

Title of the study: A comparative study between Employee Assistance Programme and Occupational Social Work in the South African context; Limpopo Province

Submitted in partial fulfilment of the requirements for the degree:

Master of Social Work: Employee Assistance Programmes

MSW: EAP

BY

KEDIBONE IRENE MOJAPELO

In the

Department of Social Work and Criminology

Faculty of Humanities

University of Pretoria

Supervisor: Prof. L.S. Terblanche

October 2018

DEDICATION

This study is dedicated to my son Lethabo “Iaka” Kopano Semenya for being the pillar of my strength. Your unconditional love, understanding, and your innocent smile bring out the best in me.

DECLARATION

I do hereby declare that this research report entitled:

“A comparative study between Employee Assistance Programme and Occupational Social Work in the South African context; Limpopo Province”

have not previously been submitted by me for a degree at this or any other University; that is my work in design and in implementation, and that all sources of information herein has been duly acknowledged

.....

KEDIBONE IRENE MOJAPELO

OCTOBER 2018

ACKNOWLEDGEMENTS

I would like to share my gratitude and appreciation to the following people whom their valuable contribution towards this study is unforgettable:

The almighty has done great things for me and Holy is His name Luke 1:49. Indeed You have done great things for me and I am thankful for the gift of life, the strength and the helping me to complete this project;

My supervisor Prof. L.S. Terblanche for the endless support, encouragement, persistent guidance, as well as the interest you showed in this study. Working under you was a privilege and I am enriched with experience. I have grown both academic and professionally. God bless you!

To my parents Moses and Leah Mojapelo; my one and only sibling Mankwe Mojapelo for their physical, financial and emotional support throughout my studies. You always believed in me and I am thankful for that! I promise to continue making you proud. Indeed you are the pillar of strength.

To my first love Kim and my son Lethabo Iaka, thanks for always bringing joy to my heart and you guys are without a doubt my smile keepers.

To my mom for being a mother to my son while I was busy with my studies. May God continue shining in your life and I love you mom. You know where thank is more sincere and that is from the bottom of my heart.

My spiritual advisor Fr Rev Welcome Maluleka you have been very instrumental to finding my path in this project. Thank you for your spiritual guidance and for always being there. Continue being the best not only to me but also to those who need to be enlightened spiritually and otherwise.

Ms Lindsay Van Zyl for editing document your contributions and inputs are valuable.

To my aunt Maria Kapa and Granny Rebecca Legodi thanks for your continuous prayers and having faith in me.

To my colleagues, friends and praying partners for your unconditional support throughout the study. You are the best!

Board members of the Employee Assistance Professionals Association South Africa (EAPA-SA) and South African Occupational Social Work Association (SAOSWA) for giving me permission to interview their members.

The EAPA-SA members and SAOSWA members for your willingness to participate in the study, this study would not have been completed without your valuable contribution.

My Masters colleagues (2018 class) for your support, sharing the joys and challenges of this steep learning curve with me. It was not an easy journey but we made it.

ABSTRACT

Introduction and background: There are two programmes that are both aimed at addressing work related and personal problems in the workplace, namely Employee Assistance Programme(EAP) and Occupational Social Work(OSW). It was not clear what the difference and similarities are between Employee Assistance Programmes and Occupational Social Work. There was very little literature available critically outlining the differences between the two professions. Therefore the study is aimed at comparing the two professions in order to outline both the differences and similarities.

Design and Methods: Qualitative exploratory and descriptive research was conducted to determine the differences and similarities between EAP and OSW. Data had been collected through telephonic interviews, through means of a semi-structured interview schedule. Criteria for trustworthiness were adhered to throughout the study. Ethical standards were adhered to in order to ensure quality of the study.

Findings: The findings of the study reveals lack of knowledge of core technologies amongst OSWs; they displayed confusion between the core technologies and the OSW practice model. The findings revealed that there is no legislation specific for OSW and EAP; they both rely on the legislation in general. The findings revealed that there are differences between EAP and OSW as well. The differences that were discovered are service delivery, requirements for practice and scope of practice applicable for both professions. Although the two professions differ, there are similarities which are therapeutic services, proactive programmes, core technologies and the fact that they both focus on workplace problems.

Key terms

Differences

Employee Assistance Programme

Employee Assistance Professionals Association of South Africa

Employee Health and Wellness

EAP professional

EAP practitioner

Occupational Social Work

Similarities

South African Occupational Social Work Association

Work-place

Well-being

Productivity

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Chapter 1

Title of the study: A comparative study between Employee Assistance Programme and Occupational Social Work in the South African context; Limpopo Province

1.1 Introduction

In 1984, it was suggested by the the National Association of Social Workers that work related problems influence employees and often overflow into problems that occur at home or in the community. Maiden (2001:125) highlighted that problems experienced at home and within the community affect the individual's work. There are two tools employed by organisations to address challenges faced by employees. These are Employee Assistance Programme (EAP) and Occupational Social Work (OSW). Their main purpose is to enhance productivity and well-being of the employees. Although their objectives sound similar there is no grounded evidence that the tools are intervening the same way in order to meet their objectives. In the past EAP dominated the OSW scene, thus EAP and OSW were often used and referred to interchangeably (Mor, Barak & Bargal, 2000:3).

The most recent definition of OSW by the South African Council for Social Services Professions (SACSSP, 2008), defines it "as a specialised field of social work which addresses the human and social needs of the work community through a variety of interventions which aim to foster optimal adaptation between the individuals and their environment". The researcher is of the opinion that OSW is a specialised field in social work aimed at addressing social problems in the work place.

Employee Assistance Programme is described as a workstation programme intended to assist "work organisations in addressing productivity issues and. employee clients in identifying and resolving personal concerns, including health, marital, family, financial, alcohol, drug, legal, emotional, stress or other personal issues that may affect job performance" (EAPA-SA, 2010:6). The researcher is of the opinion that EAP is designed to assist employees to address their work related and personal challenges that may affect productivity in the workplace.

A comparison is defined as “a consideration or estimation of the similarities between two things or people” (Oxford Dictionary).

The study is aimed at comparing Employee Assistance Programme and Occupational Social Work, because literature utilises the two interchangeably but not actually recognising similarities and differences consistently. This proposal will include a literature review, theoretical framework, problem statements and rationale, goals and objectives of the study, the research process, ethical consideration that needs to be considered and chapter outline of the research with its time frame.

1.2 Literature review

The literature review will entail the historical background of EAP and OSW, the core technologies of EAP and the models for both EAP and OSW.

In the USA EAP was established as an Occupational Alcoholism Programme (OAP) for employees that were experiencing alcohol related problems which comprised, such as non-attendance of work, deteriorating performance and the associated impairment of the labour force (Daniels, Teems & Carroll, and 2005:37). Daniels, Teems and Carroll (2005:38) add that “EAPs 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”. This is also supported by Attridge et al., 2005 as cited in Nsibandé-Mbokazi (2010:22) when they argue that the United States developed the concept of EAP as a result of addressing alcoholism in the workplace. In the late 1980s and the early 1990s, “the continuum of work-based human services 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” (Maiden, et al. 2005: 5).

In South Africa, EAP originally incorporated two areas which are; human welfare, employees and management in the context of the workplace (Pillay & Terblanche, 2012:230). The first EAP was instituted by the Chamber of Mines which hired a consultant to conduct a study on an EAP for employees working in the mines in 1983. In 1983 the University of South Africa established a working group of EAPs under its

auspices. This working group was incorporated into the membership of the Institute for Personnel Management of Southern Africa (IPM) in 1983 (Terblanche, 1992:19). The working group was known as Nation EAP Committee. It was in 1986 that South Africa increasingly acknowledged the EAP; at the time there were two mines that had received two programmes housed in their own buildings (Pillay & Terblanche, 2012:231). The implementation of these programmes was due to challenges created by the adverse working conditions in the mines. The challenges faced by employees led them to turn to drugs and alcohol as a coping mechanism. However this led to employees experiencing mental challenges while working underground work in the mines (Pillay & Terblanche, 2012:232). EAP has now expanded from mining to other industries such as the financial, food, motor and public sector (Pillay & Terblanche, 2012:232).

The ecological approach has lent a conceptual tool to occupational social workers (Du Plessis, 1990:203). This can be extended to all social work settings allowing them to view their input in terms of the two broad spectrums of problems. The problems include substance abuse, marital and family problems, psychological and emotional stress and health problems. These problems arise from the nature of the work process or the organisation of work. The main problems here are seen as being caused by the work environment.

Cater (1977) as cited in Du Plessis (1990:206) explains that the development of occupational social work has five phases which are;

- Philanthropic industrial welfare
- Paternalistic social work
- The decline of industrial welfare work
- War and post war revival
- Industrial social work by schools of social work

It is acknowledged by Cater (1977:15-16) that social work has had various functions over the years in the occupational setting (Du Plessis, 1990:207). Some of these involve increasing profit, pacifying the workforce, preventing unionisation, expressing sincere philanthropy, facilitating the entry of new groups of workers into the workplace.

The promotion of mental health and social planning were represented by the social role of business via efforts aimed at affirmative action (Cater, 1977 as cited in Du Plessis 1990:208)

In South Africa, there is no sufficient information of the development and history of OSW, all though there are documented facts and trends about occupational social work in the form of theses undertaken by scholars since 1960s (Du Plessis, 1990:239). In 1983, a forum was established for occupational social workers, which had approximately 50 people on their mailing list (Du Plessis, 1990:243).

EAP in South Africa dates back to the 1940s with its roots in the United States of America in the field of occupational social work which developed within the context of welfare systems (Du Plessis (1991:35). Du Plessis (2001:99) further explained that occupational social work services focused heavily on therapeutic service provision for many decades and neglected the prevention, educational and developmental aspects of EAPs. Therefore according to the researcher, both EAP and OSW were aimed at addressing alcohol problems which were seen as a challenge in the mines. Employee Assistance Programme and Occupational Social Work are both implemented in the workplace as a tool for addressing challenges faced by employees.

According to the EAPA-SA (2010:6) "Employee assistance programme core technology" or "EAP core technology" signifies the crucial components of the EAP. The core technologies are components aimed at resolving work-organisation output issues and "employee client" personal challenges affecting job performance. EAP core technologies as stated in the EAPA-SA (2010:6) are as follows:

- (1) Consultations with work organisation leadership (managers, supervisors and union officials) concerning challenge that affect productivity, in order to train them to deal with troubled employees, enhance the work environment and improve employee job performance;
- (2) Effective marketing of available EA services to all employees including management and union and their immediate family members;
- (3) Confidential be assured to clients and problem be identified timely and be assessment be conducted for employee clients with personal concerns that may affect job performance;

- (4) Short-range intervention, inspiration, and effective confrontation with employee clients to address problems that affect job performance;
- (5) Relevant intervention be made, referral for further intervention and diagnoses, as well monitoring of cases and follow-up;
- (6) Networking with other stakeholders and assisting them to maintain good working relationship and also monitoring service providers' contracts.
- (7) Consultation with work leadership and encouraging employees to utilise wellness and psychological benefits.
- (8) Evaluation of the impact of EAP on the organisation and performance of employee.

The above-mentioned eight core technologies are aimed at enhancing and improving effectiveness in the workplace through anticipation, identification and resolution of both personal and work problems. There are no specified core technologies that are being followed in occupational social work.

For EAP to be implemented certain models must be selected in order to effectively implement the core technologies. The EAP models are categorised into two models namely; internal and external models. According to Masi (2000:407) the in-house model is one in which the entire EAP staff is employed by the company. Sharar, Pompe & Attridge (2013) explain external programmes as an outside vendor that is contracted to provide most or all aspects of the EAP. Potterton (2013:2) state that an "external EAP can be of further value to the employer by offering counselling services through an extensive network of EA professionals". According to the researcher there is no wrong or right model; it all just depends on the unique circumstances of the organisation, looking at the organisation's size, funds and resources of.

1.3 Occupational Social Work

“Occupational Social Work is an emerging profession with the potential to positively influence the workplace. However, in order to make a positive contribution to solving current workplace dilemmas, occupational social workers need to keep abreast of workplace developments” (Dorkin, 2009:1). Van Breda and Du Plessis (2009:323) argue that the occupational social work practice model is grounded within two principles; which emphasizes the importance of comprehensive and integrated practice that is contextually responsive and binocular vision encourages social workers to remain at the interface between the workers and management without becoming overly allied with either party. The practice model comprises of four major roles from which the occupational social workers practice. They are namely restorative intervention, promotive intervention, work-person intervention, and workplace intervention. This implies that with occupational social work, intervention is made based on the four practice models. Van Breda and Du Plessis (2009:323-326) explain the four different practice models as follows:

- Restorative interventions: This position is considered a traditional social work practice that addresses the personal challenges of employees from the micro, meso and macro levels.
- Promotive Interventions: This position focuses on encouraging or improving the well-being and social functioning of employees. This position focuses on the employee as person whereby the social worker empowers employees for further growth and development.
- Work-Person interventions: In this position, Van Breda (2009) explains that the “occupational social worker addresses the systems of interpersonal relationships within the workplace in order to produce a productive work community”. She further explains that boundaries between work environment and other systems such as families and communities are also important in this position.
- Workplace Interventions: Workplace is main focus on the objective structures whereby employees function. It aims to change the social environment within which people work, by influencing policies in order to enhance productivity and the social well-being of employees.

