

Applying Gender-Based Analysis Plus to Employee Assistance Programs: A Canadian Perspective

Dr. Mary Bartram, PhD, RSW, Researcher, University of Ottawa
Alain Contant, BSc, BEd, Director, Employee Assistance Services (Health Canada)
Employee Assistance Professionals Association St. Louis Conference
September 25, 2019



Health
Canada

Santé
Canada



uOttawa



LEARNING OUTCOMES



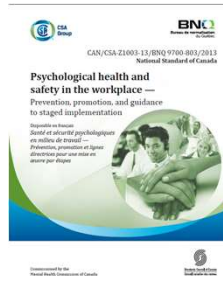
First, a bit about us.



And a bit about you....



Workplace
spotlight
on
mental
health and
gender



FEDERAL GOVERNMENT CONTEXT

Workplace mental health is a priority

- Variety of positive practices currently in place
- Ongoing concerns indicate more can be done
- Adopted a workplace mental health strategy

SGBA+ being implemented across government

- Ties into vision of a diverse & inclusive public service representative of Canada's population
- Seeks to close key gaps between diverse groups of women, men, and non-binary people

EMPLOYEE ASSISTANCE SERVICES (EAS)

Employee Assistance Program (EAP)

SHORT-TERM COUNSELLING
Assessment, referral, and follow-up

- Confidential, bilingual phone services, available 24/7, year-round
- Counselling appointment made within 48 hours (or immediately in crisis situations)
- For employees and their immediate families
- Identifying and resolving personal and work-related problems
- Face-to-face with a local mental health professional, phone or e-counselling available

TRAUMA SERVICES
Response to traumatic workplace incidents

- On-site interventions following line-of-duty occurrences outside the range of normal experience

Psycho-Social Emergency Preparedness and Response (PSEPR)

- Support for federal employees before, during and after a large scale critical incident and preparedness for large events
- Team of 10 experts in disaster mental health, supported by EAP providers
- Resiliency training
- Protocols for self-care
- Incident response and management support
- Follow-up

Occupational and Critical Incident Stress Management (OCISM) Program

- Created to prevent and respond to workplace incidents that impact the health of nurses working in First Nations communities
- Pre-incident education and support for prevention
- Post-incident assessment and intervention

Specialized Organizational Services (SOS)
Experienced mental health professionals provide psycho-social supports

CUSTOMIZED TRAINING ACROSS THE MENTAL HEALTH CONTINUUM

- Delivery of *Root to Mental Readiness and Mental Health* Commission of Canada's *The Winding Mind and Mental Health First Aid*

GRIEF AND LOSS COUNSELLING

- Death or impending job loss

WORKPLACE WELLNESS AND MENTAL HEALTH

- Case-finding
- Psychosocial workplace health review
- Assessment, recommendations, facilitation and support
- Stay at work, disability management and workplace reintegration

Informal Conflict Management Services (ICMS)
Experienced practitioners in Conflict Management offering:

- Individual consultation and conflict coaching (1 on 1)
- Facilitated discussions (conversation assisted by a neutral third party)
- Mediation (voluntary process of collaborative problem solving leading to a mutually satisfactory agreement)
- Group processes (facilitator-led process enabling groups to identify issues and establish a plan)
- Preventive workshops

What is Gender-Based Analysis Plus?

Government of Canada
2018

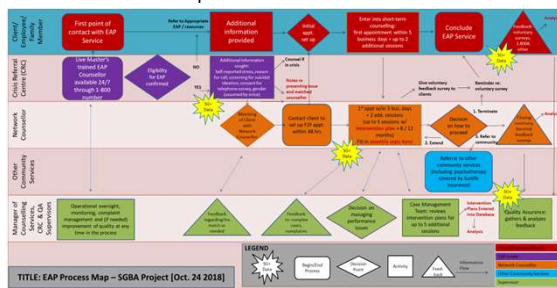
Policy Research Partnership Project

What can Health Canada's EAP do to systematically consider sex and gender (as well as intersecting identities such as age, sexual orientation, and ethnicity) in policies, procedures and services?



10

EAP Process Map



11



| Concepts | Academic |
|------------------------------|------------|
| Sex/gender & mental health | 80 |
| Sex/gender & counselling | 36 |
| Sex/gender & EAP | 28 |
| General EAP articles | 4 |
| Total | 148 |
| Concepts | Grey |
| Sex/gender & mental health | 72 |
| Sex/gender & EAP/counselling | 26 |
| Total | 98 |

12



- ✓ targeted outreach
- ✓ training
- ✓ digital services
- ✓ Performance measurement

13

Targeted outreach: men and underutilization

- Men are the largest group in need of targeted outreach
 - Men 2.5x substance use problems, 3x suicide, but only half as likely to seek professional help (Statistics Canada, 2018)
- Similar disparities in EAP utilization (Azzone et al., 2009; Brodziaski & Goyer, 1987)
- Targeted brochures and online materials both effective for engaging men (Hammer & Vogel, 2010; Wang et al., 2016).

