

Evolution of the Employee Assistance Program Industry in North America: Historical Changes and What Purchasers Want Today

A Research Report for *EASNA*
The Employee Assistance Society of North America

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There is increased interest lately in how the employee assistance industry in North America has changed over the past few decades. Ten areas of change were rated for how accurate each was considered to be today. Also assessed were the importance of different factors that drive purchaser choices today for why they sponsor an EAP in general and ratings of how important various services and features contribute most to why a particular vendor is selected to provide EA services. Also examined are preferences for how to update the 2009 EASNA purchaser's guide to EAP. Results are based on a survey in 2018 of 155 professionals in EAP field.

Overview of the Study

Employee Assistance Society of North America (EASNA) is the employee assistance industry's trade association. EASNA advances the competitive excellence of its members by fostering best practices, research, education, and advocacy in behavioral health and wellness that impacts workplace performance. In May of 2018, the EASNA held its 30th Annual Institute in Vancouver, Canada. In recognition of such a sustained history,

many people were interested in how the industry had changed over this span of time. The top 10 areas of change were identified by the author from a preliminary one-page qualitative survey completed by 33 people at the Institute's luncheon event.

These 10 areas were then featured in a survey offered to a much broader sample and each area of change was rated for how accurate it was considered to be today. Also assessed on the survey were the importance of different factors that drive purchaser choices today for why they sponsor an EAP in general and which services and features contribute most to why a particular vendor is selected to provide EA services. The results are based on a survey of 155 professionals in EAP field.

Research Questions

The study examined the following four main research questions:

RQ1 – What has changed compared to 30 years ago in the EAP industry?

RQ2 – Today how important are different features and kinds of services, in general, to why employers purchase EAPs?

RQ3 – In today's market, how important are different factors to why employers decide to purchase one EAP over other EAPs?

RQ4 – Do the Findings Differ by Characteristics of the Respondent?

This last question will explore possible differences in the major findings above by certain characteristics of the respondents, including: Perspective of Provider vs. Purchaser of EAP; Country (Canada vs. United States); Sex (Male vs. Female); Age; and Years of Experience in EAP Industry.

Other items concerned aspects of how to revise an update the 2009 resource from EASNA: *Selecting and Strengthening Employee Assistance Programs: A Purchaser's Guide*.

Methodology

Recruitment of Survey Respondents

This applied study used a non-random sampling process with survey data collected on a volunteer basis from people experienced in the EAP industry in Canada and the United States. Invitations to an online questionnaire distributed through several channels: Social media (Twitter) for EASNA; Posts and reminders on LinkedIn for researcher (500+ views); Personal e-mails by researcher to EAP contacts (300+); Personal e-mails by researcher to Editorial board of *Journal of Workplace Behavioral Health: EAP Practice and Research*; E-mail list of members of National Behavioral Consortium (Mostly US-based EAPs); E-mail list for Graham Lowe (750+ mostly Canadian); E-mail list for Great West Life's Centre for Workplace Mental Health (mostly Canadian); and an E-Newsletter to

members of the Health Enhancement Research Organization (HERO).

A financial incentive of \$100 USD was offered to one respondent to be chosen at random.

Data collected during May and June in 2018.

The specific response rate was unknown but it estimated to be roughly 30% of the target population of experienced professionals in the EAP industry in North America.

Sample

There were 155 valid surveys. Of this sample, not everyone answered all of the items but were retained nonetheless if at least the first set of items on historical changes in the EAP industry was completed.

Country. The mix of respondents by country was mostly from the United States (78%, $n = 121$) with 21% from Canada (21%, $n = 32$) and 1% other countries (Japan & South Africa, 1 each).

Sex. The sample was 51% male ($n = 77$) and 49% female ($n = 72$; with 6 missing).

Size of Employer. There was a fairly even mix of employer sizes: Boutique or Regional size at 40% ($n = 62$), National at 36% ($n = 55$), and Global at 34% ($n = 38$).

Age. The average age of respondent was 56 years. Details on age included: Less than 30 years old = 0%; 30 to 39 years = 11% ($n = 16$); 40 to 49 years = 14% ($n = 20$); 50 to 59 years = 30% ($n = 44$); 60+ years = 46% ($n = 67$).

EAP Industry Experience. Item: "Approximately, how long have you been associated in some way with the field of employee assistance programs?" Years of

experience in EAP was an average of 23 years, based on: Less than 5 years = 8% ($n = 12$); 5 to 10 years = 9% ($n = 13$); 11 to 15 years = 11% ($n = 16$); 15 to 20 years = 9% ($n = 13$); 20 to 25 years = 9% ($n = 25$); 25 to 30 years = 21% ($n = 32$); 30+ years = 27% ($n = 41$).

