate studies at the University of Maryland, obtaining her doctorate in 2004. In 2006, Dr. Jacobson was selected to chair the EAP sub-specialization at the University of Maryland.  With wit and humor, she described the challenges faced by a junior tenure track faculty member attempting to develop an academic research portfolio. Describing the challenges faced by all researchers seeking to gain access for workplace-based research, she detailed the various sources of organizational resistance and lingering stigma attached to mental health and substance use disorders. Through perseverance and creativity she was ultimately able to develop viable partnerships with EA providers to conduct research on a range of EA-related issues and enhance the knowledge base of the field. These efforts have coincided with her appointment to a tenured faculty position at the University of Maryland. In conclusion, Dr. Jacobson endorsed the research conducted by contemporary EA researchers and encouraged its expansion. She emphasized the importance of evidence-based practice research for the continued viability and credibility of the EA field.

### B. Keynote - Connecting Mental Health Services Research and the Workplace

The second keynote presentation was delivered by David Chambers, Chief of the Services Research and Clinical Epidemiology Branch at the National Institute of Mental Health. Dr. Chambers introduced the basic mission of the 27 National Institutes of Health and emphasized the continuing need for mental health care, noting that 60 million Americans have experienced some form of mental illness. Problematically, less than half receive mental health care and only slightly more than a third receive quality evidence-based care. Within this context he argued persuasively for the integration of scientific research and clinical practice (i.e., translational research).

Dr. Chambers cited several products, including the Employers' Guide to Behavioral Health Services published by the National Business Group on Health and results of the NIMH-sponsored Work Outcomes Research and Cost-effectiveness Study as examples of recent progress in evidence-based research relevant to the workplace. Additionally, he described a number of ongoing NIMH activities such as a series of Small Business Innovation Research projects to develop web-based mental health interventions, and studies designed to address the mental health needs of returning veterans. Dr. Chambers listed four NIMH-identified research priorities:

1) Improve the general health of people with mental illness;
2) Advance sustainable evidence-based practices;
3) Leverage the value of existing administrative and clinical data; and
4) Reduce the rate of suicides.

Lastly, Dr. Cambers discussed the many challenges faced by researchers in the workplace context from the development of viable research partnerships to worksite access and funding. He encouraged the audience to be both creative and expansive in their research efforts. Dr. Chambers closed his remarks by inviting interested parties to approach him with questions regarding either his material or funding of related research studies.

## II.  Panel Discussion

Following the two keynote sessions, an expert panel composed of Eric Goplerud (NORC at the University of Chicago), Heather Healy (International Association of Flight Attendants), William Hudock (Substance Abuse and Mental Health Services Administration) and moderated by Dan Hughes (Mt. Sinai Medical Center) introduced the topics for the afternoon's small group discussion sessions. Some of the wide-ranging, but salient issues discussed were the impact of return on investment studies, the importance of evidence-based research, the commoditization of EA services, demonstrating value through cost effectiveness, EA organizational integration,

the impact of information technology, EAPs in the international context, EA services for managers, demonstrating clinical efficacy through measurable outcomes, and the challenges of conducting workplace-based research. Critically, the EA field's practice-based research deficiencies were raised and offered as a challenge. Among those present, the pressing need for rigorous EA research was universally endorsed.

## III. Luncheon Program

Sponsored by the Employee Assistance Research Foundation (EARF), the luncheon program was designed to provide attendees an opportunity to network informally and continue the discussion generated by the panel presentation. Luncheon speakers representing the Foundation, Vice President John Burke and Treasurer Dave Sharar, discussed EARF's mission, current focus, and future activities. They provided details of EARF's upcoming call for proposals, in which the Foundation plans to award a competitive research grant of up to $100,000. Parties are requested to submit an initial abbreviated preliminary description of a research study to measure and evaluate EAP workplace outcomes. Those interested in learning more about EARF or the particulars of this particular solicitation cycle were encouraged to view the Foundation's website: www.eap**foundation**.org

## IV. Afternoon Discussion Groups

Summit participants were asked to join one of five content specific concurrent break-out discussion groups. Each group was asked to discuss relevant issues in their respective areas and to develop actionable items for research in the following areas:

> A. Veteran Workplace Integration;
> B. Crisis Intervention and Mental Health;
> C. Health and Productivity;
> D. Alcohol and Drug Use Disorders; and
> E. Out of the Box (miscellaneous topics)

### A. Veteran Workplace Integration (VHI)

The VWI group explored the challenge of supporting employers and organizations to assist veterans (re)entering the civilian workforce. Discussion focused on the importance of research in the establishment of evidence-based best practices. The need for outcome studies comparing workplaces offering EA-sponsored veteran specific services to those without such sponsorship was suggested. The group reviewed the efficacy of community-based services compared to workplace-based services. Multiple issues were discussed, including, confidentiality, role of stigma as an inhibiting factor in help-seeking behavior, occupational

culture (military vs. civilian), veterans as peer counselors, family services, and domestic violence.

A series of broadly framed questions were posed for future EA practice and research, including: How can veterans in the workplace be assisted most effectively? What is the impact of mental health stigma among Gulf War Era veterans? Are veterans better suited for specific sectors of the civilian workforce? What is the role of EA in supporting both male and female veterans? Do veterans in workplaces served by EAPs have improved workplace outcomes for productivity, retention and less need for mental health services? Would veterans be best served in a VA healthcare setting versus a community health setting? How are veterans being introduced to available EA and other mental health services in the workplace? The VWI group proposed the following next action steps:

- Exploration and documentation of existing workplace-based services for veterans;

- Review of existing instruments used to screen veterans for PTSD, CBI, MST, suicide risk and other mental health issues;

- Development of a training programs for managers and supervisors in educating them about military culture and what techniques work best with returning veterans;

- Design and creation of veteran specific cultural competency programs for employers and employees, e.g., the online Returning Veterans Toolkit; and

- Identification of best practice modalities for PTSD, CBI, MST suicide, prevention and other mental health care for veterans.


**VWI Group Participants**

Patricia Herlihy, Rocky Mountain Research - Moderator

Dave Bringhurst, National Air Guard

Denise Hamlin-Glover, Wounded Warrior Project

Stacey Pollack, US Department of Veterans Affairs Office of Mental Health Services

James Schmeling, Institute for Veterans and Military Families at Syracuse University

Jeff Gorter, Crisis Care Network

Sara Landes, US Department of Veterans Affairs National Center on PTSD

Paul Maiden, University of Southern California Center for Integration Research on Veteran and Military Families

Nancy Vineburgh, Uniformed Services University of Health Sciences Center for the Study of Traumatic Stress

Josef Ruzek, US Department of Veterans Affairs National Center on PTSD

Leslie Brettschneider, University of Maryland School of Social Work – Research Volunteer

**B. Crisis Intervention and Mental Health (CIMH):**

The CIMH group began its discussion with a general exploration of the psychological impact of trauma, evidence-based treatment methods, chronological sequencing of interventions, the significance of resilience, trauma resistance/inoculation, protective factors and the distinction between acute trauma and chronic, cumulative stress. The discussion considered the impact of both acute and chronic stress on multiple occupational groups including firefighters and other first responders, health care workers, crime victims and veterans. The group also explored the impact of cumulative sub-acute stress such as workplace harassment and bullying, which typically falls below established DSM IV criteria. Lastly, the issue of suicide, especially among veterans was discussed.

The CIMH group raised a series of questions for subsequent exploration and study, including: What are the implications of severity and proximity in critical incident (CI) management? What CI interventions have proven to be effective? What are the most opportune moments for intervention? What is the significance of an individual's psychological history on the choice of appropriate evidence based treatment modalities? What are the established best practices for suicide prevention and the implications for EA practice? What is the impact of sleep deprivation on mental health and occupational performance? How can the field of neuroscience advance EA practice? What types of CIMH training and education programs have proven to be most effective in the workplace? How can EA practitioners balance organizational and employee interests regarding confidentiality. The CIMH group suggested a number of actionable next steps, including:

- Development of standardized measures of the impact of MH issues on the workplace;
- Development of standardized EA outcome measures to help build the business case for EAPs as an investment rather than merely an employer cost;
- Development of a severity index of critical incidents;
- Comparisons of the relative effectiveness of professional and peer interventions;
- Creation of an inventory of established CIMH training and education programs; and
- Solicitation of increased funding for secondary analysis of existing databases.

