ABSTRACT
        This document discusses employee assistance programs
(EAPs), programs which have been developed to help employees deal
with personal problems that seriously affect job performance. It
reviews literature which specifically addresses EAPs in the public
sector, noting that there are no exact figures on how many public
entities have EAPs. Previous research on EAPs serving governments is
presented which shows that there are no great differences in public
and private EAPs. Federal laws mandating alcoholism prevention and
treatment and drug abuse rehabilitation are reviewed. Research on
services in state programs is reviewed which indicates that these
services are most frequently used: alcohol rehabilitation;
psychological, drug abuse, marital, family, financial, and legal
counseling; stress management; interpersonal relations; health
issues; and life style issues. It is noted that local government EAPs
seem to be most prevalent in larger urban counties, municipalities,
and school districts. The development of a University EAP at
California State University, Chico (CSUC) is described. References
are included. (ABL)

Public Sector Employee
Assistance Programs

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Abstract

Employee Assistance Programs (EAPs) have been developed to help employees deal with personal problems that seriously affect job performance. There is little literature which specifically addresses EAPs in the public sector, and there are no exact figures on how many public entities have EAPs. Complexities in establishing an EAP on a public university campus are shown in the implementation of an EAP at California State University, Chico.

Employee Assistance Programs have been developed by government and industry to help employees deal with personal problems that seriously affect job performance. The philosophy behind EAPs is that it is more desirable, both economically and socially, to rehabilitate previously proven and trained employees than to terminate them. Appropriate referrals are made to professional providers for prevention and rehabilitation services.

Although some employee counseling and social service programs go back to the turn of the century. The real growth of programs began during and after World War II with the development of occupational alcohol programs. In the 1970s, with the recognition of the impact of drug, psychological, marital, financial, and other problems on employees EAPs became broadbrush programs to address many problems.

EAPs have been developing as a way for employers to deal with productivity and disciplinary problems and as a risk management tool to address worker compensation and substance abuse issues. EAPs have also been seen as a way to address employer health care costs through a prevention and promotion model. In addition, they have been used as a low cost employee benefit for employees and their dependents.

Research and literature on EAPs is in the process of development. Much of that literature is descriptive or prescriptive and is practitioner focused. Relatively little empirical research has been completed. Although some literature may apply to EAPs in both the public and private sector, there is little literature which specifically addresses them only in the public sector.

Federal, State, and Local EAPs

There are over 80,000 governments in the United States including the national government, state governments, counties, municipalities, townships,

and special districts. There are no exact figures on how many of these public entities have EAPs. A 1987 survey of the membership of the Association of Labor Management Administrators and Consultants on Alcoholism (ALMACA), one of two major professional associations in the EAP field, showed information on members' work sector for 4,153 members (32 percent of the current membership). One hundred eleven members (2.6 percent) identified themselves as working for the federal government, 158 members (3.8 percent) identified themselves as working for state governments, and 186 (4.4 percent) identified themselves as working for local governments. An additional 30 members (0.7 percent) identified themselves as working for government unions (ALMACA Clearinghouse, 1987). There was no information on how many of the 2,881 private sector members provided contractual services to the public sector. A 1981 survey of members of the American Society for Personnel Administration revealed that of 32 government or education respondents, 22 percent had an EAP. The percentage response rate for EAPs in government or universities was similar to other organizational categories (Ford & McLaughlin, 1981).

In 1984 and 1985, a comparison was made between public and private sector EAPs in the Baltimore - Washington D.C. area. Of the eleven public sector organizations, three were federal organizations, two were state organizations, and six were local organizations, all at the county level. These were compared to ten private sector organizations which consisted of six manufacturing companies, two utilities, and two hospitals. Johnson (1986) concluded that there were no great differences between public and private sector EAPs, and that EAPs in both sectors appeared underdeveloped and not well integrated into their organizations. Politics and the law were seen as constraints for the public sector while production requirements limited the private sector.

Some works describe cases in both the public and private sectors. Schramin's (1977) collected papers with a public health focus toward alcoholism treatment provide descriptions of the federal civil service alcoholism policy, the New York City police department, and the Baltimore Employee Health Program as well as private companies. Also Akabas, Kurzman and Kolben (1979) profile two government agencies in the 12 profiles of employee counseling and EAP programs given in their monograph on program development.

In a related area Klingner, O'Neil, and Sabel (1987) reported the results of a survey by the Clearinghouse on Drug and AIDs Testing of the American Society for Public Administration of public agency drug testing policies and procedures in the Unites States. They covered personnel directors of the 50 states, 100 largest cities, all counties over 500,000 population, and all 114 federal cabinet level departments and independent agencies. With a 43 percent return rate, they found approximately one-third of agencies with a testing policy, and eighty four percent of agencies reporting having an EAP. Most of the programs were broadbrush, and almost half of them were off site, contracted programs.

