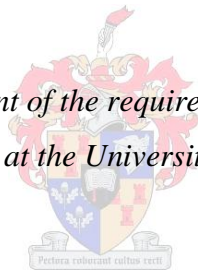


**THE IMPLEMENTATION OF EMPLOYEE  
ASSISTANCE PROGRAMME OF THE DEPARTMENT  
OF EDUCATION: A CASE STUDY OF MOTHEO  
DISTRICT IN THE FREE STATE PROVINCE.**

by

**Thethiwe Thelma Rakepa**

*Thesis presented in partial fulfilment of the requirements for the degree Master of Public  
Administration at the University of Stellenbosch*



Supervisor: Prof. Frederik Uys

March 201

## **Declaration**

By submitting this thesis electronically, I Thelma Thethiwe Rakepa declare that the entirety of the work contained therein is my own, original work, that I am the sole author thereof (save to the extent explicitly otherwise stated), that reproduction and publication thereof by Stellenbosch University will not infringe any party rights and that I have not previously in the entirety or part submitted it for obtaining any qualification.

## **Acknowledgments**

### **Unto God be the glory!!!!**

I would like to extend my gratitude to Dr Frederick Uys, a “perfectionist” indeed. I have walked a long learning path which looked desolate. Several times I felt I will never reach my destiny, but you believed in human potential and I make it at the end.

I also want to extend my fullest appreciation to my editor Mrs. Deirdre Van Jaarsveldt. You were not only editing my work, but encouraging when times were tough. Thank you.

To my parents, Louisa Johnson and William Johnson, you have made me who I am with the little that you have. I thank you from the bottom of my heart and I will always love you.

To my husband, Joseph Rakepa, thank you for your support. To Boitumelo (son) and Karabo (daughter) thank you for your understanding. I hope later in your life you will learn that if you want to become a better person you sacrifice your time. Mommy loves you very much.

To EAP section for participating in the focus group and colleagues who have participated in the questionnaires, thank you. To Mrs Tshepiso Supi in particular (Deputy Director) thank you I have learnt a lot from you.

To all my friends and colleagues thank you for your support. Each time I needed information you were there to provide. To Puseletso and Mike Makhura, Daisy Mphosi, Bukelwa Qwelane, Mamokwai Moleme, Maiketjo Mokgothu, you made the journey look easier. Thank you for the inspiration and words of encouragement.

## **Abstract**

The primary aim of the Employee Assistance Programme (EAP) is to make a positive contribution towards maximum employee productivity and effectiveness in the workplace. Various organisations implemented EAP, but the achievement of aims and objectives need to be investigated in order to ascertain whether the service is successful. In order to achieve the latter, the present study was therefore designed with the primary aim of evaluating the effectiveness of the EAP services in the Free State Department of Education, Motheo District.

In order for the DoE to comply with legislation they need to ensure that there is adequate provision of human and capital resources. Employees should be knowledgeable on the content of policy guidelines and procedures to promote utilisation. Accessibility of the programme will depend on the restructuring of EAP section from a sub section to a Directorate. Appropriate structure can make the EAP section effective. Staffing, competency, integration and early identification can be dealt with if the DoE can employ personnel with appropriate skills. Confidentiality and the Model through which EAP service is rendered is a challenge in the DoE as it influences utilisation of EAP services.

## Opsomming

Die primêre doel van die Werknemersondersteuningsprogram (WOP) is om 'n positiewe bydrae tot maksimale werknemer-produktiwiteit en -effektiwiteit in die werkplek te lewer. Verskeie organisasies het die WOP geïmplementeer, maar ten einde vas te stel of die diens suksesvol was, moet die bereiking van doelstellings en doelwitte ondersoek word. Ten einde laasgenoemde te vermag, is die huidige studie dus ontwerp met die primêre doel om die effektiwiteit van die WOP-dienste in die Vrystaatse Onderwysdepartement, Motheo-distrik te evalueer.

Die Onderwysdepartement moet, wetgewing nakom deur te verseker dat voldoende menslike en kapitaal hulpbronne beskikbaar gestel word. Ten einde verbruik te bevorder behoort werknemers goed ingelig te wees met betrekking tot die inhoud van beleidsriglyne en -prosedure. Toeganklikheid tot die program sal van die herstrukturering van die WOP afdeling van 'n onderafdeling tot 'n Direkoraat afhang. Toepaslike strukture kan die WOP-afdeling effektief maak. Personeeltoewysing, bevoegdheid, integrasie en vroeë identifisering kan hanteer word indien die Onderwysdepartement personeel aanstel wat oor die toepaslike vaardighede beskik. Vertroulikheid en die Model waarvolgens die WOP-diens bedryf word, bied 'n uitdaging in die Onderwysdepartement aangesien dit die verbruik van WOP-dienste beïnvloed.

## TABLE OF CONTENT

### CHAPTER 1: GENERAL INTRODUCTION

1.1	Introduction	1
1.2.	Purpose and objective of the study	2
1.2.1	Objectives	2
1.3	Research question	2
1.4	Research sample	4
1.5	Research methodology and design	5
1.5.1	Methodology	5
1.5.2	Focus group interview	5
1.5.3	Questionnaires	5
1.6	Research design	6
1.7	Data collection	6
1.8	Data analysis	7
1.9	Ethical issues	7
1.9.1	Informed consent	7
1.9.2	Privacy/confidentiality	7
1.10	Limitations	8
1.11	Chapter outline	8

### CHAPTER 2: A LITERATURE ANALYSIS ON THE EMPLOYEE ASSISTANCE PROGRAMME

2.1	Introduction	9
2.2	Historical background of Employee Assistance Programme	9
2.3	Rationale for integration	11
2.4	Programme description: Employee Assistance Programme, Work Life Programme, Health and Productivity Management and Wellness	14

2.4.1	Employee Assistance Programme	14
2.4.1.1	Confidential assessment	15
2.4.1.2	Counselling	16
2.4.1.3	Therapeutic services	16
2.4.1.4	Practical assessment of the EAP	16
2.4.1.5	Telephone helpline	16
2.4.1.6	Use of counselling skill as core technology	16
2.4.2	Work Life (WL) Programmes	19
2.4.3	Health and Productivity Management (HPM)	21
2.4.4	Wellness Programmes	22
2.5	Integration of Different Programmes: Employee Assistance Programmes, Employee Wellness Programmes, Health and Productivity Management and Work Life	24
2.6	General functions of the EAP	25
2.6.1	Supervisory training	26
2.6.2	Early identification of problems	26
2.6.3	Marketing the EAP	27
2.7	Role of management in strengthening EAP	27
2.8	Referral of employees	27
2.8.1	Voluntary referral	27
2.8.2	Suggested referral	27
2.8.3	Mandatory referral	28
2.9	Advantages of the EAP	28
2.9.1	Advantages of the organisation	28
2.9.2	Advantage to the employees	29
2.9.3	Advantages to the labour unions	29
2.10	EAP models	30
2.10.1	The in- house model	30
2.10.1.1	Advantages of the in-house model	30
2.10.1.2	Disadvantages of in-house model	31
2.10.2	The off-site model	31
2.10.2.1	Advantages of the off-site model	31
2.10.2.2	Disadvantage of the off-sit model	31

2.10.3 The union support and involvement model	32
2.10.3.1 Advantages of the union support and union involvement model	32
2.10.2.2 Disadvantage of the support and union involvement model	32
2.10.4 The Combine Model	33
2.11 Conclusion	33

## **CHAPTER 3: EMPLOYEE ASSISTANCE PROGRAMME: A PRACTICAL INTERVENTION IN SOUTH AFRICA**

3.1 Introduction	35
3.2 Historical background of the EAP in South Africa	36
3.3 Legal Framework	36
3.3.1 Constitution of the Republic of South Africa, 1996	36
3.3.2 Basic Conditions of Employment Act (No. 75 of 1997)	37
3.3.3 The Labour Relations Act (No. 66 of 1995)	38
3.3.4 Employment Equity Act (No. 55 of 1998)	38
3.3.5 Skills Development Act (No. 97 of 1998)	39
3.3.6 Occupational Health and Safety Act (No. 85 of 1993)	40
3.3.7 Applying Labour Relations Act (No. 66 of 1995)	40
3.3.8 Applying Employment Equity Act (No. 55 of 1998)	41
3.4 Employee Health and Wellness Strategic Framework	41
3.4.1 Pillar 1: HIV/AIDS and tuberculosis management	42
3.4.2 Pillar 2: Health and productivity management	42
3.4.3 Pillar 3: Safety, healthy environment, risk and equality management	43
3.4.3 Pillar 4: Wellness management	43
3.5 Background of the Motheo District: Department of Education (DoE) of Free State Province	44
3.6 Organisational structure	44
3.6.1 Macrostructure of the of Department of Education, Free State Province	45
3.6.2 Structure of the EAP section	47
3.7 Functions of EAP section	48
3.7.1 Deputy Director (management of subdirectorates) in the Free State Province	48



3.7.2 Assistance Director of the EAP and two sports and recreation in the province	49
3.8 Operational plan of EAP	49
3.9 Policy of Department of Education Free State Province	51
3.9.1 Aim and purpose of the programme	51
3.9.2 Beneficiary of the programme	51
3.9.3 Objective of the EAP policy	51
3.9.4 Nature of assistance	52
3.9.5 Activities	52
3.10 Provincial strategy of EAP in the Department of Education	53
3.11 Responsibilities of other role players within the Department in relation to EAP policy	54
3.12 Referral procedures	54
3.13 Principles of EAP	55
3.13.1 Confidentiality	55
3.13.2 Protection	55
3.13.3 Discipline	56
3.13.4 Voluntarism	56
3.14 EAP pilot project	56
3.15 Conclusion	57

#### **CHAPTER 4: QUANTITATIVE AND QUALITATIVE RESEARCH FINDINGS ON THE IMPLEMENTATION OF EMPLOYEE ASSISTANCE PROGRAMME OF THE DEPARTMENT OF EDUCATION: CASE STUDY OF MOTHEO DISTRICT IN THE FREE STATE PROVINCE**

4.1 Introduction	59
4.2 Methodology	59
4.3 Research design	60
4.4 Population	60
4.5 Sampling	60
4.6 Data collection procedures	60
4.6.1 Questionnaires	61

4.6.2	Focus group interviews	61
4.7	Qualitative data analysis and interpretation	61
4.7.1	Demographic variables	61
4.7.2	Description of other variables	64
4.7.3	Assessment of the effectiveness of EAP	71
4.8	Analysis and interpretation of qualitative data (focus group)	82
4.8.1	Policy implementation	82
4.8.2	Training and development of EAP officials	83
4.8.3	Management support	83
4.8.4	Outsourcing of EAP	84
4.8.5	Programme evaluation (2009-2010)	85
4.9	Conclusion	87

## **CHAPTER 5: EVALUATION OF THE IMPLEMENTATION PROCESS AND EFFECTIVENESS OF THE EAP**

5.1	Introduction	88
5.2	Evaluation approach	88
5.3	Compliance with legislation	91
5.4	Programme performance evaluation	91
5.4.1	Process based evaluation or implementation evaluation	92
5.4.2	Baseline study	93
5.4.3	Programme performance of EAP	94
5.5	Policy guideline and procedures	95
5.6	Awareness of EAP	95
5.7	Accessibility of EAP	96
5.7.1	Current EAP structure at provincial level	96
5.7.2	Different between the present structure and the proposed structure	97
5.7.3	Structure and functions	97
5.8	Management issues	99
5.9	Number of employees receiving service and type of service received	99
5.10	Early identification	100
5.11	Staffing, competency and integration	101
5.12	Resource, facilities and funding	102

5.13	EAP Models	103
5.13.1	In-house model	103
5.13.2	Off-site model	103
5.13.3	Union support and involvement model	103
5.13.4	Combined model	104
5.14	Goal based evaluation	104
5.15	Conclusion	105

## **CHAPTER 6: A NORMATIVE APPROACH TO EMPLOYEE ASSISTANCE PROGRAMME IN DEPARTMENT OF EDUCATION: FREE STATE PROVINCE**

6.1	Introduction	106
6.2	Compliance with applicable legislation	106
6.3	Policy guideline and procedures	107
6.4	Structure and accessibility of the EAP	108
6.4.1	Structure of the EAP	108
6.4.2	Accessibility of the EAP	110
6.5	Elevation of the EAP section to the level of Directorate	111
6.6	Management activities required for EAP	112
6.7	Number of employees receiving services and the type of service to be received	113
6.8	Staffing, competency, integration and early identification	113
6.9	Resource, facilities and funding	114
6.10	Department strategic goals regarding the EAP	115
6.11	Marketing strategy of EAP	116
6.12	Confidentiality regarding EAP models	118
6.13	Conclusion	120
	Bibliography	121
	Annexure 1. Self administered questionnaire	131
	Annexure 2. Focus group questionnaire	138

## LIST OF FIGURES

Figure 3.1: Macro structure Department of Education Free State Province	46
Figure 3.2: Structure of the EAP	47
Figure 3.3: Progress Report on the Operational Plan: 2009/2010	49
Figure 4.1: Percentage distribution of responses by problems experienced	64
Figure 4.2: Percentage rating of services provided by EAP	65
Figure 4.3: Percentage distributions of reasons for EAP poor rating response	67
Figure 4.4: Percentage distributions of responses on EAP positive impact	68
Figure 4.5: Percentage distributions of responses on EAP publicity	69
Figure 4.6: Percentage distribution of respondents by preference on the location of EAP	69
Figure 4.7: Percentage distribution of respondents in terms of confidentiality	70
Figure 4.8: Percentage distribution of responses on whether EAP services should be decentralised	71

## LIST OF TABLES

Table 4.1: List of demographic variables with frequency of respondents and percentages	62
Table 4.2: EAP service rating by respondents against work experience of respondents in years	66
Table 4.3: Types of services that has more impact vs gender	66
Table 4.4: EAP service rating by respondents against location	67
Table 4.5: Respondents' assessment of EAP implementation against respondents knowledge of EAP in percentage	72
Table 4.6: Respondents' assessment of EAP implementation against EAP service rating by respondents	73
Table 4.7: Respondents' assessment of EP implementation against whether respondents are in managerial position	73
Table 4.8: Respondents' assessment of EAP implementation against whether personal problems impact negatively on work performance	74
Table 4.9: Respondent's assessment of EAP implementation against whether	

DoE cares about its employees	75
Table 4.10: Respondents assessment of EAP implementation against whether respondents feel valued by the Department	76
Table 4.11: Effectiveness of EAP if unions are involved against gender	76
Table 4.12: Effectiveness of EAP if unions are involved against service in years	77
Table 4.13: Effectiveness of EAP if unions are involved against rating of EAP service provided	78
Table 4.14: Effectiveness of EAP if unions are involved against employee and supervisor relation	79
Table 4.15: EAP provision for standard guidelines and uniformity against respondent's knowledge of EAP	80
Table 4.16: EAP provision for standard guidelines and uniformity against respondents rating of EAP services provided	80
Table 4.17: EAP provision for standard guidelines and uniformity against employee referral by managers	81

## **CHAPTER 1: GENERAL INTRODUCTION**

### **1.1 Introduction**

In South Africa the public sector is undergoing a period of major change in terms of improving service delivery for the achievement of government objectives. Public sector managers are under constant pressure to improve the performance of their institutions. The White Paper on Human Resource Management (1997) and the Public Service Regulations (2001) signal a new approach to performance management and development in the South African public sector.

'Performance management' is a broad term that encompasses all the management tools necessary to ensure the achievement of performance goals. Managers often say, "People do not do what is expected of them." This becomes a challenge for managers, and it is often difficult to identify the underlying causes of valued employees' poor or declining performance. Consequently, defining appropriate corrective action also becomes a challenge.

The reality is that these causes are complex, involving matters personal to the individual and beyond the expertise or responsibility of the managers. To address this matter, Public Service Regulation 2001 (Government Gazette no. 20271) rules that all national and provincial administrations are legally required to render an Employee Assistance Programme (EAP) to their employees. This legislation plays a vital role in minimising the personal challenges faced by employees that impact negatively on their productivity or job performance.

Government departments and private sector organisations are gradually introducing EAPs to deal specifically with enhancing the wellbeing and quality of life for all employees in the workplace. The Department of Education (DoE) in the Free State Province offers an EAP to its employees to assist with their personal or work-related problems and strives to ensure that its employees receive effective and efficient EAP services.

The EAP Digest (1985:7) states that an estimated 18% of the workforce is affected by personal problems that can have an adverse effect on job performance; 12% have substance abuse-related problems and 6% have emotional problems.

## **1.2 Purpose and objectives of the study**

Fischer (2002:70) refers to the goals and objectives of research as “what the researcher would like to see happening” at the conclusion of the study or the “ultimate outcomes of the research”. However, he says, it is generally not possible to go directly from a problem to the ultimate aim. Rather, it is necessary to move through a sequence of manageable steps or subgoals first. According to Fouche (2002:109), these subgoals encapsulate the research objectives, which are categorised into explorative, descriptive, explanatory, correlative and evaluative. According to Kumar (1976:173), objectives indicate the central thrust of the study, whereas subobjectives identify specific issues that the researcher proposes to examine.

### **1.2.1 Objectives**

The primary objective of this study is to evaluate the implementation of the EAP at the DoE in the Free State Province (Motheo District).

The subobjectives were as follows:

- To analyse and evaluate the implementation process.
- To identify the gaps within the implementation process.
- To investigate to what extent the EAP is benefiting the employees in the DoE in Motheo District.
- To describe and explore the factors that impede the optimum implementation of the EAP through focus group interviews with employees and employers within the DoE in Motheo District.
- To analyse the data and come up with recommendations.

### **1.3 Research question**

According to Newman (2001:143), a research question refers to the relationship between one and a small number of variables that can be generalised to a specific universe. De Vos et al. (1998:115) and De Vos and Fouche (1998:104) state that research often starts with one or more questions or a hypothesis. According to De Vos and Strydom (1998:268), the question sets boundaries for what will be studied. The research question that this study undertook to answer was, “Is the process of implementation of the EAP in the DoE in Motheo District effective?”

Organisations are regarded as systems that exist within an ever-changing and often unstable environment in order to transform inputs into outputs. Inputs are those resources provided to the programme for expenditure, for example human, financial and physical resources. Outputs are the actual goods or services delivered by the organisation. Outcomes refer to the impact of those services on the target community.

According to Prinsloo and Roos (2006:66), efficiency relates to the process of converting inputs into outputs to deliver service or to achieve certain objectives. Coetzee (1988:67) states that efficiency in the public sector means satisfying the most essential need of the community to the greatest possible extent, in terms of quality and quantity through using the limited resources that are available. Efficiency, in other words, is the ability of an organisation to produce desired results with minimum resources, and it determines the quality and quantity of an organisation’s output.

Van der Waldt (2006:20) defines quality as the integration of management quality principles, practice, processes and procedures to provide a product of superior worth and service, to deliver value and to operationalise the strategic objectives of an organisation. Van der Waldt (2006:18) refers to three major components of quality, namely customer quality, professional quality and process quality. Customer quality indicates whether the service gives customers what they want. This is measured by the outcomes for service users, for example satisfaction surveys and representation and complaints procedures. Professional quality indicates whether the service meets



customer needs as defined by professionals and whether the professional procedures and standards, which are believed to produce the desired outcomes, are maintained. Process quality is the design and operation of service process to use resources in the most efficient way to meet customer requirements.

Prinsloo and Roos, cited in Van der Waldt (2006:75), define effectiveness as the extent to which an institution achieves its policy objectives, operational goals and other intended effects. Mondy and Premeaux, cited in Van der Waldt (2006:19), define effectiveness as the capability of bringing about an effect or accomplishing a purpose, something without regard to the quality of resources consumed in the process. The general conclusion is that effectiveness means to get the job done (rendering service) while efficiency means the extent to which the job gets done cheaply (rendering the best service with the least amount of resources).

Efficiency and effectiveness are concepts that are based on the utilisation of available resources. Therefore, an effective organisation depends, amongst others, on how well the employees are utilising the available resources in performing their duties.

#### **1.4 Research sample**

Kerlinger (2000:10–110) states that sampling means taking any portion of a population or universe as a representative of the population. Welman and Kruger (2002:52) define ‘population’ as the collection of units of analysis about which the researcher wishes to make specific conclusions; the sample was drawn from the employees of the DoE (the population), narrowing it down to Motheo District. Currently, the population in the Free State Province is 30 000 employees distributed across five districts. It is estimated that there are 5 000 people employed in the target district. The researcher included 500 employees in the study from the estimated 5 000, equalling approximately 10% of the population.

## **1.5 Research methodology and design**

### **1.5.1 Methodology**

The researcher employed both qualitative and quantitative methods, a hybrid method of data collection, in this study. The qualitative method allows for in-depth exploration of a particular view. The quantitative method enables the researcher to gain an understanding of the views of the subject, using a self-developed questionnaire. In the study the use of both qualitative and quantitative methods was illustrated as follows:

### **1.5.2 Focus group interview**

Focus groups are used to explore knowledge, attitudes, reactions and practices experienced in a particular environment. A focus group allows for creativity and becomes an enabling environment for participants to discuss certain issues and formulate ideas and opinions. Kruger and Casey (2001:11) state that a focus group presents a more natural environment than the individual interview because participants are influencing and being influenced by others, just as they are in a real life.

The focus group interview was conducted with departmental representatives (officials from the EAP) responsible for the implementation of EAP policies and activities. The group discussion gave representatives the opportunity of openly expressing their views and opinions regarding the implementation and effectiveness of EAPs in Motheo District. Through this kind of interaction, the researcher gained in-depth knowledge and improved understanding of the challenges and difficulties faced by the EAP officials when trying to put theory into practice regarding the implementation and functionality of EAPs.

### **1.5.3 Questionnaires**

Randomly distributed questionnaires can be used for data gathering. Random distribution of questionnaires to beneficiaries of a programme can indicate to a certain extent whether the programme or service was effective. It allows

beneficiaries to voice their opinions anonymously, without fear of victimisation, and it can reflect the true feelings, thoughts and challenges that they face. Questionnaires were personally distributed to the personnel of the DoE, at the Provincial Office (50). In the district offices hundred and fifty (150) questionnaires were distributed to the office based educators, administration staff, clerical staff and general workers. In the institutions (schools) 300 questionnaires were distributed amongst general workers, administration and school based educators. The rationale for the questionnaires to be distributed in the Provincial Office, District office and at the schools was to have the general view on the implementation of EAP at different levels.

## **1.6 Research design**

Bordens and Abbott (2008:43) maintain that a research design outlines the approach to be used to collect data. It describes the conditions under which data will be collected, how respondents or subjects will be selected and what instructions will be used and generally provides information about the “who, what, when, where and how” of the research project.

Mouton (2001:55) defines a research design as a plan or blueprint of how one intends to conduct the research. Mouton also states that a research design focuses on the product. The research design that was employed in this study is implementation evaluation design. “Implementation evaluation research aims to answer the question of whether an intervention (programme, therapy, policy or strategy) has been properly implemented (process evaluation studies), whether the target group has been adequately covered and whether the intervention was implemented as designed” (Mouton, 2001:158).

As explained above by Mouton (2001:55), this study undertook to evaluate the implementation of the EAP programme. Evaluating the processes of implementation of an intervention is a crucial part of evaluation research. Morris and Fitz-Gibbon (1974:32) state that programme implementation is about keeping track of how the programme looks in actual practice.

## **1.7 Data collection**

Mouton (2001:159) states that implementation evaluation studies employ all available methods of data collection. These methods are both structured (for example questionnaires, tests and scales) and less structured (for example focus groups and individual interviews). Documentary sources (for example annual reports, field reports and participatory records) can also be analysed. In this study, data were collected using both structured (questionnaires) and less structured (focus group discussion and individual interviews) methods.

## **1.8 Data analysis**

The researcher captured qualitative data (i.e. the focus group interview) in a Microsoft Word® file and analysed the data using qualitative data analysis techniques. The researcher transcribed recordings of the quantitative data obtained by means of questionnaires and a focus group discussion. The researcher then analysed the transcription for common themes, placing them into the units of codes.

## **1.9 Ethical issues**

The entire research project was guided by ethics. The researcher adhered to the following ethics while conducting the research:

### **1.9.1 Informed consent**

Before conducting any investigation, the researcher obtained consent from the employer and respondents.

### **1.9.2 Privacy/confidentiality**

According to Strydom (2002:67), privacy implies an element of personal privacy, whilst confidentiality indicates the handling of information in a confidential manner when probing into beliefs, background and behaviours that reveal intimate personal details. The questionnaires were distributed and respondents answered them anonymously. The names of respondents were not mentioned in any transcription.

## 1.10 Limitations

- The fact that the research was conducted in one of five districts necessarily means that it did not reflect what was happening in other districts.
- The timing of the study may limit its usefulness because implementation of the programme had already commenced.
- Fear and uncertainty of respondents within the EAP structure about the results may have influenced the accuracy of the study.
- Bureaucracy or departmental activities could delay the process.

## 1.11 Chapter outline

- Chapter 1 describes the background and the processes of scientific data collection.
- Chapter 2 reviews relevant literature that assists in giving a general overview of the EAP and its operations.
- Chapter 3 contains the case study, focusing on the DoE in Motheo District, its context in terms of EAPs. It outlines the background of the Department, how the EAP has started and policies in relation to the EAP that structure the implementation. Lastly, from the case study, conclusions are drawn on the actual programme.
- Chapter 4 explains how the researcher collected and analysed the data.
- Chapter 5 is the evaluation of the questionnaires, focus group interview, literature and practices.
- Chapter 6 is a normative approach to the EAP.

## **CHAPTER 2: A LITERATURE ANALYSIS ON THE EMPLOYEE ASSISTANCE PROGRAMME**

### **2.1 Introduction**

Organisations experience rapid and considerable changes. These changes are driven by both external and internal factors, such as higher customer expectations, new technologies and increased marketing dynamics, rapidly growing competition at international level, strategic changes and new legislation. These changes put pressure on individuals and organisations. Consequently, individual employees need support in dealing with these demands.

This study examines how the EAP in the Free State DoE (Motheo District) fulfils this role. In this chapter, the researcher explains the following:

- The historical background of the EAP, illustrating the evolution of the EAP in the United States of America (USA).
- Programme description.
- Rationale for integration.
- Integration of different programmes.
- General functions of the EAP.
- EAP models.

### **2.2 Historical background of the Employee Assistance Programme**

The EAP was established in the USA as an Occupational Alcoholism Programme (OAP) for employees that provided assistance with alcohol-related issues, such as absenteeism, declining performance and the associated impairment of the labour force (Daniels, Teems & Carroll, and 2005:37).

In support of Daniels et al., Atridge, Maiden and Herlihy (2005:9) state that the passage of the Comprehensive Alcohol Abuse and Alcoholism, Prevention, Treatment and Rehabilitation Act (No. 81 of 1970) was an indication that the USA government formally acknowledged a national interest in addressing alcoholism as an illness. As issues of the workplace changed and new challenges arose, the EAP

expanded from an OAP to a programme to address all work-related problems because alcoholism was obviously not the only problem experienced in the workplace.

Maiden, Atridge & Herlihy (2005:9) are of the opinion that once referrals were made following decline in job performance, a number of other conditions were identified (for example depression, family difficulties, stress and marital problems). They further state that due to the narrow focus of the OAP, services were expanded to focus on a wider range of personal issues.