There is also no right or wrong model, but rather the social worker places herself in the middle and selects the best model depending on the uniqueness of the problem. All four practice models are aimed at enhancing the social well-being of the employees and productivity.

The researcher is of the opinion that both EAP and OSW were developed to address challenges that are faced by employees within the workplace in order to enhance productivity. With the literature provided, it is clear that they both have similar objectives although they do not follow the same route when addressing the challenges encountered by the employees. Therefore the main focus of the study will be to make a comparative study between EAP and OSW. The focus will be on determining the differences and similarities between EAP and OSW.

1.4 Theoretical framework

Professions should make decisions which are guided by theories because theory is what differentiates professionals from technical discipline (Ikiugu & Smallfield, 2011:437). The researcher has employed the structural theory to carry out this study. Lopez and Scott (2000) explains that the “notion of social structure was extensively developed in the 20th century, with key contributions from structuralism perspectives drawing on the theories of Claude Lévi-Strauss, Feminist or Marxist perspectives, from functionalist perspectives such as those developed by Talcott Parsons and his followers, or from a variety of analytic perspectives”. Lopez and Scott, further explain social structure as “comprising the relationships themselves, understood as patterns of causal interconnection and interdependence among agents and their actions, as well as the positions that they occupy”. Social structure theory has been progressive with the idea that social differentiation is defined by networks of social relations. Social differentiation of groups, communities and organisations are described regarding the nominal classifications of actors (Friedkin, 1998: 3). The further explains that the differentiation social structure is “defined by the existence of actors who occupy different positions in the network of social relations” while positions are revealed by the patterns of relations with others. Since there was a lack of information on the differences and similarities of EAP and OSW, the researcher had to utilise the structural theory to generate knowledge on the specific fields.

The researcher utilised the structural approach as it observes the community as complex system where different components work together to enhance harmony and constancy. As the study is a comparative study, data was collected from both EAP and OSW, as both utilise different models to intervene when looking at a client's problem. The researcher was guided by the social structure theory when developing questions for the study so that objectives can be easily attained.

1.5 Problem Statement and Rationale

There are two programmes that are both aimed at addressing work related and personal problems in the workplace, namely Employee Assistance Programme and Occupational Social Work. It is argued by Kenyon-Thompson (in Jantjie, 2009:21). It is further explained that OSW focuses on employee's general problems, whereas EAP follow a clinical approach. She further maintained that only registered social workers can render OSW while EAP can be rendered by any practitioner not only qualified professionals. Generally speaking, there are very distinct differences and similarities between EAPs and OSWs which are highlighted by different authors. There was very little literature available critically outlining the differences between the two professions.

The rationale of the study was to explore the differences between EAP and OSW. Therefore, the researcher is in a good position to determine the differences and similarities between EAP and OSW. The study has generated knowledge for academic purposes.

The research questions for the study was structured as follows:

- What are the differences between the Employee Assistance Programme and Occupational Social Work?
- What are the similarities between the Employee Assistance Programme and Occupational Social Work?

1.6 Goal and objectives

The goal of this study was to compare the EAP and OSW in the South African context, based in Limpopo.

The objectives of the study were

- To theoretically conceptualise Employee Assistance Programme and Occupational Social Work;
- To explore and describe the difference between the Employee Assistance Programme and Occupational Social Work; and
- To explore and describe the similarities between the Employee Assistance Programme and Occupational Social Work.

1.7 Research approach

The study was rooted in an interpretivist paradigm, as it aimed to conceptualise EAP and OSW theoretically. The study was also rooted in exploring the participants' subjective experiences of reality, in an attempt to determine the similarities and differences between the EAP and OSW in practice. It was based on the assumption that there are multiple realities, which can be explored and constructed through human interactions and meaningful actions. These realities exist due to the varying experiences, knowledge, views, interpretations, meanings, definitions and perceptions of the participants relating to their fields of practice and workplace settings (Babbie & Mouton, 2001:28). The researcher conducted an in-depth examination and reading of texts and literature relating to the phenomenon being studied to discover embedded meaning, with the intention of "seeking the connections among its parts" (Neuman, 2006:88) and gaining a deeper "understanding of how its parts relate to the whole" (DeVos, Strydom, Schulze & Patel, 2011:8).

The research approach that was utilised in the study is a qualitative approach. Qualitative research is seen as a form of inquiry in which the researcher makes an interpretation of what they see, hear and understand (Creswell, 2007:37-39). The researcher wanted to develop a comprehensive view of social phenomena (Creswell, 2007:37-39). Kumar (2005:12) as cited in De Vos, Strydom, Fouché and Delport (2011) explains qualitative research as a study which is aimed at gathering information

through the use of variables measured on nominal or ordinal levels in order to describe the situation, phenomenon, problem or event. Therefore the researcher gathered information about the EAS and OSW in order to be able to make a comparative study between the two.

The study focused on the construction of detailed descriptions of the participants' realities and their meanings attached to their work experiences, knowledge and settings. The researcher aimed to understand, as opposed to control, the commonalities and differences through comparing EAP and OSW. Data was collected verbally from a small sample of participants through semi-structured interviews.

1.8 Type of research

The researcher utilised basic research. Mouton (1996:104 – 105) explains that the main purpose of basic or academic research is to contribute to the existing body of scientific knowledge and the focus is in the world of science, whereas applied research focuses on certain problems in the social world and tries to make a contribution or to solve real life issues.

There was insufficient of evidence about the comparison of Employee Assistance Programme and Occupational Social Work, therefore the researcher aimed at generating new theoretical knowledge on the differences and similarities between EAP and OSW.

1.9 Research design

The Social Work Dictionary (1995:63) describes “research design as that plan of a research project through which data is gathered, in order to investigate the hypothesis or to realise the aim thereof”. In addition, 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”.

The research design that was utilised in this study was case study research to achieve the research objectives. The researcher opted for this design as there were limitations between EAP and OSW which were not clearly defined. Therefore, the researcher

aimed at determining the differences and similarities between EAP and OSW. The sub-type research design that was utilised in this study was multiple case or collective case studies. Multiple case aims at exploring the differences within and between cases (Mare, 2016:83). The researcher opted for this sub-type as the study was a comparative study which was going to present with differences and similarities. In addition, the study worked with two groups; EAP and OSW. Moreover, data was collected through multiple sources.

1.10 Research methods

The Research method basically explains the population of the research and how the population was sampled from the larger context of the community. It further explains the process of how data was collected, the techniques used to collect data and how data was analysed.

1.10.1 Study population and sampling

The population of the research were registered members of the South African Occupational Social Work Association (SAOSWA) and Employee Assistance Programmes Association of South Africa (EAPA-SA) and registered members of the based in Limpopo. The population was determined by the professionals who are registered with either EAPA-SA or SAOSWA.

De Vos et al., (2011:391) defines sampling as “being relatively limited, based on saturation, not representative, the size not statistically determined, and involving low cost and less time”. The sampling approach to be used in the prospective study was non-probability sampling, as the population size was unknown to the researcher (Gravetter & Forzano, 2009:133). The researcher utilised the purposive sampling technique in the study as it was interested in a specific group with similar characteristics. De Vos et al., (2011:392) support this by arguing that “a particular case is chosen because it illustrates some feature or process that is of interest for a particular study”.

The researcher identified the participants through the help of EAPA-SA and SAOSWA. This was, therefore, a purposive sampling. EAPA-SA and SAOSWA identified registered professionals/practitioners from their data base who are based in Limpopo. They were all chosen because of a common interest which is EAP and OSW. The pre

selection idea for inclusion would also be that if you are not working in the EAP or OSW field you cannot form part of the study, as you would not be able to give information needed. The participants must have 1 year experience in the field. Braun and Clarke (2013:55) explain that qualitative research tends to use smaller samples than quantitative research. The researcher conducted individual interviews telephonically, each sample consisted of six members of EAPA-SA and six members of SAOSWA.

1.10.2 Data collection

Data had been collected through telephonic interviews, through means of a semi-structured interview schedule.

Semi-structured interviews are constructed on programmed themes and include probing questions with interviewees being asked questions relating to the themes. Saunders, Lewis and Thornhill (2007:314) noted that semi-structured interviews may be used in order to understand the relationship between variables, particularly those revealed through a descriptive study. The questions were categorised into 5 themes that focused mainly on differences and similarities of EAP and OSW. The semi-structured interviews allowed the researcher to follow up on interesting avenues that presented during the interview and the participants were then able to give a fuller picture (De Vos et al., 2011:352). The researcher utilised telephonic one-on-one interviews to collect data.

After receiving their names from both EAPA-SA and SAOSWA, the researcher requested permission from the individuals to collect data from them. The instrument that will be utilised to collect data is through questions in both the data collection techniques. The researcher will compile questions to be asked during the semi-structured interview with the focus group. The researcher opted for questions to allow the researcher to probe further on precisely the topic of interest and allow the participants to provide comprehensive information. During data collection the data will be captured through audio recordings. The researcher will ask for permission to record the interviews before starting with the interviews. The researcher will utilise open-ended questions in order to allow participants to elaborate on information. This is also supported by De Vos, et al. (2011:352) as they explains that for participants to express

themselves freely one needs to ask open-ended questions. Questions that will be asked during the interviews will be neutral and any leading questions will be avoided.

1.10.3 Data analysis

The research methodology was based on the eight steps on the inductive and descriptive open coding technique by Tesch as described in Creswell (2014). These eight steps will be presented briefly as follows:

Step 1 – Reading through the data

All the verbatim transcripts were carefully read to acquire a sense of understanding by the researcher. This gave ideas about the data segments and what they look like/mean. The meanings that emerged during reading were written down as were all thoughts as they came to mind. The transcripts of all the participants were carefully and repeatedly read by the researcher to make sure that she understood them. An uninterrupted period of time to digest and think about the data in totality was created. The researcher engaged in data analysis and wrote notes and impressions as they became apparent.

Step 2 – Reduction of the collected data

The researcher scaled down the data collected to codes based on the existence or frequency of concepts used in the verbatim transcripts. The researcher then listed all topics that emerged during the scaling down. Similar topics were grouped together, and those without any associations were grouped separately. Notes were written in the margins and the researcher started recording thoughts about the data in the margins of the paper containing the verbatim transcripts.

Step 3 – Asking questions about the meaning of the collected data

The researcher read through the transcriptions again to analyse them. This time the researcher asked herself questions about the transcriptions of the interview, based on the codes (mental picture codes when reading through) which existed on the frequency of the concepts. The questions were “Which words describe it?” “What is this about?” and “What is the underlying meaning?”

Step 4 – Abbreviation of topics to codes

The researcher started to abbreviate the topics that had emerged as codes. These codes needed to be written next to the appropriate segments of the transcription. Differentiations of the codes by including all meaningful instances of a specific code's data were done. All these codes were written in the margins of the paper against the data they represent with a different pen colour to the one used in Step 3.

Step 5 – Development of themes and sub-themes

The researcher listed themes and sub-themes from coded data and the associated texts and reduced the total list by grouping topics that relate to one another to create meaning of the themes and sub-themes.

Step 6 – Compare the codes, topics and themes for duplication

In this step the researcher revised from the beginning to check the work for duplication and to refined codes, topics and themes where necessary. Using the list of all codes she checked for duplication. The researcher grouped similar codes and recoded others where necessary so that they fit in the description.

Step 7 – Initial grouping of all themes and sub-themes

The researcher gathered data which belonged to the same in one column and preliminary analysis was performed. The researcher and co-coder then after met to reach consensus on the themes and sub-themes that each one has come up with independently

Step 8 – Re-coding if necessary

The researcher and the co-coder reached a consensus on the themes and sub-themes identified. Finally the themes and sub-themes that emerged were written in columns to show clear distinction and interrelationship.

Measures to ensure trustworthiness

Data quality will be ensured by means of assessing trustworthiness. It is clear that assessing trustworthiness is the acid test of your data-analysis, findings and

conclusions (Mare, 2016:123). The researcher utilised the concepts by Lietz and Zayas (2010:191-197) to assess trustworthiness, which are credible and auditable.

Padgett (2008) as cited in Lietz and Zayas (2010:191) stated that “to achieve credibility, qualitative research must manage the risk of research reactivity and bias”. The credibility of the research was assessed to ensure that the readers can believe the findings and also to ensure that the subject has been accurately identified and described. The strategies that were utilised to assess credibility were member checking. The telephonic interviews will be recorded, transcribed and coded. The analysed and interpreted data was sent to occupational social workers and the employee wellness programme professionals/practitioners who participated in the study. Their role was to evaluate the interpretations made by the researcher and recommend changes if they were misreported.

The other concept utilised to assess trustworthiness is auditability. The concept auditability refers to how the research processes are documented in order to permit the reader to follow and analysis the research process (Padgett, 2008 as cited in Lietz & Zayas 2010:191). This is supported by (De Vos et al., 2011:420) as they argue that this concept should be utilised to check if the research process is logical, well documented and able to be audited. The researcher wrote the report in a systematic process, to make it easier for someone outside to understand the document and be able to follow the research process and ask questions. The strategy employed to increase auditability is an audit trail. The researcher kept all detailed documents of each interview for data collection. These include the process of coding, searching for themes and even reviewing the themes during the transcripts.

1.11 Pilot study

The study was tested by means of developing questions that were put to participants. The participants consisted of one EAPA-SA member and one SAOSWA member. These participants who took part in the pre testing of the interview schedule were not included in the actual study reason being that data did not weigh enough value to be included. The pilot study's results did not display a need for interview schedule modification. As this was to determine whether the questions that were asked are relevant and meet the objectives of the study. The researcher kept the transcripts and all documents from the pilot study as part of the audit trial.