Federal legislation in the 1970s encouraged EAP growth. Public Law 91-616, the Comprehensive Alcoholism and Alcohol Abuse Act of 1970, provided for federal agencies to develop alcoholism prevention, treatment, and rehabilitation programs for federal civilian employees. In 1972 Public Law 92-255 required federal agencies to set up drug abuse programs. Public Law 93-282 and Office of Personnel Management regulations encouraged EAPs and required confidentiality in referral and treatment. Public Law 99-570, the Omnibus Drug Enforcement Education Act of 1986, provided additional support for EAPs in federal agencies, and an executive order issued November 28, 1986

called for federal government EAPs to counsel and rehabilitate drug abusive employees.

According to the Federal Office of Personnel Management (OPM), there were 1.8 million federal employees covered by EAPs in 1981. Forty-seven federal agencies reported having EAPs for at least some of their employees. Federal government EAPs were provided by individual agencies and also by consortiums. Consortiums were used in federal regions where employees of several agencies worked at the same job site. OPM established a goal of covering all federal employees, even those who work in small offices in remote areas. (Bureau of National Affairs, 1987).

Research on EAPs in the federal sector is limited with only one article comparing federal and private sector EAPs. That article views improved selection of EAP coordinators and counseling staff as essential to EAPs in the public sector (Fisher, 1983). There has also been some EAP evaluation research done in the federal sector; most notably, Dale Masi's (1984) $1.2 million study of 150,000 employees in sixteen operating units under the model Federal Employee Counseling Service (ECS) at the U.S. Department of Health and Human Services and Trice, Beyer, and Hunt's (1978) evaluation of the U.S Civil Service Commission's alcoholism policy. A half a dozen studies on occupational alcoholism have been performed in federal agencies (Beyer & Trice, 1978; Beyer, Trice, & Hunt, 1980; Roman, 1981; Cahill, 1983; Hoffman & Roman, 1984). There are also a few case studies of federal programs including the General Accounting Office (Blimline, Thorn, Wilson, & Wilcox, 1983; Thorn, 1983), Federal Bureau of Investigation (Capps, 1984) and federal drug testing (Bickerton, 1987).

A 1983 study found 39 states had EAPs (Kemp, 1985). Since that survey, at least three additional states Idaho, Indiana, and Oregon, have added EAPs. That study found that the most frequently used services were: alcohol

rehabilitation, individual psychological counseling, drug abuse counseling, stress management, interpersonal relations, marital and family counseling, financial counseling, legal counseling, physical-ill health issues, and life style issues such as smoking and weight. From that study, a directory of contact persons and organizations involved in providing EAP services to state employees was published in the ALMACAN (Kemp, 1985). Case studies of an EAP program for Indiana State Police (Lambruth, 1984) and of the Massachusett's Employee Assistance Program founded in 1978 (Uraneck, 1981) are among the few descriptions of state EAPs.

In 1984 the International City Management Association surveyed city managers in 1,604 cities with populations of 10,000 or more concerning employee counseling. Of 349 respondents, thirty three percent reported that their city offered personal counseling benefits to their employees. Of 272 respondents, twenty six percent provided substance abuse assistance, and of 225 respondents, twenty three percent provided financial counseling (International City Management Association, 1985).

Peter J. Schweitzer, EAP director for New York City's Department of Corrections, estimated from informal research that approximately 200 municipalities had EAPs in 1987 (Bureau of National Affairs, 1987). New York City has one of the most developed programs which covers 300,000 employees. The city employs approximately 200 EAP professional and expends approximately $6 million for 28 in-house programs in large city agencies. A case study of the New York City program has been published (Rostain, Allan, and Rosenberg, 1980). In another article, New York City was used as a prototype for the range of services which have developed during the expansion of work site social welfare programs, and the relative roles of the public, private and not-for-profit sectors in employee and union sponsored employee counseling programs were assessed (Kolben, 1982).

Local government EAPs seem to be most prevalent in larger, urban counties, municipalities, and school districts. In Boston a EAP is jointly run by the Boston Fire Department and Boston Firefighters Local 718, International Association of Firefighters. That program covers 1,660 firefighters and has a five percent utilization rate. Sixty percent of referrals are substance abuse, with most of the remainder stress related (Bureau of National Affairs, 1987). In the West, Los Angeles and Phoenix have established programs. The Los Angeles Department of Water and Power designed a Trauma Response Program to provide immediate response to serious work-related accidents or traumatic experiences. Five EAP staff counselors are on 24-hour call (Halcrow, 1987). The city of Phoenix began an EAP, Project Concern, in 1974. By 1980 approximately 1,130 of 8,700 employees were served by the program (Wagner, 1982).

Research on three eastern EAPs (Baltimore, Philadelphia, and Washington D.C.) found employees made contact with EAPs primarily for problems with alcohol. Other presented problems were emotional problems, drugs, personal or family problems, and excessive absences and other work-related problems. Supervisor referrals, followed by self referrals, were the most common means of referral, and those receiving services were predominately blue collar, male, and black. It was hypothesized that supervisors of blue collar employees viewed the EAP as a useful program and were more willing to refer troubled employees (Johnson, 1985).