Daniels, Teems & Daniels (2005:38) add that EAP's were primarily influenced by the growth of Alcoholics Anonymous and eventually shifted away from the OAP towards a broader EAP. Companies began to extend their services from traditional counselling and drug-free workplace training to wellness services and the management of behavioural health benefits.

Maiden et al. (2005: 5) add that in the late 1980s and the early 1990s, the continuum of work-based human service continued its evolution from an intervention model, focusing on troubled employees, to the incorporation of health and wellness programmes aimed at prevention and health promotion. Health Care Managers (2006:25) concurs that this exemplifies the extent to which OAPs are being further integrated into a complete continuum of care/cure delivered through America's health care system. The American health care system categorically changed its operation from problem resolution to a more positive preventative approach that has influenced the general practice in wellness issues. In the USA, the expansion of the EAP encouraged companies to increasingly acknowledge human resources as their most essential resource. Pennington cited in Mathlape (2003:3) cautions that one of the challenges in the 21<sup>st</sup> century for human resource management is that human resource departments will be looked upon to take on a more active role as custodians of the EAP. Coppersmith (1995:30) disagrees and states that numerous researchers questioned the positioning of the EAP under the auspices of human resources and suggests that it should function as an independent constituent in the organisation.

### **2.3. Rationale for integration**

According to Attridge, Patricia & Herlihy (2005:69), the first application of the concept of integration in the employee assistance field arose from pioneering research at the Ford Motor Company conducted by Jack Erfurt, Andrea Foote and Max Heirich of the University of Michigan's Industrial Relation Centre. This led to collaboration between the Employee Assistance Professional Association (EAPA), the Employee Assistance Society of North America (EASNA) and the Alliance for Work Life Professionals (AWLP). The latter conducted research with a primary perspective on the issue of integration.

Sharar and Hartenstein (2005:95) reiterate that the degree of collaboration amongst the three major professional associations for the first time, as mentioned above, supports such an integration concept. According to Swihart and Thompson, cited in Attridge et al. (2005:3), integration involves bringing together, in a synergistic way, the specialised knowledge and trained expertise of professionals in different but related fields to better serve organisations and their employees.

The professional organisations mentioned above divided the research on integration into two phases. The first phase focused on professional identity. Here, the respondents felt that both the programmes (EAP and Work Life Programme [WLP]) had a dual identity. The second phase concentrated on the collaboration of efforts; here the respondents felt that the services rendered were overlapping in the non-core areas of each profession. The respondents stated that the services had common characteristics in areas that were not an essential part of both professions. It was also mentioned by the respondents that each group provided and maintained its professional and specialist functions without losing its identity. This meant that each group would continue to offer services unique to its own individual field. The EAP, for example, would render the core functions of problem assessment and referrals, and the WLP would provide child care initiatives. Both, however, would offer information and counselling.



According to Attridge et al. (2005:3), the main trends that influence integration are medicine, business, social work, globalisation and ecology. These will consequently be discussed.

**Medicine:** The focus in the medical world has changed, incorporating within it information about alternative medicine therapies that focus not only on illness but also on health, moving towards the idea of wellbeing. The medical and scientific worlds have accepted that traditional medicine or indigenous knowledge systems can make a meaningful contribution to the wellbeing of individuals in the workplace.

**Business:** In the business world, there has been a shift in understanding of the critical factors that lead to success. Government has also inherited the paradigms for interpreting how its business functions to achieve optimal service delivery. Human capital, if valued and appreciated for its efforts and rewarded, will strive to work harder in the interest of the organisation. The employer that takes care of its employees, in whatever way it deems necessary, will encourage and motivate the staff. Motivated staff members that are emotionally balanced, in turn, will be able to give their best. As a result, customer and brand loyalty will be enhanced. An enthusiastic staff force will require less intervention from the EAP, and as a result the business as a whole will benefit because less resources in the form of an EAP will be utilised.

**Social work:** The work of Virginia Satire (1964) and Jay Haley (1968) sought to understand how individual personalities and behaviour patterns are affected by family systems and how this impacts on the work environment. Different individuals come from varying home circumstances and exhibit varying behaviour patterns at the workplace. These different behaviour patterns may influence the 'normal' functioning of the organisation. If the EAP practitioner understands the person within his/her home context (the holistic person), it will assist the counsellor to approach the individual in a more holistic manner. This means that the individual will be understood better considering his/her background.

Globalisation: The global economy offers opportunities, but the concern is about its impact on individuals in the workplace. To compete globally, the workforce needs to be healthy, both mentally and physically. This will enable workers to be receptive to employee empowerment programmes provided within the organisation and to respond to opportunities offered by the global economy.

Ecology: This phenomenon focuses on the interconnectedness among individuals and groups, their local conditions and the larger environment. In the workplace it leads to the consideration of how organisations and workers can maintain a level of interconnectedness. If there is an imbalance between the organisation and the employees, certainly this will lead to the need for intervention. If a harmonious relationship between managers and employees can be maintained, there will be a certain level of balance in the ecosystem. This implies that the wellbeing of individuals is considered.

According to Attridge (2005:7), though there is a core body of knowledge that influences the different fields (employee assistance [EA], work life [WL], health and productivity management [HPM] and wellness), there is a shift in their thinking, from a specialised knowledge base to a more generalised one, resulting in convergence in their thinking. This means that there is a common understanding of integration in the different fields without each losing its identity. All of the fields agree that there is a set of specific values that is needed to address employee wellbeing.

WL is closely associated with organisational culture whereby employees are expected to conform to workplace practices, for example the time of arrival and departure, channels of communication, work ethics and conditions of service. Even at home it is expected of individuals to conform to certain unwritten rules.

In HPM, the health of individuals is seen as dependent on productivity and productivity as dependent on health. Therefore, it is incumbent upon employers to adopt proactive measures in order to ensure that the health and wellbeing of their employees are not compromised.

Csiernik (2004:11) states that the possibility of expanding the traditional EAP practice into a more integrated wellness-based holistic practice is neither just a theoretical concept nor merely a possibility, but a reality in the workplace. Csiernik (2004:11) further gives credence to the fact that there is transformation in the thinking by the EAPA, EASNA and AWLP.

Integration has brought about sharing of knowledge amongst professionals. This sharing of knowledge or the move towards employee-related service at the workplace could have a profound effect, if employees can obtain assistance from a central point.

## **2.4 Programme description: Employee Assistance Programme, Work Life Programme, Health and Productivity Management and Wellness**

### **2.4.1 The Employee Assistance Programme**

According to Davis and Gibson, cited in Arthur (2000:550), there is no standardised EAP model in practice, but there are a variety of definitions, such as that of the EAPA (1994). Green and Masi (1997:54) mention a common group of core components, namely confidential assessment, counselling and therapeutic services. Cooper, cited in Schoeman and Pelzer (2005:119), confirms that the EAP has no single definition but is defined as a programmatic intervention at the workplace, using behavioural science and methods.

The programmatic functions of the EAP include the components referred to above, namely confidential assessment, counselling and therapeutic services for employees and dependants experiencing a wide range of personal, emotional and psychological problems. The functions also include provision of a telephone helpline for advice and information on domestic, legal and financial matters.

#### **2.4.1.1 Confidential assessment**

McKendrick, cited in Blair (2001:27), states that assessment is a phase of understanding and defining a problem with confidentiality being an assurance by a supervisor that the problems revealed will be kept private. The first objective in assessment is to collect and analyse information and then to establish goals for intervention.

In support of Mckendrick, Blair (2001:28) is of the opinion that EAP assessment is the identification and evaluation of employee strengths, weaknesses problems and needs. Piette and Fleishman (1992:49), however, state that assessment is the method of collecting in-depth information about a person's social situation and physical, mental and psychological function areas.

#### **2.4.1.2 Counselling**

Counselling is a structured conversation aimed at facilitating a client's quality of life in the face of adversity. It is a generic term used to cover processes such as interviewing, guiding and advising. According to Norman et al. (1997:51), counselling assists individuals in numerous ways, for example to develop a set of values that makes life more meaningful, to learn social behaviours that increase the quality of human relationships and to try to resolve any problem that hinders people from leading more satisfying lives.

Roberts (1993:3) states that counselling is perceived as a process through which someone that has a problem receives personal assistance through a private discussion. He further states that counselling is a structured conversation aimed at facilitating a client's quality of life in the face of adversity. It is a generic term used to cover processes such as interviewing, guiding and advising.

Norman et al. (1997:57) suggest that these concerns can be interpreted as personal problems that can be described as inner experiences, such as loss of will power, low self-esteem and a feeling of helplessness that can result in individuals' being affected emotionally, thus hindering the normal functioning of individuals.

Norman et al. (1997:57) further suggest that emotional problems are heightened feelings, such as depression, anxiety or family discord, experienced by individuals that result in their abnormal functioning. If an individual is affected emotionally, he/she will be diagnosed as having psychological problems, which are experienced when a person, due to external or internal variables, finds it difficult to function properly.

#### **2.4.1.3 Therapeutic services**

According to Kruger and Le Roux (1996:67), therapeutic services are services intended to treat mental and psychological problems that affect the full functioning of individuals.

#### **2.4.1.4 Practical assistance of the EAP**

The EAP definition further illustrates the manner in which services can be provided. This may be by means of face-to-face interviews or a telephone helpline, whereby advice can be made available on numerous issues including, but not limited to, domestic violence, legal advice and financial matters.

#### **2.4.1.5 Telephone helpline**

A telephone helpline is a service provided by professionals on a 24-hour basis to assist individuals who are experiencing a wide range of personal and work-related problems. Individuals can make use of a telephone for assistance when confronted with personal problems (for example domestic violence, which is violence within the family, maybe as a result of family miscommunication).

#### **2.4.1.6 Use of counselling skills as core technologies**

The EAPA (2003:56) states that the EAP is the sum of the organisation's resources that uses specific core technologies, which refers to the ability of a counsellor to provide clients with empathetic understanding, nonpossessive warmth, genuineness and concreteness or specificity to enhance employee and workplace effectiveness through prevention, identification and resolution of personal and productivity issues. Not all of the employees need all the assistance all of the time; some employees

require minimum support of some form or other that the organisation is able to provide.

According to the EAPA (2003:49), EAP practitioners can also use core technologies in further assisting employees who experience similar problems in a group so that individuals may learn from each other how best to confront their challenges and become effective in the workplace. According to Norman et al. (1997:64), a prevention programme at the workplace pertains to systematic patterns of activities that are used by professionals to bring about change in the group or in the individual employee.

The primary aim for many organisations is productivity, which implies that employees have to perform to the best of their abilities so that the expected output can be realised. In many cases, poor performance is brought about by personal and work-related challenges that adversely affect employees' social functioning. In an organisation where the EAP is functional, early identification of poor performance by supervisors and appropriate referrals can yield positive results. Hence it is the responsibility of the counsellor to identify and resolve personal and productivity issues.

Attridge et al. (2005:79) state that the 2001 Survey Study of Professionals in the USA indicated that the following assisting services were provided by the EAP:

- Critical incident stress debriefing (CISD)
- Supervisory training
- Early identification of problems
- Drug-free workplace

Each will be described in the following discussions.

Critical incident stress debriefing: According to Jacobson (1993:23), a critical incident is defined as any situation faced by employees that cause them to experience a strong emotional reaction. This experience may have the potential of interfering with their ability to function effectively. The EAP practitioner's role in difficult

circumstances is to assist victims to cope with the incident. Mitchell, cited in Jacobson (1993:95), concurs and states that the CISD model, when used effectively for psychological debriefing, empowers individuals and groups that have had traumatic experiences.

**Supervisory training:** Supervisory training is offered by EAP practitioners who train other supervisors within the organisation about the scope and intent of the EAP. . Romano (1995:50) is of the opinion that supervisory training is essential in maintaining the efficiency of an EAP. Dayoff (1999:629) is in agreement and stating that a highly effective EAP must take the time to train and consult with supervisors on a continuous basis.

Health Care Managers (2005:29) states that the EAP practice encourages early detection of problem behaviour. William, Rothwell and Kazanas (1994:350) further add that supervisors trained on problem detection and counselling techniques help provide additional skills to gather information and determine what kind of assistance (informal or professional) may be needed, as well as when this is needed.

**Early identification of problems:** According to Health Care Managers (1994:350), early identification and immediate notice of an individual problem ensure that individuals receive assistance before problems become major clinical, administrative or disciplinary issues.

Bruce (1990:25) states that the ideal EAP will provide early identification of problem workers when a variety of professionals assess the individual case in a case conference (a meeting where different professionals give input to the case) and make recommendations for further intervention by a case manager (an individual responsible for the case) for further intervention.

Health Care Managers (2000:27) concurs with Bruce's idea and adds that this involves documentation of the problem. The organisation further states that the problem must be accurately, objectively and dispassionately chronicled so that the employee can be confronted and offered help in a constructive and factual manner. This being the case, the employee will easily acknowledge that his/her job performance is deteriorating and that a problem exists. Terblanche (2006:86)

confirms this and states that once the employee acknowledges that he/she has a problem, he/she will be motivated to work on it.

**Drug-free workplace:** Drug abuse is a major contributing factor to society's problems, and it has extended into the workplace. According to Lawton, cited in William et al. (1994:354), drug abuse has reached epidemic proportions in that one in 18 employees use drugs. EAPs have developed programmes to manage alcohol and drug abuse in the working environment. These are drug abuse intensive day programmes operating within the organisation or outpatient programmes operating by referral to a nongovernmental organisation that offers counselling sessions.

Bensinger and Pilkington, cited in William et al. (1994:354), state that in order for employers to protect employees in the workplace, they developed a drug abuse policy in their organisation to help and support not only employees who abuse drugs but also those affected by the usage of drugs.

#### **2.4.2 Work life programmes**

Maiden (2005:3) defines WLPs as a specific set of organisational practices that recommend aggressive support for the efforts of everyone who wants to achieve success at home and at work. WLPs offer services focusing on helping workers to deal with the multiple demands of their careers, care of their children and care of their ageing parents.

Gornick, cited in Maiden (2000:11), states that WLPs are expressed in two main areas, namely

- supporting workers to balance the demands of both their work and personal lives; and
- offering consultation services to corporations on how to provide a family-friendly, supportive environment aimed at increasing creativity and productivity in the workplace.

Attridge et al. (2005:3) state that the 2001 Survey Study of Professionals in the USA indicated that WL services provide some of the following:



- Child care initiatives
- Elderly care initiatives
- Flexible work arrangements
- Family participation

Each will be described in the following discussions:

Child care initiatives: Attridge et al. (2005:11) state that the formation of the Women's Movement in the early 1970s enabled women to enter the workforce, taking on professional roles in addition to more traditional clerical and support roles. This resulted in women's remaining in the workforce after the birth of their children where they were faced with limited childcare services. Child care emerged as a critical issue for families, communities and the workplace. Employers wishing to retain talented female employees had to address the issue of quality child care, hence child care initiatives were sponsored in the workplace.

Elder care initiatives: According to Attridge et al. (2005:13), the primary aim of the WLPs was to ease the tension between work and home, to provide means and to remove barriers. The programmes expanded beyond child care to include elder care, in the sense that if an employee experienced problems in taking care of an elderly person, and arrangements for alternative care could be made.

Flexible work arrangements: Attridge et al. (2005:15) state that employees experiencing a decline in productivity due to personal or work related matters could attend EAP services during official work hours.

Family participation: The purpose of assessment is to determine the type of intervention that will have an impact in resolving an individual problem. Assessments are conducted to gain an understanding of the root cause of the problem that is preventing the person from performing to his/her maximum potential. Attridge et al. (2005:15) are of the opinion that if decline in job performance is due to family-related matters, the family members will be required to participate in some of the therapeutic sessions held with the employee.

### **2.4.3 Health and productivity management**

According to the Institute for Health and Productivity, cited in Maiden et al. (2005:3), HPM is the integrated management of data and services related to all aspects of employee health that affect work performance and includes measuring the impact of targeted interventions on both health and productivity. Maiden et al. (2005:19) argue that the purpose of HPM is to maximise the individual's health and wellbeing to lower health care costs and increase workforce productivity.

The following are the programmes suggested by Maiden et al. (2005:16):

- Complex care management
- Chronic disease management
- Health care consumer education
- Nurse line for enquiries and health education

Each will be described in the following discussions:

**Complex care management:** Complex care management refers to the coordination of types of service used by employees. These services include medical care, disability programmes, workers compensation programmes, as well as absenteeism and occupational safety programmes. Complex care management is a method of helping employers to consider the impact and consequence of illnesses experienced by their employees.

**Chronic disease management:** A chronic disease is an illness that persists for a long time. Therefore, organisations must have systems in place to deal with such occurrences. They must develop programmes for effective communication, knowledge of disease management, change of attitude and behaviour, reduction of stigma and discrimination, as well as care and support of vulnerable employees.

**Health care consumer education:** Consumers in this context are viewed as users of service in the workplace, which will be employees. Health care consumer education is a preventative measure aimed at sensitising employees with regard to health-

related issues. It entails anticipating health issues that require intervention before they reach crisis levels.

Nurse line for enquiries and health education: The Department of Education in particular have outsourced some of their services to disease management vendors who offer, amongst other services, a nurse line for enquiries and health education. Qualified nurses employed by the vendor telephonically advise employees on health-related matters.

#### **2.4.4 Wellness programmes**

According to the Queensland University of Technology, cited in Maiden et al. (2005:12), in the USA the wellness concept came to the fore in the late 19th and early 20th centuries. Dr Halbert Dunn coined the term in the 1950s, and since then a number of wellness movements have been established in the USA.

Wellness encompasses the conscious and responsible actions to balance the integrated dimensions of one's existence (i.e. physical, emotional, intellectual, spiritual, occupational and social) to achieve the highest potential for personal health and wellbeing (Queensland University of Technology, cited in Maiden et al., 2007:12). Van der Merwe (2007:21) concurs with this definition and adds that all the dimensions mentioned can be maintained by appropriate diet, exercise and a healthy lifestyle.

Wolfe and Parker, cited in Janice (1997:127), define wellness programmes as long-term organisational activities designed to promote the adoption of organisational practices and personal behaviour conducive to maintaining or improving employees' physiological and mental wellbeing. Governmental support resulted in the establishment of comprehensive health management services, including fitness centres, health screening, health risk appraisals, educational activities, behaviour change programmes and high-risk intervention (Attridge et al., 2005:72).

Research conducted by the National Productivity Board, cited in Attridge et al. (2005:45), in Singapore, on the quality of work life reported that the majority of

companies were concerned with the need to contain rising health costs. Only a few had chosen to adopt wellness programmes, with the aim of increasing employee productivity, improving employees' welfare benefits and morale and enhancing the corporate image of the organisation.

According to Wong (1993:19), the following are the benefits of wellness programmes:

- Reduced cost associated with employee health plans and workers compensation.
- Reduced cost of replacing valued workers lost to injury or illness.
- Increased employee retention by providing an additional benefit.
- Satisfying the humanitarian concern for worker wellbeing.

Wellness programmes have a far-reaching benefit for the organisation, if implemented appropriately. In essence, the primary objective for the existence of any organisation is productivity. Therefore, the involvement of senior management should go beyond merely an endorsement, but they should be actively involved in the design, implementation and maintenance of the wellness programme.

Craig and Rhodes (2004:40) discovered a wellness programme that was sophisticated and regarded as 'beyond wellness' in Appleton Headquarters in the USA. They report that this wellness programme has been developed in such a way that it offers an on-site wellness centre. The centre's staff promote a proactive approach to injury management, prevention and rehabilitation by offering regular educational programmes on topics such as ergonomics, lower back injuries, musculoskeletal disorders and other health-related topics, including stress management, proper nutrition, smoking cessation, breast cancer awareness, teens sport conditioning and child care seat safety.

In support of Craig and Rhodes, Attridge et al. (2005:71) reiterate that wellness programmes have advanced, hence the spread of corporate fitness centres that have developed lately. These facilities now offer a range of occupational and physical therapy services, as well as rehabilitative and alternative medical services.

Attridge et al. (2005:72) further state that as wellness programmes gain popularity, they will be integrated into numerous health and productivity programmes, including disease management, demand management (self-care), disability management and other employee benefit programmes.

Lynch, cited in Attridge et al. (2005:43), further emphasises the benefit of employee wellness and states that the scientific evidence to date offers a documented correlation between (a) multiple risk factors and lower productivity, (b) chronic illness and lower productivity and (c) participation in health management programmes and improved work performance.

## **2.5 Integration of different programmes: Employee Assistance Programmes, Employee Wellness Programmes, Health and Productivity Management and Work Life Programmes**

According to Maiden et al. (2005:22), the review of EAP, EWP, HPM and WL services has identified several commonalities that are encouraging a need for an integration of concepts.

Maiden et al. (2005:22) state that there is growing evidence of overlap and differences among these four fields. Some of the overlaps identified are as follows:

- Awareness of the mind and body connection.
- Smoking cessation classes offered by both the EAP and HPM.
- Programmes that address emotional and social issues are presented by WLPs, EAPs, HPM and EWPs.

Erfurt, cited in Attridge, Patricia and Herlihy (2005:69), noted that both EAPs and EWPs focused on behavioural change, utilising strategies for overcoming denial and the reduction of relapse and that both required organisational knowledge and skills for these purposes.

Kelly, cited in Attridge et al. (2005:88), state that health education is another element associated with both EAPs and WLPs that focuses on skills development and life style behavioural change, along with information dissemination and awareness building, preferably tailored to employees' interests and needs.

According to Kelly et al., cited in Attridge et al. (2005:89), the research conducted at the Ford Company in the USA by the University of Michigan on the concept of integrating EAPs and wellness programmes focused on the so-called 'walking wounded'. Wellness programmes were targeted at the whole workforce in an attempt to provide preventative treatment to individuals with risk factors that might lead to serious illness in the future.

In differentiating between EAPs and WLPs, Herlihy, cited in Attridge, Patricia and Herlihy (2005:101) states that EAPs concentrate more on behavioural health and WLPs deal with normal developmental life events.

The core function of the EAP is the identification of the causes of decline in job performance in individual employees and the development of strategies to deal with the root cause of the problem, while HPM identifies specific risk factors and designs precise intervention such as smoking cessation or exercise promotion for all employees. All these programmes share a common interest in promoting individual wellbeing, as well as organisational effectiveness in terms of risk reduction or risk management.

## **2.6 General functions of the EAP**

The EAP is structured in such a way that its primary function is to assist individual employees to handle their personal as well as work-related problems that interfere with productivity; therefore, the EAP serves the following functions:

### **2.6.1 Supervisory training**

Supervisory training is offered by EAP practitioners who train other supervisors within the organisation about the scope and intent of the EAP. Dayoff (1999:629)

states that a highly effective EAP must take time to train and consult with supervisors on a continuous basis. In support of Dayoff, Romano (1995:50) is of the opinion that supervisory training is essential in maintaining the efficiency of an EAP.

Health Care Managers (2005:29) states that the EAP practice encourages early detection of problem behaviour. William, Rothwell and Kazanas (1994:350) add that supervisors trained on problem detection and counselling techniques help provide additional skills to gather information and determine what kind of assistance (informal or professional) may be needed, as well as when this is needed.

### **2.6.2 Early identification of problems**

According to Health Care Managers (1994:350), early identification and immediate notice of an individual problem ensure that individuals receive assistance before problems become major clinical, administrative or disciplinary issues.

Bruce (1990:25) states that the ideal EAP will provide early identification of problem workers when a variety of professionals assess the individual case in a case conference (a meeting where different professionals give input on the case) and make recommendations for further intervention by the case manager (an individual responsible for the case).

Health Care Managers (2000:27) concurs with Bruce's idea and adds that this involves documentation of the problem. It further states that the problem must be accurately, objectively and dispassionately chronicled so that the employee can be confronted and offered help in a constructive and factual manner. This being the case, the employee will easily acknowledge that his/her job performance is deteriorating and that a problem exists. Terblanche (2006:86) confirms this and states that once the employee acknowledges that he/she has a problem, he/she will be motivated to work on it.

### **2.6.3 Marketing the EAP**

Marketing of EAP services is the basic function of EAP practitioners. Moodley (2003:32) states that marketing of the EAP needs to be effective in order to inform

the entire employee population in the organisation about the available services. He further states that there are different ways of communicating EAP services among employees, for example memos, e-mails, brochures and posters.

## **2.7 Role of management in strengthening the EAP**

The EAPA (2005:45) states that a head of department should allocate adequate human and financial resource to implement health promotion programmes and, where appropriate, form partnership with other departments, organisations and individuals who are able to assist with promotional health programmes. The EAPA further states that management support is crucial in ensuring the realisation and utilisation of the programme and communication of the vision of the programme at different levels within the department

## **2.8 Referral of employees**

The EAPA (2005:17) states that referrals should be based on the unique needs of the clients, as revealed by the assessment and supported by observation and documentation. Thomas (1990:170) states that identification of the problem can be seen as an initial phase and that referral is a constructive confrontation of the helping process. According to Terblanche (2006:67), there are three types of referral, namely voluntary, suggested and mandatory. These are consequently discussed.

### **2.8.1 Voluntary referral**

The employee, after acknowledging the problem, refers him- or herself to the EAP section for further assistance. Terblanche (1998:67) states that voluntary referral indicates that the employee has insight into his/her own problem and seeks help and treatment for the resolution of that problem.

### **2.8.2 Suggested referral**

According to Wright (1985:19), a supervisor who has reason to believe that an employee has a personal problem that might be contributing to his/her poor performance might suggest that the employee arrange for an interview with an EAP counsellor. Health Care Managers (2000:27) argues that what is of importance is



that the employee fully accepts the offer of help so that an EAP referral can be made.

### **2.8.3 Mandatory referral**

According to Wright (1985:19), mandatory referral (referral by managers) is an option available to management to use during the late stages of a disciplinary procedure. At this stage the supervisor has tried everything to correct the behaviour of the employee but to no avail.

Mooney, as cited by the EAPA (2003:34), states that EAP follow-up is considered one of the important functions of the EAP. Health Care Managers (2000:27), in support of Mooney, points out that while receiving EAP assistance, the employee is mainstreamed into organisational routines with therapeutic follow-up and assistance.

The EAP serves a dual purpose for both the employer and the employee in the sense that once the employee acknowledges that a problem exists, she/he embraces the service and productivity may be improved.

## **2.9 Advantages of the EAP**

A well-marketed EAP will have the support of management and unions, as well as the employees who are beneficiaries.

### **2.9.1 Advantages to the organisation**

Sutherland and Cooper (2000:24) state the following as the benefits for the organisation of the implementation of an EAP:

- Increased productivity.
- Reduced absenteeism.
- Decreased stress-related sick leave.
- Improved staff morale and thus motivation.
- Increased integrity and honesty.
- Visible leadership participation.
- Reduced staff turnover.

Dickman et al. (1988:1) state that with an EAP in operation, the organisation may have an unproductive official returned to normal or high performance. The authors further mention the following advantages of an EAP to the employees:

### **2.9.2 Advantages to the employees**

- The purpose of the EAP is to offer confidential assistance to employees and their immediate families who are affected or who have the potential to be adversely affected by personal/work-related problems. This assistance is rendered by identifying and resolving productivity problems associated with employees who are impaired by personal concerns. Sutherland and Cooper (2000:24) state the following as the advantages of the implementation of an EAP to the employees:
  - Resolution of child care and elder care issues.
  - Resolution of family and marital discord.
  - Family violence and HIV/AIDS counselling.
  - Assistance with psychological problems.
  - Stress (family, social and job) reduction.
  - Stigma reduction.
  - Affordable access to help.