1.12 Ethical considerations

Babbie, (2007) as cited in De Vos et al. (2011:114) explains that “ethics implies preferences that influence behaviour in human relations conforming to a code of principle, the rules of conduct, the responsibility of the researcher and the standards of conduct of a given profession”. This led to the ethics that the researcher utilised:

Avoidance of harm

Babbie (2007:27) explains that the “fundamental ethical rule for social research is that it must bring no harm to the participants”. Therefore the researcher structured questions in a way that caused no harm to the participants. This allowed the researcher to plan how not to provoke negative feelings.

Compensation

The researchers will not offer participants any form of financial compensation or remuneration for participation in the proposed study. It was also clearly stated in the informed consent form which the participants signed.

Informed consent

Grinnel & Unrau (2008:37) respect for persons requires that subjects be given the opportunity to choose what shall or shall not happen to them. In this case, the researcher provided the participants with a formal consent letter which outlined the rights as participants and the objective of the study, where after they signed it to

endorse their participation. The letter also stated that it is a voluntary participation study therefore participants are free to resign from taking part without any implications.

Confidentiality

During the interviews the participants were informed about obedience to confidentiality and that the contents of discussions would only be used in the study and not discussed with anyone who did not take part in the study.

Although there are many ethical considerations to be considered the above mentioned ones where the one's applicable in these study. The researcher also complied with the the relevant codes of ethical and professional practice.

1.13 Chapter outline and time line

- Chapter 1 outlines the background and the processes of scientific data collection.
- Chapter 2 reviews relevant literature that assists in giving a general overview of differences and similarities of EAP.
- Chapter 3 reviews relevant literature that assists in giving a general overview of differences and similarities of OSW.
- Chapter 4 a comparison between the Employee Assistance Programme and Occupational Social Work
- Chapter 5 outlines the research findings and interprets them.
- Chapter 6 outlines the key findings, conclusions drawn from the study and gives recommendations for practice and future research.

1.14 Limitations of the study

The researcher did not encounter major limitations with regards to conducting the study. However there was a minor challenge in terms of communication between the researcher and participants. It was challenging to get hold of the members for both EAPA-SA and SAOSWA as most had registered their old contact numbers and email addresses.

CHAPTER 2: EMPLOYEE ASSISTANCE PROGRAMMES: A THEORETICAL OVERVIEW

2.1 Introduction

The purpose of this section is to contextualize Employee Assistance Programmes (EAPs) and Occupational Social Work (OSW) theoretically. In order to compare EAP and OSW, each field of practice will be described individually and broken down into separate components. These will be discussed in the sections to follow. The various aspects and components of EAP will be examined. An outline of EAP, its brief history, service delivery and practice models, core technologies and functions, scope of practice, client systems, statutory requirements for practice and registration with professional bodies will also be dealt with.

The worksite is an important setting, which impacts on the social, mental, and physical wellbeing of the worker. A healthy workplace environment can induce many positive changes such as, a healthier workforce, increased morale, reduced absenteeism and, in turn, increased productivity. “Conversely, an unhealthy and hazardous workplace can increase mortality and morbidity, lower the worker’s quality of life and escalate health care costs (Chu, 1994:182).”

The researcher agrees with the above mentioned statement as she believes that employees are beneficial to the organisations as much as working is good for an employee’s health and wellbeing. Therefore, ensuring a healthy, positive and safe workplace environment for employees, can improve work life balance for employees, increase morale, and have a positive impact on the organisation.

2.2 Employee Assistance Programmes

Employee Assistance Programmes, as previously defined, are work-based programmes and services offered by the employer to employees as a workplace resource, based on specific core functions and technologies to address the organisational business needs and enhance workplace and employee success through the anticipation, identification and resolution of private and productivity issues (Barker, 2003:141; Standards Committee of EAPA-SA, 2010:2). Bruce on the other hand, (1990:4) refers to EAP as a programme intended to meet specific problems of employees by utilising professional human services and personnel, on either a contractual or an employment basis, to meet the needs of troubled employees. In other words, EAP is programme designed to assist employees and equip them with skills to resolve their private and work related problems in order to maintain productivity in the workplace. What makes it distinct from other programmes is its unique tri-partite relationship between the employee, the EAPs and the employer. This means that the work of an EAP always retains an organisational context and focus because of the performance-based backdrop. (Guideline Document UK-EAPA, 2012:6).

As the South African political, economic and social climates fluctuate and change, organisations and employees alike, will continue to feel the effect of unrealistic and excessive demands placed on resources. Thus, the researcher is of the opinion that the demand for EAP and workplace-based interventions will steadily increase as employees are expected to perform under challenging circumstances or situations. As a result, it will be difficult for the workers and their families to cope physically, psychologically, socially and spiritually. Their productivity and job performance will be influenced in a negative way. The researcher will examine various aspects and components of EAP.

2.3 The history of Employee Assistance Programme

The EAP was well-known in the USA as an Occupational Alcoholism Programme (OAP) that provided assistance for employees with experiencing alcohol-related issues, such as deteriorating performance, absenteeism, and the associated impairment of the labour force (Daniels, Teems & Carroll (2005:37). Daniels, Teems & Carroll (2005:38) added that EAPs were mainly influenced by the development 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” (Cf. Attridge, Herlihy & Maiden (2005) as cited in Nsibandé-Mbokazi (2010:22). In fact, “the United States developed the concept EAP as a result of addressing alcoholism in the workplace. 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” (Maiden, Attridge, & Herlihy, 2005: 5).

Prohofsky (2007:27) traces the development of EAPs. She points out that EAPs were well-known in the mid-1940s to resolve issues on misuse substance. This objective did not change much over the next thirty years, though in the mid-1970s employees were faced with other problems that needed to be addressed. Some of the problems included marital conflicts, family problems, and abuse of prescribed medication, all of which began to fall under the growing empire of EAPs. Prohofsky observed that since then the EAPs have continuously been growing, encouraging wellness, productivity and work/life balance services to meet the increasing needs of a diverse over-all work force.

According to Terblanche (1992:18) in South Africa, the Mining Industry, more especially the Chamber of Mines, played a vital role in the growth of EAP in its “traditional structured format”. Post World War II, many of the returning soldiers were compelled to find employment in the mines under very undesirable conditions which resulted in serious physical and mental health problems. Terblanche (1992:19) highlighted that the study symbolised a ground-breaking in the historical growth of EAPs in South Africa. The idea of EAP was acknowledged in principle and the Chamber of Mines introduced the first two of the seven counselling centres, to provide services. These centres are still in existence today although in a totally different organisation.

EAP originally had two areas namely human welfare and people management in the context of the workplace (Pillay & Terblanche, 2012:230). The first EAP was instituted by the Chamber of Mines which hired a specialist to conduct research on EAP for

employees working in the mines during 1983. The implementation of programmes was due to challenges created by the adverse working conditions in the mines. The challenges faced by employees led them turn to drugs and alcohol as a coping mechanism. However, this led to employees experiencing mental challenges while working underground in the mines (Pillay & Terblanche, 2012:232). EAP has now expanded from mining to other industries such as the financial, food, motor and public sector (Pillay & Terblanche, 2012:232).

According to Du Plessis (1991:35-36) EAPs in South Africa developed for several reasons. She further states that some EAPs were formed to emphasize programme cost effectiveness while others were set up to express the concept of 'internal' social responsibility and also to seek alternative ways of enhancing productivity. She also highlighted the vital role played by the Information and Preventative Services from Durban-based SANCA in the training of EAP Coordinators since 1982. These EAP coordinators provided Workplace assistance in dealing with alcoholic employees within some SANCA Societies, assisted companies to develop substance abuse policies and EAP services which included prevention and education programmes.

Harper (2000:317 - 318) admits that in actual fact South African EAPs evolved from changing social and legislative conditions within the workplace environment. The current incentive for EAPs is, however, the acknowledgement that the EAP system can play an important role by assisting workforce and management in managing and addressing their day to day work life challenges, well-being risks arising out of the transformation process taking place within the different organisations.

2.4 Service delivery and practice models

The Standards Committee of the Employee Assistance Professionals Association of South Africa (EAPA-SA) (2010) has stipulated specific standards for EAP practice and service delivery, published in their "Standards for Employee Assistance Programmes in South Africa". The purpose of this document is to guide EA practitioners and professionals in terms of EAP and service delivery. The stated purpose of the 'Standards' is to "provide a benchmark for EAP practice and service delivery; promote the establishment of quality programmes; describe EAP's scope of service; operationalise programme standards and guidelines; educate the workplace

community about EAP services; serve as a guide for EAPA-SA membership and related professionals; and enhance the quality and functioning of existing Employee Assistance Programmes” (Standards Committee EAPA-SA, 2010:1).

In order to intervene in a troublesome employee’s life, there are services to which the employee must be referred. There are ideal models which the organisation will opt for in order to offer prevention and intervention services to their employees. According to the same Standards Committee EAPA-SA (2015:7) the goal of service delivery and the practice model is to secure the most effective model of service delivery, which will enhance the services to the organisation in terms of both the individual and the corporate client, resulting in the best possible application of financial resources. This is also indicated through their objectives by selecting the most relevant model namely internal, external or combination model, to ensure:

- The efficient suitability and cost effectiveness of the EAP and
- a balance between expenditure and benefits.

Several authors have explained the various Employee Assistance Programme models and it is clear that these models are not one size fits all, as it is generally known that organisations are unique and have differing interests. There is no single EAP model that can be universally applied. A model to be used by a particular organisation will be determined by the size and location of an organisation, as well as the socio-demographics of the workplace (Mahlahlane, 2003:32). Terblanche (1992:19) argues that the workplace programme is determined by the structure and operation of each EAP which may vary with regard to the structure, functioning and needs of the organisation(s) it serves. Fleisher and Kaplan (1988:31 – 34) list factors that will influence the type of model utilised by an organisation:

- Size of Workforce
- Distribution of workforce
- Mission and Vision
- Core values
- Strategic direction
- Cultural climate
- Allocation of resources
- Target population

- Range of services
- Administrative considerations
- Funding source

Standards Committee of EAPA-SA (2015:7) also supports this by indicating that when selecting an appropriate model the following should be taken into consideration:

- Alignment with existing corporate strategies and philosophy
- The structure and size of the organisation
- The environmental location
- Ease of access to programme and community resources
- Professional capacity
- Employee fondness

The above mentioned is supported by UK-EAPA Standard Framework (2015:11) which highlights the minimum requirements for service delivery as follows:

- Resources must be adequate for EAP in order to provide a professional and clinical service.
- The organisation must employ a manager having a minimum of two years' experience of direct EAP services.
- The ratio of full time clinical staff should not be less than 1500.
- EAP's needs are the ones that determine service delivery system. The number of employees and diversity of employee population, geographical area, financial constraints and internal resources are factors that should be taken into consideration.
- The EAP should have its own separate policy document which include written procedure and identified workforce, supporting stakeholders and their role and responsibilities.
- The procedures will describe all the important EAP processes, such as:
 - Accessibility to EAP office;
 - Privacy measures of information be in place;
 - The processes for identification of problems or assessment, referral system for short-range resolution;

- EAP measures in terms of case monitoring, follow-up, treatment, case closure, reports and non-compliance;
- EAP is involved in such related areas as referral system, procedures relating to stress management, harassment, trauma management, disability management, psychological problems, misuse of substances and discipline; and
- Scope of the work explained in details in each procedure.

For that reason, choosing the relevant model assists the organisation by enhancing productivity and wellbeing of the employees. This would also ensure that there is consistency and effective service delivery. Jacobson (2011:84) highlights that EAP models are categorised into three models, namely, in-house, off-site and combined models. Each model is discussed below and the possibility of combining the two models is further explained.

2.4.1 In House Model

The internal model is one in which the entire EAP staff is employed in the company (Masi, 2000:407). In not in all cases can the employee assistance programmes be found in the same company's workforce. Their offices can be outside the building, which will also help safeguard the confidentiality of people who go to the office for consultation. Phillips and Older (1998:133) further describe that the coordination of all client services takes place from within the work environment and that the programme functions as a point of referral to community resources or internal counselling resources. They further state that internal programmes may vary in that counselling services may accordingly be excluded or included and may have an onsite or off-site location. These variations may include:

- a limited range of services such as problem identification, referral and monitoring by any suitably skilled personnel in a full time or part time capacity or a wide range of services to include therapeutic services carried out by a suitably qualified professional; and
- a comprehensive range incorporating all the core technologies of EAP.

(Phillips and Older, 1998:133).

This model is usually used by large sized organisations and the EAPs are employed permanently by the organisation (Johnson, 2008). The benefits of this model are as follows:

- It enhances ownership of the programme by employees;
- The EAP practitioner has access that facilitates an understanding the organisation its self and the traditions of the organization;
- Employee working normal office hours has easier access to the EAP and this may raise staff usage of the programme; and
- It allows for closer management of clients.

The Guideline Document of UK-EAPA (2012:11) added that in-house EAPs have the benefit of being very close to the organisation as they have background and greater understanding of its operations, culture and policies. This can make things easier to mediate work-related problems towards a positive resolution.