Employment Context. Item: “Which of the following best characterizes your employment context?” with six category options. Half of the sample was EAP Provider - External Vendor 52% ($n = 81$); with the rest being EAP Provider - Internal Program 9% ($n = 14$); EAP Provider – Specialty / Affiliate counselor 6% ($n = 11$); Other including Consultant / Research / Academic 13% ($n = 20$); Purchaser of EAP / employer 12% ($n = 19$); and Broker or benefits consultant advisor to employers about EAP 7% ($n = 10$).

EASNA Membership. Respondents were asked about their current status as a dues-paying member (either individually or as an organization) in the Employee Assistance Society of North America. Of the 132 people who answered this item, 23% were current members ($n = 35$) and 77% were non-members ($n = 97$). This item had 22 cases with missing data.

Job Title. Respondents were asked for their current job title with a fill in the blank response option. The results indicated a range of mostly senior level and executive positions consistent with the typical age of sample being in the 50s. The most prevalent examples include: CEO, CFO, COO, Owner, President, Vice President, Director, Account Executive, Professor, Consultant, Manager, and retired

Results

The findings are presented in five parts.

Results Part 1. Changes in EAP Industry

The survey asked: “How accurate is each of the following statements concerning how the EAP industry has changed compared to 30 years ago (1988 or compared to as far back as you can remember)?” Response options were: Not Accurate; Somewhat Accurate, or Accurate. The results are shown in Table 1. All 10 items had a majority of respondents who thought it was either Accurate or Somewhat Accurate.^{ENDNOTE1}

Thus, the suggestions of changes from the smaller EASNA luncheon sample were on target when examined in this larger sample. A rank ordering is presented below based on the percentage of the sample agreeing the statement was Accurate.

Top 10 Changes in EAP Industry:

1. Greater range of different services from EAP (94%)
2. More technology-based services from EAP (85%)
3. Competition from “Free EAP” products bundled into insurance (75%)
4. Shift to an external vendor model EAP delivery (75%)
5. Mature market with consolidation of EAP vendors (74%)
6. Saturated market as most larger size employers have EAP (74%)
7. More integration of EAP into the host organization (65%)
8. Stagnation of price for EAP (63%)
9. Less stigma about mental health and addiction issues in general (59%)
10. Greater role for EAP to prevent and manage behavioral health risks (44%)

Three themes were also identified for the ratings of the 10 items about change in the EAP industry. The themes were determined based on a statistical factor analysis using Principal Components extraction and Promax oblique factor rotation. This yielded three factors with eigenvalues of 2.50, 1.71 and 1.08 and accounted for 53% of the shared variance (see Table 1 for factor loadings for primary items on each factor). The three factors represent the following themes along with the average percentage of ratings at the Accurate level for all of the sub-items in each factor:

1. Mature Market of External Vendors and Technology (77%)
2. Low Value EAP - Commoditization (69%)
3. High Value EAP - Full Service with Integration and Prevention Role (66%)

Summary. The first theme is that the market in North America has become more mature, with most large and medium size employers having an EAP, consolidation of providers into fewer but larger companies, a shift from the internal staff model to mostly external vendors, and modern technology to promote and deliver services. Given this substantial shift in who provides EAP and how services are provided, there have been two competing parallel paths that define different vendors. One path has been toward commoditization which offers less value at low cost and almost no EAP presence at the worksite. In contrast, the other path offers greater value and an expanded range of services offered to the organization that recognizes the important role of workplace mental health and wants the EAP to be a partner that is integrated with other benefits and can serve in both prevention and treatment roles.

Results Part 2. EAP Services Important to Purchasers Today

Employers purchase EAPs to accomplish a wide variety of different employee and workplace problems. The survey asked: “Today how important are the following different features and kinds of services, in general, to why employers purchase EAPs?” Response options were: Low Importance, Moderate Importance, High Importance, or Very High Importance.

Three themes were identified for the ratings of the 13 items about reasons to offer EAP services. A factor analysis using Principal Components extraction and Varimax orthogonal factor rotation yielded three factors with eigenvalues of 6.22, 1.56 and 1.04 and accounted for 68% of the shared variance (see Table 2 for factor loadings for primary items on each factor). The three factors are shown below with the average percentage of ratings of Important or Very Important for items in the factor:

1. Supporting the Employee’s Work & Behavioral Health (84%)
2. Supporting the Work/Life & Family of Employee (65%)
3. Supporting the Work Organization (57%)

The first theme represents EAP services that support the employee’s work and behavioral health. This includes having the EAP provide counseling for issues of work stress, occupational, anxiety, depression, grief, alcohol and other addiction problems.

