History and Growth of the EAP Field

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ABSTRACT. *This Research Note reviews the history of the field of EAP, the characteristics of the modern EAP, and the growth over the last 20 years in how many organizations have employee assistance services in the United States and Canada.*

What are EAPs? EAPs are employer-sponsored programs designed to alleviate and assist in eliminating a variety of workplace problems. EAPs typically provide screening, assessments, brief interventions, referrals to other services and case management with longitudinal follow-up for mental health concerns and substance abuse problems. The source of these employee problems can be either personal or work-related. Those who work for EAPs come from many different professions including social workers, psychologists, counselors, substance abuse specialists, occupational nurses, and others. In Canada, the services are called Employee and Family Assistance Programs (EFAPs).

A Brief History of EAPs

Early EAP services initially arose out of a need for a stable and skilled workforce during WWII.[1,2] The severe shortage of male workers in New York City prompted some corporations to recruit workers from the Bowery district, resulting in the hiring of numerous alcoholics. Corporate medical directors postulated that it might be more cost effective to rehabilitate problem drinkers than to have a revolving door employment policy. This approach led to the emergence of Occupational Alcoholism Programs (OAPs). These workplace-based programs grew in acceptance and number throughout the 1950s and 1960s.

The US federal government promoted OAPs through legislation such as the Hughes Act of 1970, which required all federal agencies and military installations to have an OAP and it's amendment in 1972 to include drug abuse. In the early 1970s, the US government established the National Institute on Alcohol Abuse and Alcoholism (NIAAA) with the mission of promoting the growth and diffusion of EAPs throughout the United States. Also emerging at this time was the Association for Labor—Management Administrator and Consultants on Alcoholism (ALMACA). During the mid 1970s, private EAP consulting firms such as Human Affairs International and Personnel Performance Consultants began to offer an alternative option for the delivery of EAP services from an internal model to an external model.

During the 1980s, EAPs became more popular in North America. At this point in time, the mix of services offered by EAPs expanded to feature more

comprehensive elements. The drug-free workplace legislation was passed in 1988 in the US. This event spurred further growth of EAPs as they offered expertise and guidance to employers regarding the management of employees with substance abuse problems. In 1985, it was reported that approximately 68% of EAPs were provided through internal programs. By 1988, this number of internal EAPs had decreased to 58%.[4] Data from 1994, estimates the number of internal EAP programs in the US to be less than 20%.[5] Unfortunately, there is no more recent empirical data that has addressed the question of the prevalence of different models of EAPs. Another trend that began in the late 1980s was the expansion of EAP services to family members.[6,7]

In the 1990s, EAPs became a standard component of employee benefits at the majority of large companies. EAPs responded to this growth by broadening their services to address issues such as work-life balance, elder care, workplace violence, and supporting company-wide changes, such as mergers and downsizing. In the early 1990s managed mental health care also made its entrance into the health care arena, with EAP being a source of referral into these counselor networks.

The EAP field has been nurtured over the years by the support of its two major professional organizations, the *Employee Assistance Professionals Association* (EAPA; which evolved from ALMACA) and the *Employee Assistance Society of North America* (EASNA; which has a strong Canadian influence). Today, the number of members in these two associations exceeds 5,000 people and is growing worldwide.

The Modern EAP

Many types of EAPs are available today and there are some differences on the definition of what is an EAP. Regardless of the specific definition, what ultimately distinguishes the EAP profession from other forms of mental health counseling, coaching, and occupational health services, is that it emphasizes *employee work performance* as a central theme guiding all program practices and services to the organization.

Arguably, the most essential function of a successful EAP is its ability to provide confidential support services, on demand when it is needed, free of charge to the user. EAP services are voluntary and most employees who use EAP services do so through self-referrals. However, some of the employee users of EAP services are referrals from others in the organization, such as their supervisor, union stewards, human resources staff, safety officers, medical personnel, disability case managers, and other areas. Depending on how the program is designed, use of the EAP by spouses and by other family members of employees is encouraged. EAPs typically report that about 1 in 10 users of the service are non-employees.

The primary activities performed by EAP professionals include meeting privately with employees or their family members to identify and/or resolve workplace, mental health, physical health, marital, family, substance abuse or alcohol problems, or emotional issues that affect a worker's job performance. These kinds of individual cases typically comprise the majority of all activity for most EAPs. This is accomplished through a combination of different service delivery channels, including office visits, phone and web-based technologies.