It is unknown how many counties provide EAP programs, but is is estimated that about half of the counties in California have EAPs. For example, Kern County has contracted since 1986 with a private contractor for EAP services for its employees.

Universities and EAPs

The literature on EAPs in higher education has consistently pointed out differences in the university environment which make the transfer of a simple industrial EAP model impossible (Roman, 1983; Thoreson, Hosokawa, & Talcott, 1982). The complexity of developing a University EAP in an environment with many constituencies can be seen in the development of an EAP at California State University, Chico (CSUC). Developing and implementing an Employee Assistance Program may seem a simple task for seasoned professionals, but the political environment in a university setting calls for slow implementation strategies and a patient hand as the program materializes and grows.

Getting the "ear" of the University for establishing an "internal provider" model EAP for faculty and staff came as a natural step due to the fact that some management personnel recognized the need for such a program. A campus-wide task force was formed and community agency representatives were invited to look at several aspects of design. As is usually true in academia, a thorough review of current programs similar to the model proposed was researched and evaluated. The written overview highlighted statistical data widely recognized, including a formula of estimated costs involved by NOT dealing with employees impaired by chemical dependency, or personal concerns. An historical overview of employee alcoholism programs, occupational health programs, and the emergence of broadbrush employee assistance programs was included to show how the field of workplace interventions was growing. It was hoped that this fact alone would encourage the University to buy into the concept and desire to stay on top of what industry and other public entities were providing employees by way of on-site education and prevention programs, employee awareness, and supervisory training. Beyond the usual setting of goals and objectives, a look at legal

concerns was necessary. The question of liability was addressed including recommendations for the design used on other campuses which encouraged voluntary participation in the program and supervisory referral. At that particular time (1984) only one other campus in the CSU system, Fresno State, had a formal EAP, which was in its first year of operation.

The written overview was shared with the original task force, university president and cabinet which was comprised of vice presidents from various areas on campus. Discussion regarding the issues addressed was followed by the President recommending the creation of an advisory committee to explore campus and community resources available to faculty, staff, and administrators and to examine the number one concern for all newly proposed programs, funding. The consensus was that a formal needs assessment was not necessary; the need had already been indicated by the many inquires for assistance. A formal written recommendation was presented to the president and his cabinet including the scope of problems the program would be prepared to handle, program staffing requirements, and an itemized budget request. A funding source was discovered and a University commitment of matching funds was obtained. California State University now had an Employee Assistance Program.

The director chose to "soft-step" implementation by providing monthly lunch hour programs addressing such problems as aging parents, teen substance abuse, and child/parent developmental issues. The University "grapevine" worked wonders as word spread regarding upcoming lunch hour programs on sensitive subjects which may be negatively impacting the work environment. Faculty and staff shared what they "heard". Programs were presented by professionals in the field which proved to be a rich resource for future referrals. This proved to be a successful attempt in reaching troubled faculty and staff, and self referrals began.

The first year was spent educating the administration and supervisory personnel through department orientation sessions. Employee group sessions followed. Other orientations consisted of regular monthly meetings with the Administrative Council, Dean's Council, Academic Affairs Council, new Faculty and Staff orientation meetings, union meetings, faculty senate, and staff council. A written formula on cost effectiveness was completed, addressing absenteeism, tardiness, accidents, low productivity, grievance, and workman's compensation costs. An EAP Advisory Board comprised of community and campus wide representatives was established. It proved to be the eyes and ears for the program. All members brought forth many ideas and resources for addressing EAP issues.

The director learned of "the silent crew", the employees working the night shift, and devoted time to meet supervisors and employees during the 5:00 a.m. safety meeting. In addition, the director was not shy in asking for assistance from other campus departments such as the Nursing Division, colleges, and departments. It was felt that the more participation and input received from the various areas the more committed the campus would be to the concept. Faculty and staff would own the program and subsequently use its services.

As is true on many campuses, support staff was limited. The director chose to carefully select public relations interns to help market the program through the design of a bulletin and an EAP brochure.

AA and Al-Anon representatives were encouraged to work on campus by providing informational meetings. The start up of regular twelve step programs was slow, attendance low, but growing. Time and patience paid off. Supervisors began to seek assistance through the EAP for troubled faculty and staff. Formal training of supervisors in how to recognize a troubled employee was expanded by formally addressing substance abuse in the

workplace. A medical physican was invited to campus and top administrators encouraged attendance through a letter from the President and Provost. A full house heard the doctor explore alcoholism and drug addiction.

There are many ways to market the EAP in a University setting, but the grapevine still proves to be the most effective. Faculty and Staff, after fours years, still enter the doors stating, "I just heard you were here." The underlying message really is, "I need you now."

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