Supporting the work/life challenges and family members of employees was the second most important task for EAPs. These include providing assistance from the

EAP for issues of child care, elder care, balancing work schedules, legal problems, financial problems, marital counseling and counseling for spouses and other family members as needed.

Finally, supporting the work organization was also important. These workplace focused services include responding to crisis events, consultation to HR and leadership, consultation to managers and supervisors, providing educational trainings, case management support for employees who return to work after a disability leave, and support for unions. This last theme emphasizes what distinguishes the full-service EAPs from other kinds of more basic counseling services provided to individuals.

Summary. Employers purchase EAPs for a variety of different reasons. Three themes best characterize these reasons. Most important is to support the employee's work and behavioral health. Supporting the work/life challenges and family members of employees was the second most important task for EAPs. Supporting the work organization was also important.

Results Part 3. What's Important in Selecting an EAP Vendor

The survey asked: "In today's market, how important are the following factors to why employers decide to purchase one EAP over other EAPs?" Response options were: Low Importance, Moderate Importance, High Importance, or Very High Importance. Results are presented in Table 3. A factor analysis using Principal Components extraction and Quartimax factor rotation yielded six factors with eigenvalues of 6.78, 2.15, 1.64, 1.28, 1.26 and 1.04 and accounted for 64% of the shared variance (see Table 3 for primary factor loadings for items on each factor).

The factors represent the following themes along with average percentage of ratings of important or very important for items in the factor:

1. Low Price & Broker Opinion (79%)
2. Scale and Scope of Services (61%)
3. Client Outcomes, ROI & User Satisfaction (62%)
4. Account Management Expertise & Program Utilization (61%)
5. Fit with Organizational Context & Needs (39%)
6. High Quality of EAP Program & Staff (29%)

Summary. The decision by an employer to select one EAP over another is influenced by many factors. The most influential factor was the combination of lower price and the recommendations of insurance brokers and employee benefits consultants (rated as important by almost 8 in every 10 people). This result reflects the mass market stage for the industry and the commoditization changes noted earlier. Several other factors were each found to be important by about 6 in 10 people. These themes included: a) user satisfaction, improvements in work and clinical outcomes after counseling and overall program ROI; b) having a wide scope of services available from the EAP and multiple access points to use of services (i.e., better technology tools); and c) EAP account management, detailed reporting and program utilization. Less recognized were themes of having a unique fit between the EAP with the organization and workplace needs (rated by 4 in 10 people as important) and aspects of the quality services from having an accredited program and

specialized staff at the EAP (rated by 3 in 10 people as important).

Results Part 4. Tests of Moderator Variables

The major descriptive findings were also examined for possible differences based on being either a provider or purchaser of EAP, by country where the respondent lived, and by three demographic factors. Correlational tests were done using composite scores created by adding together the items for the each of the factors identified earlier for the three main areas of inquiry. Using composite scores created measures with better reliability and also reduced the total number of tests that needed to be conducted, which reduced the chances of getting a spurious finding just by chance alone (Clark & Watson, 1995). The internal reliability coefficient alpha for each of the twelve summative measure ranged from .43 to .87 (see Table 4). As with coefficient alpha, all but one of the 12 indexes had at an acceptable level of average inter-item correlation. Thus, almost all of the composite measures were adequate for their use in the moderator tests.

If a significant effect was obtained for a particular composite measure (see Table 5 for these results), then other follow-up chi-square and correlational tests were also conducted on each of the specific items within a composite measure to identify where the strongest associations were coming from that contributed to the composite scores.

Provider/Purchaser Perspective as a Moderator. Is there a difference in profile of results depending on the perspective of the respondent as being either a provider or a purchaser of EAP services? This was tested between two groups. The first group

represented the perspective of the “Providers” of EAP ($n = 102$ from the U.S., 22 from Canada and 2 from “other”). This group included those who worked for external EAP programs, internal EAP programs, specialty providers to EAPs, and others who were clinicians, academics or consultants active in EAP. The other group represented the perspective of the “Purchasers” ($n = 19$ from the U.S. and 10 from Canada). The Purchasers included employers with an EAP and brokers or benefits consultants who advise employers on EAPs. Results revealed statistically significant differences in only 3 of 12 tests ($p < .05$).