**CIMH Group Participants**

William Huddock, Substance Abuse & Mental Health Administration - Moderator

Judy Beahan, Crisis Care Network

Andrea Gonzalez, National Guard Bureau Psychological Health Program

Rebekah Hersch, The ISA Group

Georgia Karuntzos, RTI International

Caitlin Kozicki, PEER Assistance Services

Jane Lipscomb, University of Maryland School of Nursing

Beverly Younger, University of Southern California School of Social Work

Jungyai Ko, University of Maryland School of Social Work  - Research Volunteer

## C. Health and Productivity (H&P):

The H&P group explored issues pertinent to the overarching goal of linking EAPs with workplace health, safety and productivity initiatives. The historic role of EAPs as a workplace-based response to the impact of drug, alcohol and mental health disorders on productivity was affirmed as a basic premise. Discussants agreed that EAPs can clearly demonstrate the value of targeted interventions in the workplace. Participants also made an argument for increased involvement of EAPs in primary prevention and explored methodological challenges. Specifically, the group addressed the need to match health risk assessment (HRA) data with secondary data sources (organizational, administrative, clinical, etc.). Lastly, the H&P group discussed the reluctance of some providers and stakeholders to share data and research findings in a competitive entrepreneurial environment.

Several members of the group discussed current research activities including: a study on EAPs and depression management conducted by Dr. Deborah Lerner; work by Health Horizons on happiness and the workplace; a workplace resilience study assessing stress among restaurant workers conducted by Joel Bennett of OWLS; and a study of stress management and the impact of education/awareness on health expenditures conducted by the Ohio State University EAP. Other proposed goals included the need to continue identifying evidence-based practices that can be used globally and developing research partnerships with employers to support evidence-based practice. Areas of substantial interest included, workplace outcomes, the value of EA program accreditation, non-clinical management intervention and consultation. The group suggested the following next action steps:

- Identifying and promoting strategic workplace value-added partnerships;
- Development of improved workplace outcome measures;
- Reviewing current funding initiatives and RFAs; and encouraging increased levels of H&P focused research;
- Expanding the practice paradigm to include diverse perspectives such as positive psychology;
- Soliciting participation from other stakeholders (pharmaceuticals, disability managers, wellness); and
- Development of a position paper supporting the need for evidence-based standards and practices.


**H&P Group Participants**

Jodi Jacobson, University of Maryland School of Social Work – Moderator

Robert Meier, Ohio State University EAP

Kim Jinnett, Integrated Benefits Institute

Joel Bennett, Organizational Wellness & Learning Systems

Sarah Pressman, University of Kansas, ORCAS

Paul Heck, DuPont Global Employee Assistance & WorkLife Services

Stan Granberry, National Behavioral Consortium

Lourie Terblanche, University of Pretoria

Andrea Stidsen, Partners HealthCare System

Paul Kurzman, Silberman School of Social Work, Hunter College

Dennis Derr, Optum Health Behavioral Solutions

Rebecca Houston, University of Maryland School of Social Work – Research Volunteer

## D. Alcohol and Drug Use Disorders (AOD):

The AOD group began its discussion by focusing on the gaps in EAP/AOD research and by recognizing that EAPs are relatively heterogeneous. This discussion expanded to include the lack of evidence-based research in EAP practice. There was agreement that the EA field needs to develop closer relationships with federal agencies and other research funding sources to identify funding opportunities for EA research and develop alternative research designs to standard clinical trials.

In addition, the group recommended a strategy to link EA researchers with EA practitioners to develop EAP/AOD research partnerships and enhance research infrastructure and capacity. Subsequent efforts could focus on developing funding to address well-articulated research questions. Such partnerships could serve as PBRN prototypes. The AOD group identified the following action steps:

- Focus on funding, e.g., identify funding sources, develop concept papers, meet with funding agency representatives from SAMSHA, NIDA, NIH, etc.;
- Identify and engage EAP providers interested in participating in practice-based research;
- Link interested EAPs with EA researchers for the purpose of developing fundable proposals;
- Begin to organize and secure funding to create a viable PBRN infrastructure.