14

Examples from grey literature



15

Targeted outreach: higher rates

- Canadian women 1.5x depression and anxiety
- LGBTQ have been found to have higher rates of mental health problems (Eady, Dobinson, & Ross, 2011; King et al., 2008; McIntyre, Daley, Rutherford, & Ross, 2011)
 - linked to experiences of discrimination, including in the workplace
- Outreach that targets by both gender and ethnic identity given variations in problems and in help-seeking (Chiu, Amartey, Wang, & Kurdyak, 2018)
 - E.g. poor mental health highest among Chinese Canadians (particular women)

16

Targeted outreach: unique workplace needs

- Targeted EAP supports for people who are transitioning from one gender or sex to another (Morneau Shepell, 2018; Partners EAP, 2018)
- Victims and perpetrators of intimate partner violence (Pollack, Austin, & Grisso, 2010)
- Women and gender diverse individuals are more likely to experience workplace-based bullying, discrimination and harassment (Attell et al., 2017; Dispenza et al., 2012).

17

Targeted outreach: implementation

- Possible to boost utilization by underserved groups with targeted promotional materials, while still increasing utilization overall (Zarkin et al., 2001)
- Tailor to the actual needs and preferences of specific target population (Shepps & Greer, 2018)
- Strategically integrate targeted outreach with broader workplace mental health promotion and diversity efforts

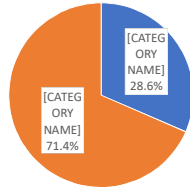
18

Targeted Outreach: Health Canada's EAP

Standard promotional visual



% clients, 2018-19



19

Training

- Effective counseling less about matching EAP client and counsellor identities as about knowledge, skill, and experience of the counselors (Lambert, 2016)
- Although some EAP clients may have a preference for a closer match (Cabral & Smith, 2011)
- Providers require training to develop competencies regarding sexual orientation and gender identity issues (Hunt, 2014; Rutherford et al., 2012)
- Training also important for understanding how broader structural inequalities affect the mental health of diverse groups of women and men (Ancis, Szymanski & Ladany, 2008)

20

Training resources are available

EASNA Institute 2010:
LGBT (Lesbian, Gay, Bisexual,
Transgender) Clients:
Best Practices for Informed EAP
Providers and Organizations



Corporate Equity Training
Move your organization towards equitable LGBTQ2 inclusion with the knowledge, systems and training to succeed.
Egale endeavors to advance human rights based on sexual orientation and gender identity through research, education and community engagement.

21

Training: Health Canada's EAP



| Expertise - Services offered / Expertise - Services offerts | | |
|---|------------------|--|
| Areas of Expertise / Domaines d'expertise | # years / années | |
| <input type="checkbox"/> Abuse - Physical | | |
| <input type="checkbox"/> Abuse - Psychological | | |
| <input type="checkbox"/> Abuse - Psychological and/or emotional | | |
| <input type="checkbox"/> Abuse - Sexual | | |
| <input type="checkbox"/> Abuse - Sexual | | |
| <input type="checkbox"/> Abuse - Other | | |
| <input type="checkbox"/> Abuse - Substance | | |
| <input type="checkbox"/> Addictions - Food | | |
| <input type="checkbox"/> Addictions - Substance | | |
| <input type="checkbox"/> Addictions - Gambling | | |

- Already tracking diverse competencies
- Recruitment and training could be tailored to identified gaps.

22

Digital EAP: shifting preferences

- Face-to-face counseling still preferred by a wide margin but e-mental health services have increasing appeal (Meurk et al., 2016; Musiat, Goldstone, & Tarrier, 2014)
- Youth are more likely to use e-mental health services than middle-aged adults (Ellis et al., 2012; Morneau Shepell, 2013)
- As internet use shifts from computers to smart phones, "EAPs without mobile access or a social media presence seriously risk compromising their utilization" (McCann, 2017)

23

Digital EAP: mind the gap...