Just one of the three themes for industry change had a difference by perspective. The Providers endorsed the theme of change in the EAP industry of commoditization more so than did the Purchasers. Exploratory tests within this theme indicated more of the Providers considered the following two kinds of changes as accurate than did the Purchasers: (a) competition from “Free” EAP insurance products, Providers 84% vs. Purchasers 38% ($r = .42$); and stagnation of price of EAP, Providers 69% vs. Purchasers 35% ($r = .28$).

No differences by perspective were found for any of the three themes of why EAP is purchased in general.

The selection factors for choosing a particular EAP did have differences by provider/purchaser on two of the six themes in this area. Having a low price for EAP was considered important to 90% of Providers (rated as High or Very High Importance) but only for 65% of Purchasers ($r = .17$). Similarly, recommendations from a broker was considered important by 77% of Providers but by only 53% of Purchasers ($r = .14$). This difference by perspective

also included the theme of the quality of EAP, with the Purchasers rating quality as more important than Providers. This difference was also found on each of the four sub-items for quality: Quality of accredited program: Providers 17% (rated as High or Very High Importance) vs. Purchasers 54% ($r = .38$); Quality of staff with CEAP, Providers 15% vs. Purchasers 38% ($r = .29$); Quality of using SBIRT, Providers 29% vs. Purchasers 42% ($r = .18$); and Quality of having own staff counselors, Providers 37% vs. Purchasers 58% ($r = .16$).

Taken together, this set of exploratory findings suggests the people who sell EAP, compared to the people who buy EAP, tend to overstate the importance of low price and broker recommendations to the vendor selection process and at the same time to understate the importance of the quality of EAP staff and services. This finding may be considered refreshing to some EAP vendors to learn that purchasers are considering more than just price and following the advice of their benefits broker and are interested in the quality of EAP services as well.

Country as a Moderator. Is there a difference in the profile of results depending on Country of respondent? This question was tested between respondents from the United States ($n = 121$) and from Canada ($n = 32$). Results revealed statistically significant differences in only 3 of 12 main tests ($p < .05$). Thus, most of the study primary results were similar by country.

However, the Americans endorsed the theme of change in the EAP industry of greater commoditization slightly more so than did the Canadians. This same difference by country was found for all three of the specific items comprising this theme (range from $r = .17$ to $.31$).

Americans also considered the theme of low price and broker opinion as more important than did Canadians for influencing why companies select a particular EAP vendor. But this finding was actually only due to the item in the theme of broker opinion, which was rated as important for more Americans than it was for Canadians (76% vs 58% rated as High or Very High Importance, respectively; $r = .21$).

In contrast, Americans regarded the theme of EAP quality as less important than did Canadians for why companies select a particular EAP vendor. Digging deeper into this last finding revealed that it was due to only one aspect of quality – which was having an accredited program. This feature of an EAP was important to more than three times as many Canadians as it was to Americans (52% vs. 17%, respectively; $r = -.32$). This difference by country makes sense given that program accreditation is common in Canada for all of the major EAP vendors and yet it is rare among EAP vendors in the U.S. The other three sub-types of EAP quality did not differ by country.

Demographic Factors of Respondent as a Moderator. Is there a difference in profile of results depending on age, sex, or years of experience in the EAP industry? The results exploratory correlational tests revealed very few differences based on demographic factors of age or sex of respondent or for total years of experience in EAP field.

Age of respondent was associated with only one of the 12 primary measures. A small effect was found between older age and greater endorsement of the commoditization of EAP as an accurate change in the EAP industry.

Sex of respondent was not a factor in most of the findings (9 of 12 tests were *ns*). However, men tended to consider the theme of price and broker opinion as more important in the selection of an EAP vendor than did women. In addition, women tended to consider the two themes of client outcomes and of quality of EAP as more important in the selection of an EAP vendor than did men.

Years of experience in the EAP industry had few moderating effects overall, with only 2 of 12 tests being significant. Yet, respondents with more years of experience in EAP field tended to rate the theme of industry change involving a high-value full-service EAP as less accurate than did those with less experience. Respondents with more years of experience in EAP field also tended to consider the theme of quality as less important in the selection of an EAP vendor than did those with less experience.

Perhaps these findings reflect the sense of pessimism (or being appropriately jaded?) after witnessing the massive changes in the field related to falling prices and commoditization that are at directly at odds with a vendor being able to afford to provide a full service and high quality EAP. A sentiment of “you get what you pay for” was noted in many of the comments that respondents provided on the survey (see next section of results).