### **2.9.3 Advantages to the labour unions**

Haper and Beckman (2000:123) state that if EAPs are entrenched in the workplace, there will be fewer interventions by the unions. The labour movements are in favour of employers' introducing EAPs in the workplace. One of the unions' primary aims is to represent its members when their well-being is affected. Sonnestuhl and Trice (1986:22) concur and support the contention that union involvement in decision making will increase the probability of employers' introducing the EAP sooner rather than later. If the labour movement monitors the EAP, the quality of the EAP will be enhanced and therefore there will be fewer interventions by the unions.

## **2.10 EAP models**

The EAPA of South America (1999:8–15) suggests EAP models and indicate that EAPs need to operate within a setting where individual employees may be confident that they will be assisted. These models will be discussed in length in the following paragraphs, namely the in-house model, the off-site model, the union support and involvement model, and the combined model.

### **2.10.1 The in-house model**

According to the in-house model, personnel employed by the organisation itself operate the EAP. EAP functions are performed at the workplace, and internal practitioners of the EAP offer interventions. The aim is to assist in the identification and resolution of productivity problems associated with employees impaired by personal concerns.

According to the EAPA-SA (1999:8–15), organisations have developed the in-house model for a number of reasons:

- Executives themselves are unfamiliar with mental health treatment.
- Employers hire professionals to ensure that an expert deals with employees' problems.
- Organisations wish to show their humanitarian concern for their employees.
- The in-house model is a subcomponent of human resource management and functions independently.

#### **2.10.1.1 Advantages of the in-house model**

An internal service provides easy access for employees during working hours, and this availability encourages utilisation. Another advantage is that an internal practitioner has greater access to and more readily understands the workers and the culture of the organisation. In support, Cayer and Perry (2000:64) states that internal practitioners possess a better knowledge and understanding of the organisation than external vendors and as a result, a high-quality service designed for a specific organisation may be delivered.

### **2.10.1.2 Disadvantages of the in-house model**

The EAP-SA (1999:11) states that where the service is readily available within close proximity, employees become suspicious of confidentiality and this may render the programme more susceptible to manipulation by management. Cayer and Perry (2000:94) agrees that proximity may be associated with a lack of confidentiality, as information about personal or work-related issues interfering with the individual performance of employees may be used to their disadvantage in terms of their career path.

### **2.10.2 The off-site model**

Phillips and Older (1988:27) refer to this model as an external or off-site model whereby the organisation enters into a contractual agreement with an independent EAP service provider. Haper and Beckman (2000:407) adds that the contractual agreement between the employer and the service provider details all the specifications on how the service should be rendered.

#### **2.10.2.1 Advantages of the off-site model**

EAPA-SA (1999:13) is of the opinion that as the off-site model operates with the staff of a service provider selected and contracted by the employer, it provides for confidentiality, maintains objectivity and is unbiased. Gibson et al. (2002:75) concurs that organisations prefer a contractual approach because they believe that an outside vendor can foster an employee's confidence in the confidentiality of the programmes.

#### **2.10.2.2 Disadvantages of the off-site model**

Meyers (1984:136) is of the opinion that external vendors can have limited knowledge about the organisation and that this can be detrimental, as it will slow intervention processes. Phillips and Older (1988:136) add that a lack of knowledge about an organisation can affect implementation processes by external vendors. Having in-depth knowledge about the organisational culture and the demands made

upon the employee by the work environment will better equip the EAP practitioner to establish the causes of problems.

### **2.10.3 The union support and involvement model**

Beyer, Trice and Hunt, cited in EAPAS-SA (1999:160), found that labour union support and involvement improved the effectiveness of the EAP. Unions should be involved in the formulation of policy because when unions are not invited, it becomes difficult for them to offer labour support to the EAP. The effectiveness of the EAP, however, may be increased when labour and management work together informally. If unions are involved, they will support the programme, as they view it as an additional benefit for their members.

#### **2.10.3.1 Advantages of the union support and involvement model**

Union support and involvement can increase by including union officials in sessions that train managers to use constructive confrontation strategies fairly and compassionately. When dealing with the initiation of formal disciplinary measures, co-operation between organisations and unions regarding the EAP has yielded positive results (i.e. a better understanding of processes amongst all involved).

Research indicates that when this approach is used, the majority of employee problems can be resolved before disciplinary measures are called for (Sonnestuhl and Trice 1986:41). Once formal disciplinary measures take effect, the union will defend its members. Co-operation between management and labour unions is vital to prevent the situation from reaching the point of dispute.

#### **2.10.3.2 Disadvantages of the union support and involvement model**

There are disadvantages associated with this model. In a study of labour and management support for EAPs, Sonnestuhl and Trice (1986:41) found that even when programme aims were rather modest, co-operation was difficult to accomplish and occurred at lower rather than at high levels.

#### **2.10.4 The combined model**

The combined model is offered in an organisation by EAP professionals and the service provider contracted by an organisation. This model is a combination of the in-house model and the off-site model. The EAPA (1999:8) states that this model is popular in many organisations because it gives individual employees a choice.

As indicated, the in-house model may be received with scepticism. The off-site model is also perceived as being limited, with its lesser knowledge of the organisation. The union support and involvement model encounters difficulties in terms of co-operation with managers.

Having stated the disadvantages of each, it appears ideal to combine the four models. If combined, all the stated problems will be addressed easily within one model, as they will complement one another. A combination of models will ensure exchange of knowledge and, as a result, managers will be involved.

The practical experience of existing programmes indicates that organisations need not provide an in-house counselling service, since there are ways to provide such a service outside the organisation, some of which may offer a better option for maintaining a balance between constructive criticism and constructive support. In any way in which an organisation chooses to render its service, the primary aim of the existence of an organisation is the attainment of short- and long-term goals (effectiveness). Organisations often prefer the off-site model because of its cost effectiveness and because it renders quality services with the least amount of resources (efficiency).

#### **2.11 Conclusion**

The EAP has evolved since its inception as a treatment-based service focusing on problem employees, especially those suffering from alcohol and drug dependence, to accommodate a wide range of problems experienced by individual employees in the workplace. The fact that poor performance is experienced irrespective of overindulgence in alcohol clearly indicates that a decline in productivity is attached to different factors.

The concept of integration introduced a model that confirms that different professionals with specialised knowledge can collaborate in providing a service without losing their uniqueness by looking at alternative ways of improving individual health, safety and organisational wellness.

Societal trends in medicine, social work, business, globalisation and ecology promote an awareness of systems, interconnection and the mutual effects of the individual upon the whole. Paradigm shifts in these trends have influenced thinking in the EA, WL, HPM and wellness fields. EA, WL, HPM and wellness fields started independently with distinct bodies of knowledge, core skills and service delivery systems, they progress along parallel paths and began to merge.

In the USA, a renewed interest in the EAP was ignited by the integration with other services such as WLPs, HPM and EWP. Although they share most policies and benefits, each setting has distinct features that represent its core functions.

Today there is an increasing interest in understanding how these diverse but related programmes can be integrated into a comprehensive approach to enhance the effectiveness of people at work.

The next chapter contains a case study focusing on EAP implementation in the DoE in the Free State Province, Motheo District. It outlines the background of the organisation, how the EAP/EWP originated as well as the structure and policies that govern the programme operation.

## **CHAPTER 3: THE EMPLOYEE ASSISTANCE PROGRAMME: A PRACTICAL INTERVENTION IN SOUTH AFRICA**

### **3.1 Introduction**

The sudden changes in both the external and internal environments in different organisations and government departments resulted in human resource managers' are faced with fundamental challenges. Externally, global economic changes persist to accelerate, and internally, a decline in productivity is cause for alert. In situations such as these, human resource management is under pressure to bring about significant changes that will enhance the overall functioning of the organisation.

In this chapter the key focus will be on the following:

- EAP developments in South Africa: The information that will be provided will be the historical background of the EAP, how it originated and gained its popularity in the public sector.
- Public Service Employee Health and Wellness (EH&W) Framework: This framework seeks to represent an integrated, needs-driven, participative and holistic approach to employee health and wellness in the public sector. The framework is based on four functional pillars, which will form part of the explanation.
- The background of the EAP: This will provide an overview of the programme, in other words how it started, what its structure looks like and how people are served by the programme in the DoE in Motheo District in the Free State Province.
- The EAP policy at the Free State DoE of Motheo District: This will present information on the services that will be provided, what the programme hopes to achieve, what activities will be involved and how referrals are to be managed.
- The pilot project of the Free State DoE, Motheo District: The EAP was piloted in Xhariep District in the Orange Free State to establish whether there was a need for the service. The outcome of the pilot project will be stated.



## **3.2 Historical background of the EAP in South Africa**

Schoeman and Petzer (2005:119) state that during the 1980s, the EAP started in South Africa as a response to the problems that migrant workers encountered by being away from home in artificial settings. Manzini (2005:31) concurs with this, saying that the EAP was introduced to South Africa in the 1980s by social workers and psychologists who had studied the programme in the USA.

Mathlape (2003:2) argues that the EAP in South Africa did not gain much momentum in the eighties. He contends that despite the growth of the EAP in South Africa, in most cases it still remains on the periphery of real business activities and is often regarded as a 'nice to have' rather than as a business imperative.

EAP popularity in South Africa is further substantiated in the *Sunday Times*, cited in Sithole (2005:80), which says that out of 93% surveyed companies, 45% were found to have an EAP at their operations. Cavanagh, cited in Schoeman and Petzer (2005:119), states that EAP initiatives originally started in the private sector to assist and support employees with psychosocial problems. Schoeman and Petzer (2005:119) add that the EAP was developed and established in the public sector due to the impact of HIV/AIDS on the workforce. Since 1980, the EAP has gained recognition in improving performance and productivity in South Africa. There is legislation that has an impact on the EAP; the explanation below singles out relevant acts that are pertinent to the EAP.

## **3.3 Legal framework**

### **3.3.1 The Constitution of the Republic of South Africa, 1996**

The Constitution of the Republic of South Africa (South Africa 1996) provides a framework for human rights, employment, labour relations and good practice. It also provides a framework for legislation in this regard.

The development of the EAP field has increased the risk of litigation, and there is an obligation on EAP professionals, employers and clients to familiarise themselves with relevant legislation in order to ensure legal compliance. It is important for legal professionals to be familiar with legal statutes and regulations and to align EAP programmes and interventions.

The public service has no uniform framework to ensure implementation of common policies and programmes in compliance with the framework. Terblanche (1998:18) affirms this and concludes that there is no specific EAP act but states that provisions are made for EAP regulations in various other acts, as noted below.

According to Section 23 of the Constitution, everyone has the right to fair labour practice. This section, when interpreted in relation with the EAP, can imply that it will be improper to dismiss an individual as a result of deterioration in job performance without proper analysis of the circumstances. This can, therefore, be equated to unfair labour practice.

Section 24(a) of the Constitution states, among others, that everyone has the right to an environment that is not harmful to his/her health or wellbeing. Section 27(1)(a) of the Constitution further states that everyone has the right to health care services. Section 18 of the Occupational Health and Safety Act (No. 85 of 1993) states that health and safety representatives must be appointed in the workplace; among others, their duties are to identify potential hazards and major incidents at the workplace and to make recommendations to the employer regarding the minimising or elimination of such hazards. The EAP is a subsection in the Human Resource Directorate, developed in the workplace to ensure that these rights are realised.

### **3.3.2 Basic Conditions of Employment Act (No. 75 of 1997)**

The purpose of the Basic Conditions of Employment Act is to advance development and social justice by establishing and enforcing the basic conditions of employment. The act clearly describes working conditions, in other words working hours, leave, public holidays, and termination of employment, job information, payment, child and forced labour, and enforcement of the law.

The application of this act implies that an employer has to adhere to the prescribed working conditions in order to enable the employee to attain his/her full potential to be productive. In reality, however, working conditions are seldom conducive to productivity, resulting in poor performance.

Studies conducted on health and performance at work indicates that when working conditions are not conducive to productivity, it could have a negative impact on employees. This could manifest, amongst other things, as occupational stress. Despite all the difficulties that impair personal and occupational functioning, the presence of an EAP can create a positive atmosphere within the work environment by initiating intervention strategies that will enable the employee to cope with challenges.

### **3.3.3 The Labour Relations Act (No. 66 of 1995)**

The Labour Relations Act promotes and regulates the right to fair labour practice, as outlined in the Constitution. EAP practitioners, together with a union as part of an EAP advisory committee, can work together in identifying occasions of unfair labour practice. Managers often assume that employees know what good performance is and therefore describe performance standards in vague terms, leaving employees to interpret the job standards on their own.

This certainly creates poor performance that can lead to demotion or dismissal. To prevent this from happening, an employee with unsatisfactory performance can be referred to the EAP where the cause of the problem can be identified and the employee can be advised accordingly.

### **3.3.4 Employment Equity Act (No. 55 of 1998)**

The Employment Equity Act is aimed at addressing the socio-political and economic imbalances of the past through the promotion of equal opportunities, the elimination of unfair discrimination in the workplace and the implementation of affirmative action measures to redress past injustices.

The recognition of the right of employment for disabled people by the Employment Equity Act extends the functions of the EAP to accommodate people with disabilities and to ensure that support programmes are put in place. Another responsibility attached to EAP personnel is to guarantee the physical accessibility of buildings by communicating with the Physical Planning section together with Public Works if the building is not accessible so that people with disabilities may achieve maximum productivity and quality output without any risk to their own occupational health and safety (OHS).

### **3.3.5 Skills Development Act (No. 97 of 1998)**

The Skills Development Act aims at using the workplace as an active learning environment, thus providing employees with opportunities to acquire new skills and providing opportunities for new entrants to the labour market to gain work experience. In carrying out what is contained in the act, various institutions and government departments developed a section with a mandate of improving employees' competencies where the need arises.

Unsatisfactory performance is attributed to different factors, such as lack of motivation, lack of skills, lack of respect for rules and personal problems. In the face of these, an employer has the right to set performance standards and to establish sanctions when those standards are not met. These are serious factors that can impede productivity. Many organisations have created an EAP, believing that it has a sufficiently broad and comprehensive approach to assist both the employer and employee to deal with issues that impede performance and enhance productivity.

The description above focuses on different acts applicable to the EAP in the workplace. Its application is met with challenges in the DoE in Motheo District. The discussion below focuses on these problems.

### **3.3.6 Occupational Health and Safety Act (No. 85 of 1993)**

The purpose of the Occupational Health and Safety Act is to ensure the protection of employees from threats to their health and safety caused by the activities of other employees. In most organisations, sections that focus exclusively on OHS already exist, but incidents where employees are injured at work are still being experienced. The role of the EAP service is to help organisations to achieve a balance between adhering to legal requirements and improving or maintaining quality standards within the organisation.

The challenge is that most of the buildings occupied by government employees are leased. Therefore, it is difficult for the DoE to renovate such buildings for compliance. This being the case, employees are found to be accommodated in buildings that do not adhere to the stipulated building standards. As a result, employees are frequently ill, which results in low productivity due to the high rate of absenteeism. The role of the EAP section becomes insignificant, and its interventions are also not effective because if the environment is not salutary for employees, intervention strategies will be of little use.

### **3.3.7 Applying Labour Relations Act (No. 66 of 1995)**

The Labour Relations Act promotes and regulates the right to fair labour practice as outlined in the Constitution. In practice, in the DoA the EAP section is not consulted on the decision made to charge, discipline and dismiss employees. The fact that an employee's performance has deteriorate due to the circumstances that surround that employee is not considered. There is no communication between the Labour Relations section and EAP practitioners in terms of interventions with the employee when decisions are taken.

The Human resource section also does not consult with the EAP section to establish whether an employee was attending sessions in terms of incapacitation when it sends the documents to the medical board as a body that decides whether a person is fit or not fit for work. No inputs from the EAP are requested in order that the medical board can reach a conclusive decision.

### **3.3.8 Applying Employment Equity Act (Act No. 55 of 1998)**

In the Doe, most of the buildings are leased; as a result, there is no compliance with the Employment Equity Act because physically challenged individual cannot be employed due to inaccessible buildings.

## **3.4 Employee Health and Wellness Strategic Framework**

The Department of Public Service and Administration (DPSA) took the lead in 2001 by obtaining inputs from internal stakeholders and holding discussions at several conferences with the focus on an integrated approach, leading to the EH&W Strategic Framework. The discussion emanated from the EAP, which mainly supported individual wellness through counselling and educational efforts, such as stress management and other wellness promotion strategies. The intentions of the indaba (discussions) were to go beyond the EAP to a comprehensive approach in dealing with health and wellness issues that have a bearing on the workplace.

The above discussion has alluded to different legislations that are relevant in carrying out the mandate found in the Constitution of South Africa. Hence, the DPSA throughout the discussion with relevant stakeholders has formulated the EH&W Framework as a guideline through which all government departments have to formulate their policies.

In November 2008, the Minister of Public Service and Administration approved and launched the EH&W Framework, which is perceived to encompass all issues that promote the quality of work life within the public service. The Public Service Regulations 2001(1) mandates all heads of department to establish and maintain a safe and healthy work environment for their employees.

In this framework, the DPSA (2008:8) deepens its definition of employee health and wellness, resulting in the identification and adoption of the four critical pillars of the EH&W Framework. In the EH&W Framework, the measures to ensure employee health and wellness are defined as follows:

- Promotion and maintenance of the highest degree of physical, mental, spiritual and social wellbeing.

- Prevention of illness caused by working conditions.
- Protection of employees in their employment from risks resulting from factors adverse to health.
- Placement and maintenance of employees in an occupational environment adapted to optimal physiological and psychological capabilities.
- Adaptation of work to employees and of each employee to his/her job.

The DPSA (2008:8) has four key areas in which employee health and wellness are to be promoted. These are specific functional support areas that impact directly on the roles and responsibilities of the managers, as well as on health and wellness practitioners in government. The four key areas or pillars will consequently be described.

#### **3.4.1 Pillar 1: HIV/AIDS and tuberculosis management**

The primary purpose of introducing this pillar is to reduce the incidence of HIV/AIDS and the impact on individuals, families, communities and society. The EH&W Framework aligns itself with the HIV/AIDS and Sexually Transmitted Infections strategic plan for South Africa 2007–2011 in seeking to reduce the number of new infections by 50% and to reduce the impact on individuals, families, communities and society by providing access to appropriate treatment and care to at least 80% of all people diagnosed with HIV/AIDS (DPSA, 2008:29).

In the DPSA (2008:9), it is indicated that South Africa is one of the 22 high-burden countries that contribute approximately 80% to the total global burden of all tuberculosis (TB) cases. Therefore, health care systems should ensure as a first priority that individuals suspected of having TB have access to rapid diagnosis, appropriate treatment and adequate support systems to ensure treatment completion (DPSA, 2008:29).

#### **3.4.2 Pillar 2: Health and productivity management**

HPM in the workplace refers to the management of chronic diseases, infectious diseases, disability and occupational diseases so as to reduce the burden of disease management programmes, in order to enhance productivity in the public service.

HPM activities are convergent efforts to promote and maintain the general health of employees through prevention programmes, risk assessment and support. These activities lessen the impact and effect of communicable and noncommunicable diseases as well as injuries on quality and the productivity of individuals in the workplace (DPSA, 2008:29).

### **3.4.3 Pillar 3: Safety, healthy environment and risk and quality management**

This pillar deals with tangible and intangible factors of safety, healthy environment and risk and quality (SHERQ) management. The purpose is the optimal OHS of employees, the safety of citizens, the sustainability of the environment, the management of occupational and general risks, as well as the quality of government products and services (DPSA, 2008:36).

### **3.4.4 Pillar 4: Wellness management**

This pillar addresses individual and organisational wellness in a proactive manner. Individual wellness is the promotion of the physical, social, emotional, occupational and intellectual wellness of the individual. The intended outcome of wellness management is to maximise the potential of human resources, which may result in an effective and efficient public service that is responsive to the needs of the public.

The description above intended to indicate that the EAP has evolved in the public sector. The present situation still portrays the traditional EAP, however, and the programme is still being referred to as the EAP because there were no standard guidelines from the leading department (DPSA).



### **3.5 Background of the Department of Education of the Free State Province, Motheo District**

The Free State is one of nine provinces in South Africa and is demarcated into five districts, namely Xhariep, Motheo, Thabo Mofutsanyane, Fezile Dabi and Lejwe Leputswa. The focus of the study is on the effectiveness of the EAP in Motheo District.

The total number of DoE employees in the province is 30 000. Motheo District, which is situated in the centre of the province, has widely dispersed towns and a large population, for which the Department has employed close to 5 500 employees (Department of Education, 2005).

Motheo District is the biggest district in the province in terms of the number of people employed by the DoE. The employees at Head Office number about 1 000, at the district offices there are 1 500 people and in the schools (institutions) there are 3 000 educators and noneducators (Persal Report Employment Statistics, 2005).

The DoE outsourced the EAP services to two companies: RTM Joint Venture and ICASA/WELLCORP. Both companies are responsible for 4 000 employees in five districts. ICASA/WELLCORP is responsible for 2 000 employees in Motheo District. The company services 23 secondary schools composed of 900 employees. It also services Head Office, which is composed of 1 100 employees. In other words, ICASA/WELLCORP is responsible for 2 000 employees. The EAP subdirectorates of the DoE is responsible for 3 500 employees, both at schools and in the districts.

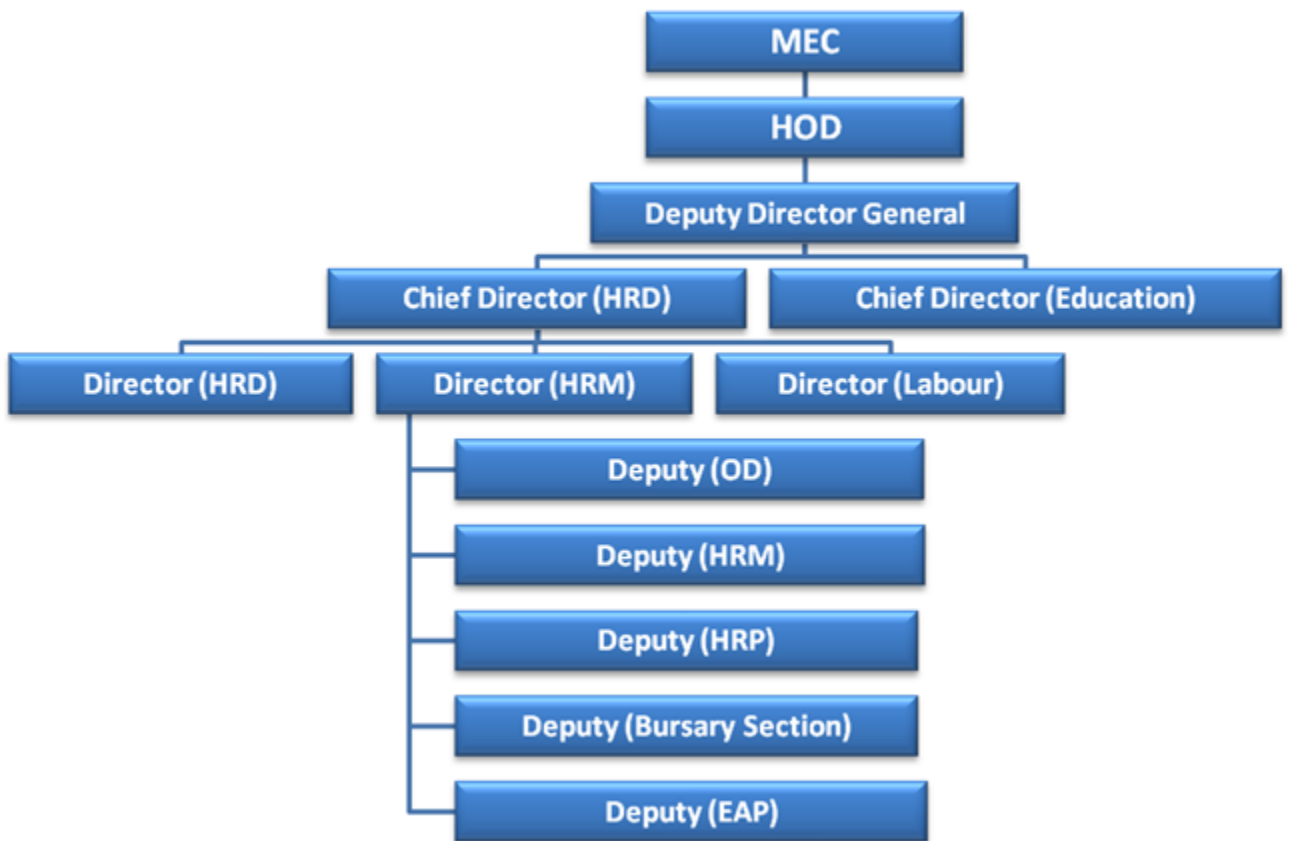
### **3.6 Organisational structure**

Robbins and Barnwell (2006:103) state that the structure of an organisation refers to its overall dimensions, characteristics and areas of responsibility. The primary aim of Human Resources is to ensure that the organisational structure has enough capacity and resources directed at efficiently and effectively implementing any programmes envisaged to accomplish departmental goals.

### **3.6.1 Macrostructure of the Department of Education, Free State Province**

Pennington, cited in Mathlape (2003:35), is of the opinion that one of the challenges of the 21<sup>st</sup> century for human resource management is to play a more active role as custodians of organisational strategies. He further states that the EAP is one of the key functional areas of human resource strategies for the 21<sup>st</sup> century and therefore active collaboration between the EAP and Human Resources is essential. In support of Pennington, Coppersmith (1995:30) suggests that the EAP should position itself as a central component within Human Resources, influencing all human resources functions in organisations.

In South Africa, most of the EAPs operate within human resource management sections, which is also the case in the DoE, Free State Province. The macrostructure of the DoE, Free State Province (see Figure 3.1) may be summarised as follows: the Member of the Executive Council (MEC), Head of Department (HOD), Deputy Director General(s) (DDG), Chief Directors, Directors and Deputies.



**Figure 3.1:** Macrostructure, Department of Education, Free State Province

The DDGs are responsible for different sections headed by the Chief Directors. The focus will be on the Resource Management, Development and Support Directorate. The DDG of the said directorate is responsible for two directorates, namely Education Support and Administration and Human Resource Development and Support, headed by two Chief Directors. Under the Chief Director of Human Resource Development, there are three Directors, namely the Director for Human Resource Management, the Director for Human Resource Development and the Director for Labour Relations and Legal Services.

The Director for Human Resource Development has five Deputy Directors managing different subdirectorates, namely Organisation Development, Human Resource Development, Human Resource Planning, the Bursary section and the EAP section.

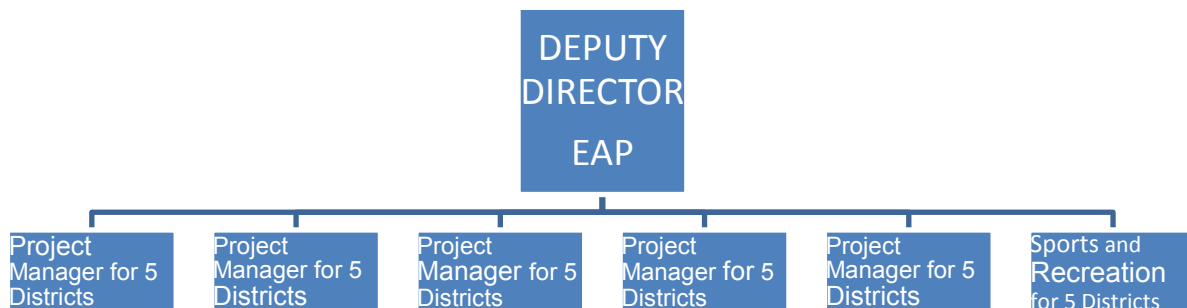
The Human Resource Development Directorate provides a support function for the DoA in the Free State Province. Demands for the supply of human resources are

met within budget constraints, hence some subdirectorates are centralised at the provincial level or Head Office and others are decentralised in the five education districts, namely Xhariep, Motheo, Lejweleputswa, Thabo Mofutsanyane and Fezile Dabi.