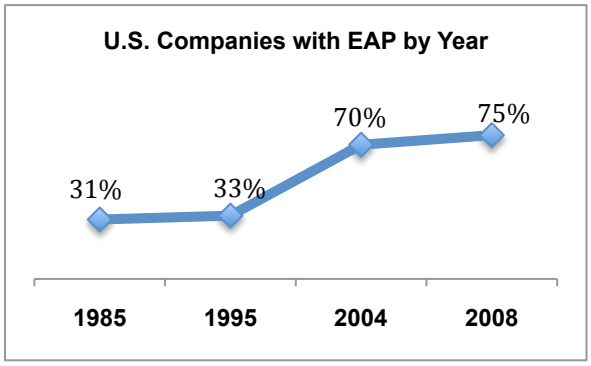
Most EAPs also offer consultative and educational services around legal and financial issues that affect employees.[8] Other EAP services support individual leaders and supervisors with their management and work team problems – these are called "management consultations" – as well as more strategic consulting around organizational change and workforce development issues.[9] EAPs also offer preventative and immediate response services for crisis and workplace critical incidents.[10] For some EAPs, this kind of organizational level activity makes up the majority of the total mix of EAP services compared to individual employee cases contact. Certainly, most EAPs function in ways that are highly dependent on the culture of the company that they serve and the customer expectations for their EAP.

The Growth in EAP

EAPs have been widely adopted across North America. In 2002, well over 100 million American workers were estimated to have access to an EAP.[11] Much of the growth in offering EAPs happened in the late 1990s and early 2000s.[12] In 1985, about 31 percent

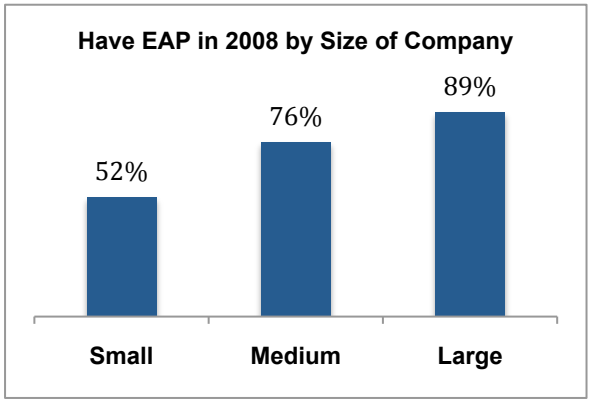
of companies in the US had an EAP and in 1995 this had risen slightly to 33 percent.[13] But by 2002-2003, a majority of full-time workers (60%) were employed in settings with an EAP.[14] In 2004, *SHRM* reported that 70 percent of employers had an EAP.[15] According to a national survey by *Employee Benefit News*, about 75 percent of all businesses in 2007 had an EAP.[16] The 2008 *SHRM* survey also found that 75 percent of businesses offered an EAP.[17] Thus, in the last twenty years the number of companies with EAPs has more than doubled (see Figure 1).

Figure 1



However, having an EAP varied substantially based on company size (see Figure 2), ranging from 52% for small employers (1-99 staff), 76% for medium employers (100-499 staff), and 89% for large employers (500+ staff).[17]

Figure 2



The figures on market penetration in Canada are similar to those in the US. In the province of Ontario during the period of 1989 to 2003, the number of organizations with an EAP doubled – going from 28 percent to 67 percent.[18] As the US, EAPs in Canada are more commonly provided in government and unionized environments and in medium to larger size private sector organizations.[19]

Conclusion

The history of the field of EAP began more than 60 years ago. It featured internal programs – called Occupational Alcoholism Programs – that had a focus on managing workers workers with alcohol problems. The alcohol related laws that were passed in the 1970s further increased the role of EAPs in the workplaces of government organizations. As more companies became aware of the success of EAPs, the industry began to grow with providers offering EAP services to many different organizations. The characteristics of the modern EAP include a "broad brush" approach where treatment is provided for a wide range of personal problems, such as alcohol or drug abuse, depression, financial problems, family problems or work problems.

As the external model became more popular, the number of companies with an EAP has more than doubled over the last 25 years. Today more than 75% of all organizations in the US have EAP services, although it is much more common for large size companies than for smaller companies.

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