Summary of Moderator Tests. In general, there were few differences by perspective of provider or purchaser of EAP. However, the providers placed more emphasis on some of the external market changes and the role of low price and broker influence in selecting a vendor while purchasers placed more emphasis on the quality of EAP services. Respondents from Canada and the United States tended to have similar patterns of

findings. Demographic factors also had very few differences on the primary findings.

Results Part 5. Implications for Updating the EASNA Purchaser’s Guide to EAP

The Purchaser's Guide to EAPs was released in 2009. It is 58 pages long, features contributions from 11 authors and has over 150 research-based references. It has three sections: The Case for EAPs; How to Select an EAP; and How to Strengthen an EAP. It was available at no-cost from the EASNA website. The study also asked a number of questions designed to provide possible information for revising the Guide:

- How Familiar with 2009 Guide?
- Which Chapters of Guide Most Shared?
- What is Most Useful Format for Update?
- Separate Guides for Canada and US?
- Impact on EASNA Membership?

Level of Familiarity. The data showed that 6% of the sample were very familiar – used it in our EAP program; 37% were familiar – had downloaded the PDF and read it; 27% were somewhat familiar – had heard about it; and 30% were not familiar. Thus, less than half of the sample had a moderate level of familiarity with the Guide. This is not that surprising as it was first released almost a decade ago. This finding also allows for some experience to qualify part of the sample for answering some of the follow-up items about the Guide.

Chapter Topics. To explore which topic areas were most of interest, the survey asked “The Purchaser's Guide was also split into 10 separate brief reports (each only 3 to 5 pages long). These were published in 2009 and 2010 the first volume of the *EASNA Research Notes*. Please indicate which of these reports you have read or shared with

others (check all that apply):” The data for this analysis exclude the portion of the sample who were not familiar with the Guide. The results are presented in Table 6. The range of effect was from 59% to 27% across the 10 chapters. The topics with a majority of respondents indicating they had shared the material were: EAP Effectiveness and ROI at 59% and The Business Value of EAP at 56%. These results reflect the intended purpose of the overall Guide for educating the employer market on the business value and outcomes possible from EAPs.

Format of Updated Guide. The 2009 guide was comprehensive and thus considered an authoritative resource. But it also was considered too long by some people to effectively share with customers and others less familiar with EAP. That is why the original Guide was broken into 10 smaller reports that were published as a series in the *EASNA Research Notes*. For a newer version, there was the issue of length and style of sharing information on EAPs to purchasers. This was also addressed on the survey. An item asked: “For the new Purchaser's Guide to EAP in 2018, which kind of presentation format of the updated material would be the most useful for you? Please rate each type.” With three options and five choices of presentation style types. The results are shown in Table 6.

As expected, the original long White Paper style of report was the least preferred format – with only 19% finding it *very useful*. In contrast, each of the other four format types had a majority of respondents saying it was *very useful*. These included a simple decision-making checklist (69%), an infographic one-pager (64%), a short business style written report (54%) and a slide deck (52%). These findings indicate

something (anything) that is short is the preferred format for a new Guide.

New Purchaser's Guide – Need Country Specific? As EASNA has membership in both Canada and the USA, it was of interest to consider if a different revised version should be created for each country. The survey asked: “Concerning how EAP is delivered and sold in different countries, do you think the updated purchaser's guide resources should be: One version for EAP industry overall but with certain country-specific aspects noted OR Different versions for United States and for Canada?” The results revealed slightly more Canadians preferred a country-specific new report.

Americans ($n = 109$)

- 54% One report
- 46% Country-specific reports

Canadians ($n = 28$)

- 39% One report
- 61% Country-specific reports

Potential Impact of a New Guide on EASNA Membership. Also examined was the idea of how offering a revised version of the original Guide could boost membership in EASNA. The survey asked: “Would having access to updated Purchaser Guide resources from EASNA as a benefit of membership make you more likely to consider becoming a dues-paying member of EASNA (or to renew your existing membership)?” The results are in Table 7. Overall, 43% of sample reported a Maybe response and 14% a Yes. This Yes positive response was highest among those who were already a member compared to non-members (27% vs. 9%). Overall, a majority of the survey sample (58%) indicated the possibility of a new purchasers guide type of resource contributing to continued or new membership in EASNA.

Summary. Most of sample was at least somewhat familiar with original 2009 Purchaser's Guide. There was a wide range of which chapters of Guide were shared most often. EAP Outcomes and business value issues were the most popular topics from the Guide. If a new updated Guide was created, the most useful format for 2018 version of guide is anything that is *not* a long written report / white paper like the original guide. There was a split in opinion for if we need separate new resources for Canada and for United States. But more Canadians than Americans wanted country-specific tools. Finally, a revised Guide may have positive impact on adding or retaining paid membership in EASNA - for about half of sample – including current members and non-members.