The EAP is amongst the sections that operate only from the provincial level or Head Office, with no personnel at the five education districts. This implies that personnel based at the provincial level or Head Office serve all five education districts.

### 3.6.2 Structure of the EAP section

The structure in Figure 3.2 depicts the present organisational structure of the EAP section of the DoE. Figure 3.1 shows the broad structure of the DoE, but Figure 3.2 represents a link between the two diagrams with Figure 3.2 narrowed to focus only on the EAP section.



**Figure 3.2:** Structure of the EAP

Figure 3.2 indicates the number of project managers who render the EAP service. They are all responsible for five districts with one person rendering inclusive services.

The literature review put more emphasis on the historical developments of the EAP as a broader programme that was initiated to assist individuals who failed to be effective due to their overindulgence in alcohol, which had an impact on productivity. The realisation that not only alcoholism had an effect on productivity resulted in broadening the horizons of the EAP.

Implementation of the broader perspective resulted in different departments' adopting a holistic approach. The department under investigation is now following a holistic approach whereby each person is doing a generic work, except for the Sports and Recreation section, which is still a stand-alone section, and the person responsible services all five districts.

### **3.7 Functions of the EAP section**

In preceding discussions, the process of integration of the EAP in South Africa was discussed in detail. The fact that the DPSA is in the process of ensuring that all government departments comply with Circular 1 of 2009 was mentioned. Hence, in other departments, including the DoE, the E&W Framework is not adopted.

#### **3.7.1 Deputy Director (manager of subdirectorate) in the Free State Province**

Purpose: To develop and implement employee health and wellness strategies and programmes.

Functions:

- Develop and implement employee health and wellness strategies and programmes.
- Promote and facilitate the implementation of OHS and environmental management strategies and programmes.
- Manage the Sports and Recreation Programme.
- Facilitate and manage health and productivity management programmes.
- Co-ordinate the EAP at provincial and district level.
- Ensure internal and external collaboration of the health and wellness programmes.

- Develop and facilitate the implementation of HIV/AIDS programmes.
- Monitor and evaluate the impact of HIV/AIDS programmes.
- Co-ordinate HIV/AIDS programmes.
- Ensure that counselling services are provided.

### 3.7.2 Assistant Director of the EAP responsible for sports and recreation in the province

Purpose: To promote a healthy lifestyle for employees.

Functions:

- Develop and facilitate the implementation of sports and recreation programmes.
- Co-ordinate sports and recreation activities in the provincial and district departments.

## 3.8 Operational Plan of the EAP

Directorate: Organisational and Human Resource Development

Subdirector: EPA

### Progress Report on the Operational Plan: 2009/2010

Measurable objectives	Activities	Performance measure	Base line data	Target for end 2010	Actual performance 2010
To ensure the implementation of the EAP from 0% to 50% in Motheo District by 2009	Orientation of employees on EAP policy	Number of workshops conducted	0%	Workshop 1 175 (50%) schools out of 327 schools  To have five out of 10 workshops with district officials in different sections on EAP policy	20 school were orientated on the EAP  Two workshops were conducted in the district

	<p>Coordinate presentations on HIV/ AIDS awareness</p> <p>Conducted the Voluntary Counselling and Testing (VCT) survey</p> <p>Conducted the VCT survey</p> <p>Monitoring Disease Management Programme</p>	<p>Number of employees attended HIV/ AIDS awareness presentations</p> <p>Number of employees expected to test</p> <p>Number of employees tested</p> <p>Report on follow-up made</p>		<p>All officials</p> <p>All officials (5 500) in Motheo District</p> <p>130 employees</p> <p>50 employees</p>	<p>944 employees from Motheo District show interest in testing – 60 employees tested</p> <p>24 employees booked for CD4 count check-ups</p>
To increase employee productivity from 30% to 50% in Motheo District by 2009/2010	HPM Programme implemented to promote awareness of diseases and chronic illness	Awareness programmes conducted	30% (1 650)	To conduct awareness campaign for 1 100 (20%) employees	Conducted comprehensive risk assessment that covered employees' health risks, health behaviour, medical patterns and preferences. 300 employees reached.
To ensure safety in the workplace and advocate OHS policy by conducting six workshops in different areas within Motheo District by 2009	Advocate OHS policy and establish committees	Advocacy on SHERQ done	0%	Advocacy on OHS	Two information sessions at the district and schools held. Two committees formed at district and schools (30 schools attended).
To promote physical and emotional	EAP management	Physical and psychosocial			Educational and curative

<p>wellbeing of employees by conducting 10 different educational programmes at different schools and observe national days by 2009.</p>	<p>programme implemented</p>	<p>wellness of employees promoted</p>		<p>programmes implemented, such as counselling (825 employees reached), stress management (400 employees reached), nutrition week (200 employees reached), financial management (300 employees reached), legal matters (300 employees reached) and physical fitness promotion (250 employees reached). Soccer and netball clubs formed in 30 schools.</p>
---	------------------------------	---------------------------------------	--	---

Figure 3.3: Progress Report on the Operational Plan: 2009/2010

### 3.9 Policy of the Department of Education, Free State Province

In 2003, the EAP section developed a draft policy for the province, which was reviewed in 2005. It serves as a guiding document for the five districts in the Free State.

#### 3.9.1 Aim and purpose of the programme

The EAP policy of the DoE 2001 clearly defines the strategic approach of the EAP. It is a workplace-based programme aimed at improving the quality of life of employees and their families. It does this by providing a supportive system that alleviates the impact of everyday work and personal challenges.

The programme also recognises that short- and long-term personal and psychological problems may adversely affect an employee's wellbeing and ability to function on the job. Hence, it aims at promoting and maintaining a well-balanced lifestyle for the employees and envisages creating a healthy DoE, which will improve



the productivity and effectiveness of the Department. The programme also aims to enhance the productivity and social functioning of employees (Department of Education: Employee Wellness Policy, 2001:6).

### **3.9.2 Beneficiaries of the programme**

The EAP policy is clear on the beneficiaries of its service, which will be all the DoE employees and their immediate families (Department of Education: Employee Wellness Policy, 2001:6).

### **3.9.3 Objectives of the EAP policy**

The objectives, as proposed in the policy document, articulate what is to be achieved through the introduction of the EAP in the Department. The following are the objectives stated in the EAP policy of the DoE (2001:6):

- Assist managers and supervisors to deal appropriately with the difficulties and challenges that confront employees in the workplace.
- Assist employees to seek professional help for the challenges that impact on their work and interpersonal relationships at work.
- Provide appropriate mechanisms for intervention and confidential counselling for employees who seek to address challenges that they face at the workplace.
- Promote cooperation, motivation and improve employee morale in order to improve productivity and workplace efficiency.
- Reduce absenteeism, staff turnover, interpersonal conflicts, grievances and work-related accidents in the Free State DoE at provincial and district level.

### **3.9.4 Nature of assistance**

The EAP policy states that the purpose of the assistance rendered by the programme is to provide employees and their immediate families with professional assistance in dealing with a broad range of human relationship problems. According

to the DoE Employee Wellness Policy (2001:5), the assistance to be provided to employees through the EAP is not limited to the following areas:

- Abusive relationships.
- Child care and elder care issues.
- Family and marital discord.
- Family violence.
- HIV/AIDS counselling.
- Psychological problems.
- Stress (family, social and job).
- Stigma reduction.
- Affordable access to help.

### **3.9.5 Activities**

The EAP policy informs employees about activities that the programme will offer in relation to the areas listed above. The following areas are highlighted in the DoE Employee Wellness Policy (2001:6):

Employees and their immediate families benefit from the following:

- Direct confidentiality and unlimited access to a 24-hour personal support service.
- Up to six face-to-face counselling sessions per person per year.
- Direct, confidential and unlimited access to a 24-hour life management service that comprises legal, financial and family care service.
- HIV/AIDS service.
- Managers' and supervisors' programme.
- Executive wellness programme.

### **3.10 Provincial strategy of the EAP in the Department of Education**

The EAP policy was developed simultaneously with the EAP strategy and illustrates how various activities are to be implemented.

The strategy is informed by the policy on the nature of assistance to be provided and the activities to be rendered. The strategic document takes the processes further and elaborates on how the intended activities are to be implemented.

The EAP strategic plan on implementation, as set out in the Employee Wellness Strategy for the Free State DoE (2001:3), comprises three different levels that may be summarised as follows:

- The first level is the reactive counselling service that is delivered in response to a particular problem experienced by an employee. Referral may be formal or voluntary.
- The second level is project based and addresses the particular population distribution within the DoE. The project is informed by a number of similar cases presented during counselling services. Therefore, the programme adopts a proactive stance, addressing one identified problem in various ways, including, but not limited to, training, workshops, seminars, section meetings and group work.
- The third level addresses the broader wellness of the individual within the work community. This is often the highest level of programme and service delivery, where a more in-depth counselling service, consultative service, health and lifestyle service and physical exercise service form the basis of the programme.

All role players' responsibilities must be made known to the employees. The responsibilities highlighted by the DoE Employee Wellness Policy (2001:13) are consequently discussed.

### **3.11 Responsibilities of other role players within the Department in relation to the EAP policy**

Managers' and supervisors' responsibilities:

- Address work performance problems through normal supervisory procedures.
- Be consistent and treat employees fairly.

- Ensure early identification, management and referral of troubled employees.
- Provide follow-up support to employees when they return to work, if appropriate.

### **3.12 Referral procedures**

The DoE Employee Wellness Policy (2001:16) stipulates the following procedures for the referral process:

- The policy indicates that the individual can contact the EAP practitioners for assistance during office hours and notify the supervisor.
- In the case of a formal referral, the supervisor must consult with the EAP co-ordinator regarding the appropriateness of making a formal referral and how it links with the organisational policies and procedures. Once it has been ascertained that a formal procedure would be an appropriate intervention, employees must be informed that they have seven days in which to consult the EAP. When the therapy is completed, the supervisor should be informed; however, the details of the therapy remain confidential.

### **3.13 Principles of the EAP**

The DoE Employee EAP Policy (2001:9) states the following principles:

#### **3.13.1 Confidentiality**

Employees must be guaranteed that confidentiality will be maintained throughout on every level of the programme.

#### **3.13.2 Protection**

Participation in the programme will not jeopardise the employee's job security, compensation and promotional opportunities.

### **3.13.3 Discipline**

The EAP is not a substitute for the disciplining of employees. Rather, the programme may be used before or in conjunction with disciplinary action, where appropriate.

### **3.13.4 Voluntarism**

The EAP is strictly voluntary and employees should be encouraged to use the service.

## **3.14 EAP pilot project**

The following information is included to illustrate how the DoE undertook a needs analysis. This was to enable it to plan better and to focus on relevant issues.

The number of employees in the DoE made it too difficult for the Department to introduce the EAP. The Department therefore adopted a phased approach. It started piloting the programme in a small district named Xhariep.

From November to December 2004, the EAP component contracted the Careways Group to conduct a survey. The Careways Group used a behavioural wellness profile (BWP) to determine the level of corporate, personal and social functioning. According to the Careways Group (2004:8), a BWP is a self-report suited to providing a baseline assessment of needs for an EAP. If an EAP is implemented, it can be used to measure change over time.

The Careways Group distributed 7 000 questionnaires to employees who were randomly selected from different districts. Three thousand responses were returned. The main findings by the Careways Group indicated to the Department that there was a clear need for an EAP.

From July 2005 to March 2006, the Department used the Careways Group again to pilot the programme in Xhariep District. This is a small district with about 2 220 employees working for the DoE. At the end of the contract, the Careways Group presented the Department with a summary of the usage trends.

According to the report, the services that were used most frequently were legal advice services (17%), the telephone service for emotionally abused (4%), face-to-face counselling (41%) and financial advice services (23%). The calls were mostly self-referrals (88%) with some managerial referrals (11%) (Careways Utilization Report for the EAP, 2006:11). The Careways Report concluded that the problems employees experienced were more personal challenges and not work related.

As a result of the Careways Report, the DoE was able to allocate more funds to the component for the service, which would be phased in across various districts. It also guided the Department to focus strategically on areas where there was a great need.

### **3.15 Conclusion**

It is evident that the EAP is a legitimate structure endorsed by the Public Service Regulations. The Free State DoE complied with the Regulations by establishing an EAP. While formulating the programme, the Department deemed it necessary to develop a policy on the EAP as a guiding document.

The policy focuses on different aspects, which include aims and objectives that clearly guide the EAP on what is to be achieved and the nature of assistance, stipulating clearly the type of service to be provided. The policy also mentions who the beneficiaries of the service are. This chapter also alluded to the EAP principles, which ensure that a professional standard is maintained throughout the practice.

The pilot programme also forms part of the explanation and highlights the usage and trends of the EAP. This assisted the Department to prioritise when executing its plans.

To further pursue the legislative mandate, as stated in the Public Service Regulations, the DoE established an EAP, operating at the provincial level under the auspices of Human Resources, in 2003.

Part six of the Public Service Regulations of 2001 affirms the principle of improvement of the working environment to ensure efficient service delivery to include, amongst others, disability, HIV/AIDS and other health conditions for the benefit of employees and their families. By virtue of such statutes, it is evident that the South African Government has the vision to apply the caring philosophy holistically to include employees and other stakeholders equally. The next chapter contains the interpretation and analysis of data.

## **CHAPTER 4: QUANTITATIVE AND QUALITATIVE RESEARCH FINDINGS ON THE IMPLEMENTATION OF THE EMPLOYEE ASSISTANCE PROGRAMME OF THE DEPARTMENT OF EDUCATION: CASE STUDY OF MOTHEO DISTRICT IN THE FREE STATE PROVINCE**

### **4.1 Introduction**

In this chapter, the researcher presents the research results gathered from the DoE in Motheo District in the Free State Province. Analysis and interpretation of the data will also form part of the description and explanation. For the accurate presentation of the data, this research will be described in the following sections: Methodology, research design, data collection procedure, sampling, data collection instruments and analysis of data in questionnaires and focus groups.

### **4.2 Methodology**

In this study, both quantitative (questionnaires) and qualitative (focus group) methods were employed to generate data. By virtue of applying these two approaches, the data collected are conclusive. In comparing these two approaches, Mears, cited in De Vos et al. (1998:17), cautions that neither of these approaches is better than the other but states that they complement each other. The best approach is to combine them as one single approach can certainly not succeed in encompassing human beings fully (De Vos et al., 1998:17).

The quantitative data were gathered by use of self-administered questionnaires (see annexure A). The raw data were captured onto Microsoft Excel and subsequently converted to Stata (combination of the words 'statistics' and 'data') analytic software version 10 formats and analysed as follows:

- Frequency analysis.
- Descriptive analysis derived from means and standard deviation.
- Cross-tabulation coupled with inferential analysis such as chi-squared and correlation analysis.

The qualitative data were gathered by means of a focus group interview. According to Welman and Krueger (2002:211), raw field notes for the purpose of data analysis



need to be processed. This entails converting the notes into write-ups, which should be intelligible products that can be read, edited for accuracy, commented on and analysed. In this study, field notes were converted into write-ups for analysis. The results of the qualitative method will be presented as descriptive statistics, graphs, cross-tabulation or histograms.

### **4.3 Research design**

The research design employed in this study is implementation evaluation research. According to Mouton (2005:158), implementation evaluation research is a form of applied research aimed at assessing whether EAP interventions have been well conceptualised and properly implemented.

### **4.4 Population**

Grinnell and Williams (1990:118) define population as the totality of persons or objects within which a study is concerned. The population of this study was limited to Motheo District in the Free State DoE, which has 5 500 employees. All categories of employees were included.

### **4.5 Sampling**

Babbie (2004:190) views sampling as a subset of the population that the researcher is interested in studying. The sample size for this study was 10% of the 5 500 employees, and 500 questionnaires were consequently distributed. According to Strydom and De Vos (2002:194), a sample consisting of 10% of a known population has become a convention, which serves as a handy rule of thumb.

### **4.6 Data collection procedure**

Subsequent to the request made to conduct research in the DoE, written permission was received from the Quality Assurance section within the Department. This facilitated the processes of data gathering (personally).

The researcher personally distributed 500 questionnaires to officials in the district, Head Office and schools from 1 October 2008 to 31 October 2008. Only 300 of the 500 questionnaires were returned, of which 45 were not completed. The remaining

255 questionnaires were used for analysis and interpretation.

#### **4.6.1 Questionnaires**

The questionnaires were divided into two sections. The first section dealt with demographics to ascertain the background of employees employed in the DoE. The second section used a rating scale, which, according to Leedy and Ormrod (2009:185), is used when a behaviour, attitude or other phenomenon of interest needs to be evaluated on a continuum of, say 'inadequate' to 'excellent', 'never' to 'always' or 'strongly disapproved' to 'strongly approved'.

#### **4.6.2 Focus groups interviews**

As Welman and Krueger (2002:201) have noted, focus groups consist of a small number of individuals or interviewees that are drawn together for the purpose of expressing their opinion on a specific set of open questions for the purpose of collecting qualitative data. The researcher selected EAP officials exclusively for this purpose as they are seen as 'experts' on the subject under investigation. Seven EAP officials were interviewed.

### **4.7 Quantitative data analysis and interpretation**

Quantitative data were analysed by use of STATA and Microsoft Excel. Information will be represented in terms of frequency tables, histograms, bar charts and pie charts. Demographic variables explains the analysis of variables that relate to responses by experience, service provided by the EAP poor rating, EAP positive impact, EAP marketing and EAP accessibility, but not limited to them. Qualitative data collected by using focus groups interview will be discussed in terms of identified themes.

#### **4.7.1 Demographic variables**

Demographics or demographic data are the characteristics of a sample as used in a study or opinion research. Commonly used demographics include sex, race, age, income, disability, mobility (in terms of travel time to work or number of vehicles available), educational attainment, home ownership, employment status and even location.

**Table 4.1:** List of demographic variables with frequency of respondents and percentages

Variable	Response	Freq	Percent
1.1 Gender	Female	153	60.00
	Male	102	40.00
	<b>Total</b>	<b>255</b>	<b>100.00</b>
1.2 Age	18 to 30	43	16.86
	31 to 40	78	30.59
	41 to 50	100	39.22
	51 to 60	28	10.98
	60+	6	2.35
	<b>Total</b>	<b>255</b>	<b>100</b>
1.3 Race	African	191	74.90
	Coloured	23	9.02
	Indian	1	0.39
	White	40	15.69
	<b>Total</b>	<b>255</b>	<b>100</b>
1.4 Marital status	Single	80	31.37
	Married	168	65.88
	Living together	7	2.75
	<b>Total</b>	<b>255</b>	<b>100</b>
1.5 No. of dependants	One	57	22.35
	Two	129	50.59
	Three	55	21.57
	More	14	5.49
	<b>Total</b>	<b>255</b>	<b>100</b>
1.6 Occupation	Admin clerk	61	23.92
	Cleaner	19	7.45
	Dept. principal	1	0.39
	Educator	69	27.06
	General worker	1	0.39
	Human resource officer	11	4.31
	Messenger	3	1.18
	Office-based educator	79	30.98
	Personal secretary	3	1.18
	Prov. co-ordinator life skills & HIV/AIDS	2	0.78
	Security	1	0.39
	Transport officer	3	1.18
	Learning support facilitator	2	0.78

	<b>Total</b>	<b>255</b>	<b>100.00</b>
1.7 Years of service	0 to 5	24	9.41
	6 to 10	43	16.86
	11 to 15	102	40.00
	16 to 20	58	22.75
	20+	28	10.98
	<b>Total</b>	<b>255</b>	<b>100</b>
1.8 Place of work	District	172	67.45
	Head Office	4	1.57
	School based	79	30.98
	<b>Total</b>	<b>255</b>	<b>100</b>

The relevance of demographic data in this study is to establish, amongst other things, whether utilisation of the programme is determined by gender, age, marital status, occupation, experience and site.

Table 4.1 demonstrates that the sample encompasses 60% women and 40% men, which means that the female utilisation rate is higher than the male. Table 4.1 also demonstrates that 16.86% of the employees are in the age category of 18–30 years, 30.59% are between 31 and 40 years, 39.22% are between 41 and 50 years and 10.98% are between 51 and 60 years. The interpretation in terms of utilisation is that respondents between the ages of 18 and 30 years utilise EAP services less than those who are in the age categories of 31–40 and 41–50. This can be attributed to the fact that they are still young and therefore have not yet been confronted with as many challenges.

The utilisation rate is seen to rise between the age of 31 and 50 years. The assumption is that most of the respondents at this age are married with children and these bring about added responsibilities, which may affect the individual's normal functioning at times.

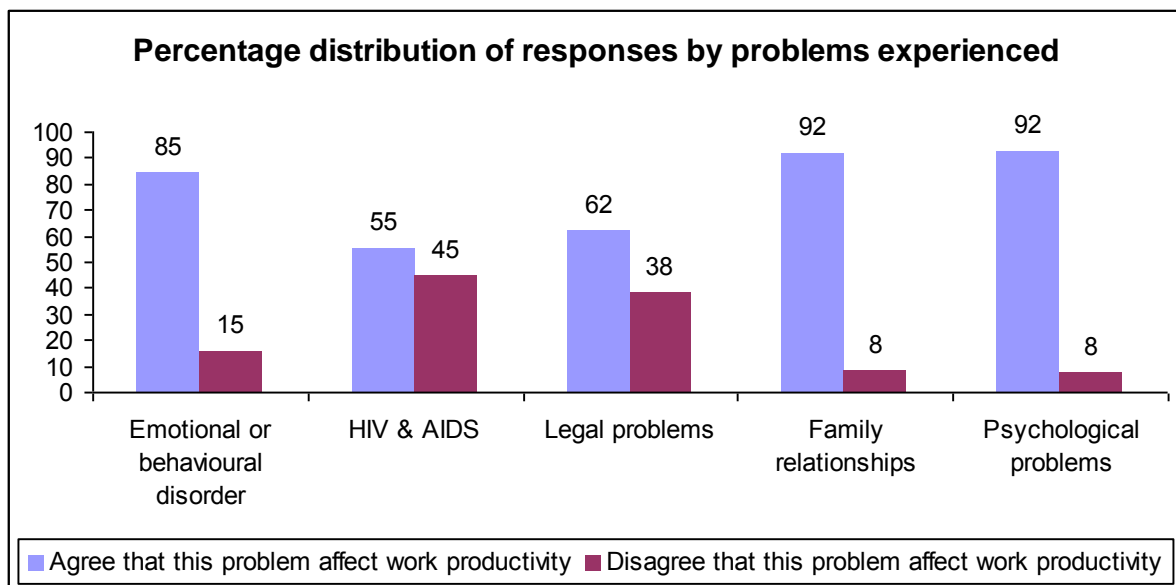
Table 4.1 further shows that Africans constitute 74.9% of respondents, coloured people 9.02%, Indians 0.39% and white people 15.69%. The marital status of respondents is composed as follows: 31.37% single, 65.88% married and 2.75% living together. Respondents who have one dependent account for 22.35%, two

dependents 50.59%, three dependents 21.57% and more than three dependents 5.49%. The number of dependents is one of the factors that can create personal problems and consequently lead to EAP involvement.

Office-based educators constitute 30.98% of respondents, school-based educators 27.06% and administration clerks 23.92%, while the remaining percentage is shared amongst cleaners, human resource officers and personal secretaries. Respondents who have 11–15 years experience account for 40%, followed by 16–20 years of experience at 22.75% and 6–10 years of experience at 16.86%.

#### 4.7.2 Description of other variables

This section describes variables that focus on the EAP, referral by managers (problems experienced by employees), employee perceptions of the EAP and accessibility of the EAP.

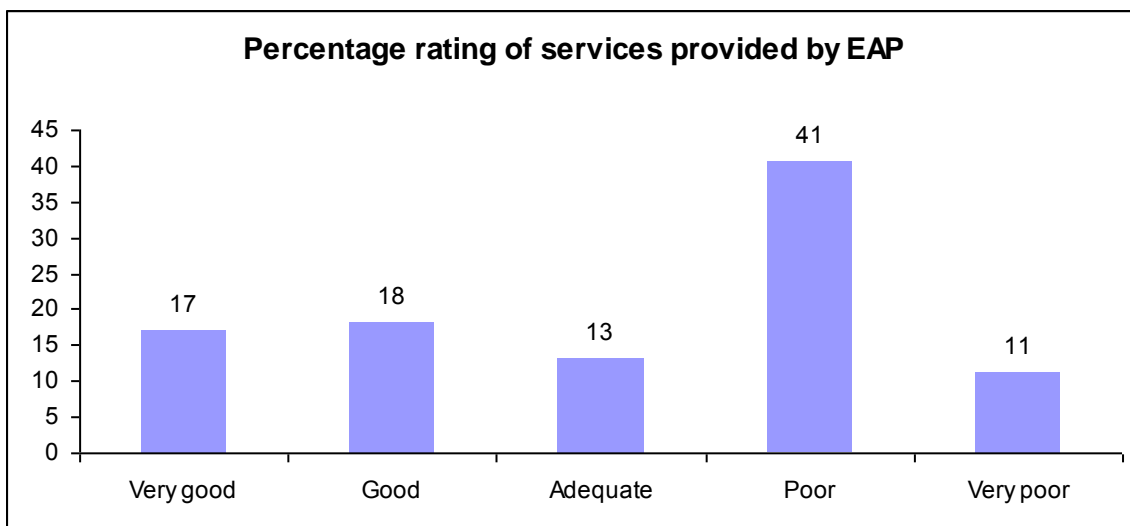


**Figure 4.1:** Percentage distribution of responses by problems experienced

Figure 4.1 shows that family relationships and psychological problems are the leading problems experienced by the respondents, followed by emotional or behavioural disorders and family violence. The highest percentage of respondents who disagree that the problem affects productivity is found for HIV/AIDS and legal

problems.

In Xhariep District, where an EAP pilot project was undertaken in 2005/2006, and in Motheo District, there were similar sentiments, with respondents agreeing that family relationships and psychological problems are the leading problems experienced. The recommendation of the pilot project was considered when the wellness policy was developed. Hence the DoE opted for a combined model according to which counselling is provided by an external service provider and prevention programmes by the EAP section.



**Figure 4.2:** Percentage rating of services provided by the EAP

Figure 4.2 shows that most respondents rated the services provided by the EAP as poor (41%). Poor and very poor constitute a total of 52%, while very good, good and adequate have a total of 48%.

Since most respondents rated the services provided by EAP as poor, further analysis was done whereby the researcher wanted to establish the influence or reasons behind the poor rating. Therefore, the following tables are presented:

**Table 4.2:** EAP service rating by respondents against work experience of respondents in years

		Work experience of respondents in years					
EAP service rating by respondents	Response	0 to 5 yrs	6 to 10 yrs	11 to 15 yrs	16 to 20 yrs	20+ yrs	Total
	Good	15	12	41	34	15	117
	Poor	9	31	61	24	13	138
	<b>Total</b>	<b>24</b>	<b>43</b>	<b>102</b>	<b>58</b>	<b>28</b>	<b>255</b>

Table 4.2 shows that most respondents (61) who had 11–15 years of work experience rated the services rendered by the EAP as poor, followed by those (31) who had 6–10 years of work experience. This shows that the number of years in the service has an influence on the rating of the programme. Respondents with five years experience in the system expected an effective EAP.