According to Potterton (2013:2), the shortcomings of an in-house EAP are that EAPs employed by the company may not readily be trusted by employees as they may be viewed as part of the organisation. This is also supported by Guideline Document UK-EAPA, (2012:11) indicating that employees may feel less comfortable regarding confidentiality, especially when visiting the EAP office as they may be seen by their colleagues or managers. Potterton (2013:2) further stated that although access to EAP services is confidential, there is less privacy to whom enters the EAP office as others would prefer not to be seen. Other shortcomings are:

- A company that wants to offer standardized services to all employees may find this approach economically out of reach.
- “Offering adequate access to employees and their families is also challenging in this model. This is due to the fact that on-site hours are often during the daytime and therefore not convenient for either employees or their dependents” (Potterton: 213:2).

There are, however, benefits of the in-house model because services are provided within the institution of employees. Therefore, it is evident that there is direct contact between EAP and employees. As a result, it would improve both voluntary and involuntary referral and could be beneficial for both the employer and employee. Both

the employer and employees have a sense of ownership to the programme, as they are directly involved and it's within the institution. Therefore, in-house EAP functionaries are employed by the same institution where clients are being serviced and this makes it easier for employees to access the EAPs.

2.4.2 External Model

According to Sharar, Pompe and Attridge (2013), external programmes are defined “primarily in terms of an outside vendor that is contracted to provide most or all aspects of the EAP”. Potterton (2013:2) stated that an external EAP can be of further worth to the employer by rendering therapeutic services through a wide group of EA professionals. Hence organisations that do not value the importance of EAP functionaries engaging directly with the staff members usually opt for external models. There are various sub-models that fall under this category; they are contract models, consortium models and Hot-line models.

** Contract Model*

Standards Committee EAPA-SA (1999:6) highlighted that external programmes offer services delivered by EAP professionals under contract to an organisation. Haper and Beckman (2000:407) support this version by indicating that the “contractual agreement between the employer and the service provider details all the specifications on how the service should be rendered”. Therefore, an off-site model is basically EAP that is offered by someone who has the agreement with the employee to offer such services. This means the EAP services are being outsourced to another company or a consultant.

The contract model is an affiliate/subcontractor model whereby the seller out source with local professionals rather than using employed staff (Masi, 2000:407). This simply means that the contract model is whereby professionals who are locally based are given authority to render EAP to the employees of a certain organisation. This might be a short or long term contract and their salaries are not paid by the organisation but by the institution that holds the contract.

**Consortium model*

According to Masi (2000:407), a consortium model is an EAP in which several companies join their wealth to develop a combined programme with the purpose of

maximizing individuals. He further indicates that, it is mostly suitable for organisations with fewer than 2000 employees and the advantage is that they hereby decrease company costs. Csiernik (2003), states that in the consortium model, the different organisations merge all their resources to develop an EAP. Therefore, this model would work best for smaller or emerging organisations because implanting it would be the best way of cutting costs for salaries of EAP practitioners who are housed within the organisation.

* Hot-line Model

Hot-line model is another type of off-site model. According to Myers (1984:82-83), cited in Govender (2009:40), a hot-line is either a local or long distance telephone service. Govender further states that the telephonic consultation may be an opportunity to motivate an employee to move from the pre-contemplation and contemplation stages of anticipated change to taking committed steps to activate positive change in his or her life. Therefore, in this case, employees that are troubled can phone the call centre and speak to the person who will assess the problem and refer them to the relevant service provider. Counselling and crisis intervention are done telephonically.

The benefits of an external EAP tend to provide a choice of office hours, evening and during weekend, consultation with the EAP practitioner away from the work environment is also an option, thus with privacy (Potterton, 2013:1). The shortcoming of this model is that services are not well utilised as employees are often reluctant to travel to where the EAPs are accommodated. Franklin (2003:29) argues that utilising an off-site model may result in a counsellor taking a longer time to understand the culture of the organisation they serve. Once the counsellor takes time to understand the culture of organisation it makes it even worse for employees to get to know the services that are being offered to them. Which will delay the process of self-referral and that will not be beneficial for the employer. 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. Therefore this means that for one to be an effective EAP it is important that they know the culture and have an understanding of the environment. This will assist in developing plans on how to implement programmes and enhance productivity

2.4.3 Combined Model

Combined model is also known as blended or hybrid model. “The combined model is offered in an organisation by EAP professionals and the service provider contracted by an organisation” (Sharar, et al. 2013). Combined model is a blend of in-house model and the off-site model. Sharar, et al. (2013) maintain that the blended model shares essentials of both internal and external model and usually the employer hires EAP profession whom is based the offices or at multiple locations within the organisation. Combined model has several external contract personnel involved in EAP services in many locations.

With the information provided above, for service delivery to be effective, the researcher is of the opinion that the correct EAP model should be utilised. Each model has its pros and cons that need to be considered when selecting the best model for the organisation. For big organisations, the researcher believes that opting for a combination model would be the best move as it blends both models; whereby the internal EAP model may deal with organisational profiling and prevention programmes and other work related problems whereas the external EAPs are preferred for therapeutic counselling due to the specialised nature thereof. However, this does not exclude the in-house EAPs from rendering therapeutic services, as long as employees are offered a choice.

2.5 Core Technologies and Functions

Herlihy (2002: 12- 13) explains that the Employee Assistance (EA) Core Technology characterizes important components of the EA profession. Maynard (2004: 36), on the other hand, views EAP core technology as the most suitable approach to enhance the profession and says it should not limit the boundaries of the field. The researcher is of the opinion that the core technologies are the strategies that guide the EAPs to address work related and personal challenges. Herlihy (2002: 13) describes the EAP Core technology as follows: Consultation and training, i.e. Consultation with managers, supervisors and unions, as well as training of management on how to identify and manage the troubled employee, which all form part of this core technology. Consultation and training efforts serve to improve the work environment as well as employee job performance. Assistance is made available to employees and their

family members, through training and outreach methods about the availability of EA programmes as well as guarantees (i.e. confidentiality) of EAP services.

Herlihy (2002: 13) describes the EAP Core technology as follows:

- Problem identification and assessment: During problem identification/assessment confidentiality must be maintained during services and timely for employee clients with individual private matters that may affect job performance.
- Constructive confrontation: Effective confrontation is encouraged, motivation and utilises quick-fix intervention with to address problems that affect productivity.
- Referral for diagnosis, treatment and assistance: This core technology includes referral system for troubled employee, identification, dealing with such employees and monitoring, follow-up and aftercare service.
- Consultation to work organisation: Effective Working relationship need to be established and maintained with other service providers. Contracts of service providers should be monitored as part of consultation to work organization.
- Consultation with work organisation for health: Organisation is encouraged to facilitate the availability of health benefits for employees especially in terms of access to medical benefits that are covered, behavioural challenges such as substance abuse and psychological problems.
- Evaluation: Evaluation of effects of EAP services on the work organisation, employee productivity and return on investment.

Standards Committee EAPA-SA (2015:1) however only partially supports the above mentioned core technologies by regarding the following aspects as core technologies and functions of EAPs:

- Training and development: The core technology of training and development of stakeholders, including managers, unions and line managers, concerning effective management of work force who are

encountering challenges; enhancing the employment setting; and improving employee productivity and job performance.

- Marketing: The promotion and 'selling' of EAP programmes, services and interventions to stakeholders, providing necessary information regarding programme details and content, accessibility, and confidentiality, as well as encouraging participation and utilisation. Ligon and Yegidis (2003) support this by indicating that for EAP to increase its services, marketing the services is important in ensuring expansion in a persuasive and convincing manner.
- Case management: Therapeutic intervention for employees and their families experiencing individual private and job-related challenges that might affect productivity. These services consist of threat identification, assessment, causes, short-range intervention, referral system to other stakeholders, monitoring, follow-up, reintegration, and aftercare services.
- Consultation to work organisation: Consultation with work organisation to proactively identify and deal with natural trends stemming from personal or organisational issues.
- Networking: Developing and maintaining of effective relationships with internal and external stakeholders including service providers.
- Monitoring and evaluation: monitoring and evaluation of EAP services and interventions relating to the work organisation and personage job performance.

EAPA also supports the Standards Committee EAPA-SA (2015:1) by outlining the Employee Assistance Programme core technology as follows:

- Training and development in terms of capacitating organisational leadership about EAP which include how to deal with troubled employees, develop conducive work environment, and improve worker job performance;
- The availability of EA services should be marketed to employees, their family members, and the work organization;
- Risk that may poses problems should be identified timely, thorough assessment be rendered to determine relevant intervention or services

for employee with individual private concerns that may affect job performance and maintain confidentiality;

- To tackle problems that may affect productivity EAP should utilise short term intervention, positive confrontation is encouraged and also motivation;
- Problem identification, relevant assistance, case management and follow up services;
- Supporting organisations in establishing and maintaining effective relations with treatment and other service providers, and in overseeing service provider contracts;
- Consultation to work organisations to determine the needs of the organisation and to encourage employees to utilise availability health benefits and behavioural problems including, but not limited to, misuse of substances, and psychological problems; and
- EA services implemented being evaluated to see their effect on work organisations and individual job performance.

The researcher is of the belief that these components can be used in combinations or individually, to generate a unique method of addressing work related productivity issues and also personal problems. This will assist in ensuring the productivity and personal wellness of employees.

The following diagram as presented by Beidel and Brennan (2005: 36) illustrates how the EAP Core Technology and the productivity of an organisation are related.

Family/Medical leave Act (FMLA) Child/Elder Care Services	Substance Abuse Professional (SAP) Services	Risk Management	Support Groups	Return-to-Duty Assistance	Critical Incident/ Stress Management
lawful/Financial Referral	Beidel and Brennan (2005:36) & EAPA-SA (2015) explains the EAP Core Technology Functions as follows: 1 Consultation with, training of, and assistance to work organization leadership (managers, supervisors, and union stewards) seeking to manage the troubled employee, enhance the work environment, and improve employee job performance; and, capacitating employees and their immediate family members about availability of EAP services. 2 Confidential and timely problem identification/assessment services for employee-clients with personal challenges that may affect job performance 3 Use of constructive confrontation, motivation, and short-term intervention with employee clients to deal with problems that affect job performance. 4 Referral of employee-clients for diagnosis, treatment and assistance, plus case monitoring and follow-up services. 5 Consultation to work organisations in establishing and maintaining effective relations with treatment and other service providers, and in managing provider contracts. 6 Consultation to work organisations to encourage availability of, and employee access to, employee health benefits covering medical and behavioural problems, including but not limited to substance abuse, and psychological problems. 7 Identification of the effects of EAP services on the work organisation and individual job performance.				Health Care Services * Clinical Evaluation * Clinical Diagnosis * Psychological Counselling * Chemical Dependency/ Mental Health Treatment
Outplacement/ Retirement					
Welfare-to-Work Programs					
Americans With Disabilities Act (ADA) Teams					Managed Care Services Manage: *Provider Networks *Healthcare Systems *Benefits
Conflict Management/ Violence Prevention/ Threat Assessment Teams	Drug-Free Workplace (DFWP)	OSHA/Safety Program	Wellness Promotion	Disability Management	Work/Life Programs

The diagram above explains in details how core technologies enhance productivity in the workplace. Therefore, it is important that EAPs utilise these core technologies appropriately to ensure maximum productivity and stress free organisation.

2.6 Scope of practice

This section describes the scope of EAP practice by identifying the specific actions required in the implementation of employee assistance programmes. Dickman and Emener (2003) define service components as the availability of assistance for a wide variety of problems, such as alcohol, family, personal, financial, grief and others which affect the employees' job performance. The scope of practice is basically outlining the scope of the area where the EAPs are to work; this includes their geographical areas and those which the employer should provide. Furthermore it includes the code of ethics wherein they are to guide the EAPs; including policies and legislations.

The EAP scope of practice also consists of various components which form the foundation upon which the various EAPA-SA Standards have been established (Standards Committee EAPA-SA 2015:4-33). The EAPSA-SA standards are as follows; programme design, implementation, management and administration, clinical services, non-clinical services, preventative services, networking and monitoring and evaluation. These will be briefly explained individually:

2.6.1 Programme design

This aspect deals with the establishment of an EAP advisory committee, organisational profiling, policy, identification and selection of appropriate service delivery models and procedures, and selection of appropriate costing models.

- **Organisational Profiling**

Standard 1 which is organisational profiling assists us to ensure that programme improvement and planning includes profiling and an consideration of the needs of the employee population and the organisation for which they work. This profiling is intended to "help the organisation determine the most appropriate and cost effective methods of providing EAP services" (Standard Committee EAPA-SA 2015:4). This was also stated by Myers (1984:100) who maintains that in order to determine whether an EAP is needed in the organisation and to be able to make recommendations to the

strategic decision makers in the organisation pertaining to the employee's needs and how they could be addressed, there should be a proper organisational profiling.

The researcher is of the opinion that organisational profiling is a systematic way of gathering information regarding the organisation and needs of the employee in order to be in the best position to know what the needs of the employees are and to then develop the necessary measures to address them. In simple terms, needs assessment is a build-up to proper programme design, as the results of needs assessment are the ones which are utilised to design a programme for the employee's needs.