END NOTES

1. Another item on the survey in the section on historical changes asked: "Longer-term follow-up by EAP for more severe cases (alcohol or depression) rarely happens today." The results were: 16% Not Accurate, 56% Somewhat Accurate and 28% Accurate. This item was excluded from the above results because it had a much lower level of endorsement, inconsistent shared variance with the other items and was the only negatively phrased item in the set.

FULL-LENGTH GUIDE

EASNA. (2009). *Selecting and strengthening Employee Assistance Programs: A purchaser's guide*. Attridge, M. (Lead author). Washington, DC: Employee Assistance Society of North America. Available at: <http://www.easna.org/publications>

GUIDE CHAPTERS AS 10 NOTES

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PEER-REVIEW JOURNAL ARTICLE

Attridge, M. (2010). Resources for employers interested in employee assistance programs: A summary of EASNA's *Purchaser's Guide* and *Research Notes*. *Journal of Workplace Behavioral Health: Employee Assistance Research and Practice*, 25(1), 34-45.

Table 1
Ratings of Changes in EAP Industry from 1988 to 2018

Item: "How accurate is each of the following statements concerning how the EAP industry has changed compared to 30 years ago (1988 or compared to as far back as you can remember)?"		Level of Accuracy of Statement							
		Not Accurate (1)	Somewhat Accurate (2)	Accurate (3)	Row Total	Mean	SD	Rank Total	
Factor loading	Factor & Specific Items								
	Mature Market - External Vendors and Technology					2.74			
0.70	Almost all large and most medium-size employers now have some kind of EAP.	9%	21%	74%	100%	2.70	0.56	5	
0.64	More mature market with fewer but larger EAP external vendors after acquisitions and mergers of EAP providers.	1%	25%	74%	100%	2.71	0.49	4	
0.46	Shift from internal staff model to mostly external vendor affiliate models of delivery of EAP counseling services.	2%	23%	75%	100%	2.72	0.51	3	
0.40	More technology-based EAP services (phone, website, online video, mobile apps).	0%	15%	85%	100%	2.84	0.37	2	
	High Value EAP - Full Service with Integration and Prevention Role					2.58			
0.80	EAPs have greater role in preventing and managing behavioral health risks in employee population.	17%	39%	44%	100%	2.25	0.74	10	
0.78	More integration of EAP into other parts of organization (e.g., work/life, wellness, disability, safety).	4%	31%	65%	100%	2.61	0.57	7	
0.64	Greater recognition of mental health and addiction issues in general (less stigma).	8%	33%	59%	100%	2.51	0.64	9	

0.47	Greater range of different services offered beyond traditional focus on employee alcohol and substance abuse problems.	0%	6%	94%	100%	2.94	0.24	1
	Low Value EAP - Commoditization					2.72		
0.78	Competition from "Free EAP" limited programs bundled into other employee health insurance products.	6%	19%	75%	100%	2.70	0.56	6
0.70	Stagnation of price for core EAP services.	8%	29%	63%	100%	2.54	0.65	8

N = 153.

Table 2
Features of EAP Important to Purchasing an EAP in General. By Theme

Factor loading	Item: “Today how important are the following different features and kinds of services in general to why employers purchase EAPs?”	Level of Importance				Total	Avg. Rating <i>M</i>	SD
		Low (1)	Mod. (2)	High (3)	Very High (4)			
	Supporting the Employee’s Work and Behavioral Health						3.36	
0.85	Counseling for employees with emotional issues (depression, anxiety, grief)	1%	13%	33%	53%	100%	3.40	0.73
0.76	Counseling for employees with work stress and occupational issues	1%	13%	31%	55%	100%	3.42	0.74
0.71	Counseling for employees with alcohol and other addiction issues	2%	19%	31%	48%	100%	3.25	0.83
	Supporting the Work/Life and Family of the Employee						2.91	
0.87	Supporting employees with personal financial and legal issues	6%	33%	34%	27%	100%	2.81	0.91
0.76	Supporting employees with work/life balance issues (family, elders, children)	1%	29%	32%	38%	100%	3.08	0.83
0.68	Counseling for employees with relationship and marital issues	1%	26%	36%	37%	100%	3.07	0.82
0.64	Counseling/support for covered family members of employees for similar issues	9%	35%	35%	21%	100%	2.68	0.90
	Supporting the Organization						2.71	
0.83	Supporting the organization with expert consultation to HR and leadership	16%	38%	26%	20%	100%	2.50	0.99
0.79	Supporting the organization with training and educational services on key topics	11%	35%	37%	17%	100%	2.61	0.90