**Table 4.3:** Type of service that has more impact versus gender

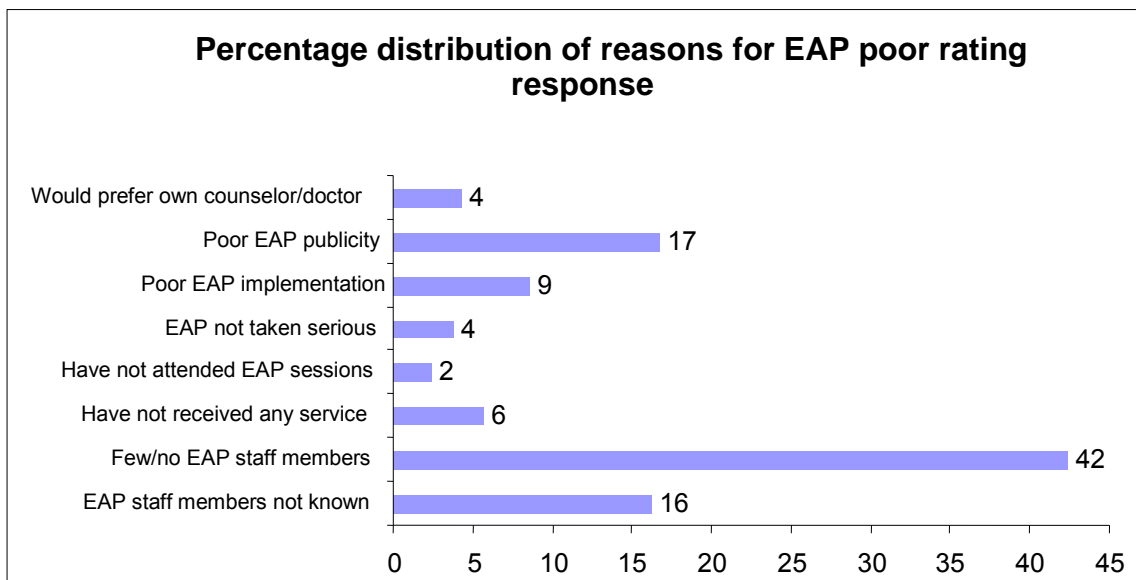
Service	Female	Male	Total
Awareness	61	60	121
	69.9	51.1	121
	25.52%	25.10%	50.63%
Counselling	77	41	118
	68.1	49.9	118
	32.22%	17.15%	49.37%
Total	138	101	239
	138	101	239
	57.74%	42.26%	100

Table 4.3 indicates that the service that is most preferred by both men and women is the awareness service at 50.63%. More women prefer the counselling service at 32.22% as compared to men at 17.15%.

**Table 4.4:** EAP service rating by respondents against location

		Location (work place) of respondents			
		Schoolbased	District offices	Head Office	Total
EAP service rating by respondents	Response				
	Good	54	62	1	117
	Poor	25	110	3	138
	Total	79	172	4	255

Table 4.4 shows that most respondents (110) who work at the district offices rated the services rendered by the EAP as poor. This shows that there is an influence on the rating of the programme by location or place of work of respondents. This could be either because there is not enough publicity regarding the EAP at the district offices or because EAP officials at the district offices are not known or there are no EAP officials.

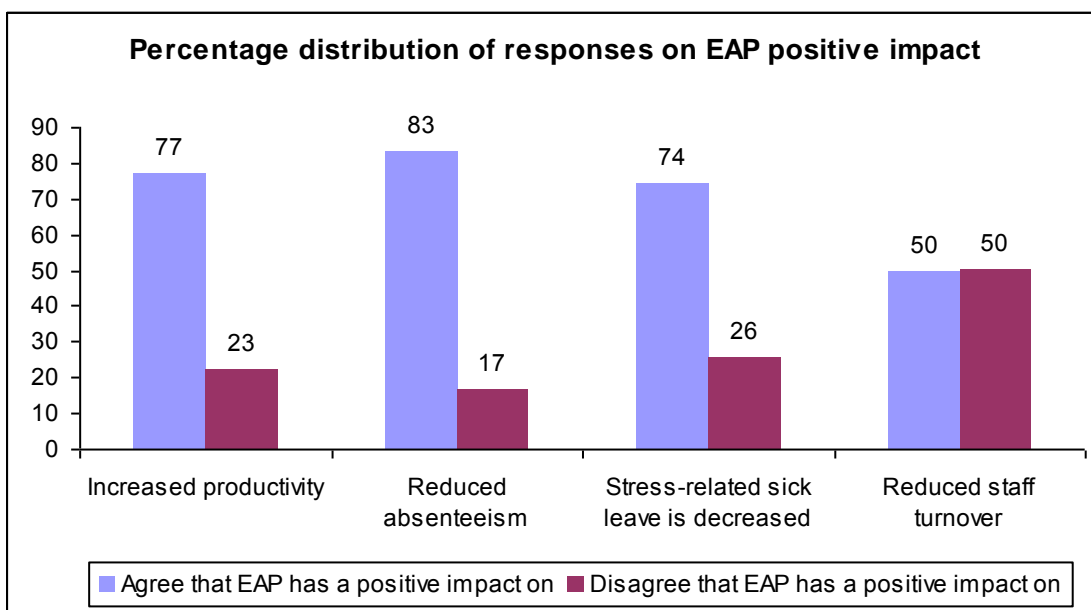


**Figure 4.3:** Percentage distribution of reasons for EAP poor rating response

Figure 4.3 shows that the main reason for respondents' rating the EAP as poor (42%) is that there were few or no EAP staff members in their location or place of



work. Further reasons furnished were poor publicity of the EAP (17%) and the fact that the respondents did not know who the EAP staff members were (16%). Some respondents believed that the EAP was poorly implemented, whereas others stated that they had not received any service from EAP officials. The reasons indicated by the smallest percentages of respondents were that the EAP was not taken seriously (4%), the respondents would prefer their own counsellors/doctors (4%) and the respondents had not attended EAP sessions (2%).

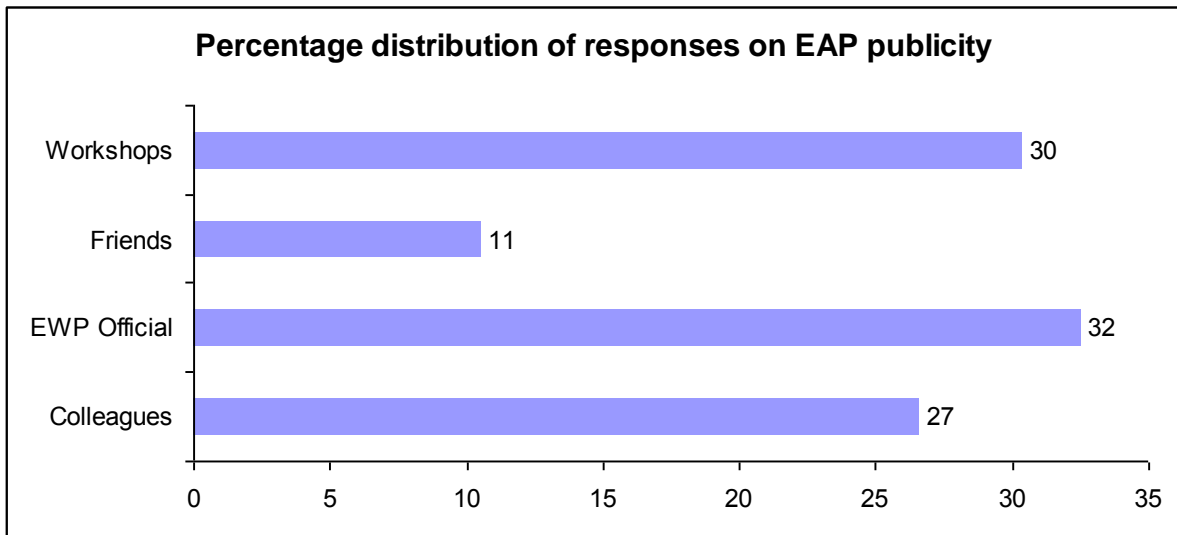


**Figure 4.4:** Percentage distribution of responses on EAP positive impact

Figure 4.4 shows that 83% of the respondents agree that the implementation of EAP has an influence on reduced absenteeism. This is followed by increased productivity at 77% and decrease in stress-related sick leave at 74%. Increased productivity, reduced absenteeism and the reduction of stress-related sick leave are all positive attributes of healthy employees, which is the objective of the EAP. Therefore, respondents hope that if the EAP were to be effectively implemented, the above would be achieved.

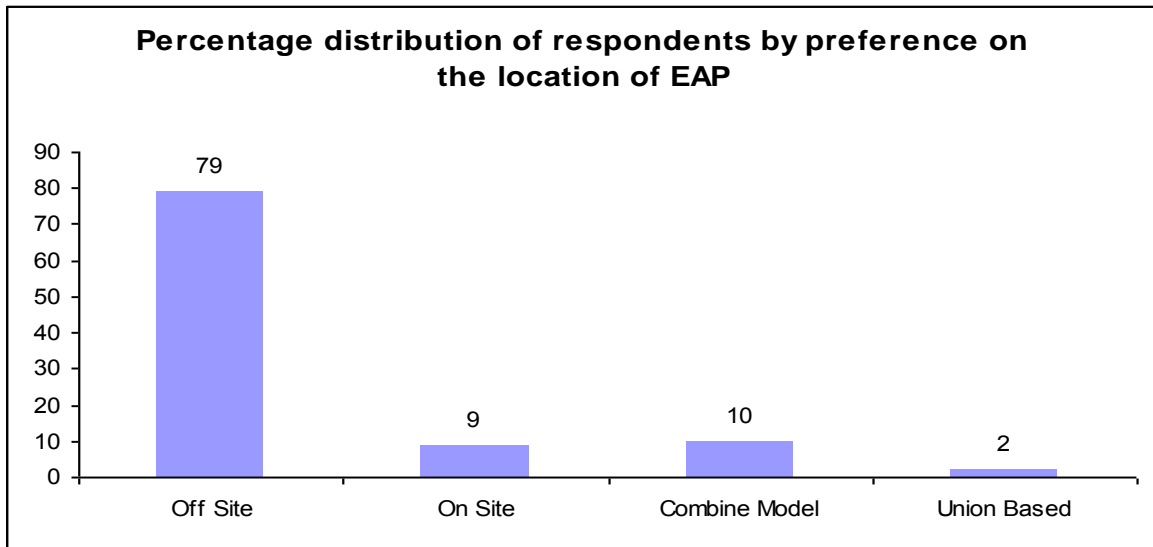
Respondents are equally divided (50% each) as to whether the EAP has a positive impact on the reduction of staff turnover or not. This means that the presence or

absence of the EAP does not influence an employee's decision to seek employment elsewhere.



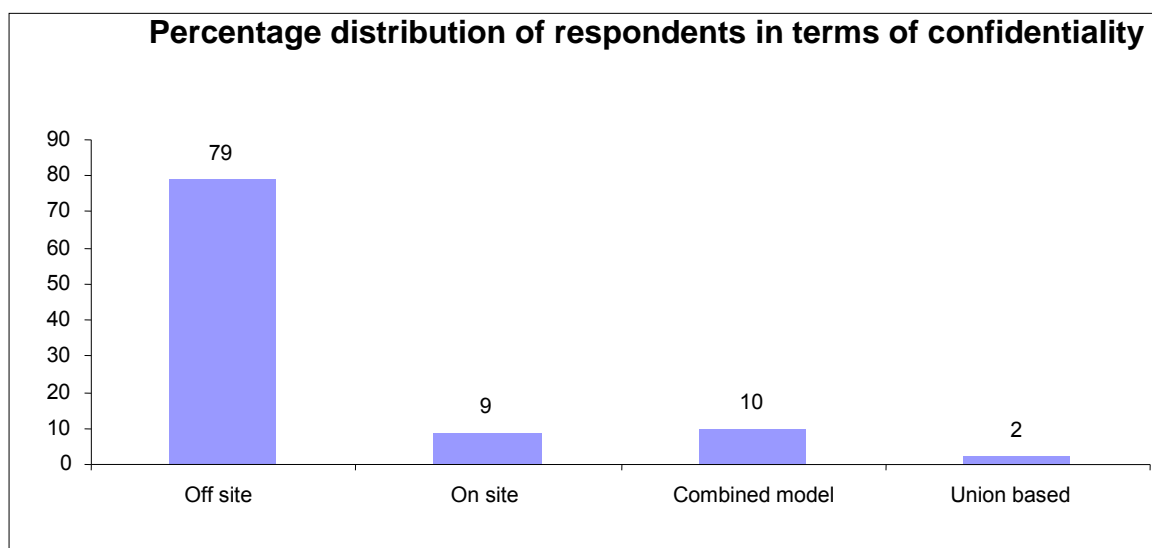
**Figure 4.5:** Percentage distribution of responses on EAP publicity

Figure 4.5 shows that EAP officials at 32% are the leading medium of publicising the EAP, followed by workshops at 30%, then colleagues at 27% and lastly friends at 11%. Respondents have indicated (see Figure 4.5) that EAP officials are the relevant people to address EAP poor publicity. These problems, as indicated in Figure 4.4, were raised by respondents as some of the influencing factors for rating the EAP as poor. Figure 4.5 further indicates that workshops also are effective in publicising the EAP.



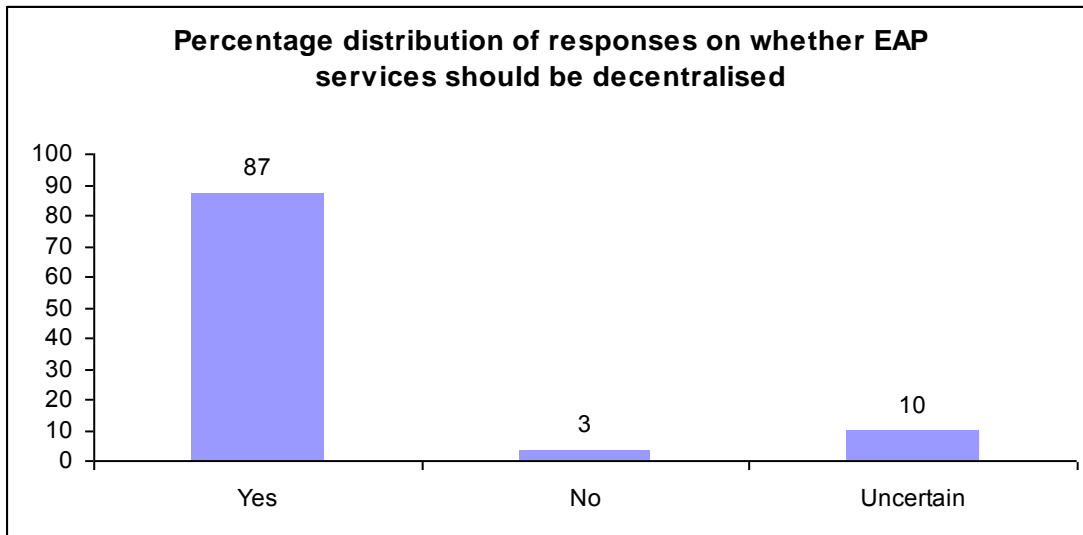
**Figure 4.6:** Percentage distribution of respondents by preference on the location of the EAP

Figure 4.6 shows that most of the participants (79%) prefer that the EAP be located off-site, while 9% prefer the service to be on-site. A combined model is preferred by 10% of respondents, and 2% prefer that the EAP be based at their union sites. The reasons cited may be related to uncertainty about confidentiality and limited privacy in the workplace. In line with the arguments of Ligon and Yegidis (1988:194), a potential barrier to EAP utilisation is a lack of employee confidentiality.



**Figure 4.7:** Percentage distribution of respondents in terms of confidentiality

Figure 4.7 shows that respondents prefer the off-site model for confidentiality. In the literature, confidentiality is said to be crucial because if employees feel that their problems are not going to be treated with confidentiality according to the on-site model, they will not use the service.



**Figure 4.8:** Percentage distribution of responses on whether EAP services should be decentralised

Figure 4.8 shows that most respondents at 87% prefer EAP services to be decentralised. The reason behind this may be that there is a delay in service delivery. Urgent cases cannot be attended to promptly, especially in areas allocated to the EAP section.

#### 4.7.3 Assessment of the effectiveness of the EAP

The probability values shown in the tables that follow are all less than 0.05 ( $H_0$  is rejected) and the expected frequencies on each test of independence were greater than five (if less than five, it does not satisfy Pearson criteria, meaning one does not accept the test). Therefore  $H_0$  is rejected, which means that the two variables are dependent. The following tables show the variables that affect respondents' judgement about EAP effectiveness.

Key information for the following tables: For each cell there are three numbers. The first number is a frequency, meaning the count for the number of respondents. The second number represents expected frequency; this is calculated by the STATA

programme that is used in this study to analyse data. The third number is the cell percentage and is also calculated by the STATA programme. The last row is a total and the highlighted number is a row percentage.

**Table 4.5:** Respondents' assessment of EAP *implementation* against respondents' *knowledge* of the EAP in percentage

	Response	Respondents' <i>knowledge</i> of the EAP in percentage		<b>Total</b>
		No	Yes	
Respondents' assessment of EAP <i>implementation</i>	Good	12	50	62
		9.5	52.5	62
		4.71	19.61	<b>24.31</b>
	Poor	13	134	147
		22.5	124.5	147
		5.10	52.55	<b>57.65</b>
	Uncertain	14	32	46
		7	39	46
		5.49	12.55	18.04
		39	216	255
		<b>15.29</b>	<b>84.71</b>	<b>100</b>
	Pearson chi2 (2) = 13.6503 Pr = 0.001			

Table 4.5 shows that respondents' assessment of the EAP depends on respondents' knowledge of the EAP. Most respondents who indicated that there was poor EAP implementation also indicated that they had an understanding of the EAP, which means that their opinions and judgment on EAP assessment are reliable.

**Table 4.6:** Respondents' assessment of EAP *implementation* against EAP *service rating* by respondents

Respondents' assessment of EAP	Response	EAP <i>service rating</i> by respondents		<b>Total</b>
		Good	Poor	

<i>implementation</i>	Good	49	13	62	
		28.4	33.6	62	
		19.22	5.10	<b>24.31</b>	
	Poor	35	112	147	
		67.4	79.6	147	
		13.73	43.92	<b>57.65</b>	
	Uncertain	33	13	46	
		21.1	24.9	46	
		12.94	5.10	18.04	
		117	138	255	
		<b>45.88</b>	<b>54.12</b>	<b>100</b>	
	Pearson chi2 (2) = 68.6685 Pr = 0.000				

Table 4.6 shows that the respondents' assessment of EAP implementation depends on EAP service rating by the respondents. Most respondents who rated the EAP service as poor also rated implementation of the EAP as poor. This means that services rendered by EAP staff affect respondents' assessment negatively. However, most of the responses are also related to the fact that EAP staff members are not known or do not exist in that location, which means that EAP services provided may not necessarily be of a poor standard.

**Table 4.7:** Respondents' assessment of EAP *implementation* against whether respondents are in a *managerial position*

Respondents' assessment of EAP <i>implementation</i>	Response	Respondent is in a <i>managerial position</i>		Total
		No	Yes	
Good		42	20	62
		48.6	13.4	62
		16.47	7.84	<b>24.31</b>
Poor		128	19	147
		115.3	31.7	147
		50.20	7.45	<b>57.65</b>

		30	16	46
		36.1	9.9	46
	Uncertain	11.76	6.27	18.04
		200	55	255
		<b>78.43</b>	<b>21.57</b>	<b>100</b>
Pearson chi2 (2) = 15.4279 Pr = 0.000				

Table 4.7 shows that respondents' assessment of poor EAP implementation depends on whether respondents are in a managerial position. Most respondents who rated EAP implementation as poor were not in managerial positions. This may be because these employees were not managers and never had a chance to rate the performances of other people or programmes. The other factor may be that they did not have exposure to the EAP as managers.

**Table 4.8:** Respondents' assessment of EAP *implementation* against whether *personal problems* impact negatively on work performance

	Response	Do <i>personal problems</i> impact negatively on work performance?		Total
		No	Yes	
Respondents' assessment of EAP <i>implementation</i>	Good	24	38	62
		12.4	49.6	62
		9.41	14.90	<b>24.31</b>
	Poor	12	135	147
		29.4	117.6	147
		4.71	52.94	<b>57.65</b>
	Uncertain	15	31	46
		9.2	36.8	46
		5.88	12.16	18.04
		51	204	255

		<b>20</b>	<b>80</b>	<b>100</b>
Pearson chi2 (2) = 31.0076 Pr = 0.000				

Table 4.8 shows that respondents' assessment of EAP implementation depends on personal problems that impact negatively on work performance. The assumption is that most respondents who rated EAP implementation as poor were of the opinion that personal problems impacted negatively on work performance.

**Table 4.9:** Respondents' assessment of EAP *implementation* against whether the DoE *cares about its employees*

	Response	The DoE <i>cares about its employees</i>			Total
		No	Unsure	Yes	
Respondents' assessment of EAP <i>implementation</i>	Good	27	14	21	<b>62</b>
		27.5	25	9.5	<b>62</b>
		10.59	5.49	8.24	<b>24.31</b>
	Poor	72	63	12	<b>147</b>
		65.1	59.4	22.5	<b>147</b>
		28.24	24.71	4.71	<b>57.65</b>
	Uncertain	14	26	6	<b>46</b>
		20.4	18.6	7	<b>46</b>
		5.49	10.20	2.35	18.04
		113	103	39	255
		<b>44.31</b>	<b>40.39</b>	<b>15.29</b>	<b>100</b>
	Pearson chi2 (4) = 29.8130 Pr = 0.000				

Table 4.9 shows that respondents' assessment of EAP implementation depends on whether the respondents think that the DoE cares about its employees. Most respondents who indicated that they did not think that the DoE cared about its employees also rated EAP implementation as poor. The fact that the EAP as a programme to take care of employees' needs is not provided with adequate human capacity might be a contributing factor to these perceptions.



**Table 4.10:** Respondents' assessment of EAP *implementation* against whether respondents *feel valued* by the DoE

	Response	Respondents <i>feel valued</i> by the DoE			Total	
		No	Unsure	Yes		
Respondents' assessment of EAP <i>implementation</i>	Good	33	7	22	<b>62</b>	
		39.9	11.7	10.5	<b>62</b>	
		12.94	2.75	8.63	<b>24.31</b>	
	Poor	112	20	15	<b>147</b>	
		94.5	27.7	24.8	<b>147</b>	
		43.92	7.84	5.88	<b>57.65</b>	
	Uncertain	19	21	6	<b>46</b>	
		29.6	8.7	7.8	<b>46</b>	
		7.45	8.24	2.35	18.04	
		164	48	43	255	
		<b>64.31</b>	<b>18.82</b>	<b>16.86</b>	<b>100</b>	
	Pearson chi2 (4) = 46.7931 Pr = 0.000					

Table 4.10 shows that respondents' assessment of EAP implementation depends on whether respondents feel valued by the department. Most respondents who indicated that they did not feel valued by the department also rated EAP implementation as poor. The same view as in Table 4.9 can be expressed here.

**Table 4.11:** Effectiveness of the EAP *if unions are involved* against gender

	Response	Gender		Total
		Female	Male	
Effectiveness of the EAP <i>if unions are involved</i>	No	27	31	<b>58</b>
		34.8	23.2	<b>58</b>
		10.59	12.16	<b>22.75</b>
	Uncertain	42	20	<b>62</b>
		37.2	24.8	<b>62</b>
		16.47	7.84	<b>24.30</b>
	Yes	84	51	<b>135</b>
		81	54	<b>135</b>

		32.94	20	52.94
		153	102	255
		<b>60</b>	<b>40</b>	<b>100</b>
Pearson chi2 (2) = 6.1969 Pr = 0.045				

Table 4.11 shows that the opinion that the EAP will be effective if unions are involved depends on whether this view is expressed by a man or woman. Most respondents who indicated that the EAP would be effective if unions were involved were women. The assumption is that the majority of women have inherited a position of powerlessness because of their socialisation; therefore, they feel that if the union is involved, the programme can be effective because they will be represented in some work-related matters.

**Table 4.12:** Effectiveness of the EAP if *unions are involved* against *service in years*

	Response	<i>Service in years</i>					<b>Total</b>
		0 to 5	6 to 10	11 to 15	16 to 20	20+	
Effectiveness of the EAP if <i>unions are involved</i>	No	11	13	24	7	3	<b>58</b>
		5.5	9.8	15.3	13.2	6.4	<b>58</b>
		4.31	5.10	9.41	2.75	1.18	<b>22.75</b>
	Uncertain	3	9	30	11	9	<b>62</b>
		5.8	10.5	24.8	14.1	6.8	<b>62</b>
		1.18	3.53	11.76	4.31	3.53	<b>24.31</b>
	Yes	10	21	48	40	16	<b>135</b>
		12.7	22.8	35.5	30.7	14.8	<b>135</b>
		3.92	8.24	18.82	15.69	6.27	<b>52.94</b>
	<b>Total</b>	<b>24</b>	<b>43</b>	<b>102</b>	<b>58</b>	<b>28</b>	<b>255</b>
		<b>9.41</b>	<b>16.86</b>	<b>40</b>	<b>22.75</b>	<b>10.98</b>	<b>100</b>
	Pearson chi2 (8) = 19.7454 Pr = 0.011						

Table 4.12 shows that the opinion that the EAP will be effective if unions are involved depends on the number of years of service of the respondents. Most respondents

are in the category of 11–15 years of service. Out of the total of 102 respondents in the 11–15 years of service category, 48 respondents, which are the most in the category, agreed that involvement by the unions would assist in the effectiveness of the EAP. The assumption is that employees believe in union involvement and consider the union to have a powerful collective voice that may be used to communicate to management their dissatisfaction and frustrations.

**Table 4.13:** Effectiveness of the EAP if *unions are involved* against *rating of EAP services provided*

	Response	<i>Rating of EAP services provided</i>		<b>Total</b>
		Good	Poor	
Effectiveness of the EAP if <i>unions are involved</i>	No	18	40	<b>58</b>
		26.6	31.4	<b>58</b>
		7.06	15.69	<b>22.75</b>
	Uncertain	30	32	<b>62</b>
		28.4	33.6	<b>62</b>
		11.76	12.55	<b>24.31</b>
	Yes	69	66	<b>135</b>
		61.9	73.1	<b>135</b>
		27.06	25.88	52.94
		117	138	255
		<b>45.88</b>	<b>54.12</b>	<b>100</b>
	Pearson chi2 (2) = 6.7927 Pr = 0.033			

Table 4.13 shows that the view that if unions are involved the EAP will be effective depends on the rating of EAP services provided to the respondents. Most respondents who agreed that the EAP would be effective if unions were involved also rated the EAP services provided as good.