- **Policy**

According to Gerston (2004:7) policy is defined "as a basic decision, commitment, and plan of action made by those who hold or affect government positions of authority". Young (2009:95) gives another definition of policy as "a method for enforcing management views on specific business-related activities." Both definitions are interrelated as policy is a written principle that is utilised to enforce management and staff to do specific things. It is important that when developing policies confidentiality remains an important aspect, and that the EAP policy should always include professional standards and ethics (Emener, Hutchison and Richard, 2003:192). They further highlight that the implementation plan should cover: policies, procedures and objectives, logistics, an operational plan, management plan and evaluation system. According to the EAPA-SA (2015:4) the goal of the EAP policy is to ensure that focal areas, principles and mandates amongst all the various stakeholders are fair, consistently applied and balanced. This implies that the main purpose for policy is to basically ensure consistency in implementation amongst different components in the organisation. Therefore, the researcher is of the opinion that for EAP's goals and objectives to be implemented effectively and efficiently while further ensuring fairness and consistency there should be a policy. Therefore, a written policy would ensure that there is fairness and consistency in implementation whereby it can also be used as a mode of reference.

- **EAP advisory committee**

According to Standards Committee EAPA-SA (2015:6), its goal is to “ensure that all relevant role players in the organisation, such as top management, employees, supervisors and union members, contribute to the effective design and operation of the EAP”. Googins and Godfrey (1987: 164 – 165) highlight the functions of EAPs and can be summarized as: Programme support and legitimacy, resource for information – organisational profiling and needs assessment, ensuring linkages with all relevant stakeholders, program design – advice on policy, goals, objectives, an implementation plan and procedure, program services, marketing, evaluation and critical feedback regarding the program initiatives, ongoing review of operations and supporting EAP confidentiality safeguards.

The researcher is of the opinion that having different role players as part of the advisory committee would be helpful in incorporating different skills and knowledge from their respective components that would assist in implementing an EAP. The Advisory Committee would also assist in smooth implementation of the programme and would ensure that there is support for the program from all the different components, including a sense of ownership of the programme.

- **Service Delivery Costing Models**

There is a criterion which needs to be followed when selecting the best model for the EAP. The Standards Committee EAPA-SA (2015:7) outlines the criteria of selecting the suitable model for the organisations as follows: “alignment with existing corporate strategies and philosophy, the size and structure of the organisation, the geographical location, accessibility to programme and community resources, professional capacity, and employee preferences”. The UK-EAPA Standard Framework (2015:11) also supports the criteria mentioned above by highlighting the minimum requirements for service delivery as follows:

- There must be adequate resources to offer a proficient and clinical service.
- A minimum of two years’ experience of EAP is required for one to be employed as an EAP manager.
- The ratio of full time EAP clinical staff should not be less than 1:500.
- The service delivery system will be selected that best reflects an EAP’s needs.

- The written procedure on how to implement EAP, identified personnel, reporting relationships and their role and responsibilities should be outlined in the independent EAP policies.
- The standard operating procedures will illustrate vital EAP course of action.

There are different types/models, namely in-house, external model and combination model. These models have been explained in detail under the section of service delivery and models. Therefore, the researcher emphasises that when selecting the best model for the organisation one needs to take consideration of the above mentioned criteria, and also include the size, funding and different services being offered by the model. Selecting the best model will assist in ensuring that objectives of the programme are met in an objective manner.

During EAPs pricing negotiations, different models should be considered and agreed upon between the service provider and the employer. Models should be transparent and acceptable to all role-players involved (Standard Committee EAPA-SA, 2015). This implies that pricing of the models should be based on the models selected while looking at the criteria to be followed when guiding the selection of a suitable model.

According to Myers (1984: 79), “in choosing an EAP model the decision maker must balance EAP costs with anticipated benefits.” Cost considerations should include: marginal expenditure or change in costs caused by including additional client services, for example: an assessment and referral service is only slightly cheaper than a program that also includes some short-term counselling; service comparability – in-patient versus out-patient treatment – cost versus effectiveness method of pricing for the different program models – per capita cost versus an overall cost and workforce size – some experts believe that at least 3000 employees are needed to justify the cost of an in-house program (Myers, 1984:79). The following costing models should be kept in mind when it comes to service providers: “capitated pricing, fee-for-service, co-payment by a health care provider, co-payment by the client/employee and limited clinical services” (Standards Committee of EAPA-SA, 2015:8).

2.6.2 Implementation

Implementation includes formulation of operational guidelines for policy implementation, and formulation of an implementation plan.

- **Operational Guidelines**

Procedures are defined as documents which specify 'how to' information and further explain that they are developed by the office responsible for the administration of the policy (Planning Unit, 2005:5). EAPA (2010:13) explains that operational guidelines are "clearly defined written procedures that help to assure consistent and effective delivery of services". The policy must describe the EAP in its entirety while operational guidelines should be developed to operationalise the policy (Standard Committee of EAPA-SA, 2015:4, 9). It is further explained as providing the procedural and logistics guidelines for implementing EAPs according to the unique circumstances of the organisation. In simple terms, operational guidelines are written statements on how to implement the policy in order to ensure routine and quality work. The researcher agrees with both descriptions of operational guidelines, as she also views the operational guidelines as a written statement which explains what must be done when implementing the policy. This would assist in implementing the policy as it stipulates what is to be done as part of implementation.

- **Implementation Plan**

The Standard Committee EAPA-SA (2015:9) affirms that by explaining the implementation plan as an important process in development of policy as it ensures successful roll-out by establishing the EAP as an integrated service of the organisation. The Standards Committee of EAPA-SA (2010:13) outlines the essential components that the implementation plan must include:

- The implementation plan must describe the everyday jobs of all stakeholders involved in the implementation process.
- The implementation plan must outline all of the important components outlined in the Standards and Professional Guidelines, including an extensive and marketing strategies, training and development strategy.

With the information provided, the researcher agrees that the implementation plan has an important role when introducing the EAP or any other new programme, because the implementation phase is what will ensure buy-into the programme by the service

users. The responsibilities of all role players involved should be defined in order to avoid confusion and mismanagement of the programme. Implementation plan should also cover all aspects of how the programme is going to be implemented included how the programme will be marketed, monitored and evaluated.

2.6.3 Management and Administration

Management and administration include staffing of the EAP, EAP professional consultation and supervision, professional development of EAP staff, confidentiality, record keeping, professional liability insurance, and ethics.

- **Staffing**

In order to achieve the goals and objectives of the programme an appropriate number of qualified suitable EAP professionals and practitioners must be available. Lussier (2013:12) explains staffing as “the process of selection and training of individuals for specific job functions and charging them with associated responsibilities”. The goal of this standard is to ensure that the number of EAP staff matches the needs of the organisation with the programme (Standard Committee of EAPA-SA, 2015:10). In simple terms, staffing is a process of selection and hiring of qualified personnel to accomplish organisational goals and objectives. Hence for one to achieve certain results for a programme an eligible person should be appointed in order to implement those activities. Therefore, it is important that an organisation hires a qualified person to implement the EAP in order to achieve its goals and objectives.

Standards Committee of EAPA-SA (2015) and UK EAPA (2010:15) suggest that the following factors should be considered when staffing the EAP in order to ensure compliance with the EAP standards as explained by their EAP association. These factors are: geographical location, size of the workforce including the cultural diversity, and the staffing ratio. Geographical location is important in ensuring that employees have access to the EAPs as well as to their services. Determining the size of the workforce is important in determining whether they should opt for in-house or external EAP. It would be a fruitless expenditure to hire a permanent EAP for an organisation that has less than 1000 employees.

- **EAP professional consultation and supervision**

UK EAPA (2000:48) emphasises the importance of the two concepts; supervision and consultation, outlining that given the complex duties of EAP it is important that supervisors be able to differentiate between the two. Supervision is more about administrative work such as planning and delegation, monitoring operational procedures and the implantation of policies, providing support and advice as well as performance appraisals. The researcher agrees with the description of supervision and consultation. Supervision is an administrative duty of the supervisor wherein he/she monitors the work. This caseload includes being supportive to the employees. This can be done individually or in a group session. Consultation is more about discussing challenges relating to cases. The researcher believes both these concepts are important as they are aimed at ensuring professionalism and that EAPs improve on their service delivery.

- **Professional Development**

Standard Committee of EAPA-SA (2015:12) explains the objective of professional development as “to ensure that the knowledge and skills of EAP practitioners and professionals are continuously updated and in keeping with the highest level of professional practice”. In simple terms professional development aims at ensuring that the EAPs must keep themselves updated with relevant information and skills that will enhance their profession. Richard, Emener and Hutchinson (2009:208) and UK EAPA (2000:44) explain that professional development can be conducted by external consultants as well as be done internally through in-service training by experienced employees to those who are less skilled. The researcher is in agreement with both these authors as she believes that utilizing someone internally can be cost free as it can be done during staff briefing, group supervision or even specifically arranged training. It is also the responsibility of colleagues to ensure that after training, they are given time away from work or refunded so that they can return and share information with their colleagues. The researcher also believes that it is the responsibility of the EAPs to ensure that they are developing themselves professionally as it is part of personal growth and required by the statutory body. SACSSP (2010) emphasises the

importance of supporting professionals to enhance and upgrade their skills and knowledge and to comply with the requirement for continuous professional development as outlined by the different professional bodies.

- **Professional liability insurance**

The objective of professional liability insurance is “to protect the corporate clients and service providers against legal action by clients alleging malpractice” (EAPA 2010:19 and Standard Committee of EAPA SA, 2015). The professionals should ensure they register and comply with the guidelines of the insurance company and also ensure they work within their scope of practice (EAPA, 2010:20). Professional liability insurance is very important as it assists by covering professionals because when dealing with human beings there are always possibilities of malpractice. Therefore, the professional liability insurance’s main objective is to protect professionals during practice. This malpractice insurance may include things such as; management of a client’s information or improper management of a client’s records. Although the insurance will protect the EAPs, it is the responsibility of the EAPs to ensure that they work within their scope of practice to avoid such financial loss due to the exposure to a lawsuit. EAPs should know and understand their roles and responsibilities, code of ethics, professional limitations, organisational policies and any other legislative framework that may govern them, in order to avoid professional misconduct.

- **Ethics**

Reamer (2013:3) refers to ethics as “principles of conduct governing individuals or a profession”. In simple terms, according to the researcher ethics are principles that guide professionals on how to conduct themselves and how to differentiate between the correct and incorrect way of doing things. Ethics standards assist professionals to be responsible and to be accountable for everything they do. The researcher states that the different professional bodies such as SACSSP, EAPA-SA, EAPA and specialists in occupational social work have developed codes of ethics to regulate the conduct of their professionals.

- **Confidentiality**

Confidentiality is defined as the practice of not sharing any information which has been shared by clients with others (Midgely & Cowley, 2010:26). A confidentiality standard is a crucial standard in any profession. Daniels and Teems (2008) highlight that the perception of confidentiality is very important, and the goal is to maintain a safe place to discuss personal and sensitive concerns. The above mentioned statement really proves that confidentiality is the foundation of the profession; therefore it must be consistent with all the professional standards, legal requirements and ethics that regulate how to handle a client's information. It is further highlighted that there are criteria which should be followed during management of information (Standard Committee of EAPA SA, 2015);

- A written declaration on confidentiality must be included in all applicable documents.
- Precautions should be taken to ensure that all communication involving confidential information is protected.

The researcher is in agreement with the above-mentioned authors' definition of confidentiality as it shows that protecting the client's information is the cornerstone of the profession. It will increase the sense of trust among clients and EAPs, which will enhance utilization of services. It is also important that the EAPs should obtain a written consent form from the employees, before sharing their information unless there is danger to themselves, others or a court order has been issued. Therefore, it means that EAPs should not handle a client's information in a way that would jeopardize their profession.

- **Record Keeping**

The Protection of Personal information Act No 4(2013:18) maintains that personal information must be protected by third parties and accountability be exercised in disclosing and disposing of such information. The Standard Committee of EAPA SA (2015) explains the goal of record keeping as ensuring proper and accurate management of records. Therefore, the researcher is of the opinion that record keeping is very important to EAPs, as the above-mentioned authors highlight that record keeping is basically to ensure proper management of a client's information.

Therefore, this means that all clients' records, including intakes, referrals, assessments, intervention plans as well as organisational policies, meeting minutes and promotional materials should be kept safely and be accessed by an authorized person. This would avoid misuse of personal and organisational information.

2.6.4 Clinical Services

Clinical services include trauma management, crisis intervention, assessment, referral, short-term intervention, case monitoring and evaluation, after care and reintegration.

- **Critical Incident Management**

Trauma or critical incident refers to a controlling and overpowering incident that lies outside the range of common human experience (Antai-Otong, 2001:127). Standard Committee of EAPA-SA, (2015:15) highlights that it is important to respond to a critical incident in a timely fashion as specified by the organisational policies. The EAP should offer both preliminary debriefing which is considered trauma defusing and trauma debriefing services for employees, family members and the organisation. Trauma defusing is to normalise the situation and should take place within 24 hours of the incident occurring, while trauma debriefing should be rendered within 72 hours of the incident. Rending trauma management in the workplace is very important as it assists the clients in returning to their normal well-being and prevents them from experiencing post-traumatic stress disorder.

- **Crisis Intervention**

James (2013:8) describes crisis as "a perception or experiencing of an event or situation as an intolerable difficulty that exceeds the person's current resources and coping mechanisms". The researcher is in agreement with the author's definition, and is of the view that a crisis is an event that threatens one's state of well-being and requires immediate intervention. This implies that a crisis is when you find yourself in an overwhelming situation beyond your control. Standard Committee of EAPA-SA, (2015) and EAPA (2010:24) agree that the EAP must respond quickly in terms crisis intervention services for employees, family members and the organisation who are

undergoing crisis situations. Assisting the employees together with their families will ensure work-life balance and productivity amongst employees.