0.77	Consultation for managers and supervisors concerned with troubled employees or work team issues	6%	26%	36%	32%	100%	2.93	0.91
0.64	Supporting the union stewards and union members	32%	40%	16%	12%	100%	2.09	0.98
0.59	Supporting the workplace after crisis events	2%	9%	29%	60%	100%	3.48	0.74
0.58	Supporting employees returning to work after disability leave involving mental health or addiction issues	15%	30%	30%	25%	100%	2.64	1.02

Note: Items listed in each theme according to factor loadings from highest to lowest.
N = 149.

Table 3
Features of EAP Important to Selecting a Specific Vendor: By Theme

Factor loading	Today how important are the following different features and kinds of services, in general, to why employers purchase EAPs?	Level of Importance						Avg. Rating <i>M</i>	SD
		Low (1)	Mod. (2)	High (3)	Very High (4)	Total			
	Price & Brokers						3.12		
0.81	Price for EAP (usually lower price)	1%	14%	37%	48%	100%	3.33	0.74	
0.73	Recommendation from employee benefits broker or consultant	4%	24%	50%	22%	100%	2.90	0.79	
	Scale and Scope of EAP Resources						2.75		
0.75	Style or strategy of the promotional materials for EAP	16%	48%	26%	10%	100%	2.31	0.86	
0.65	Advanced technology to access EAP (phone, website, online video, mobile app)	3%	25%	39%	33%	100%	3.02	0.83	
0.63	Bigger network of affiliate counselors in many locations to provide in-person sessions	7%	30%	41%	22%	100%	2.76	0.88	
0.47	Range of different kinds of services offered by EAP	5%	24%	49%	22%	100%	2.89	0.80	
	User Outcomes, ROI & Satisfaction						2.74		
0.82	Evidence of user outcomes in improved workplace performance (less absenteeism, presenteeism, turnover)	11%	27%	36%	26%	100%	2.78	0.97	
0.81	Return on Investment (ROI) financial analysis for EAP services	13%	29%	38%	20%	100%	2.65	0.94	
0.77	Evidence of user outcomes of improved clinical status or issue resolution	14%	30%	39%	17%	100%	2.59	0.93	
0.52	Evidence of user satisfaction with their experience with the EAP	6%	21%	47%	26%	100%	2.93	0.85	
	Account Management Expertise & Program Utilization						2.70		
0.74	Level of engagement with account manager(s) for EAP	4%	35%	45%	16%	100%	2.72	0.78	
0.72	Level of expertise of EAP staff with organizational and workforce development issues	11%	39%	35%	15%	100%	2.55	0.88	
0.59	Utilization reporting for EAP services	7%	24%	49%	20%	100%	2.81	0.83	

0.48	Getting a high enough level of EAP program utilization	10%	28%	43%	19%	100%	2.71	0.90
	Organizational Context & Needs						2.45	
0.68	EAP part of health care plan or other employee benefits already at company	8%	37%	40%	15%	100%	2.60	0.84
0.58	EAP enhances larger organizational strategy for employee well-being / work culture	10%	39%	39%	12%	100%	2.52	0.85
0.56	Unique fit between employer and EAP (i.e., same regional location, experience with same industry, non-profit status)	8%	33%	41%	18%	100%	2.68	0.87
0.45	EAP counselor(s) available at company worksite to provide in-person sessions	37%	33%	23%	7%	100%	2.01	0.95
	Quality of EAP Program and Staff						1.98	
0.86	Higher quality of EAP in being an accredited employee assistance program/vendor (COA, CARF, others)	44%	32%	17%	7%	100%	1.86	0.94
0.82	Higher quality of EAP in having staff that are CEAPs (Certified Employee Assistance Professional)	46%	35%	14%	5%	100%	1.77	0.87
0.77	Higher quality of EAP in use of risk screening, brief intervention, and referral processes for alcohol, drugs and mental health disorders (SBIRT)	27%	42%	23%	8%	100%	2.12	0.90
0.58	Higher quality of EAP in having full-time counselors on staff (vs. reliance on part-time affiliate network counselors)	31%	28%	33%	8%	100%	2.18	0.96

N = 153.