**Table 4.14:** Effectiveness of the EAP if *unions are involved* against *employee and supervisor relations*

	Response	<i>Employee and supervisor relations</i>			<b>Total</b>	
		No	Unsure	Yes		
Effectiveness of the EAP if <i>unions are involved</i>	No	21	0	37	<b>58</b>	
		21.4	5.9	30.7	<b>58</b>	
		8.24	0	14.51	<b>22.75</b>	
	Uncertain	26	0	36	<b>62</b>	
		22.9	6.3	32.8	<b>62</b>	
		10.20	0	14.12	<b>24.31</b>	
	Yes	47	26	62	<b>135</b>	
		49.8	13.8	71.5	<b>135</b>	
		18.43	10.20	24.31	52.94	
		94	26	135	255	
		<b>36.86</b>	<b>10.20</b>	<b>52.94</b>	<b>100</b>	
	Pearson chi2 (4) = 26.5568 Pr = 0.000					

Table 4.14 shows that employee and supervisor relations affect respondents' opinion on whether if unions are involved, there will be effectiveness of the EAP. Most respondents who thought that they could talk to their supervisor when they experienced work-related problems also indicated that if unions were involved in the EAP processes, the EAP would be effective. Employees in general regard unions as the mouthpiece of employees. The assumption by employees is that when unions are involved, treatment by supervisors will be fair, just and respectful. The other factor is that union members are regarded as being well informed about labour issues.

**Table 4.15:** EAP provision for *standard guidelines and uniformity* against respondents' *knowledge* of the EAP

	Response	Respondents' <i>knowledge</i> of the EAP		Total
		No	Yes	
EAP provision for <i>standard guidelines and uniformity</i>	Agree	7	36	<b>43</b>
		6.6	36.4	<b>43</b>
		2.75	14.12	<b>16.86</b>
	Disagree	12	30	<b>42</b>
		6.4	35.6	<b>42</b>
		4.71	11.76	<b>16.47</b>
	Uncertain	20	150	170
		26	144	170
		<b>15.29</b>	<b>84.71</b>	<b>100</b>
	Pearson chi2 (2) = 7.3820 Pr = 0.025			

Table 4.15 shows the respondents' knowledge on EAP provision for standard guidelines and uniformity. Most respondents indicated that they were uncertain as to whether the EAP provided for standard guidelines and uniformity. The same respondents indicated that they did have knowledge of what the EAP was. The knowledge claimed by respondents may be just at the surface, and they may not have clear understanding of what the EAP entails.

**Table 4.16:** EAP provision for *standard guidelines and uniformity* against respondents' rating of EAP *services provided*

EAP provision for <i>standard guidelines and uniformity</i>	Response	Respondents' rating of EAP <i>services provided</i>		Total
		Good	Poor	
Agree		32	11	<b>43</b>
		19.7	23.3	<b>43</b>

		12.55	4.31	<b>16.86</b>
	Disagree	20	22	<b>42</b>
		19.3	22.7	<b>42</b>
		7.84	8.63	<b>16.47</b>
	Uncertain	65	105	<b>170</b>
		65	92	<b>170</b>
		25.49	41.18	66.67
		117	138	255
		<b>45.88</b>	<b>54.12</b>	<b>100</b>
	Pearson chi2 (2) = 18.1565 Pr = 0.000			

Table 4.16 shows that most respondents have rated the service implementation of EAP as poor and that they are uncertain of EAP provision for standard guidelines and uniformity. Since it was shown on EAP services previously that some EAP staff members are not known and other locations do not have dedicated EAP staff, most respondents have rated the EAP poorly and it is evident from Table 4.16 that they do not even know whether the EAP has guidelines.

**Table 4.17:** EAP provision for *standard guidelines and uniformity* against *employee referral by manager*

EAP provision for <i>standard guidelines and uniformity</i>	Response	As a manager have you referred any employee?		Total
		No	Yes	
Agree		33	10	<b>43</b>
		35.6	7.4	<b>43</b>
		12.94	3.92	<b>16.86</b>
Disagree		23	19	<b>42</b>
		34.8	7.2	<b>42</b>
		9.02	7.45	<b>16.47</b>
Uncertain		155	15	<b>170</b>

		140.7	29.3	<b>170</b>
		60.78	5.88	66.67
		211	44	255
		<b>82.75</b>	<b>17.25</b>	<b>100</b>
Pearson chi2 (2) = 32.5839 Pr = 0.000				

Table 4.17 shows the EAP provision for standard guidelines and uniformity and employee referral by managers. Since most of the respondents were not in managerial positions, they indicated that they were uncertain whether the EAP had a provision for standard guidelines and uniformity. The assumption is that policy matters in different organisations are seen as management issues and that the knowledge about policy issues of employees who are not in managerial positions is limited. Hence, there is uncertainty on whether the EAP has provision for standard guidelines.

#### **4.8 Analysis and interpretation of qualitative data (focus group)**

The qualitative method was applied through the focus group interview. Welman and Krueger (2002:211) state that what is fundamental in collecting data via focus groups is to identify themes before, after and during the data collection. Identified themes assist the researcher in analysing qualitative data from interviews.

A structured questionnaire (see annexure B) formulated around themes was used in the interview to facilitate the discussion. On 11 October 2008 in the Deputy Director's office, the researcher met with seven EAP officials and engaged them in a discussion about the EAP section. With the permission of the group, the researcher used a tape recorder to record the discussion. The researcher interpreted data from the themes and provides an explanation as follows:

##### **4.8.1 Policy implementation**

The feedback from the focus group participants from the EAP section, which constitute seven officials, was that the EAP policy has only been implemented to a

certain extent. The following were stated as challenges that hinder optimal implementation:

- Limited capacity.
- Budget constraints.
- Lack of commitment by senior managers.
- Lack of support by other sections within the Department.
- Difficulties in implementing marketing strategy.
- Reactive approach and therefore no proactive management of workplace problems or envisioning of potential workplace programmes.

#### **4.8.2 Training and development of the EAP officials**

The participants in the focus group were confident that they had the necessary training and skills on stress management, family therapy, the development of substance abuse programmes and facilitation skills for the job but acknowledged that there was room for development in the EAP section. The focus group participants indicated that they still needed empowerment in areas that were not core to their academic training.

The EAP officials indicated that in their daily interaction with employees, multiple problems surfaced that were not areas of their competence. These included but were not limited to legal and financial problems. Therefore, development in such areas was of the utmost importance for them to deliver a comprehensive package to individual employees and avoid unnecessary referrals.

#### **4.8.3 Management support**

The commitment and leadership of top management have proven to be one of the most important aspects influencing the successful functioning of the EAP. The focus group participants felt that top managers were not seriously committed to the strengthening of the EAP. This has resulted in sections within the Department not being supportive of EAP activities. EAP officials in the focus group indicated that their activities should be endorsed by top management, for without the necessary support from top management, the EAP is viewed as a form of entertainment or a second-rate, marginally effective activity. The EAP officials frequently echoed the



need for financial support during the focus group interview. A sufficient budget is needed to fully carry out EAP activities.

#### **4.8.4 Outsourcing of the EAP**

The participants in the focus group interview related the historical development of the EAP and stated that the EAP in the DoE came about as a result of a needs analysis that was conducted by a private company. In the focus group interview, it was established that one district was pilot tested for the implementation of the EAP. The findings confirmed that employees of the DoE needed EAP services. The participants were of the opinion that the outcome of the pilot project influenced the Department to expand the service to all five districts in the Free State Province.

Through the findings it was clear that the most frequently used service was counselling and that influenced the Department in outsourcing counselling as the regularly used service. The counselling service was outsourced to two companies, namely ICASAWELLCORP and RTM Joint Venture. The latter terminated its contract at the beginning of 2008. According to Arthur and Arthanasiades (2008:175), negative preconceptions of counselling (counselling is attended by failures in life) had a discouraging effect, making participants sceptical of or hesitant towards the use of workplace counselling. In support of Arthur and Arthanasiades, the focus group indicated that the suggestion of outsourcing, as outlined in the pilot study, was implemented but that employees were given an option (to use either external or internal services) to address their perception of counselling in the workplace. Therefore, outsourcing of some functions of the EAP may yield positive results for both the employee and employer. The implication is that people will have a choice in terms of the kind of service that they need.

The focus group indicated that the DoE benefited a great deal through contracting an external service provider. The EAP officials indicated during the focus group interview that the section screens all cases before making a referral. Quarterly meetings are held between the EAP officials and service providers. During these meetings, the service provider gives feedback of all referred cases. It is through these meetings that the EAP section is able to evaluate the performance of the

service provider. During the focus group interview, it was established that there is 100% client satisfaction with service delivery, that referred cases are attended to immediately and that the results are always positive. At times, the service provider operates outside its jurisdiction without any extra cost for services delivered. Focus group participants also view the involvement of a service provider as beneficial to the employees in terms of confidentiality.

From the participants, it was clear that the DoE is not intending to decentralise services in the near future. This section with limited resources is left to devise a strategy on how it will attend to all five districts.

Therefore, as a collective, the EAP section has decided to allocate one official to service each district. The EAP officials stated that the current situation is not cost effective because of the distance between Motheo District and the other districts. If an official from Motheo District services Thabomofutsanyana District, which is 350 km from Motheo District, most of the time is spend on travelling.

#### **4.8.5 Programme evaluation (2009–2010)**

Participants in the focus group indicated that the goals and objectives for the year 2009/2010 were not fully achieved due to the loaf human capacity. Presently the EAP section operates with seven officials, but in the staff establishment the number of officials reflected is 15. The resignation of one of the service providers was another setback. These challenges are seen as a stumbling block, as from time to time plans within the section need to be changed to address a shortage of personnel, thus disrupting programmes.

During the interview with the focus group they indicated that the target population of Motheo District alone is 5 500. This means that 5 500 persons need to be served by one EAP official alone. The population includes district officials and educators in 327 schools, spread throughout the district, some of them farm schools with a distance of 200 km estimated from Motheo.

During the interview with the focus group, the participants stated the following as challenges faced by the DoE in the Free State Province:

- A lack of personnel. The EAP section caters for the whole province, involving 32 000 employees, and it functions with a skeleton structure of seven officials. Considering the number of employees to be catered for, preventative programmes are not effective.
- One of the service providers, RTM Joint Venture, has ceased its services, which were rendered in three districts, namely Xhariep, Thabo Mofutsanyane and Fezile Dabi. This has negative implications for the EAP section as it increases the caseload for these officials. At present, the EAP officials are supposed to render services to those areas; these are an addition to the workload that they have. It also become additional work for ICASAWELLCORP to service these areas as per service level agreement (meaning that ICASAWELLCORP is bound to service only what is in the contract).
- The availability of funds, for example cost containment, also has a bearing on service delivery for the EAP section.

The focus group participants stated the following as achievements of the EAP section:

- EAP policy is developed and implemented.
- A 24-hour telephone counselling service is effective, as it is delivered by an external service provider and clients are receiving prompt service.
- The EAP section engaged in negotiations with wellness centres, such as Super Sport and Virgin Active, which enables the employees of the DOE to receive discount upon registration with these fitness or wellness centres.
- Awareness and education programmes are in place for nutrition, weight control, medical check-ups, life style and chronic diseases.
- Systems are in place for dissemination of medical information electronically and in print for all employees.
- Health professionals, such as dietitians, nurses and doctors, are

invited to wellness days to provide information and education on health and wellness issues.

- Prevention and curative programmes for managing emotional wellness are in place to enhance the emotional intelligence, self-esteem, optimism, sense of coherence and resilience of employees.
- Programmes are established to promote social, financial and spiritual wellness.

#### **4.9 Conclusion**

The focus of the study was to investigate the effective implementation of the EAP in Motheo District of the Free State DoE. The study elicited a positive response, namely 255 out of 500 questionnaires were completed. The focus group meeting was held with all officials in the section with maximum participation.

Triangulation is a method regarded to be more reliable because of its nature of generating responses on both qualitative and quantitative data. The fact that questionnaires as well as a focus group were used means that more insight was gained into the effectiveness of the implementation of the EAP.

Participants in general stated that they were aware of the existence of the EAP and should the need arise for using the services of the EAP, they would do so. The focus group participants alluded to the fact that their invisibility was due to a lack of personnel. The following chapter will evaluate in detail the process of implementation and the effectiveness of the EAP.

## **CHAPTER 5: EVALUATION OF THE IMPLEMENTATION PROCESS AND EFFECTIVENESS OF THE EAP**

### **5.1 Introduction**

An effective organisation strives to improve its service conditions by continuously evaluating its service and activities. To ensure accountability, an organisation needs to engage in self-evaluation in order to review its own activities and goals. This exercise will result in the organisation's modifying its programme goals and directions. Therefore, the organisation can develop and maintain the flexibility needed to respond to an ever-changing environment.

The purpose of this chapter is to evaluate the EAP as one of the programmes implemented within the DoE. The fundamental function of evaluation is to provide data on programme effectiveness.

This chapter evaluates the implementation process and effectiveness of the EAP. It synthesises the theory discussed in Chapter 2 with the practical implementation of the EAP in Chapter 3, which is a case study of the implementation of the EAP in Motheo District. In Chapter 3 the findings of the baseline study will be highlighted, which will indicate whether any progress has been made. It also reflects on the findings in Chapter 4.

The EAP practice in Motheo District adopts the combined model whereby the approaches of both the on-site and off-site models of discharging the EAP functions are adopted. This study focused on evaluating the EAP in the context of the combined model approach.

### **5.2 Evaluation approach**

Csiernik, cited in Naicker and Foucher (2003:23), is of the opinion that more has been written about how evaluation research into EAPs should be carried out. He further states that there were failures and shortcomings in the evaluation of the research on what has already been done.

Masi (2001:30) also found that there is paucity in EAP evaluation research; therefore, there is a demand for evidence-based evaluation of EAP effectiveness that demonstrates an improvement in employees' psychological functioning and performance. Naicker and Foucher (2003:25) concur that most comprehensive evaluation studies in the past have focussed on the treatment of alcoholism in industry, with few addressing the broad-based EAP concept or the numerous other problems that an employee might present with.

Masi, cited in Naicker and Foucher (2003:27), is of the opinion that there are other factors that contribute to the paucity of EAP research, including issues of confidentiality and a lack of performance standards to measure EAP effectiveness. Arthur (2000:553) states that numerous researchers have identified the necessary components of an ideal EAP evaluation, but as Csiernik (2004:37) notes, in the literature, considerably more articles focus on how such research should be conducted than on the actual research.

The criteria for a satisfactory study should include the collection of uniform and standardised data that will allow comparison with other studies; a true experimental research design; the inclusion of employees who use other kinds of mental health service, linking the mental health status of individuals with their counselling utilisation rates; the use of adequate control groups; collection of data at least three years prior to and three years following the EAP intervention; and random assignment of employees to different treatment and nontreatment conditions. To date, however, there is no single study that meets all these criteria.

Having stated the above methodological constraints on evaluation research, it is important to note that this research on the evaluation of EAP effectiveness can nevertheless proceed on a smaller scale. According to Jerrel and Rightmyer (1998:70) several evaluation research studies have been conducted on EAPs.

Naicker and Foucher (2003:29) further state that evaluation is the systematic and objective assessment of an ongoing or completed project or programme or policy, its design and implementation. Evaluation is the comparison of the actual

project/activities against agreed strategic plans. It looks at what the programme has set out to do and what it has accomplished. It looks at the following:

- What the programme has set out to do: This entails the goal that the section has set for itself, for example reducing absenteeism by 20%.
- What has been accomplished: This focuses primarily on the achievements in relation to the goals that have been set; for example, did the EAP manage to reduce absenteeism by 20%?
- How the EAP has accomplished its goals: This entails the approach, method and strategies employed to reach goals and establish the effectiveness of the programme.

Naicker and Fouche (2003:25) state that the organisation or department must set itself performance targets and develop clear strategies on how to achieve such performances.

In accordance with the discussion above, the primary objective of this chapter is to evaluate the EAP as a programme implemented in the Motheo District of the DoE over a one-year period (2009/2010) in terms of its implementation and effectiveness. In an attempt to achieve this, the following objectives were formulated:

Implementation: To measure how well the programme is operating.

Utilisation: To measure how well the programme is utilised.

Effectiveness: To measure how well the output and objectives of the department have been achieved.

Naicker (2002:27) refers to programme evaluation as the logical assessment of a programme to determine whether and/or how a programme is realising its goal and objectives. He further states that this assesses in depth the relevance and effectiveness of the programme.

### **5.3 Compliance with legislation**

The Constitution (Bill of Rights, Section 9) states that everyone has the right to equal protection and full enjoyment of all rights and freedom. One cannot be discriminated against on the basis of, amongst others, disability. In an ideal situation, buildings should be accessible to disabled people to facilitate their mobility. In the DoE, because most of the buildings are rented, changes to the physical environment are not possible and therefore compliance is difficult.

In Chapter 3 the Basic Conditions of Employment Act describes working conditions such as working hours, leave and public holidays. The ideal situation will be that employees' working conditions are structured in such a way that each employee works the prescribed eight hours per day. If employees are working prescribed hours, they will be more focused and therefore become more productive as they will be attending to a manageable workload. The practical situation in the DoE is that employees are working beyond the prescribed hours due to lack of human capacity in all sections in the DoE. Therefore, the Department fails to comply with legislation requirements.

The Occupation, Health and Safety Act stipulate that the employer should ensure that employees are protected from hazardous effects. 'Hazard' according to the act means a source of exposure to danger. In an ideal situation, the employer must ensure the safety of the employees by taking precautionary measures. In the DoE, adherence is difficult as most of the buildings are leased and not properly maintained

### **5.4 Programme performance evaluation**

A programme is a set of government activities that delivers the products of government. These products are complex outputs and outcomes and include governance, justice, safety and security, development impetus, social change and services. In the DoE, there are eight programmes, each programme defined according to its subprogramme objectives. The programme to be evaluated is Programme 1, which is Administration, of which the EAP is a subprogramme.



To evaluate the EAP as a subprogramme, the researcher will use two types of evaluation, namely process-based evaluation and goal-based evaluation, which will be discussed later in the chapter. Rossi et al. (2004:171) state that programme process evaluation (widely known as implementation evaluation) ascertains the operation and utilisation of programmes. Goal-based evaluation, according to Masi (2001:56), evaluates the extent to which programmes are meeting predetermined goals and objectives.

#### **5.4.1 Process-based evaluation or implementation evaluation**

Processes-based evaluation focuses on the situation before the intervention (baseline), during the intervention and after the intervention. In support of Rossi et al. (2004:171), MacNamara (2005:7) states that process-based evaluation is geared at fully understanding how effective a programme works, how it produces the effective results that it does.

Sloan et al. (1987:128) state that process-based evaluation measures the quality of a programme and the extent to which it is implemented. Cayer and Perry (2000:156) support this by stating that programme process evaluation focuses on how the programme functions, not on 'whether' goals are met but on 'what' is done to meet them and measure results; however, goal-based evaluation determines whether goals are met.

Firstly, the EAP programme will be evaluated using the baseline study conducted by the Careways Group in one of the five districts of the Free State Province, namely Xhariep District in 2006. The baseline study will provide information on how the situation was before the implementation of the EAP. The baseline will also give an indication as to whether the programme is bringing some changes in the identified areas. Secondly, the discussion will be based on programme performance and utilisation of the programme by employees, as described in chapters 3 and 4.

#### 5.4.2 Baseline study

A baseline study examines the nature of the problem that the programme is meant to address. This includes evaluating who is affected by the problem, how widespread the problem is and what effects stem from the problem (Rossi et al., 2004:174).

The database at Human Resources (2007:17) at Motheo District established that the employees of the DoE in the Free State Province are confronted with numerous challenges that affect their productivity. It was indicated that 70% of the workforce in the DoE in Motheo District was not functioning as expected in relation to the performance standard. This presented a challenge for the DoE Free State Province, because there were no mechanisms in place to deal with personal issues that affect productivity.

In responding to the challenge, the Careways Group (2005:8) was contracted to do a baseline study. The purpose of the study was to determine the prevalence of common workplace-related problems. The group distributed 7 000 questionnaires to employees who were randomly selected from different districts. Three thousand responses were returned. The main findings of the Careways Group (2005:8) were as follows:

- Absenteeism ..... (40%)
- Alcohol dependency ..... (40%)
- Stress-related problems ..... (60%)
- Disciplinary issues ..... (40%)
- Extended family issues ..... (60%)
- Lack of support at work ..... (40%)
- HIV/AIDS-related issues ..... (30%)
- Work overload ..... (90%)
- Depression ..... (40%)
- Chronic illness ..... (40%)
- Demotivation ..... (80%)
- Staff turnover ..... (10%)

### **5.4.3 Programme performance of the EAP**

The EAPA (2001:130) states that in order to measure the success of the programme, it is critical to know how the programme was utilised by its beneficiaries during the intervention. Rossi et al. (2004:175) concur that programme process evaluation generally involves assessment of a programme's performance in the domain of service utilisation. The authors further state that assessing programme performance consists of examining the extent to which the intended target population receives the intended service.

In the Operational Plan (Chapter 3), it is evident that the service was delivered to the intended target population; this is reflected by the actual performance of the EAP section. It also becomes clear that the service that was delivered was not what was targeted for.

In Chapter 4, the focus group alluded to the challenges experienced by the EAP section in terms of service delivery and the effects that these challenges have on programme performance. To further investigate programme performance, a few questions from process-based evaluation will be looked into. These questions will be linked with the findings from the questionnaires, the literature review and the case study. The sequence of the discussion will be as follows: It will describe what the service should be like in an ideal situation from the literature, which will then be followed by an examination of the practical situation in the DoE and the findings from the data analysis.

The following questions will be discussed:

- Is the programme in compliance with applicable legislation?
- Are the employees conversant with policy guideline and procedures?
- Is the target population aware of the EAP?
- Are services accessible and are the structure suitable for EAP services?
- Are managers supportive of the EAP?
- Is the targeted number of employees receiving the proper type of service?
- Is there an early identification of services?

- Is staffing sufficient in numbers and competencies for the function that must be performed?
- Are resources, facilities and funding adequate to support important programme functions?
- Is performance at some sites better than at others?

## **5.5 Policy guideline and procedures**

Chapter 3 illustrates that policies are means by which annual objectives are achieved. Policies include guidelines, rules and procedures established to support efforts to achieve stated goals. In an ideal situation, policies are supposed to be communicated to all employees so that employees are aware of the services available. If employees are knowledgeable about what is offered, service utilisation will be promoted.

In the DoE of the Free State Province, the policies that are developed are the Wellness Policy and the Occupational Health and Safety Policy. There is no policy on Health and Production Management and HIV/AIDS. In Chapter 4 it was established that the majority of employees are not aware of the policy procedures and guidelines of the EAP. This resulted in the majority of employees' rating the service provided by the EAP as poor due to lack of knowledge.

## **5.6 Awareness of the EAP**

Awareness of the EAP includes knowledge of the existence of EAP and what is actually offered so that the employees can utilise the service. The ideal situation, as described in the literature, will be that EAP employees ensure that the promotional material and educational activities are available and visible at the entry point (reception) at the district and provincial offices and schools. The EAP section should reach all schools and sections in the DoE individually to make them aware of the services provided by the EAP.

These measures will encourage the employees to utilise the services as they will be knowledgeable about the policy issues and the procedures to be followed in utilising the EAP. Beneficiaries will have an optimum amount of information about the

programme and will follow the correct referral procedures. It is essential that an EAP classify its goals for the overall marketing campaign and its objectives for any specific marketing or promotional activity.

The data analysis in Chapter 4 gives an indication that 255 respondents out of 500 who participants in the completion of questionnaires are aware of the existence of the EAP section. According to the Annual Plan, 825 employees utilised the EAP services for different types of illness.

In Chapter 3, in the Progress Report on the Operational plan 2009/2010 what is recorded on the actual performance clearly indicates that few schools were reached. This implies that for 2009–2010, the EAP section was not effective in terms of ensuring that employees are aware and knowledgeable of EAP services. This is further confirmed by the findings in the data analysis that indicate that respondents are aware of the EAP but that they are not knowledgeable about the content of the EAP.

The practice at Motheo District is that awareness is done at management level, with EAP officials targeting only the supervisors of various sections and schools. The problem that arises is that supervisors that attend the information sessions either give superficial information or they do not cascade the information received to their subordinates.

## **5.7 Accessibility of the EAP**

The primary aim of evaluation is to ascertain whether the population of the programme has been reached and whether they benefited from the services that are provided. The ideal situation would be that the EAP is elevated to a directorate in order that it can be decentralised to all districts and be accessible.

### **5.7.1 Current EAP structure at provincial level**

- 1 x deputy director
- 3 x project managers (social workers)
- 3 x project managers (professional nurses)

1 x sports and recreation practitioner

### **5.7.2 Difference between the present structure and the proposed structure**

The present situation at the DoE is that the EAP section personnel at the provincial level do not perform management functions. They work on operational issues, for example conducting workshops at the districts and schools, providing employees with counselling and presenting prevention programmes (i.e. stress management, substance abuse awareness and trauma management).

In the current structure, there is no diversity in terms of professionals with diverse skills. This in itself limits service delivery because EAP activities, as specified in Chapter 3 in the Operational Plan, need a variety of specialisation to carry out the objectives. In Chapter 2 there is an emphasis on the integration of services with the main focus on preventative or educational programmes; integration of services in the current structure is nonexistent because there is no specialist. The proposed structure will ensure proper prognosis of individual cases and suitable therapeutic intervention.

There is currently no structure at district level.

### **5.7.3 Structure and functions**

As a subdirectorates within the Organisational Human Resource Directorate (OHRD), the EAP's key functions tend to be overlooked; its primary function is administration and co-ordination of services amongst the districts. Chapter 3 indicates the functions of all EAP officials, which imply that their focus is operational. This also affects their financial resources because most of the funds are spent on operational issues, such as workshops and national events, for example HIV/AIDS Day, TB Week, Diabetes Week and Cancer Week.

The OHRD is responsible for different subdirectorates, and upon presentation of the needs of those subdirectorates to senior management, the director is not focusing on the EAP in particular because employees' needs are not seen as the core business

of the DoE. The focus group were also of the opinion that the needs of the employees in DoE were not taken seriously.

The Free State DoE, as seen in Chapter 3, has adopted a centralised structure, meaning that top managers have more powers in terms of decision making and managers at lower levels are given limited powers. David (2005:251) states that some of the disadvantages of a centralised structure are that it forces accountability to the top and brings about poor delegation powers. In the DoE, top managers make all the decisions and lower-level managers carry out top management's directives. The EAP section in the DoE is an extension of a functional structure with limited delegated authority on decision making.

The disadvantage of a centralised structure is as follows:

- Centralised decisions and actions can be more time consuming. In a centralised approach, it takes time for input from the Provincial Office (EAP section) to flow up to the Head Office. Senior managers in the DoE do not prioritise EAP issues; therefore, there are delays before the input is collated.
- When decisions are made by top management, the EAP section is not given a platform to give its own input; therefore, decisions are taken without its inputs, thus allowing the EAP section a minimum input into its work.
- Top managers are limited as to the amount of information that they can process effectively, due to lack of knowledge and expertise in that field.
- The centralised approach means that priority is given to the core business of the DoE which is teaching, learning and producing good results. The priorities of the EAP section are on the periphery and are not regarded as core deliverables of the DoE.

The present structure of the EAP is depicted in Chapter 3. EAP operations are centralised in the Provincial Office in the DoE in the Free State Province. This impacts negatively on the districts in terms of accessibility because the Provincial Office is supposed to co-ordinate and give direction to the district offices. The

districts then focus on operational issues and ensure that the service reaches employees in different areas within Motheo District.