- Women of all ages more likely to use e-mental health services than men, and gap more pronounced than for face-to-face (Keane et al., 2013; Meurk et al., 2016; Morneau Shepell, 2014; Rickwood et al., 2016; Tsan & Day, 2007)
- Targeted digital services that feature fitness, action-oriented tools and peer support are showing the most promise in engaging men (Ellis et al., 2012; Fogarty et al., 2017; Wang et al., 2016)

24

Performance: data collection

- EAP valuation typically weak, relying on limited utilization data and follow-up surveys that may or may not collect information on gender (Jacobson, Jones, & Bowers, 2011)
- Basic quantitative data on clinical outcomes of diverse EAP clients are limited, with few assessments of benefit equity (Milot, 2017)
 - “the equitable distribution of benefits among the different types of employees covered by an assistance program”

25

Example: Improving Access to Psychological Therapies (United Kingdom)

- Able to track equity gaps in clients moving from intake to treatment because they collect demographic information at intake

Referrals received by age and gender

Figure 18: Referrals received by age group³¹ and gender, England, 2015-16



Referrals entering treatment by age and gender

Figure 21: Referrals entering treatment by age and gender, England, 2015-16



26

Example: Health Canada's EAP intake form

Form fields include: Name, Date of Birth, Sex, and checkboxes for various service types and preferences.

27

Performance: EAP utilization rates

- Reporting the percentage of total EAP clients who are male or female has limited relevance (Spetch, Howland & Lowman, 2011)
 - especially when include both employees and eligible family
- Calculate as a percentage of eligible employees who are male, female, gender diverse, LGBTQ, etc., to take differences in employee demographics into account.
 - E.g. two thirds of Health Canada employees are women but two thirds of Fisheries and Oceans Canada employees are men

28

Performance: outcome reporting

- EAP outcome data need to be strengthened (Csiernik, 2011)
 - in general
 - by gender and other identity factors
- Follow-up surveys are weaker than standardized pre- and post-service measures (Jacobson et al., 2011)
- Kessler distress scale particularly suited to EAP mandate (Kessler et al., 2003)

29

Example: K6 Distress Scale – self-administered

| Q1. During the past 30 days, about how often did you feel ... | All of the time | Most of the time | Some of the time | A little of the time | None of the time |
|---|-----------------|------------------|------------------|----------------------|------------------|
| a. ...nervous? | 1 | 2 | 3 | 4 | 5 |
| b. ...hopeless? | 1 | 2 | 3 | 4 | 5 |
| c. ...restless or fidgety? | 1 | 2 | 3 | 4 | 5 |
| d. ...so depressed that nothing could cheer you up? | 1 | 2 | 3 | 4 | 5 |
| e. ...that everything was an effort? | 1 | 2 | 3 | 4 | 5 |
| f. ...worthless? | 1 | 2 | 3 | 4 | 5 |


30

Performance: organizational context

- Include high-level GBA+ EAP indicators in organizational performance management frameworks
 - E.g. male and female employee utilization rates as percentages of total male and female employees
 - E.g. rates of improvement in distress levels pre- and post-EAP services by gender and other identify factors
- Leverage EAP GBA+ quality improvement efforts
 - EAP has little direct impact on structural causes of workplace stress such as harassment and discrimination

31

Example: Statistics Canada adds third gender

|  Statistics Canada / Statistique Canada | |
|--|---|
| Subjects | Data Analysis Reference Geography Census Survey |
| Home → Definitions, data sources and methods → Statistical classifications → Classification of gender | |
| Classification of gender | |
| Status: This standard was approved as a recommended standard on January 25, 2018. | |
| Classification structure | |
| Display definitions | |
| Code | Category |
| M | Male gender |
| F | Female gender |
| D | Gender diverse |

32

Implementation accomplishments to date

- Action plan designed and priority areas identified
- Project overview and awareness session for all staff
- Changes made (where possible) to collect additional GBA+ data
- Targeted outreach campaigns planned
- New service delivery modes are being piloted (CHAT, Virtual)
- Some QA data collected can be analyzed with GBA+
- Collection of demographic information of existing client departments for increased analysis
- LifeSpeak web-based wellness platform to include new modules (LGBTQ+ Mental Health and Gender Identity)



33

Implementation challenges to date

- Alignment of technology with enhanced intake and voluntary surveys and other activities
- Collecting feedback from clients with apprehension about answering additional demographic information (confidential nature of EAP)
- Building the capacity within the affiliate provider network

34

Small group discussion



- How could GBA+ strengthen you own EAP context?
- What could be moved forward, what would be the next steps?
- What challenges can be foreseen, how could they be overcome?

35

Team Members



uOttawa



Health
Canada

Santé
Canada

- | | |
|----------------------|---------------------|
| • Mary Bartram | • Chantal Fournier |
| • Jelena Atanackovic | • Nikolina Kovacina |
| • Vivien Runnels | • Alain Contant |
| • Ivy Bourgeault | • Louis MacDonald |
| | • Nancy Porteous |
| | • Ariane Renaud |

36

Thank you!

- Stay tuned: full research article under review by the *Journal of Workplace Behavioural Health*
- Feel free to contact us:
mary.Bartram@mcgill.ca @mary_mbartram
alain.contant@canada.ca @AContant_EAS

37
