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## NEGOTIATING EMPLOYEE ASSISTANCE PROGRAMS

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Employee Assistance Programs, called "EAPs," have become a standard fixture in workplaces and are increasingly becoming an important component of workers' health and welfare benefit package. The EAP model popular today is often described as "Broadbrush," a program which combines substance abuse and mental health services and/or referral in a workplace office. In 1970 it was estimated that there were between 350-400 programs in the U.S. Current estimates put the number as high as 10,000. The Washington Business Group on Health predicts that EAPs will become the major form for the delivery of mental health services to employees in the future.

While EAPs have been around since the Post-War era, they have recently taken on a new importance for labor/management negotiations. Some labor representatives see the programs as an unproblematic benefit they can offer their members, but others have maintained a more skeptical stance. Such skepticism is probably warranted given that the majority of EAPs are sponsored and administered by managers concerned primarily with workers' productivity. When surveyed on their reasons for sponsoring an EAP, most managers cite their desire to help "supervisors to manage marginally performing employees." EAPs, then cannot be approached simply as another health benefit that happens to be located in the workplace. Labor participation and, in some cases, joint-spon-

sorship of EAPs, can provide some beginning guidelines to influence these workplace programs.

### Contemporary EAPs: Policy and Treatment

While a few unions formed their own EAPs in the post-war period, the rapid growth of these programs after 1970 can be attributed largely to management initiative. Most unions influence an EAP only after its inception by management. Often an EAP's site (whether in the workplace or outside through contracted services), service providers, and policies have been established when the union is brought in to co-sponsor the program. Thus in many cases, unions are negotiating changes and posing alternatives to existent EAP policy when they participate in EAP labor-management committee.

The vast majority of EAPs (in both union and nonunion workplaces) have a referral policy that specifies two methods of entry into the program. A worker may voluntarily elect to use drug/alcohol rehabilitation services or to see a counselor, for example, about family problems. Voluntary services generally have a ceiling of 5 or 10 visits per worker. Alternatively, a worker may be referred by a supervisor to the EAP in what is called a "Constructive Intervention" on the basis of impaired work performance if, typically after several warnings, she or he does not improve. Where a question of substance abuse exists, the EAP may be used in combination with drug testing. In most cases, the union member's perception of the EAP as either an attractive benefit or a repressive arm of management will be significantly influenced by the way in which she or he enters the program.

The involuntary referral procedure, used especially in cases of suspected substance abuse, has been reluctantly accepted by labor representatives. It is seen as the preferred alternative to supervisory referrals based on non-work based criteria or, more drastically, termination. While employees can be involuntarily referred for treatment, unions insist that the supervisor must document a decline in work performance to support such a referral. Labor representatives believe that, despite its disadvantages, Constructive-Intervention protects workers' privacy, as well as providing a safety net for the employee who would otherwise be fired. Furthermore, union negotiators have the potential to soften involuntary referral policy through collective bargaining.

Once admitted to the EAP, an employee typically receives one or both of two kinds of treatment: Cognitive-Behavioral therapy or Stress-Management. (These therapies are often used with substance abuse treatments as well as in cases in which substance abuse is not an issue.) Both types of treatment offer the employer the cost benefit of a short-term therapy program with an emphasis on self-help. According to one of its proponents, Cognitive-Behavioral therapy has the advantage of teaching employees that "irrational, illogical thinking, unwarranted assumptions, and exaggerated evaluations lead to disturbed emotions . . . it teaches people that they are responsible for their own emotional reactions." Similarly, stress-management places the onus of responsibility on employees to work on their responses to stressful situations. Therapists typically prescribe relaxation exercises, such as biofeedback, before coming to work to deal with a difficult supervisor or an overload of work.

While we might agree, at least in part, that individuals have a responsibility for their own mental well-being, EAP treatments emphasize *workers'* responsibility for stress to the exclusion of all others. Workplace stressors such as inadequate health and safety practices, overwork, and difficult supervisors are overlooked or not dealt with. The prescribed solution for an employee's complaint of stress then is an individual therapy that may have negative consequences for the collectivity. Nonetheless, union members who have undergone such EAP treatments often appreciate the benefits of stress-reduction techniques, especially in situations in which they perceive no resolution of workplace problems through any labor-management cooperation or collective bargaining. We may, however, continue to question the short-term benefits gained by a more tolerant worker when there is a real danger that workplace stressors that negatively affect all employees will continue.

## Labor's Response To EAPs

While post-war labor representatives saw EAPs as a beneficial aspect of management's and labor's "human contract," contemporary unionists want to make these programs more accountable to union members. Joan Braconi, Research Coordinator for SEIU Local 790, summed up labor's most pressing concerns about EAPs when she said: "We want to be sure that they are not used to punish workers. Confidentiality for members undergoing rehabilitation for substance abuse, as well as therapy is a major concern. We'd also like to see them rely on voluntary referrals." Labor representatives are pursuing various strategies to make EAPs realize this vision. They are monitoring specific programs to ensure that they conform to management's stated policies, specifically, by training union members to act as referral agents in the workplace. Referral agents are trained union members who have time set aside with pay in which they can educate and advise other employees interested in EAP services. Unions also have elected to main-

tain a strict separation of the grievance procedure and EAP. The following are examples of various union policies on EAPs:

- AFSCME, who has formalized its own EAP policy for joint sponsorship, insists that the program office not be located in or near the personnel office or any other conspicuous place. In a similar vein, the UAW requested that management post EAP policy on confidentiality and voluntary referrals to encourage members to use the program.
- An AFSCME shop steward who sits on the advisory committee of her EAP reports that union members who act as referral agents may bring in shop stewards or union staff if a members' "personal problem" appears to be connected to a grievable complaint.
- The UAW jointly selects and trains rank and file referral agents with Chrysler in a EAP called "Help Line."
- AFSCME also has a series of suggestions concerning the specifics of union participation. They ask that union representatives be involved and receive recognition in all EAP publicity and training materials. The EAP training classes for supervisors and management should also be offered to shop stewards and officers. The flip-side of this participation is that the EAP staff should be familiar with the union and the union contract. EAP staff should regularly attend local union meetings to publicize the EAP, answer questions and get to know the union better.
- The CWA was especially concerned with keeping the EAP entirely separate from the disciplinary and grievance procedure. They secured the following provision in their EAP agreement with AT&T: "It is understood that staff members of the EAP will not participate in any discipline or grievance procedure involving EAP clients. Confidentiality in accordance with Company policies will be guaranteed in all facets of the EAP."
- Concerned about the danger of working with substance abusers on the job, the glaziers in the State Building Trades initiated and finances an EAP out of their health and welfare fund.

Unions are taking the initiative to ensure that management maintains its formal commitment to make EAPs a workplace service for employees. Union referral agents, policies facilitating communication between labor and EAP staff, and the separation between the grievance, disciplinary procedures and the EAP all counteract the coercive potential of EAPs.

Labor's silence on the issue of treatment in EAPs signals their acceptance of short-term therapies which train individuals to manage the stress of the workplace. While such a silence is understandable given the acknowledged benefits of such programs for some members, unions may want to closely examine the more subtle liabilities of such therapies and pose alternatives. Managing stress can benefit an individual, eliminating the cause of stress will help everybody.

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