The general impression of the actual performance of the EAP section, as highlighted in the Operational Plan of the section, is that the EAP services are not accessible considering the number of employees reached and employees eligible for the service. The findings in the data analysis show respondents' preference: the majority want the service to be decentralised in order to be more available.

## **5.8 Management issues**

Process-based evaluation raises the question whether in the process of programme implementation, senior managers are supportive of the programme. In Chapter 2 reference has been made to elements that influence the successful implementation of the EAP. Lack of support from senior management was mentioned as one of the debilitating factors that impact negatively on the full functioning of the EAP. The EAP section shares the same problem with other employees of the DoE in that senior management is not supportive of the EAP. This was a serious concern echoed in the interview with the focus group. Participants also felt that they were not valued in the DoE.

## **5.9 Number of employees receiving service and type of service received**

The number of employees presently using the EAP is determined by the number of new cases opened during the given period, usually 12 months, divided by the total number of employees eligible for EAP services. In the year 2009/2010, the number of employees who had used EAP counselling services was 825; these employees presented with illness that resulted in absenteeism.

The practical situation in the DoE is that there is minimal interaction between the EAP officials and the employees, particularly because of limited human capacity to facilitate interaction, which results in poor performance. Figure 4.3 shows that the major reason for respondents' rating the EAP as poor (42%) is that there are few



staff members. This implies that there is poor interaction between programme personnel and beneficiaries.

In the DoE in Motheo District, the counselling service was supposed to be offered by a service provider while the EAP section officials focused on prevention programmes, but that is not the case since one of the service providers terminated the service. The present practice is that the EAP section now provides both prevention and counselling sessions. In the Operational Plan, one observes that few employees were reached by counselling sessions as compared to the number of employees reached by prevention programmes.

This might imply that individual employees do experience problems that need individual sessions but feel more at ease when the problem is addressed in a group. When analysing data, one sees that employees prefer the off-site model in terms of confidentiality. In the literature study, confidentiality is one of the principles of the EAP. The issue of confidentiality is a concern because if employees feel confident that in the off-site model their problems will be confidential, the DoE needs to come up with a strategy to address this concern.

### **5.10 Early identification**

In an ideal work environment where the EAP is effective, early identification of personal problems is crucial before the problem becomes a major clinical, administrative or disciplinary problem. If an EAP section has people with expertise, they will accurately and analytically diagnose the employee in order that the correct assistance is given. The advantage of early identification would be that at the early stages of the problem, prognoses are good and the chances of successful intervention are increased.

The present problem in the DoE is that, for example, an individual EAP official, such as a social worker, receives a referral at an advanced stage of depression, where the assistance of a psychiatric expert is required. If the referral were received at an early stage, successful intervention might have been possible. The other problem is that an individual professional assesses employees and makes an intervention; it

could happen at times that the assessment of the individual EAP professional was incorrect.

Through counselling sessions, individual employees are assisted to deal with psychological illnesses that result in absenteeism. Mathis and Jackson (2000:655) indicate that turnover and absenteeism represent convenient forms of withdrawals from a highly stressful job. The primary causes of absenteeism appear to be psychosocial in nature, which include but are not limited to work stress, depression, HIV/AIDS, lack of support from work, extended family issues, fatigue due to high work load and chronic illness. EAPs design activities that are conducive to maintaining or improving employee physiological, mental and social wellbeing.

The practical situation in the DoE is that all new cases that require individual counselling are referred directly to the EAP section; it will then establish whether the case falls within its service area or whether it falls in an area allocated to the service provider, in this case ICASA/WELLCORP. If the case falls within the scope of the EAP, it will handle the case, but if it falls within the areas allocated to the service provider, the EAP will refer the case. The present problem is that individual employees opt out of the counselling sessions, and the reason therefore is unknown. When a follow-up is made, the person is no longer interested in continuing with the counselling sessions.

A mechanism should be put in place that will establish the reasons why an employee is opting out of the counselling sessions. Figure 4.4 shows that 83% of respondents are of the opinion that if the EAP is implemented properly, there is a possibility that it can reduce absenteeism. These results confirm that respondents are positive that the EAP can reduce absenteeism.

### **5.11 Staffing, competency and integration**

In the DoE, the number of posts as reflected in the EAP structure indicates that there is a limited personnel in the EAP section. This was reiterated during the interview with the focus group, where it was made known that the whole of the Free State Province that constitutes 32 000 employees, which includes the number of

employees in Motheo District, is served by a skeleton staff of six officials. In terms of competencies for the functions that must be performed, the focus group participants indicated that they still needed training in areas that were not their core competencies.

In the EAP section, there are three social workers, three professional nurses and one sports manager. These officials have differing academic backgrounds with the implication that they need training on other areas that form part of their job. This training could include lay counselling on different aspects, such as dealing with loss, HIV/AIDS and divorce, trauma management, financial matters and legal matters, and general training on chronic illnesses, conflict management, stress management, crisis intervention and domestic violence. The practice in the DoE is that each social worker and professional nurse is a project manager who deals with many issues that are not core to his/her profession. This practice on its own is ineffective as people become confident when their issues are dealt with by people with expertise.

### **5.12 Resources, facilities and funding**

The EAP in the USA and in South Africa operates within the ambit of the Human Resources Directorate, which has different subsections. Budget allocation is therefore divided amongst all those sections. In the literature review, different authors were of the opinion that the position of the EAP in the future should be reviewed. In the proposed structure, the researcher supports the view of different authors that the EAP needs to be repositioned. If the EAP is a directorate, it will have its own budget and will be able to plan according to its needs. The director of the EAP will be able to communicate at different levels.

In Chapter 2 the emphasis was on 'beyond wellness', stating that a wellness programme in Appleton Headquarters in the USA has been developed in such a way that it has an on-site wellness centre. The Appleton Headquarters staff promotes a proactive approach to injury management, prevention and rehabilitation by offering regular educational programmes on topics such as ergonomics, lower back injuries, musculoskeletal disorders and other health-related topics. The centre has all the

necessary facilities, for instance elliptical bikes, treadmills, aerobics steps, small weights, water fountains, lockers and chairs.

In the EAP section, funding for the programme poses a challenge, as the section has limited human, capital and physical resources. There is an area at the Provincial Office of about 20 square meters that has three treadmills, five small weights and three aerobics steps, which are supposed to cater to all the employees in Motheo District.

### **5.13 EAP models**

In process-based evaluation, the question that is asked is whether performance at some sites is better than at others. In the EAP context, the sites that are referred to are the EAP models. Brief explanations on each EAP model follow:

#### **5.13.1 In-house model**

As stated in Chapter 2, this is a model whereby EAP services are run by the official of the organisation. This model is an ideal model whereby the organisation is held accountable for poor performance and low productivity. One of its disadvantages, as documented in different research by different theorists, is confidentiality. In the DoE, this is one of the models that is utilised. Few respondents show an interest in the in-house model. The assumption is that employees are not certain about confidentiality.

#### **5.13.2 Off-site model**

In Chapter 2 it was indicated that the off-site model is an outsourced service. The findings show that respondents prefer this model because of its objectivity, lack of bias and confidentiality. However, there can be a lack of obligation from the contractor (employer) in adhering to the terms and conditions of the contract, which can lead to termination of service. The practical experience in the DoE is the termination of service by one of the service providers.

#### **5.13.3 Union support and involvement model**

This model does not suggest that unions should render a service; it indicates the benefits that the organisation can gain from involving the unions. It highlights the fact

that when unions are involved, issues can be resolved before a disciplinary hearing. There is an involvement of union members in the EAP section.

#### **5.13.4 Combined model**

The combined model is provided by both EAP professionals and a contracted service provider. It combines the benefits of the in-house model and the off-site model. The DoE uses this model because it allows the DoE to incorporate the best aspects of the traditional approaches. Only 10% of the respondents prefer this model.

### **5.14 Goal-based evaluation**

Prinsloo and Roos (2006:75) define effectiveness as the extent to which an institution achieves its policy objectives, operational goals and other intended effects. Molnar and David (1976:401) concur and define organisational effectiveness as goal attainment or the degree to which the organisation is attaining its internally determined objectives.

In support of Prinsloo and Roos (2006:75), Molnar and David (1976:401) further define effectiveness as the capability of bringing about an effect or accomplishing a purpose, sometimes without considering the quantity or resources consumed in the process. Goal-based evaluation focuses on the effectiveness and implementation of the programme. To evaluate EAP effectiveness, it is necessary to examine whether the EAP managed to achieve its objectives stated in the Operational Plan. Often programmes are established to meet one or more specific goals.

According to Masi (2003:56), goal-based evaluation evaluates the extent to which programmes are meeting predetermined goals and objectives. The main question asked is, "What is the status of the progress of the programme towards achieving its goals?"

To establish the status of the programme progress and goal achievements, the EAP Operational Plan will be utilised, as outlined in Chapter 3. In Chapter 3, which is the case study, the objectives of the EAP section are outlined in the Operational Plan. The discussion that follows is a summary and evaluation of these objectives.

The stated objectives are not attainable and realistic; when comparing the target with the actual performance, the gap is wide. This shows a lack of proper planning from management, because when the objectives are operationalised, human capacity is considered. In Chapter 3 the structure of the EAP is depicted and shows that there is lack of human capacity to carry out the task. If there were proper planning, the target could have been scaled down so that it could be achievable with the available personnel. Some of the objectives are achievable because there has been a build-up of what has already been done in the previous year. This was confirmed in the interview with the focus group when the participants reiterated that despite their challenges, they managed to make progress in terms of goal attainment. Chapter 4 summarises the EAP achievements. This summary gives an overall picture on the realisation of the goals and objectives that were planned in previous years. Respondents in Figure 4.4 indicated an increase in productivity at 77%. The assumption is that productivity in previous years was low and that the employees are noticing the changes that are brought by the EAP section.

### **5.15 Conclusion**

The purpose of evaluation is to measure organisational performance. The process of evaluation includes comparing expected results to actual results. In the Operational Plan, it becomes evident that it was difficult for the EAP section to reach its target. The fact that the EAP expectations deviate significantly from actual performance should have raised concern for senior managers who receive quarterly reviews. The failure to make satisfactory progress towards the accomplishment of long-term or annual objectives signals a need for corrective action.

The EAP section is confronted with factors such as a lack of personnel, unclear objectives, structural issues and budget issues. This has resulted in unsatisfactory progress towards meeting objectives. The EAP section is experiencing difficulties in rendering an effective service. One can conclude that the EAP section is ineffective; in other words, performance in general is poor due to internal and external factors that are barriers. The next chapter will attempt to address corrective actions for the DoE.

## **CHAPTER 6: A NORMATIVE APPROACH TO THE EMPLOYEE ASSISTANCE PROGRAMME IN THE DEPARTMENT OF EDUCATION: FREE STATE**

### **6.1 Introduction**

EAPs as an intervention strategy in the workplace have the characteristic of providing essential workplace services. Unprecedented growth in the number of employees utilising the EAP has occurred in the EAP field, both locally and internationally, sufficient to evaluate whether therapeutic intervention assists those employees who are in psychological distress in the workplace. In order to accomplish the aforementioned, the study was designed with the overall aim of evaluating the implementation process and the effectiveness of the EAP. Consequently, recommendations are provided in line with such an aim.

The current chapter is structured in such a way that it presents corrective actions to be taken for remedying various inefficiencies that exist in the current programme.

### **6.2 Compliance with applicable legislation**

Corrective actions that can be taken in terms of legislation are the following:

- The Basic Conditions of Employment Act should be adhered to; employees should work eight hours per day, as stipulated by the act. In the DoE, employees work overtime that is not compensated. To ensure compliance, the Department should employ a reasonable number of employees to make the workload manageable.
- The Labour Relations Act should be adhered to in order to promote fair labour practice. The Labour Relations section, the EAP section and the Human Resources section should work together, particularly in cases where disciplinary action that can lead to dismissal is eminent. Also, in cases of ill health where an employee was attending sessions with the EAP, there needs to be discussions between the EAP and the Human Resources (leave) section before any decision is taken.
- The Occupational Health and Safety Act should be adhered to and the Occupational Health and Safety section should ensure that the employer

take precautionary measures by fumigating the offices on a regular basis to prevent occupational diseases, amongst other things.

- The Employment Equity Act should be adhered to so that employees who are disabled can gain access to the workplace. There should be ramps within the buildings to ensure accessibility for employees with disability.
- The Skills Development Act should be adhered to and employees should be empowered to enhance performance. The Skills Development section should be informed by the EAP on employees' training needs, particularly those that are psychological in nature and can impede performance.

### **6.3 Policy guidelines and procedures**

As was mentioned in Chapter 3, the EAP provides services in four key areas, namely wellness, occupational health, HIV/AIDS and HPM. Presently, the EAP section has no policy in place regarding HPM and HIV/AIDS.

The following are corrective actions to be taken in terms of policy guidelines and procedures:

- The development of an HIV/AIDS policy should help to ensure that those employees who are affected by the illness are not unfairly discriminated against in terms of employment policies and practices.
- The development and implementation of relevant programmes should be aimed at preventing new HIV infections and at providing care and support for those employees who are affected. Such development and implementation would enable the DoE to manage the impact of the epidemic on the organisation as a whole.
- Development of an HPM policy should ensure that there are mechanisms in place for the management of chronic, infectious and occupational diseases, as well as disability.
- The DoE should also develop different programmes as an effort to promote and maintain the general health of employees through prevention programmes, risk assessment and support. Such activities would alleviate the impact and effect of communicable and noncommunicable diseases and promote workplace productivity.



For policies to be more effective, they should be developed as follows:

- All policies should be developed in consultation with key stakeholders within the workplace, including the trade unions, the Labour Relations section of the DoE and employee representatives from different sections and from schools.
- The proposed document should be circulated to all employees for further suggestions and comments.
- The final document should be communicated to all concerned, giving feedback to all those stakeholders who have been involved in policy development. They should be tasked with cascading the policy to their respective sections and organisations.

## **6.4 Structure and accessibility of the EAP**

### **6.4.1 Structure of the EAP**

The following post structure is proposed for the EAP at provincial level:

- 1 × director
- 3 × deputy directors
- 1 × social worker manager
- 1 × psychologist manager
- 1 × psychiatrist
- 1 × wellness manager
- 1 × professional nurse manager
- 1 × legal advisor manager
- 1 × financial manager
- 1 × administration clerk
- 1 × cleaner

The structure that should be adopted by the DoE to ensure accessibility should be a divisional structure by region, which would offer the following benefits:

- A divisional structure ensures flow of information and accountability. Provincial managers should be held responsible for poor performance

because a divisional structure is based on extensive delegation by a manager of a section to immediate subordinates.

- When the EAP is a directorate, it will have its own staff in all the districts, with its functions being co-ordinated at the Free State provincial level.
- A divisional structure would facilitate speedy action because it would avoid the need to process information through a vertical hierarchy. Responses to problems could then be acted on by those closest to the issue, such as by the EAP officials at the district level.
- A divisional structure would allow for more detailed input to be made in decision making, particularly in the case of those who make the inputs being more familiar with the issues raised than might otherwise be the case. An EAP official at district level could easily assess the situation and decide on what is relevant for the issue at hand.
- A divisional structure would allow for action to be taken quickly to solve problems. More people would be able to provide input in terms of decision making, and employees would be less likely to feel alienated from those making decisions that affect their work. The following is a proposed structure at provincial level that should ensure that the EAP performs its functions appropriately in future.

The Provincial Office is responsible for management functions, namely for proper planning, organising, motivating, staffing and controlling. Proper planning will enable the Provincial Office to work out the most effective way of reaching the desired objectives. Organising includes all managerial activities that result in a structured task and authority relationship (e.g. coordination, job descriptions for district officials and job design). EAP officials are responsible for the motivating and shaping of human behaviour. Staffing, which consists of activities that are central to personnel or human resource management, should be carried out at the EAP Provincial Office. Controlling entails managerial activities that are directed towards ensuring that the actual results of the EAP are consistent with the planned results.

The following post structure is proposed for the EAP at district level:

- 6 × managers
- 5 × social workers
- 5 × psychologists
- 5 × mental health practitioners
- 5 × wellness practitioners
- 5 × professional nurses
- 5 × legal advisors
- 5 × financial advisors
- 2 × administration clerks
- 2 × cleaners

The proposed structure would include a combination of qualified and registered professionals who would ensure the correct prognosis. The multidisciplinary team would hold a case conference after a case is referred. The case manager, as the person who has seen the employee, would present the case to the team for further analysis and recommendations.

Once recommendations have been made, the person to whom the case is allocated would handle the case from then on, with the maximum number of sessions required being six per individual, including his/her family, if necessary. Such a number is supported by Norman et al. (1997:91), who recommend that for counselling services to be complete, a maximum of six follow-up sessions per individual case is required.

#### **6.4.2 Accessibility of the EAP**

The EAP should be rendered more accessible by means of taking the following factors into consideration:

- The majority of respondents preferred offsite counselling services sourced by a service provider. Confidentiality was one of the reasons given.
- Employees are unaware that they are allowed to access the EAP without their being referred by supervisors, which implies that employees do not understand the related policies and procedures.

- The majority of respondents from the district rated the services provided by the EAP as poor. The institutions concerned indicated that if such services could be decentralised, they would be more accessible. Currently, the EAP services are inaccessible.
- The DoE should consider restructuring the EAP section by elevating the status of the EAP subsection to that of a directorate, in order that its services might be decentralised. The consequent shift away from centralised operation, in terms of which the service is not reaching the intended beneficiaries, to decentralised operation would allow for officials to respond to the needs of those seeking their aid at grassroots level.

### **6.5 Elevation of the EAP section to the level of directorate**

For the EAP section to be elevated to the level of directorate requires that the Deputy Director take the initiative to make contact with the Organisational Development or Work Study unit. The Deputy Director of the EAP section should, on completion of a prescribed request form, send it to the Organisational Development or Work Study unit to evaluate and to upgrade the EAP section. In connection with this procedure, the following should take place:

- Organisational Development should look at the present capacity, namely the capacity of the present personnel, the number of employees to be serviced, and the level of responsibility and skills required.
- On interviewing the EAP officials, the Organisational Development unit should ask them to complete a questionnaire regarding the level or responsibility that an incumbent occupies. Depending on the results obtained, an informed decision can then be made as to whether more personnel are needed.
- The Organisational Development or Work Study section should collate all the information obtained and give the outcomes of its evaluation, together with its recommendations, in the form of a presentation to the following committees: Departmental Quality Assurance and Provincial Job Evaluation Committee, chaired by the Director General and represented by the heads of departments. The key responsibility of such committees would be to ensure

that correct procedures are followed before the section is elevated to a directorate.

- The above-mentioned committees should make recommendations regarding the request for subsection elevation, which they should send to the MEC for approval.
- Upon approval of the requests by the MEC, Human Resource Management should implement the approved structure.

## **6.6 Management activities required for the EAP**

There is evidently a lack of support from senior management in the DoE regarding the EAP, with, for example, the allocation of funds not being sufficient to cater for the needs of the EAP. The EAP officials at the Provincial Office are not performing managerial functions (such as organising, controlling and motivation), as was explained in the previous discussion.

The following corrective actions should be taken in connection with management activities:

- It is imperative that the Human Resource Director communicate with the District Director to endorse EAP activities in all sections, as without such District Director backup, the implementation and development of the EAP in the DoE would be difficult. If the EAP were to plan an activity, the letter of invitation should be signed by both the District Director and the school managers (as the immediate supervisors of schools) at district level before being distributed to the relevant schools.
- In order for the EAP to be effective, the departments should be compelled to develop requirements in line with the performance agreement of senior management members. Such members would be responsible for implementing a fully functioning integrated EAP programme, equipped with all the necessary human and capital resources. The requirements should ensure that adequate resources are provided to enable the effective functioning of the EAP, and budgetary resources should be sufficient to enable the required service to be rendered.

## **6.7 Number of employees receiving services and the type of service to be received**

According to the interview that was conducted with the focus group, the utilisation rate of the EAP service has been low, when considering the number of employees that has made use of the EAP counselling service for the current year. It was also clear that prevention programmes were not rendered as had been planned for in terms of the Operational Plan.

The fact that employees opt out of therapeutic services, no matter whether the service is provided by an on-site or off-site counsellor is of concern, as such opting out might imply that employees are not satisfied with the service. A range of factors could be associated with any dissatisfaction with the service, including the breaching of confidentiality, the incompetency of case managers and incorrect diagnosis.

The following corrective actions should be taken to improve the EAP services:

- The EAP section needs to revise its marketing strategy if it wants to encourage a large number of employees to utilise the programme. It could publish cases with which it has had success, either anonymously or with the consent of an employee who benefited from EAP intervention. Such success stories could be publicised in the staff newsletter.
- Different sections and schools could also be encouraged to share the improvements (such as enhanced stress and financial management, and the provision of sound legal advice) brought about by educational programmes, as well as publish news regarding such improvements in the staff newsletter.

## **6.8 Staffing, competency, integration and early identification**

The proposed structure as illustrated above would help to create an ideal situation, as it comprises different professionals with diverse expertise. Such a structure would help to ensure that there are different professionals with specialised knowledge, who would be able to help ensure that the needs of employees in Motheo District are catered for. For the DoE to realise its objectives by reaching out to a large number of employees, service integration is paramount. According to Swihart and Thompson

(cited in Attridge, 2005:3), integration involves bringing together, in a synergistic way, the specialised knowledge and trained expertise of professionals in different but related fields to better serve organisations and their employees.

A multidisciplinary approach/integration would be the best for Motheo District. To cite a scenario when coming to the issue of the implementation of a prevention programme, all professionals could be involved in educational programmes that cut across noncore areas, in terms of which they could work in teams to cover the range of activities that is outlined in the Operational Plan of a school. When dealing with treatment, namely counselling therapy, an individual professional would be able to retain personal identity, while dealing specifically with a problem with which he/she is presented as a professional counsellor.

As indicated earlier, a multidisciplinary team would be able to assess the presentation of the case manager and to make appropriate recommendations. If the team established that a problem of a particular individual would be best dealt with by a mental health practitioner, a psychologist or a social worker, the professional, while protecting the person's individual identity, could deal with issues that are core to his/her profession.

Possible corrective actions for staffing, competency, integration and early identification could entail the following:

- The DoE should employ staff with different specialities.
- A multidisciplinary approach in the assessment of cases should be implemented.

## **6.9 Resources, facilities and funding**

The fact that the EAP section within the DoE falls within the scope of Human Resource Management renders the section ineffective. At the time of the current study, the section was allocated R3 million for servicing five districts, staffed by 32 000 employees. The EAP section is limited by an insufficient budget, which prevents it from planning activities in line with the set objectives, which cannot be reached due to insufficient human resources.

Possible corrective action that can be taken regarding resources, facilities and funding is that the EAP subsection could be elevated to a directorate, which would enable the EAP to have its own budget. The directorate would then be able to plan according to its needs.

### **6.10 Departmental strategic goals regarding the EAP**

As an organisation, by definition, exists to achieve one or more strategic goals, successful goal accomplishment is an appropriate measure of effectiveness. The use of goals implies other assumptions, which must be valid if they are to be attained.

- Departmental strategic goals should be specific, measurable, attainable, realistic and time-bound (SMART). The current study found that the strategic goals were not SMART.
- The strategic goals should be concise statements of expected accomplishment. For a strategic goal to state an intention without considering that the objective involved should consist of the five SMART elements is inadequate. Such is the case with the DoE strategic goal regarding the EAP, which is stated as “[t]o have [an] Employee Wellness Programme”. Such a desire should be converted into a tangible goal that can be measured and evaluated. Without clear departmental strategic goals, the EAP section will be unable to attain its goals.

Departmental strategic goals are essential because they

- represent the foundation for the allocation of personnel, physical and financial resources;
- serve as the mechanism for evaluating the EAP as a programme that is provided within the ambit of the DoE; and
- are the major instruments for monitoring progress towards achieving long-term objectives such as ensuring that the EAP is established and functional within the Free State DoE .



The following corrective actions could be taken in terms of meeting departmental strategic goals:

- The EAP subsection could be elevated to a directorate, as has been recommended.
- Strategic planning training is crucial for senior management so that it can formulate the correct strategic goals.
- If the EAP section were to be elevated to a directorate in the DoE, it should be able to concentrate its effort on core competencies, which are managerial functions, rather than on its operational competencies, which would be more the focus of the district level.
- As a directorate, the EAP should have a director representing it in terms of senior management planning.
- The director should have input into the strategic planning of the DoE, at which level all directors represent their sections.
- The director should ensure that the goals of the DoE in relation to the EAP are clear so that the EAP section could align its objectives accordingly.
- If the strategic goals were clear, the EAP directorate at provincial level should be able to assist the district with its work plans, which would reflect performance targets that are quantifiable and achievable. Such planning is crucial, as it forms the basis for the evaluation of the directorate.

### **6.11 Marketing strategy of the EAP**

The EAP in the DoE has operated since 2005, with the assumption that for the past five years, all the employees were supposed to be aware of and utilising its services. However, such has not been the case in the DoE.

The following problems have been experienced with marketing the service:

- Marketing the EAP programme to employees has not always been easy because the officials concerned often had to market a product that was originally designed with little consideration of end user preferences. In most instances, programmes have been designed with no input from employees. EAP officials have also been confronted with a low level of user acceptance.

- Employees have been found to hold the belief that health problems will affect someone other than themselves.
- Employees tend to resist change, particularly in relation to their reliance on traditional employer health care provisions. Most employees also tend to rely on traditional corrective medicine to remedy any health problem that they have.
- Employees view the EAP as a counselling service, as they fail to understand the scope of the section. If the EAP were to be well marketed, the employees would come to know of other benefits that could be provided by the EAP.
- Due to a lack of information, employees tend to associate the EAP with the disciplinary process, leading to their distrusting the programme, as it is viewed as a management tool.
- Accessibility might be one of the factors that affect the utilisation of the EAP. The fact that in Motheo District areas are dispersed has a limiting effect on the awareness and utilisation of the services provided.

The following corrective actions could be taken in relation to marketing:

- The EAP section should design and package a programme that will be compatible with employees' needs. It should design a questionnaire to be completed by the employees, with the questions based on how the employees envisage the EAP programme. The employees would then come to feel part of the process and would make more use of the services provided.
- The EAP section should analyse the questionnaires and develop EAP programme strategies according to the needs of the employees. EAP activities have little relevance unless employees' needs are satisfied.
- Marketing strategies should be developed to ensure the utilisation of the programme by employees. Booklets should be produced that clearly state the vision, mission, aims and objectives, the services offered and who is eligible to use the EAP. EAP officials should distribute the booklets to all schools and districts. The cover of the booklet should read, "The EAP will

not be used as part of the disciplinary process” so that those employees who read the booklet can come to trust the EAP processes.

The EAP should request a slot in the following meetings:

- Director’s road show: All departmental (district and institutional) employees should be invited to the director’s road show, which is held at the beginning of each year in Motheo District. At the road show, the heads of the sections from the districts and schools should make presentations about their year plans.
- Principals’ conference: The empowerment of principals should take place at the conference, at which different issues, including, but not limited to, leadership and management skills and governance issues are covered.
- Union meetings: As yet another platform that can be used for the marketing of the EAP, union meetings should provide an opportunity for all site representatives to be empowered regarding labour issues.

### **6.12 Confidentiality regarding EAP models**

The majority of the employees that are mentioned in Figure 4.7 stated that they preferred the offsite model. According to Ligon and Yegidis (1998:194), confidentiality is a key principle of an EAP, as it fosters trust in the service, which, consequently, promotes its utilisation. Ensuring the confidentiality of those employees who make use of the service should, consequently, be guaranteed. Therefore, the assumption is that the majority of employees believe that the offsite model helps to ensure their confidentiality.