## AOD Group Participants

Tracy McPherson, NORC at the University of Chicago – Moderator

Jayme Delano, White House Office of National Drug Control Policy

Jeremy Bray, Research Triangle Institute

David Loveland, Fayette Companies

Dave Sharar, Chestnut Global Partners

Cecilia Montano, University of Texas Health Science Center School of Public Health – Research Volunteer

Christa Lee, University of Maryland School of Social Work – Research Volunteer

**E. Out of the Box (OTB):**

Given the OTB group's lack of a specific content area focus, the discussion was less structured and very spontaneous. The discussants articulated many of the major challenges faced by researchers in the EA field. These including sparse funding, the methodological challenges of conducting research in real world workplace settings, inadequate access to workplace research sites, poor cooperation among research stakeholders, the absence of adequate standardized measures, and the lack of global EA outcome data.

Generally, it was believed that many EAPs are not collecting reliable data suitable for use in empirical research. The group discussed the utility of creating a broadly constructed database capable of supporting multiple research initiatives employing meta-analytic methods and techniques. Preliminary ideas regarding the structure and availability (open vs. subscription) of the proposed data base were explored. Lastly, the group discussed the importance of informed consent, de-identifying data, and other human subjects research protections.

The OTB group identified the following next steps:

- Construction of a large data base to support EA research;
- Steps to improve the overall quality of EA metrics;
- Creation of an inventory of evidence-based EA practices;
- Development of a list of EA-relevant research questions; and
- Encouraging closer partnerships between researchers, academic institutions, foundations and government institutes to promote EA research.


**OTB Group Participants**

Eric Goplerud, NORC at the University of Chicago - Moderator

Dale Masi, MASI Research Consultants/Catholic University

Tom Amaral, EAP Technology Systems

Bob VandePol, CrisisCare Network

Karen Hopkins, University of Maryland School of Social Work

Sandra Turner, Ernst & Young

Ron Manderscheid, National Association of County Behavioral Health and Development Disability Directors

Beverly Younger, University of Southern California, School of Social Work

Jennifer Zwahlen, University of Maryland, School of Social Work – Research Volunteer

## V.  Conclusion

In Conclusion, the Research Summit Planning Committee thanks each and every person who participated in this historic event.  The Committee was gratified to see the aligned interests of participants who came together from diverse backgrounds to offer insight and potential future steps for research on EAPs.   A number of key ideas surfaced during the day, including the need for a White Paper on the important role of EA Research in the evolution of a more affordable health care system, and the potential for developing an across-Federal-Institutes grant proposal addressing these topics.   Probably the most important contribution of the Research Summit was the gathering of thought leaders in the field and the first steps toward creating and supporting a EAP focused practice-based research network (PBRN) similar to those currently functioning in the primary care arena.

A Steering Committee, chaired by Dr. Dan Hughes, will remain in place and will continue to meet monthly to maintain the momentum generated by the Summit.  The Steering Committee will distribute semi-annual updates on progress to all attendees.  Anyone interested in being part of the Steering Committee or being added to the distribution list for semi-annual updates should contact EAPA at researchsummit@eapassn.org.

## VI.  Acknowledgements

**2012 Research Summit Planning Committee**

> Dan Hughes (Chair)
> Kathi Beauchesne
> Paul Clavelle
> Eric Goplerud
> Patricia Herlihy
> Bill Huddock
> Jodi Jacobson
> Tracy McPherson
> Jim O'Hair
> Lisa Stern
> Charlie Williams
>
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## Research Summit Attendees

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David Bringhurst, National Guard Bureau Psychological Health Program
John Burke, Burke Consulting
David Chambers, National Institute of Mental Health
Jeff Christie, Halliburton
Paul Clavelle, US Department of Defense
Royer Cook, The ISA Group
Jayme Delano, White House Office of National Drug Control
Richard Denisco, National Institutes of Health
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Mitchell Geiger, US Department of Labor
Andrea Gonzalez, National Guard Bureau Psychological Health Program
Eric Goplerud, NORC at the University of Chicago
Jeff Gorter, Crisis Care Network
Stan Granberry, National Behavioral Consortium
Arlene Greenspan, National Center for Injury and Prevention Control
Heather Healy, International Association of Flight Attendants
Paul Heck, DuPont Company
Patricia Herlihy, Rocky Mountain Research
Rebekah Hersch, The ISA Group
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