Table 4
Internal Measurement Consistency of Composite Measures

Area	Theme	Item count	Mean inter-item correlation r	Alpha α
Changes in EAP Industry	Mature Market of External Vendors and Technology	4	.16	.43
	Low Value EAP - Commoditization	2	.43	.60
	High Value EAP - Full Service, Integration, Prevention	4	.32	.66
Why Buy EAP	Support the Employee's Work & Behavioral Health	3	.59	.81
	Support the Work/Life and Family of the Employee	4	.62	.87
	Support the Work Organization	6	.50	.86
Why Select EAP Vendor	Price & Broker Recommendation	2	.43	.60
	Scale and Scope of EAP Resources	4	.39	.72
	Outcomes, ROI & User Satisfaction	4	.60	.85
	Account Management Expertise & Program Utilization	4	.37	.70
	Organizational Context & Needs	4	.29	.62
	Quality of EAP Program and Staff	4	.52	.82

$N = 153$.

Table 5
Results of Tests of Moderator Variables on Composite Measures

Area	Composite Measures	Moderator Variables (correlation r with Composite Measures)					
		Perspective	Country	Sex	Age	Years in EAP Industry	
Changes in EAP Industry	Mature Market of External Vendors and Technology	.14	-.04	.16	.12	.13	
	Low Value EAP - Commoditization	.41**	.36**	.15	.17*	.08	
	High Value EAP - Full Service, Integration, Prevention	.15	-.15	-.07	-.03	-.18*	
Why Buy EAP	Support the Employee's Work & Behavioral Health	.06	.05	.02	.10	.06	
	Support the Work/Life and Family of the Employee	.02	.02	-.05	.07	.05	
	Support the Work Organization	.02	-.03	-.14	.01	-.02	
Why Select EAP Vendor	Price & Broker Recommendation	.18*	.17*	.21*	.12	.09	
	Scale and Scope of EAP Resources	-.01	.01	-.06	.12	-.04	
	Outcomes, ROI & User Satisfaction	-.08	-.07	-.19*	.02	-.11	
	Account Management Expertise & Program Utilization	-.04	.05	-.06	.01	-.14	
	Organizational Context & Needs	.01	.12	-.11	.15	-.02	
	Quality of EAP Program and Staff	-.32**	-.20.*	-.22**	-.07	-.29**	

Note: Coding of moderator variables: Country = U.S. (1) & Canada (0); Perspective = EAP Provider (1) & Purchaser (0); Sex = Male (1) & Female (0). Correlation coefficient listed in Table.

$N = 153$.

Table 6
Results of Questions on the 2009 EASNA Purchaser's Guide to EAPs

<i>Chapter in Original Guide</i>	“The Purchaser’s Guide was also split into 10 separate brief reports (each only 3 to 5 pages long). These were published in 2009 and 2010 the first volume of the <i>EASNA Research Notes</i> . Please indicate which of these reports you have read or shared with others (check all that apply):”			
	<i>% Yes – Shared Material</i>			
EAP Effectiveness and ROI	59%			
The Business Value of EAP	56%			
The Need for EAPs	44%			
Utilization of EAP Services	41%			
History and Growth of the EAP Field	37%			
Pricing Options for EAP Services	35%			
EAP Services Programs and Delivery	35%			
Indicators of the Quality of EAP	34%			
Selecting an EAP Provider RFPs & Audits	32%			
Implementation of EAPs	27%			
<i>Format Type for Revised Guide</i>	Item: “For the new Purchaser’s Guide to EAP in 2018, which kind of presentation format of the updated material would be the most useful for you? Please rate each type:”			
		<i>Not that Useful</i>	<i>Somewhat Useful</i>	<i>Very Useful</i>
	Long Written Report - white paper style	42%	39%	19%
	Slide Deck - details & sources	10%	38%	52%
	Short Written Report - business article style	3%	43%	54%
	Infographic - graphic visual on single page	9%	27%	64%
Decision Making Checklist - one-page of key issues	9%	22%	69%	
				<i>Total</i>

N = 132-137 – excludes respondents with no familiarity with Guide.

Table 7
Results of Questions on Potential Future Impact of EASNA Membership Related to a Revised Guide

<i>Member Status</i>	<i>Count n (%)</i>	<i>Would having access to updated Purchaser Guide resources from EASNA as a benefit of membership make you more likely to consider becoming a dues-paying member of EASNA (or to renew your existing membership)?</i>		
		<i>No</i>	<i>Maybe</i>	<i>Yes</i>
Are you currently a member of EASNA (as an organization or an individual)?	Group Sample Size			
Yes - USA	24 (23%)	33%	46%	21%
Yes - Canada	11 (46%)	27%	36%	36%
No - USA	82 (77%)	45%	44%	11%
No - Canada	13 (54%)	53%	40%	7%
TOTAL	132	42%	43%	14%