The fact that employees lack insight into the policies of the EAP means that they stigmatise the EAP as a service that is used by those employees who feel that they cannot cope with their personal life challenges. The employees concerned, therefore, seemed to assume that if the EAP services were rendered outside the working environment, such rendering would reduce the likelihood of their being stigmatised for their use of such services.

In the above-mentioned models, the issue of confidentiality was researched. However, other researchers have proven with certainty that the services of the EAP can successfully be rendered by means of an in-house model, provided that the issue of confidentiality be properly managed.

If the above-mentioned issues were dealt with effectively, the EAP would receive the recognition that it deserves within the DoE. The EAP section officials are responsible for ensuring that employees have the correct perception of and knowledge about EAP services.

Possible corrective actions to be taken in respect of ensuring the confidentiality of EAP models are the following:

- The anonymity of those utilising the services provided by EAP officials should be ensured. For instance, EAP officials should provide their services on a 24-hour basis, allow for employees to consult them by telephone and supply the user with a reference number for further follow-up on the case concerned.
- Employees' identities should be protected and legal steps should be followed should a breach of confidentiality occur.
- EAP officials should explain the practical protection accorded employee records, namely that their files, which are kept under codes instead of their names, are kept inside locked file cabinets in a safe room that is specifically reserved for the storage of classified information.
- All EAP offices should be laid out in such a way as to guarantee confidentiality, with professional EAP officials each having his/her own office, or, where they have to share offices, each having an area that is partitioned off from the rest of the office.
- Confidentiality is a principle of all helping professions; therefore, EAP officials should be aware of the importance of not transgressing the bounds of confidentiality. Professional ethics, such as those prescribed in the code of ethics for social workers, psychologists and other medical health practitioners, should be adhered to at all times.
- Adherence to confidentiality should be part of the EAP policy.

### **6.13 Conclusion**

The previous chapters of the thesis identified possible inefficiencies that exist in the implementation of the EAP in the DoE in the Free State Province. In the present chapter, possible corrective actions for the identified inefficiencies are explained. In order for the DoE to comply with legislation, the Department should ensure that adequate provision is made regarding human and capital resources. Employees should be knowledgeable regarding the content of policy guidelines and procedures in order to promote utilisation of the services provided. As has been discussed in the thesis, accessibility will depend on the restructuring of the EAP section from a subsection to a directorate. Putting an appropriate structure in place would make the EAP section effective.

Such a transformation would ensure role clarification in the manner that the Provincial Office would focus on management issues and the co-ordination of services, with the district focusing on operational issues. Management support is crucial because if senior managers endorse the activities of the EAP, other sections would also be supportive of the section. The utilisation rate and the rate of delivery of EAP services are still a challenge, as was explained in the course of the thesis. The EAP service was not, at the stage during which the research was undertaken, reaching its target in accordance with the Operational Plan

Issues of staffing, competency, integration and early identification could be dealt with effectively if the DoE were to employ personnel with appropriate skills. The departmental goals also should be SMART so that they enable the section to reach its objectives. Confidentiality and the model according to which the EAP services are rendered are a challenge in the DoE because of their influencing the utilisation of EAP services.

## 92Bibliography

Arthur, A. R. 2000. Employee Assistance Programmes: The Emperor's New Clothes of Stress Management. *British Journal of Guidance & Counseling*, Vol. 28:4, pp 549-559.

Arthur, A. R. & Arthanasiades, C. 2008. Factors Affecting Self Referral to Counseling Services in the Workplace. *British Journal of Guidance and Counseling*. Vol. 36. 3 pp198 - 276.

Attridge, M., Patricia, A., & Herlihy, P. 2005. Research on the Integration of Employee Assistance, Work Life & Wellness Services Past, Present and Future. *Journal of Workplace Behavioral Health*, Vol 20:1, pp 67-93

Babbie, E. 2004. *The Practice of Social Research*. Belmont, California: Thomson Publisher.

Blair, J. 2001. Does your EAP add Value to the Organization? *HR Futures*, Vol 1:2, pp 36.

Bordens, M. & Abbott. B. B. 2008. *Research Design and Methods: A Process Approach*. Boston: McGraw-Hill.

Bruce, M. 1990. *Promoting Employee Health*. Hampshire: Macmillan.

Careways Group. 2004. *Manager Training Manual*. South Africa.

Careways Utilization Report. 2006. *Careways Report*. South Africa.

Cayer, N. J. & Perry, R.W. 2000. A Framework for Evaluating Employee Assistance Programme. *Employee Assistance Quarterly*, Vol 3:1, pp64-84.

Coetzee, W. A. J. 1988. *Public Administration: A South African Introductory Perspective*. Pretoria: Van Schaik Publishers.

Coppersmith, R. 1995. *Employee Assistance Programme in the Workplace*. New Jersey: Haworth Press.

Craig, H. & Rhodes, J. 2004. Proactive Efforts by the Wellness Programme at Appleton. *Journal of Employee Wellness and Beyond*. Vol. 20:3, pp 40

Csiernik, R. 2004. A Review of EAP Evaluation in the 1990s. *Employee Assistance Quarterly*, Vol. 19:4, pp21-37.

Daniels, A., Teems, L., & Carroll, C. 2005. Transforming Employee Assistance Programs by Crossing the Quality Chasm. *International Journal of Mental Health*. Vol. 34:1, pp37-54.

David, R. 2005. *Strategic Management*. New Jersey: Pearson Prentice Hall.

Dayoff, M. 1999. The Seven Practices of Highly Effective EAP. *EAP Digest*. March/April, pp 28-29.

Department of Education. 2001. *Policy Document on Employee Wellness*. South Africa.

Department of Education. 2005. *Persal Report Employment Statistic*. South Africa.

Department of Public Service and Administration. 2008. *Employee Health and Wellness Strategic Framework*. South Africa

Department of Education. 2007. *Human Resource Database*. South Africa

De Vos, A.S., Strydom, H., Fouche, C.B., & Delpont, C.S.L. 2002. *Research at Grass Roots: For the Social Sciences and Human Services Professions*. Pretoria: Van Schaik Publishers.

De Vos, A. S. & Strydom, H. 1998. The Nature of Research in the Caring Professions. In De Vos, A.S., Schurink, E.M., & Strydom, H. (eds) *Research at Grass Roots: For the Social Sciences and Human Services Professions*. Pretoria: Van Schaik Publishers.

Deyer, G., Lipsky, T., & Kochan, W. 1977. *Human Resource Management Handbook*. Basingstoke: MacMillan.

Dickman, F., Challenger, B., Emener, W. & Hutchison, W. 1988. *Employee Assistance Programme*. Charles: Thomas Publisher.

EAP DIGEST. 1985. Review pp 1-7 Author unknown.

Employee Assistance Programs Association (EAPA) SA. 1999. *Standard for Employee Assistance Programme in South Africa*. South Africa.

Employee Assistance Programs Association (EAPA). 2003. *Employee Intervention Strategies*. Charles: Thomas Publishes.

Fouche, C. B. 2002. Problem Formulation. In De Vos, A.S, Strydom, H, Fouche, C.B. & Delpont, C.S.L, *Research at Grassroots. For the Social Science and Human Service Professions*. Pretoria: Van Schaik Publishers.

Fouche, C. B. & De Vos, A.S. 1998. Quantitative Research Designs. In De Vos, A.S., Schurink, E.M. & Strydom, H. (eds), *Research at Grassroots. For the Social Science and Human Service Professions*. Pretoria: Van Schaik Publishers.

Fischer, S. K. 2002. Emerging Trends for the EAPA 21st Century. *Monthly Labor Review*. Vol.125. pp 62-70.



Gay, J. 2001. Seven-Year follow-Up Comparing Attendees' and Non-attendees at a Statewide, School Employee Wellness Conference. *Journal of School Health* Vol.71: 4. pp 127-145.

Gibson, K., Swart, L., & Sandenbergh, R. 2002. *Counseling and Coping*. Cape Town: Oxford University Press.

Green, C. & Masi, D. 1997. *Employee Counseling*. Buckingham: Open University Press.

Grinnel, R. M. & Williams, E. 1990. *Social Research and Evaluation*. Illinois: Peacock Publisher.

Haper, T. & Beckman, A. 2000. *Employee Assistance Programme and Professional Development*. Washington: Dallen Inc.

Health Care Managers. 2006. *Health Care System*. Author Unknown.

Jacobson, K. & Van Zyl, K. 1993. *Trauma Debriefing*. South Africa.

Janice, T. S. 1997. Corporate Wellness Programme in Singapore: Effect on Stress, Satisfaction and Absenteeism. *Journal of Managerial Psychology*. Vol 9: 3pp 45.

Jerrel, J. M. & Rightmyer, J. R. 2000. Evaluating Employee Assistance Programme. In Dickman, F., Challenger, B., & Emener, W. G. *Employee Assistance Programme*. Charles: Thomas Publisher.

Kerlinger, M. 2000. *Foundation of Behavioral Research*. Fortworth: Harcourt Publishers.

Kruger, A. & Casey, M. 2001. *Understanding Research*. Pretoria: Van Schaik Publishers.

Kruger, S. & Le Roux, R. 1996. *Basic Psychology for Human Resource Practitioners*. Pretoria: Van Schaik Publishers.

Kumar, R. 1976. *Research Methodology. A Step-by-Step for Beginners*. Australia: Addison Wesley Longman.

Leedy, P. D. & Ormrod, M. 2009. *Practical Research and Design*. New Jersey: Pearson Printers.

Levendal, C. 2004. *Assessment of the Implementation of the HIV and AIDS Policy*. Unpublished Master's thesis. Cape Town: University of Western Cape.

Ligon, J. & Yegidis, B. L. 1988. Programme Planning and Evaluation of Employee Assistance Programme. In Huchison, W.S. & Emener, W. G. *Employee Assistance Programme*. USA: Charles C Thomas.

MacNamara, C. 2005. *Nonprofit Programme Design Marketing and Evaluation*. New York: Authenticity Consulting.

Maiden, R. Atridge, M. & Herlihy, R. 2005. *The Integration of Employee Assistance, Work Life, Wellness Services*. New York: Haworth Press.

Maiden, R. 2005. *United State Perspective on Employee Assistance Programme*. USA: Haworth Press.

Mamathe, F. 2004. *The Need for an Employee Assistance Programme*. Unpublished Master's thesis. Pretoria: University of Pretoria.

Masi, D.A. 2001. *Designing Employee Assistance Programme*. New York: American Management Association.

Manzini, K. 2005. *Factors that Hinder the Utilization of the Employee Assistance Programme*. Unpublished Master's thesis. Pretoria: University of Pretoria.

Mathis, R. & Jackson, J. 2000. *Human Resource Management*. Ohio: South Western Collage Publishing.

Mathlape, M. G. 2003. *Strategic Positioning of EAP in South African Workplaces*. Unpublished Master's thesis. Johannesburg: University of Witwatersrand.

Meyers, D. 1984. *Establishing and Building Employee Assistance Programme*. Connecticut: Quorum Books.

Molnar, J. & David, R. 1976. Organizational Effectiveness: Empirical Comparison of the Goal and System Resource Approaches. *Sociological Quarterly*, Vol.17:3, pp 401-413.

Moodley, A. 2003. *New Approaches on EAP*. Charleston: Thomas Publishers.

Morris, F. & Fitz-Gibbon, M. 1974. *Programme Implementation*. Pretoria: Van Schaik Publishers.

Mouton, J. 2001. *Understanding Social Research*. Pretoria: Van Schaik Publishers.

Naicker, R. (2002). *The Evaluation of Insourced Employee Assistance Programme*. Unpublished doctoral dissertation. Johannesburg. Rand University

Naicker. R. & Foucher, C. 2003. The Evaluation of an in Sourced Employee Assistance Programme. *Journal of Human Resource Management*. Vol. 1:1, pp 25-31.

Newman, W. L. 2001. *Social Research Methods: Quantitative and Qualitative Approaches*. Boston: Allyn & Bacon.

Norman, R., Bob, B. & Johnson, R. 1997. *Systematic Counseling*. New Jersey: Prentice Hall.

Oher, J. M. 1999. *The Employee Assistance Handbook*. South Africa: Wiley and Son.

Phillips, B. & Older, H. 1988. *Models of Services Delivery*. Charles: Thomas Publishers.

Piette, J. & Fleishman, V. 1992 *A Comparison of Hospital and Communiti Case Management Programs for Person with Aids*. New York: Haworth Press

Posavac, M. & Carey, A. 1978. *Programme Evaluation*. New York: Haworth Press.

Prinsloo, A. & Roos, K. 2006. *Monitoring and Evaluation*. London: Sage Publishers.

Public Service Commission. 2006. *Evaluation of Employee Assistance Programmes*. Pretoria: Government Printers.

Public Service Regulations. 2001. *Approach to Performance Management*. South Africa. Government Printers

Robbins, P. S. & Barnwell, N. 2006. *Organizational Theory*. Australia: Pearson Education Australia.

Roberts, D. M. 1993. *Developmental Guidance and Counseling: A Practical Approach*. Minneapolis: Educational Media Corporation.

Roman, P.M. 1990. *Employee Assistance Programs and Strategic Alternatives*. London: Quorum Books.

Romano, M.E. 1995. *Redefining Supervisory Shop Steward Training*. In *EAP Digest*, January/February. p 50.

Rossi, P. H., Freeman, H. & Lipsy, M. W. 2004. *Evaluation a Systematic Approach*. London: Sage Publication.

Schoeman, L. & Petzer, S. 2005. *HIV Prevalence Study and Costing Analysis Undertaken for the Development of HIV/AIDS Workplace Strategy for Buffalo City*. Cape Town: Mills Litho.

Sithole, L. 2005. *The Need for Employee Assistance Programmes in South African Universities*. Unpublished thesis. Limpopo: University of the North.

Sharar, A. & Hartenstein, E. 2005. Perspectives on Elevating Quality in EAP through Standards Enforcement. A Survey of Key Informants in the EAP Field. *Journal of Workplace Behavioral Health*. Vol. 21:1, pp 53-65.

Shin, M., Suurvali, H. & Boutilier, M. 1996. *Health Promotion and Employee Assistance Programs*. Canada: Health and Company.

Sloan, R. P., Gruman, J. C. & Allegrante, J. D. 1987. *Investing in Employee's Health*. New Jersey: Jossey-Bass Printers.

Sonnestuhl, W. J. & Trice H. 1986. *Strategies for Employee Assistance Programmes*. Cornell University: ILR Press.

South Africa (Republic). 1993. *Occupational Health Safety Act, 1993. (No 85 of 1993)*. Pretoria: Government Printers.

South Africa (Republic). 1995. *Labor Relation Act, 1995 (No 66 of 1995)* Pretoria: Government Printers.

South Africa (Republic). 1996. *Constitution of the Republic of South Africa, 1996 (No 108 of 1996)*. Pretoria: Government Printers.

South Africa (Republic). 1997. *White Paper on Human Resource Management*. Pretoria: Government Printers.

South Africa (Republic). 1998. *Basic Conditions of Employment Act, 1997. (No 75 of 1997)*. Pretoria: Government Printers.

South Africa (Republic). 1998. *Basic Condition of Employment Act, 1996 (No 75 of 1998)*. Pretoria: Government Printers.

South Africa (Republic). 2001. DPSA. *Employee Health and Strategic Framework*. South Africa: Government Printers

South Africa (Republic). 1997. *White Paper on Human Resource Management*. Pretoria. Government Printers.

Strydom, H. & De Vos, A. S. 2002. Sampling and Sampling Methods. In De Vos, A.S, Strydom, H, Fouche, C.B. & Delpont, C.S.L., *Research at Grassroots. For the Social Sciences and Human Sciences and Human Professions*. Pretoria: Van Schaik Publishers.

Strydom, H. 2002. *Ethical Aspects of Research in the Social Sciences and Human Service Profession*. New Jersey: Haworth Press

Sutherland, C. J. & Cooper, C. L. 2000. *Strategic Stress Management*. Basingstoke: MacMillan.

Terblanche, L.S. 2006. *Employee Assistance Programmes*. University of Pretoria: Pretoria.

Thomas, F. 1990. *Employee Assistance Programme in the 20<sup>th</sup> Century*. South Africa.

Van der Merwe, E. 2007. *Employee Assistance Programme*. South Africa.

Van der Waldt, G. 2006. *Public Sector Performance Management*. South Africa.

Van Zyl, J. 1997. *South African Police Trauma Debriefing Manual*. South Africa.

Welman, J. & Krueger, S. 2002. *Research Methodology*. Pretoria: J. Van Schaik Publishers.

William, L., Rothwell, C. & Kazanas, B. 1994. *Managers Manual*. South Africa.

Wong, N. 1993. *General benefits of Employee Assistance Programme*. Basingstoke: MacMillan.

Wright, D. 1985. *The Essential Elements in an EAP*. New York: Praeger.

## Annexure A

### SELF-ADMINISTERED QUESTIONNAIRE

**Topic: The implementation of an Employee Wellness/Employee Assistance Programme in the Department of Education (Motheo District) process evaluation study.**

This is a self-administered questionnaire for the following Department of Education employees:

- Managers
- Office-based educators
- Administration staff
- Institution-based educators
- Cleaners

This questionnaire will be answered by participants independently. It forms part of a research study that will describe and explore factors that impede optimal implementation of an Employee Assistance Programme (EAP). The aim of the study is to evaluate the implementation of an Employee Wellness Programme or EAP and make recommendations.

- This self-administered questionnaire will take only 20 minutes.
- Please respond to the questions to the best of your ability.
- Your identity will remain anonymous.



## 1. PERSONAL PARTICULARS

1.1	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female			
1.2	Age	<input type="checkbox"/> 18-30	<input type="checkbox"/> 31-40	<input type="checkbox"/> 41-50	<input type="checkbox"/> 51-60	<input type="checkbox"/> 60+ 60+
1.3	Race	<input type="checkbox"/> Black	<input type="checkbox"/> White	<input type="checkbox"/> Coloured	<input type="checkbox"/> Indian	<input type="checkbox"/> Other
1.4	Marital status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Living together		
1.5	Number of dependants	<input type="checkbox"/> One	<input type="checkbox"/> Two	<input type="checkbox"/> Three	<input type="checkbox"/> More	
1.6	Occupation	_____				
1.7	Number of years in the department	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-10	<input type="checkbox"/> 11-15	<input type="checkbox"/> 16-20	<input type="checkbox"/> 20+
1.8	Where are you situated?	<input type="checkbox"/> District	<input type="checkbox"/> School-based		<input type="checkbox"/> Head office	

## 2. EMPLOYEE ASSISTANCE PROGRAMME (EAP)

2.2	Do you know what the employee wellness programme is?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
2.3	If yes, how were you informed about the service?	<input type="checkbox"/> EAP official	<input type="checkbox"/> Friend	<input type="checkbox"/> Colleague	<input type="checkbox"/> Workshop	
2.3	If you knew about the service, would you be interested in using it?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

2.4	There are various activities within the EAP. Which service would most interest you?	<input type="checkbox"/> Face-to-face counselling <input type="checkbox"/> HIV & AIDS programmes	<input type="checkbox"/> Stress management <input type="checkbox"/> Debt advice			
		Other (Please specify) <hr/> <hr/>				
2.5	In your opinion which service has more impact?	<input type="checkbox"/> Counselling	<input type="checkbox"/> Awareness programme (career planning, team building, conflict management, etc.)			
2.6	How do you rate the services provided by EAP?	<input type="checkbox"/> Very good	<input type="checkbox"/> Good	<input type="checkbox"/> Adequate	<input type="checkbox"/> Poor	<input type="checkbox"/> Very poor
2.7	If you rated the service provided as poor or very poor, briefly explain why:	<hr/> <hr/>				

### 3. REFERRAL BY MANAGERS: PROBLEMS EXPERIENCED BY EMPLOYEES

3.1	Are you in a managerial position?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2	Do personal problems impact negatively on work performance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.3	Do work-related problems have an effect on work performance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3.4	Have you referred an employee to the service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
3.5	In your personal experience, which of the following problems experienced by employees affect productivity?	<b>Strongly agree</b>	<b>Agree</b>	<b>Strongly disagree</b>	<b>Disagree</b>
	Emotional or behavioural disorder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Family violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	HIV & AIDS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Legal problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Marital, family relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Psychological problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.6	Which of the following internal referral procedures are commonly used by Department of Education employees?	<input type="checkbox"/> Formal supervisor referral	<input type="checkbox"/> Informal referral		<input type="checkbox"/> Voluntary referral
3.7	In your opinion, does the implementation of EWP have positive impact on the following areas?	<b>Strongly agree</b>	<b>Agree</b>	<b>Strongly disagree</b>	<b>Disagree</b>
	Increased productivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Reduced absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Stress-related sick leave is decreased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Reduced staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	------------------------	--------------------------	--------------------------	--------------------------	--------------------------

#### 4. EMPLOYEE PERCEPTIONS OF EAP

4.1	Do you think the Department of Education cares about its employees?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.2	Do you feel valued in the Department?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.3	Do you struggle to get support or counselling if you experience work-related problems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.4	If you experience problems, does it affect your job performance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.5	Do you think you can talk to your supervisor when you experience work-related problems?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.6	If you have received counselling from EWP, did you find the service valuable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.7	Would you use the service again?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure
4.8	Based on your experience with the service, would you recommend it to your family or colleagues?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure

## 5. ACCESSIBILITY OF EAP

5.1	EAP is provided in various settings. Which setting would you prefer?	<input type="checkbox"/> On-site (service provided by EAP staff on the department premises)	<input type="checkbox"/> Off-site (service provided by service provider outside the department premises)	<input type="checkbox"/> Union-based (referral of employees by unions)	<input type="checkbox"/> Combined model (where the service is provided by both EAP staff and service providers)
		Why? _____			
5.2	Some therapists argue that many employees who need professional help will not use an on-site model because they are afraid that managers will learn about their problems. Do you share the same view?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure	
5.3	Confidentiality is one of the principles of EAP. In which setting would you feel reassured that confidentiality will be strictly observed?	<input type="checkbox"/> Onsite	<input type="checkbox"/> Off-site	<input type="checkbox"/> Union based	<input type="checkbox"/> Combined
5.4	EAP services are centralised, operating only from one district. Would you prefer the services to be more decentralised for accessibility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure	

## 6. EFFECTIVENESS OF EAP

6.1	What is your assessment of the implementation of	<input type="checkbox"/> Good	<input type="checkbox"/> Adequate	<input type="checkbox"/> Poor	<input type="checkbox"/> Very poor	<input type="checkbox"/> Not sure
-----	--	-------------------------------	-----------------------------------	-------------------------------	------------------------------------	-----------------------------------

	EAP?					
6.2	Do you think that if unions are involved in EAP the service will be effective?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure		
6.3	EAP policy provides standard guidelines that ensure uniformity when handling transgression of workplace policies.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Not sure		
6.4	Do you think that employees should be informed about the financial implication of services not covered by EAP (e.g. rehabilitation due to substance abuse)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not sure		
6.6	The failure or success of EAP depends entirely on the support of management.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Not sure		
6.7	EAP needs to have measurable, attainable objectives in order to evaluate the achievement of its objectives.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Not sure		

**Thank you for your participation.**

## **Annexure B**

### **QUESTIONS FOR FOCUS GROUP DISCUSSIONS WITH EWP SECTION**

**Topic: The implementation of an Employee Wellness/Employee Assistance Programme in the Department of Education (Motheo District) process evaluation study.**

This questionnaire will be used in a group discussion with all the staff from the section. It forms part of a research study that will describe and explore factors that impede optimal implementation of an Employee Assistance Programme (EAP). The aim of the study is to evaluate the implementation of an Employee Wellness Programme or EAP and make recommendations.

- This discussion will take only two hours.
- Please respond to the questions to the best of your ability.
- Your identity will remain anonymous.
- If you have no objection, this session will be recorded.

## 1 Implementation of EAP

In the EAP Implementation Strategy there is a mention of seven areas for the effective implementation of EAP. The following discussion will centre on these areas as a means of evaluating the extent to which the strategy has been implemented.

### 1.1 Policy and procedure development

1.1.1 To what extent has the policy been implemented?

## 2 EAP advocacy

2.1 As a section, are you skilled enough with the necessary information to render the service?  Yes  No

2.2 Are all stakeholders on board with identification of challenged employees, referral procedure, confidentiality issues, and knowledgeable enough to integrate a challenged employee into the workplace?  Yes  No

No of training sessions held: \_\_\_\_\_ Motivate: \_\_\_\_\_

Stakeholders reached: \_\_\_\_\_

2.3 According to the Human Resources department there are 5 000 employees in the Department of Education in Motheo District. Can you estimate how many employees your section has reached in advocating for the service?

Number of officials reached:

Head office \_\_\_\_\_

District \_\_\_\_\_

Different schools \_\_\_\_\_

## 3 Ongoing management consultation

What plans are in place to engage the service providers to support supervisors/managers?



---

#### 4. Management support

The Public Service Regulation 1999 (Gazette no. 20271) ruled that all national and provincial administrations have a legal requirement to render Employee Assistance Programmes (EAPs) to employees in their organizations as a crucial structure in curbing employee personal challenges that impact negatively on production/job performance.

4.1 Briefly describe the kind of support management gives.

---

---

4.2 In your opinion, what kind of support does your section expect from management?

---

---

4.3 The Department of Education has different sections attached to different managers. Are these managers supportive of EAP services?

Yes  No

---

4.4 What are your expectations in terms of support from these managers?

---

---

## 5. Outsourcing of EAP

Different departments, including the Department of Education, prefer to outsource EWP services. What influenced these decisions?

5.1 In 2006 Careways group was \_\_\_\_\_  
contracted by the Department to pilot \_\_\_\_\_  
EAP in one of the Department's \_\_\_\_\_  
districts. What was the outcome? \_\_\_\_\_

5.2 Is the Department benefiting from outsourcing the service?  Yes  No

In what way(s)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5.3 Is the Department intending to decentralise the service?  Yes  No

5.4 Do you as a section have enough manpower to render the service?  Yes  No

5.5 If No, are there any future plans to expand the structure?  Yes  No

## 6 Evaluation of the programme

6.1 Did your section at any stage conduct needs analysis?  Yes  No

6.2 What were the pressing needs of your recipients? \_\_\_\_\_  
\_\_\_\_\_

6.3 Is your programme meeting those needs?  Yes  No

In what way(s)?

---

---

6.4 Is your programme achieving its goals and objectives?  Yes  No

How?

---

---

6.5 Is the programme being implemented as designed?  Yes  No

6.8 Does the programme serve the targeted population?  Yes  No

6.9 Are the recipients receiving intervention in the most effective and efficient manner?  Yes  No

Elaborate:

---

---

6.10 Is the necessary programme management and infrastructure in place to support programme implementation?  Yes  No

Give details:

---

---

6.11 What are the programme's strengths and weaknesses?

---

---

6.12 What constraints are there on \_\_\_\_\_  
proper implementation? \_\_\_\_\_

6.13 Are the programme recipients  Yes  No  
responding positively to the intervention?

If No, why not? \_\_\_\_\_  
\_\_\_\_\_

## **7. Challenges facing the section**

7.1 What are your \_\_\_\_\_  
challenges? \_\_\_\_\_

**Thank you for your participation**