- **Case Assessment**

Googins and Godfrey (1987: 128) refer to assessment as an important function in EAPs where referrals for extended treatment are frequently made. According to Standard Committee of EAPA-SA (2015:17) the goal of the standard is to identify and analyse the problem and develop a relevant intervention plan. Assessment is a continuous process as long as the case is still ongoing, and requires regular and relevant intervention.

- **Referral**

Standard Committee of EAPA-SA (2015:17) highlights that clients should be referred to an appropriate resource according to the unique needs revealed by the assessment. Its goal is to ensure that they accommodate the individual who has a challenge with relevant and cost-effective levels of care. The researcher is of the opinion that it is important for EAPs to have a comprehensive resource list so that it is easier to refer clients to relevant service providers for further intervention.

- **Short-Term Intervention**

Short-term therapy is an important approach for EAPs since it helps the EAPs to provide a cost effective, time limited therapy to benefit both the employer and employee (Taute, 2004:22). The researcher agrees with Taute as she believes that EAP services are short term interventions as they focus on ensuring that the clients have efficiently recovered so that they are able to resume their normal duties. EAPs need to refer to other service providers should longer intervention be required. Standard Committee of EAPA (2015:18) explains that EAPs shall establish SOPs to determine the need of short-term problem resolution, and the need for referral to other professional and/or community resources. The researcher further explains that assessment is continuous during intervention, as this will guide EAPs on how to provide further relevant intervention or whether to refer the case.

- **Case Monitoring and Evaluation**

Standard Committee of EAPA (2015:19) emphasises that the goal of case monitoring and evaluation is to ensure quality and cost effective treatment from resources. It further explains that proper monitoring and evaluation will assist in improving the reflection and trustworthiness of the EAP amongst prospective clients and management. The researcher also believes that proper monitoring will enhance service delivery, as during monitoring of progress on intervention provided, the tool being utilised will assist the EAPs to identify gaps that need attending to, while evaluation will assist to determine if the end results of the programme have been met.

- **Aftercare and reintegration**

The goal of this standard is to ensure that there is reintegration and continued well-being of the referred employees after the intervention (Standard Committee of EAPA-SA. 2015:20). The researcher is of the opinion that after institutionalization it is important that employees be reintegrated back into the workplace as they might have spent some time away from the environment. This therefore requires support from the supervisor and also the EAPs. Supporting these employees will also assist in identifying and dealing with the risk that might make the employee default from the treatment or certain programme. Therefore, follow ups will ensure that case objectives are met. It is also important that follow ups and reintegration not only be made with the employee only but also with the family and supervisors as they form part of the support system of the employee.

2.6.4 Non Clinical Services

Non Clinical services standard entails organisational consultation, EAP training, and marketing.

- **Organisational consultation**

The standard committee of EAPA-SA (2015:2) refers to consultation with the work organisation as “one of the EAP’s core technologies and functions, indicating that the purpose of such consultation is to address inherent trends resulting from personal and organisational issues”. The standard further explains the goals as assisting

management in addressing challenges which may impact the organisational effectiveness and wellbeing of the employee. Organisational consultation is considered crucial in the successful implementation of any EAP (Khubeka, 2015:5), and hence it is specifically identified as a non-clinical service standard. The researcher is of the opinion that when proper organisation profiling has been done, it ensures that when the EAPs give feedback on the trends, risks and statistics they be well informed, not only of the services rendered, but also of the results from organisational profiling and employee needs assessment.

- **EAP Management and Supervisory Training**

The drive of this standard is mainly to ensure that management and supervisors are trained in EAP in order to ensure that they understand the programme and to ensure support from them. Standard Committee of EAPA-SA (2015:21) supports the above-mentioned statement by emphasizing that the goal of the standard is to provide training that enhances employee and organisational resilience. The curriculum content of supervisory training should include the company's written EAP policy; goals and rationale of the EAP; EAP scope of services; benefits of the EAP; problems addressed by the EAP; EAP principles; impact of problems on work performance; description of a troubled employee; role of the supervisor; the three referral types; do's and don'ts for supervisors; effective communication skills; and involvement of HR management (Terblanche, 2016:24). Supervisory training encourages management and supervisors to make formal referrals when certain events occur and also to make informal "positive" referrals for employees where there are indications of personal issues or other needs (EASNA, 2009:31).

The researcher believes that it is through management and supervisory training that the programme is being utilised effectively to ensure that the top management and line managers understand the programme and the importance of utilizing the programme. Supervisory training will ensure that supervisors are able to refer and also allow easy access the programme as they know how to identify a troubled employee and the benefits of the programme. The researcher views management and Supervisory

training as another part of the marketing strategy which will also open corridors for organisational consultation.

- **Marketing**

Lamb, Hair, McDaniel, Boshoff and Terblanche (2008:77) define marketing as “the process of planning and executing the conception, pricing, promotion and distribution of ideas, goods and services to create exchange that satisfies individual or organisational goals”. Marketing can also be defined as a procedure of arrangement and implementing by ensuring that services are well known which includes, pricing, promotion, place for marketing and people to whom it will be marketed; in order to ensure that services are well utilised and understood. Standard Committee of EAPA-SA (2015:22) is in agreement with the above-mentioned authors who explain that marketing is to “ensure that EAP is highly visible and presented in a positive way that will encourage beneficiaries to utilise the programme”. Therefore, in order to ensure that EAP is highly visible it is the responsibility of the EAP to ensure that there are marketing strategies that will be utilised to ensure that the programme is well known and comprehensively understood.

2.6.5 Proactive services

Proactive services include the development of holistic and proactive prevention services. The proactive programmes are aimed at ensuring that programmes are in place to mitigate employee behavioural and organisational risks (Standard Committee of EAPA-SA, 2015:23). It is further explained that proactive activities should include awareness campaigns, seminars, workshops, information sessions, training, wellness days, HCTs and health-risk screening. The researcher believes that it is important that EAPs should develop themselves professionally so that they are able to equip employees with updated and relevant information during information sharing sessions, lectures and even workshops. When implementing this programme, the researcher will also require assistance from other stakeholders therefore it is very important that they network and build working relationships with other professionals in order to assist each other when it is necessary.

2.6.6 Stakeholder Management

Stakeholder management encompasses the building of networks with internal and external stakeholders and service providers. The standard committee of EAPA-SA (2015:24) explains the goal of this standard as ensuring that EAP should partner with both internal and external stakeholders, in order to respond to the organisational, employees and family needs in a cost effective manner. It further emphasises that the EAPs should compose and maintain a list of relevant internal and external stakeholders to ensure effective networking.

2.6.7 Monitoring and Evaluation

UK EAPA Standard (2015:18,19) outlines that an “EAP must have systems in place to ensure the appropriate monitoring of progress for all clients referred to services external to the EAP and they will implement internal procedures that are used routinely to audit and evaluate the effectiveness of both delivered EAP services and administration processes”. The effectiveness of EAP services and interventions are continuously monitored and evaluated. In order for an EAP to have a likelihood of succeeding, they should, when designing the programme, include a specific evaluation plans wherein the progress of the programme will be monitored (Yende, 2005). The researcher is of the opinion that monitoring and evaluation is crucial in implementation of EAP as it allows us chances to identify the gaps through monitoring so we can fix and evaluate if the objectives of the programme have been met. Proper monitoring and evaluation helps when planning for the future so we can avoid repeating the same mistakes.

The EAPA standards enlighten in detail what the crucial elements in EAPs are and how EAPs can best address the challenges faced by organisations and employees in order to enhance productivity in the workplace.

2.7 Client systems

The Standards Committee EAPA-SA (2010:3) has identified the following client systems as target groups for comprehensive service delivery, (a) the organisational management and supervisory structures; (b) worker organisations; and (c) employees and their families. EAP services are rendered to these client systems by EAP practitioners and professionals as part of a comprehensive package.

In the first instance, services are rendered to organisational management and supervisory structures, thus enhancing the work environment. Both these groups represent the organisation or employer as a structure. In accordance with the EAPA-SA standards document (2010), EAP services comprise training and development of managers and supervisors in terms of conflict management and resolution, and supervisor training programmes. This assists with regards to identifying employees whose performance is unsatisfactory due to possible personal or work related problems; marketing of EAP services, products and programmes; networking and stakeholder management; consultation in terms of programme development and implementation, and workforce related issues and trends; policy development; organisational profiling and needs assessments; and evaluation and feedback regarding EAP services and interventions.

Secondly, services are rendered to workers' organisations that represent the workforce collectively, such as unions. EAP recognises the importance of this group as stakeholders in EAP programmes and services, and as a resource in identifying and dealing with employee matters related to the work environment as well as employee development. Thus it is important to obtain commitment from such organisations to ensure the success of EAP and work-based interventions. Services relevant to this client system would comprise of training and development of union representatives, consultation in terms of programme design, development and implementation, follow-up and aftercare services to union representatives, marketing of EAP services, products and programmes, networking and stakeholder management, and evaluation of EAP services (Standards Committee EAPA-SA, 2015; Terblanche, 2009:215).

Lastly, services are rendered to employees and their families, specifically to address issues and problems that would affect job performance and productivity, working towards assisting the employee maintain a positive work-life balance and improving overall job satisfaction. Services rendered to this client system would include training and development with regard to social functioning; marketing of EAP services, programmes and interventions; networking with external and community-based service providers and agencies; advocacy with regard to social justice and human rights; and case management in terms of counselling services, trauma debriefing and

other therapeutic interventions. In relation to case management, the EAP professional may render such services personally, but only if they have the relevant training and qualifications; otherwise such services should be referred to an external service provider for intervention. Such services would consist of prevention, identification, early intervention, referral, problem resolution, aftercare and reintegration.

Due to the systemic nature of the occupational setting, the identified client systems form part of a bigger system, ranging from micro to macro levels, and are seen as interrelated and interdependent. Thus, the role of the EAP in terms of service delivery focuses on the three client systems individually, as well as on maintaining the reciprocal relationship between these systems. However, the researcher is of the opinion that despite the fact that EAP services are rendered at all levels and are to the benefit of all stakeholders, the primary purpose of EAP is to assist employees maintain work-life balance, aiming to ensure conducive work environment, enhance productivity and overall job satisfaction.

2.8 Requirements for practice: registration with statutory bodies and professional associations

The Employee Assistance Professionals Association of South Africa (2016) indicates the following requirements for registration as a member:

- Proof of payment;
- Curriculum Vitae;
- Job Appointment letter in the field of employee assistance programmes and/or wellness;
- Proof of achievement of a short course in EAP (as part of accreditation);
- Proof of registration with a statutory body;
- Attendance of at least 2 meetings in local chapter

Currently, the South African Qualifications authority recognises EAPA-SA as a “professional body constituted to represent and/or regulate and recognise the community of expert practitioners”. However, there is no specific legislation or statutory body currently available in South Africa, which governs EAP practice. As stipulated above, one of the requirements for membership with EAPA-SA is “proof of registration with a statutory body”. Therefore, this means that any practicing

professionals, such as social workers or psychologists, who seek to join EAPA-SA, must be registered with their respective statutory bodies, being the South African Council for Social Services Professions or the Health Professions Council of South Africa, as required by legislation. In confirmation, Standards Committee EAPA-SA (2015:3) highlights that all EAP staff members are considered practitioners, however only those registered with statutory bodies can be considered professionals.

2.9 Conclusion

With the information provided, the researcher believes that EAP is a tool utilised by EAPs to address challenges and problems experienced by employees including work related problems. The development of EAP highlights that it was developed in the 1930s as the method of addressing substance abuse in the workplace. With its evolution it was then seen as a better resource to address personal and work related problems in order to enhance productivity. There are 3 different models which the organisation can employ in order to ensure that they render effective services to the employees and are also beneficial to the employer. The identified models are in house, external and blended models. There are factors that need to be considered when selecting the best model for the organisation, which are; size of workforce, geographical location, distribution of workforce, mission and vision, core values, strategic direction, cultural climate and funding.

CHAPTER 3: OCCUPATIONAL SOCIAL WORK: A THEORETICAL OVERVIEW

3.1 Introduction

Occupational Social Work (OSW) is an emerging profession with the potential to positively influence the workplace. However, in order to make a positive contribution to solving current workplace dilemmas, occupational social workers need to keep abreast of workplace developments (Dorkin, 2009:1). Occupational social workers endeavour to develop the fit between the various client systems occurring within the occupational setting, striving toward gainful employment for employees (Mor, Barak & Bargal, 2000). The primary purpose of OSW is to enhance the social well-being and functioning of the work organisation as a community through making contributions to the effectiveness and objectives of the work organisation (Kruger & Van Breda, 2001:947). The researcher views OSW as a specialized method of social work which includes programmes and interventions utilised to address work-related and personal problems.

3.2 History of Occupational Social Work

Logan (2001:1) explains the growth and present practices of occupational social work in Australia, which is viewed as a specialised work practice that assists the employees to adapt to work culture and changing environments. The Social Services Department expanded during the late 1940s to meet the demands of a welfare state. New schools of Social Work developed and in the 1960s and 1970s employees received training in child care, foster care and home care. By the end of the 1970s practitioners were obligated to charge fees for services in order to stay in business. At some point in the late 1980s and early 1990s the process of justification and downsizing, as a direct consequence of restructuring and privatization, resulted in a decline in the demand for

occupational social workers. However, they soon merged relevant services with employee assistance programmes to enhance treatment outcomes, thus re-establishing a demand for OSW and EAP (Bhoodram, 2010:54). It is encouraging to notice that the Social Work profession in Australia has a good foundation and emergence of OSW. Due to demands of social welfare this has led to acknowledging the importance of solving work-related problems.

Gehlenborg (2001:17) explains that the defeat of the First World War, the devastation of the economy and mass unemployment were the context of the occupational social work's first years in Germany. From 1960 to 1980 the occupational social work profession evolved to focus on enhancing productivity as well as addressing personal problems experienced by employees. During the last thirty years OSW was slowly introduced into service industries such as insurance companies, banks and aerospace firms. The researcher is of the opinion that the evolution of OSW in Germany was correctly focussed on social, economic and political changes of their country, and that these changes had a positive impact on ensuring productive employees and a healthy workplace environment.

The United States has in some way influenced the development of the profession in most of the countries. According to Maiden (2001: 119), with regard to the development of OSW in the US, Social services emerged in the early 1900s from the welfare movement. At the time OSW was viewed as a management tool to sabotage unionisation therefore it did not gain a position in the workplace. The view that there was no place for industry in psycho-social casework prevailed for several decades. Therefore, service providers managed the behavioural healthcare that emerged to ensure the delivery of cost effective quality healthcare through selective contracting and channelling of members to those service providers. This move provided new opportunities to advance the aspects of behavioural healthcare, especially for occupational social workers. Skills that are needed by occupational social workers relevant to corporate social responsibilities are listed as follows by Feinstein and Brown (2001) as cited in (Maribe, 2006):

- Organisational skills
- Preparation and policy development skills
- Political and legislative skills

- Relational and small group skills
- Administrative skills
- Strategy design and execution skills
- Communication and promotion skills

There is an interesting developmental history of Occupational Social Work in South Africa. In South Africa the evolving of OSW is traced in the article by Du Plessis (2001:97) whereby it is stated that the welfare system in the 1930s focused on whites only as the primary recipients of services, but which were entrenched in 1948 when services were structured separately by the government. Du Plessis (2001:100) points out eight factors that either facilitated or hindered OSW in South Africa:

- Individuals championed OSW because of personal commitment
- Industrial relationship measures where some managers sought outside assistance while others chose to deal with problem employees in-house
- The retrenchment of social workers when times were tough
- The influence of lobbyists like the South African National Council for Drug and Alcohol Abuse (SANCA) to employ social workers
- Prevailing managerial views in respect of assisting employees through counselling
- The lack of union involvement in promoting the feasibility of occupational social work in South Africa
- Socio-political changes created opportunities for social workers
- The approach by qualified social workers to market their services to prospective employers and the education institutions in placing newly graduated social workers with organisations.

There are various studies which contributed to this developmental history. Such studies were highlighted by Du Plessis (1994). In South Africa the first post for OSW was created 1935 (Du Plessis, 1994), with the aim of rendering OSW service for white people. The expansion of social work services within the workplace took place in 1954. The first OSW were employed by big companies such as Iscor and SASOL for the first time. Some studies also described the development of occupational social work. There was a study that made it clear that “there was a lack of literature on occupational social work and only few occupational social workers were employed at that stage” Martice(1966), cited in Du Plessis, (1994:10). In addition, Botha (1968) cited in Du

Plessis (1994:11) completed her study wherein six organisations were identified and thirteen social workers interviewed. The findings of the study indicated “that the social workers employed by the organisations were attending to employees’ personal problems far more than organisational problems” (Du Plessis, 1994:11).

The University of the Witwatersrand introduced the course on OSW in 1960. The researcher is of the opinion that that by then it only University offering this course in South Africa however EAP was offered at other universities.

3.3 Occupational Social Worker Roles

Iversen (1998:556-558) highlighted the roles of occupational social workers as follows.

3.3.1 Work-focused assessment, brief counselling and referral

In this role, comprehensive assessment employment dynamics with each work programme participation also including the importance of meaning of work. This should start with the employee as a client, educational background, early and future goals, work experiences, networks and information sources about work, discriminatory experiences in the workplace and workplace relevant physical abilities and disabilities. The OSW should also assess how personal problems and family problems affect attitudes and experiences. Short-term counselling might be rendered and referrals made where possible.

3.3.2 Work-focused Advocacy

During this role the OSW should team up with other business colleagues to facilitate improvements in organisational structure and resource management relevant to poor and dislocated employees. It is appropriate to advocate and educate organisations on the importance of increasing workforce and working with disadvantaged clients to take advantage of tax breaks to ensure livelihood services for employees making the transition from welfare to work.

3.3.3 Work-Focused programme development

OSW during work-focused programme development is where they initiate community-wide anticipation and improvement efforts such as career enrichment and mentorship

activities with high schools, centres for skills development and home-grown Non Profit organisations.

3.3.4. Work-Focused Social Activist

In this regard OSW utilises an employment-focused social activist role to initiate and support policy changes. They could also mobilize relevant stakeholders to promote employment enhancing policy changes. This role can be utilised to regroup employment focused social services jobs as needing the particular knowledge and skills of advanced OSW professionals through testifying, lobbying and coalition-building skills.

3.3.5 Concurrent Multilevel Practice

During this role, micro, meso and macro levels must be engaged concurrently by individual practitioners. It is essential to collect and use data about the work related needs of people at all levels in order to accomplish practices and changes.

The roles explained above are simply basic social work roles, which must be applied in the workplace to assist in addressing work related and personal challenges. These roles can assist occupational social workers to render their services while being goal oriented. Utilizing these roles can be used effectively while being incorporated with the 4 positions of OSW in order to ensure that personal and work related challenges are addressed while enhancing productivity. Utilising the occupational roles can assist in ensuring effective service delivery, especially when incorporated with the practice models.

3.4 Practice models and service delivery for Occupational Social Work

The White Paper on Social Welfare (1997) prescribes a developmental approach to social service delivery. As OSW is based on generic social work principles as stated earlier, and falls within the social service spectrum, service delivery should be focused on development with the intention of building human capacity, be needs-based and people-centred. Thus, OSW services should promote and contribute to the development of skills, play a facilitative role in a changing environment and remain

dynamic, while being able to undergo change in order to stay relevant (Kruger & Van Breda, 2001:947). Because there are occupational social workers working within EAP, the White Paper is relevant and applicable to EAP concerning the adoption of a developmental approach to service provision within the occupational setting.

Kruger and Van Breda (2001:948-951) suggest the OSW Practice Model as a point of departure for OSW practice. This model identifies three client systems, namely the employee as a person, the person as an employee, and the organisation as a client (Van Breda, 2001:948-951). The authors refer to the term “binocular vision”, describing it as the ability to have a microscopic view of everyday issues of the individual and their family, and a telescopic view of organisational related issues and problems, giving the social worker the ability to look at the situation in perspective. The model refers to four intervention positions, relating to different focal areas of OSW practice and services.

3.4.1 The four positions of the Social Work Practice Model are

Occupational social work has 4 practice model, which are restorative interventions, promotive interventions, work-person interventions and workplace interventions (Van Breda and Du Plessis, 2009).

- **Restorative intervention**

Restorative interventions are applied at micro, mezzo, or macro levels and they are used to address personal or non-work problems of employees and their families. Although individual therapy is practiced, social workers are encouraged to work with client problems at macro level as much as possible (Van Breda, 2007:4).

In the study conducted by Van Breda and Du Plessis (2009:292) it seemed that the majority of restorative interventions, which occupy a third of the participants’ time and focus are on a micro level of practice. Therapeutic group work is not used frequently. Employees may see participation in the group work process as exposing, and prefer the anonymity of individual therapy or external referrals.

- **Promotive interventions**

Promotive interventions may also be applied at all levels of social work practice and they address the personal or non-work issues of employees and their families. While restorative interventions focus on resolving client problems, promotive interventions aim at enhancing the quality of life, fulfilling client needs, and prevention (Van Breda, 2007:4).

In the study conducted by Van Breda and Du Plessis (2009:293), most promotive interventions are implemented at mezzo level. Various community needs, most of which are related to the needs of employees as persons, are addressed through these interventions.

- **Work-person interventions**

Van Breda (2007:4) states that these interventions are focused on the relationship which employees have with an organisation. They are meant to assist them in fitting in better with the needs of the organisation. They further seek to enable employees and their families to become resilient to organisational stressors and ensure that they thrive.

Occupational social workers run various interventions at mezzo level aimed at work-related needs of employees, and to some extent, their families. The study describes the commonly reported work-person interventions as training or programmes aimed at developing resilience in employees and their families to allow them to cope with organisation demands, mediation or resolving conflict between employees and management, team building, presenting and interpreting policies to employees (Van Breda & Du Plessis, 2009:294).

The psychological growth needs of employees must be met for them to thrive in the workplace. Hackman and Oldman (1976) identified several such needs to draw attention to this; needs such as variety of skills, task identity, task significance, and feedback. Moreover, to enhance the quality of life in the workplace the following must be involved: hiring quality attitude, increasing organisational support, improving office comfort and encouraging personal health, amongst others. This is best achieved in a group setting where members have an opportunity to share experiences and learn from each other, thus removing the social worker from the expert position.

- **Workplace interventions**

Workplace interventions focus on the relationship the organisation has with its people, thus assisting the organisation to be better aligned with the needs of the workforce. These interventions are aimed at creating a conducive working environment for the healthy social functioning of employees and their families, as well as improving productivity, performance and efficiency (Van Breda, 2009:4).

In Van Breda and Du Plessis' (2009:296) study participants indicated the provision of inputs to the organisation for new or revised policies and strategies, thus acting as change agents. The occupational social workers should further participate in supervisory/management training programmes and consult and advise management about the challenges within the organisation or implement processes of organisational development.

The Social Work Practice Model describes a comprehensive and effective approach to OSW practice and service delivery. The following section will address core technologies and functions of OSW.

3.5 Core technologies and functions

Akabas (1995) and Kruger and Van Breda (2001:948) identify the following as core functions of OSW services and work-based programmes:

- Consultation: Within the workplace organisation with management and stakeholders concerning identification and management of needs and trends regarding personal and organisational issues;
- Training and development: teaching and facilitation of job-specific social skills and employee development;
- Support services: provide support services to employees and their families regarding personal and work related issues that contribute towards social functioning;
- Client assessment and intervention through social work methods and skills, including short-term and crisis interventions;
- Marketing: proactive promotion of OSW services and programme utilisation thus contributing to the work organisations goals and objectives; and

Networking: advocating on behalf of clients, development of relationships and referral to community-based service providers.

Shank (2001) as cited in Maribe (2006) also highlights other roles and responsibilities of occupational

social workers which are as follows:

- Human resource policy consultation
- Legislation analysis
- Wellness benefits administration
- Societal research
- Community growth
- Consultation
- Data analysis
- Administration
- Community planning.

Schweiz, Suisse, Svizzera & Svizra (2014) explain the functions of occupational social work as follows:

- **Individual advice for employees at all hierarchical levels**

- Information on challenges experienced by Individual and families
- Information giving on well-being issues
- Guidance on proper management on finances.
- Guidance on conflict management in the workplace
- Employee Case management
- Management of sick leave

- **Consultative advice for managers**

Consultations should be made with management so that Occupational social workers be able to provide relevant advices and support for managers and employees with social or individual problems that are affect their work (e.g. psychological difficulties or addictions).

- **Help finding solutions for socially relevant issues in the company**

OSW provide training courses for employees and members of the management on how to prevent addictions, handle conflict management and how to react to mobbing and sexual harassment in the workplace. OSW are also involved in working groups and project teams, help introducing preventive measures (e.g. health promotion, early detection, dealing with stress and preparing for retirement) and assistance with disability management as defined within the company policy. OSW also offer advice before restructuring and company closures.

- **Promotion of services within the company**

Continuous information sessions and workshop seminar of available services available should be made for all employees including management and executives.

Incorporating Shank's roles and responsibilities with the core functions of OSW will enhance service delivery and ensure that employees receive maximum service. The researcher is of the opinion that to assist employees to address personal and work-related issues, the OSW should utilise diverse intervention strategies and the skills required to address those issues.

3.6 Scope of practice

The Social Service Professions Act 110 of 1978, section 28(1) (g): Regulations relating to the registration of a specialty in occupational social work, 2010 identifies OSW services as:

- Work-focused assessment by assessing the needs or problems of various client systems in the workplace and the reciprocal relationship between them;
- The boundary and impact of the employing organisations in the geographic location in which the workstation functions should be assessed;
- Render work-focused interventions with micro, mezzo or macro;
- Employing organisations and community interventions to ensure socially responsible employment;
- Work-family interventions to promote family enrichment in relation to the impact of employment;
- The promotion of a enculturation within the organisation to enhance productivity, human rights practice, social justice; and

- Programme development and work oriented policy.

Social Service Professions Act 110 of 1978, section 28(1) (g)

The researcher is in agreement with how the Social Service Professions Act 110 of 1978 outlines the scope of practice for OSW. This is also supported by the statement the researcher made when explaining that OSW is a specialized method of social work where programmes and interventions are utilised to address work-related and personal problems; and whereby the Act indicates that OSW is a work focused assessment that evaluates the workplace in order to determine what the workplace and personal challenges are. Knowing and understanding the workplace challenges would assist the OSW in implementing relevant interventions for workplace and personal issues that may hinder the productivity in the workplace and socially responsible employees. Employees are assets of the organisation. Therefore, it simply means that the scope of practice for OSW can be viewed as a tool employed to assess the workplace challenges to determine the cause of those challenges and be able to implement relevant interventions. The researcher is also of the view that their services are to encourage an organisational culture which will promote human rights equity and productivity by utilizing the policy and programme being rendered.

3.7 Client systems

The Social Service Professions Act 110 of 1978, section 28(1) (gA): Regulations concerning to the registration of a speciality in OSW, 2010, classifies client systems as recipients of occupational social work services. These client systems include (a) employees, and their family systems, forming part of a work system; (b) the employing organisation; and (c) communities that have operational or geographical links to the employing organisation.

The above perspective takes into consideration the systemic nature and approach of occupational social work by addressing various systems, from a micro to macro level, thus, highlighting the role of the occupational social work in maintaining a working relationship between these systems.

Kruger and Van Breda (2001:948) identify three client systems in OSW, (a) the individual as an employee; (b) the employee as an individual and (c) the workplace as

a client. The authors suggest that in the first instance, the employee as a person, describes the employee in the private capacity referring to the employee's personal problems, including their family system. The occupational social worker primarily focuses on the employee in his/her role as a parent, spouse, child and community member.

Secondly, the person as an employee refers to the employee's work related needs and problems, which might have an impact on his/her ability to fulfil his/her work related tasks as designated by the employer. The occupational social worker enables the employee to fulfil his/her work related duties and responsibilities.

Lastly, the organisation as a client refers to the employer system. The occupational social worker aids in facilitating the accommodation of human needs, functioning and problems into organisational policies and procedures.

Thus, the researcher is of the opinion that the primary role of OSW and the occupational social worker within the occupational setting is not necessarily on the three client systems as separate entities, but rather on the reciprocal relationship between these systems.

3.8 Statutory requirements for practice and registration with professional associations

The SACSSP (2017) stipulates the following requirements for registration and recognition as a specialist in occupational social work (SIOSW):

- Registered social work; and
- Master's degree and at least two years' applied experience in the field of OSW services; or
- Diploma in OSW plus three years' work experience within the scope of OSW services ; or
- Relevant five years' work experience within the scope of OSW services.

South African Council for Social Service Professions (2017)

Furthermore, the South African Occupational Social Workers' Association (2017) states the following requirements for member registration:

- “Any person who is registered as a Social worker within the Republic of South Africa with the SACSSP may become an ordinary member”.

Concerning legislation, all social work practice is governed by the Social Service Professions Act 110 of 1978. The Act necessitates the establishment of a statutory body, the SACSSP, which regulates and ensures ethical conduct and professional social work practice. OSW is recognised by the SACSSP as a specialist field of social work practice as indicated above. The SAOSWA as a professional body representing OSW specialists and practitioners, and its members are subject to the SACSSP code of ethics and the Social Service Professions Act 110 of 1978.

3.9 Conclusion

This section dealt with the history of OSW, service delivery and practice models, core technologies and functions, scope of practice, client systems, and statutory requirements for practice and registration with professional bodies. This chapter described the various components and requirements of OSW practice in South Africa. The researcher discovered that OSW has five roles which are work-focused assessment, brief counselling and referral, work-focused advocacy, work-focused programme development, and work-focused social activist and concurrent multilevel practice. In this chapter it was alluded that the scope of practice for OSW is basically work-focused assessment to assess the workplace and personal challenges, which assist in rendering relevant services to address the challenges experienced. Only qualified registered social workers with Masters in OSW or at least two years working experience in the field can be recognised and registered with SIOSW.

CHAPTER 4: DIFFERENCES AND SIMILARITIES BETWEEN EAP AND OSW THEORETICALLY

4.1 Introduction

Occupational social workers and Employee Assistance Professionals are either employed by the organisation or hired as part of outsourced services, to render counselling services and interventions to employees and their families. Over time, EAP dominated the OSW scene, thus EAP and OSW were often used and referred to interchangeably (Mor Barak & Bargal, 2000:3). Van Breda (2009:285) provides a similar account, by indicating that based on the working definitions of OSW and EAP, provided by Akabas (1995) and Barker (2003) respectively, both disciplines identify employees as the sole client systems, thus EAP and OSW became indistinguishable. Therefore the purpose of this chapter is to highlight the differences and similarities of EAP and OSW.

Employee Assistance Programmes, as previously defined, are work-based programmes and services offered by the employer to employees as a workplace resource, based on specific core functions and technologies to address the organisational business needs and enhance workplace and employee effectiveness through the prevention, identification, and resolution of personal and productivity issues (Barker, 2003:141; Standards Committee of EAPA-SA, 2010:2). What makes it distinct from other programmes is its unique tri-partite relationship between the employee, the EAPs and the employer. This means that the work of an EAP always retains an organisational context and focus because of the performance-based backdrop. (UK-EAPA, 2015:6).

Occupational Social Work is defined as “a specialised field of practice addressing the human and social needs of the work community through a variety of interventions, which aim to foster optimal adaptation between individual and environment”

(Straussner, 1990: 21). Netting, et al (1998) assert that occupational social work involves assisting employees, their families and management with challenges that relate to social functioning and human relationships in the workplace.

Therefore both definitions for EAP and OSW clearly indicate that they are not to be used interchangeably. Therefore the researcher will explore the differences and similarities of the two professions.

4.2 SIMILARITIES

4.2.1 Core Technologies and Functions

From the definitions it is clear that Occupational Social Work and Employee Assistance Programmes are similar in that their main function which is to assist organisations have a healthy and productive workforce by assisting their employees with their problems and work related issues. This is done through:

- Support Service / Case Management
- Training and Development
- Consultation
- Networking
- Marketing
- Monitoring and Evaluation

4.2.2. Short-Term Therapy

Both Occupational Social Workers and EAP practitioners provide short-term free confidential counseling to employees to support their well-being in the workplace and in their personal lives (Klarreich, et al, 1985). They offer employees brief therapy or short-term interventions as a group of therapeutic interventions aimed at solving employees' problems. Counseling is focused, has direct objectives and problem areas are identified and prioritized (Darick, 1999:72). Work issues that can be discussed in counseling may include performance problems, relationships between co-workers, conflict management, career change and managing work-related stress. Personal issues that employees can discuss in counseling include, but are not limited to grief,

substance abuse, financial management, anger management, gambling problem and stress management.

4.2.3 Client systems

The EAPA-SA (2010:3) identifies the following client systems as target groups for comprehensive service delivery, (a) the organisational management and supervisory structures; (b) worker organisations; and (c) employees and their families. EAP services are rendered to these client systems by EAP practitioners and professionals as part of a comprehensive package. Organisational management and supervisors represent the organisation or employer as a structure. In accordance with the EAPA-SA standards document (2010), EAP services include training and development of managers and supervisors in terms of conflict management and resolution, and supervisor training programmes. This assists with regards of identifying employees whose performance is unsatisfactory due to possible personal or work related problems, in terms of services are rendered to worker organisations that represent the workforce collectively, such as unions. EAP recognises the importance of this group as stakeholders in EAP programmes and services, as a resource in identifying and dealing with employee matters to the work related environment as well as employee development. Thus it is important to obtain buy-in from such organisations to ensure the success of EAP and work-based interventions. Services are rendered to employees and their families, specifically to address issues and problems that would affect job performance and productivity, working towards assisting the employee maintain work-life balance and improving overall job satisfaction.

The Social Service Professions Act 110 of 1978, section 28(1) (gA): Regulations relating to the registration of a speciality in occupational social work, 2010, classifies client systems as recipients of occupational social work services. These client systems include (a) employees, and their family systems forming part of a work system; (b) the employing organisation; and (c) communities that have operational or geographical links to the employing organisation.

Due to the systemic nature of the occupational setting, the identified client systems form part of a bigger system, ranging from micro to macro levels, and are seen as interrelated and interdependent. Thus, the researcher is of the opinion that the primary role of OSW and the occupational social worker within the occupational setting is not necessarily on the three client systems as separate entities, but rather on the reciprocal relationship between these systems. However, the researcher is of the opinion that despite the fact that both EAP and OSW services being rendered at all levels and benefiting all stakeholders involved, their major purpose is to assist employees maintain improved productivity, work-life balance and aiming to enhance the work environment.

4.3 DIFFERENCES

4.3.1 Service Delivery and Practice Models

The main difference identified between Occupational Social Work and EAP is the approach used for service delivery. Occupational Social Work is based on the generic social work principles outlined in the White Paper thus it uses the developmental approach to social service delivery. Services rendered by Occupational Social Workers are people centered, needs based and build human capital (White Paper on Social Welfare, 1997). According to Van Breda (2007:4) Occupational Social Work has 4 practice models, which are restorative interventions, promotive interventions, work-person interventions and workplace interventions.

In EAP, a service delivery system is chosen from the three models of service delivery that can be customized based on the unique requirements of each organisation. When choosing which model to use, the EAP practitioner will take into consideration the size and location of an organisation, as well as the socio-demographics of the workplace (Mahlahlane, 2003:32). Standards Committee of EAPA-SA (2015:7) also supports this by indicating that the following should be considered when selecting an appropriate model: alignment with existing corporate strategies and philosophy, the size and structure of the organisation, the geographical location, accessibility to the programme and community resources, professional capacity and employee preferences. EAP models are categorised into three, namely, in-house, external model and combined model (Masi, 2000:407). This is supported by the Standards Committee EAPA-SA

(2015:7) whereby the goal of service delivery and practice model is to secure the most effective model of service delivery, which will enhance the services to the organisation in terms of both the individual and the corporate client, resulting in the best possible application of financial resources. It is also indicated in their objectives by selecting the most relevant model namely internal, external or combination model which ensures: the cost effectiveness and functional appropriateness of the EAP and a balance between expenditure and benefits.

The researcher is of the opinion that it is clearly evident that within EAP and OSW the approach used for service delivery and practice models differs. OSW relays generic social work outlined by the White Paper and the four practice models by Van Breda (2007), while the EAP goal for service delivery and practice model is to ensure effective and efficient service delivery through the relevant model and through the uniqueness of the organisations.

4.3.2 Requirements for practice: registration with statutory bodies and professional associations

Although EAPA-SA is recognized as a professional body constituted to represent and/or regulate the community of expert practitioners by the South African Qualifications Authority, South Africa does not have a statutory body that governs EAP practice. Registration with EAPA-SA is dependent on the professionals, such as social workers or psychologists, being registered with their professional statutory bodies, whether it be the South African Council for Social Services Professions or the Health Professions Council of South Africa (EAPA-SA, 2015:3). EAP draws on the knowledge and skills from different professional fields, and professional development occurs through continuing education (EAPA,-SA, 2015). Because of this, EAP services can be provided by practitioners of different professions; Social Workers, Psychologists, Counselors and those with backgrounds in Human Resource and Organisational Development (EAPA-SA, 2015).

The Employee Assistance Professionals Association of South Africa (2016) indicates the following requirements for registration as a member:

- Proof of payment;
- Curriculum Vitae;

- Proof of employment in the field of employee assistance programmes and/or wellness;
- Proof of the successful completion of a short course in EAP (as part of accreditation);
- Proof of registration with a statutory body;
- Proof of chapter involvement / attendance of at least 2 meetings

As with OSW, the South African Council for Social Service Professions (2017) stipulates the following requirements for registration and recognition as a specialist in occupational social work:

- Recognised qualification in social work and being registered as a social worker with the Council; and
- Master's degree and at least two years' practical experience within the scope of occupational social work services; or
- Post graduate diploma or certificate and three years' practical experience within the scope of occupational social work services; or
- Five years' appropriate practical experience within the scope of occupational social work services.

Furthermore, the South African Occupational Social Workers' Association (2017) stipulates the following requirements for member registration:

- Registration as a social worker within the Republic [of South Africa].

With the information provided, it is clear that in terms of practice and registration EAP and OSW operate differently. The EAPA-SA is recognized by South African Qualifications Authority, but there is not a statutory body that governs EAP practice. Therefore their practicing professionals, such as social workers, rely on their professional statutory bodies such as South African Council for Social Services Professions or the Health Professions Council of South Africa. In the case of OSW, the South African Council for Social Service Professions (2017) stipulates that for someone to practice as an OSW they must have a Master's degree and at least two years' practical experience within the scope of occupational social work services. Therefore, this implies OSW is limited to only registered social workers.

4.3.3 Scope of Practice

The EAP scope of practice consists of various components which are derived from the EAPA standards which identify the specific actions required when implementing employee assistance programmes (Standards Committee EAPA-SA 2015:4-33). The EAPSA-SA standards are as follows: programme design, implementation, management and administration, clinical services, non-clinical services, preventative services, networking and monitoring and evaluation. These standards detail how EAP can address challenges faced by an organisation and its employees so that workplace productivity is enhanced.

The scope of practice for Occupational Social Workers is outlined by the Social Service Professions Act 110 of 1978 as tools employed to assess the workplace challenges, to determine the cause of those challenges and be able to implement relevant interventions. This is done through work-focused assessments, work-focused interventions, work-family interventions and work-focused policy and programme development.

4.4 CONCLUSION

With the information provided above, it is clear that there are similarities and differences between EAP and OSW theoretically. The identified similarities EAP and OSW client systems, short term therapy and core technologies. There are also differences between EAP and OSW which are service delivery, requirements for practice: registration with statutory bodies and professional associations and scope of practice. The highlighted differences and similarities point out that theoretically the two EAP and OSW are clearly two different professions.

CHAPTER 5: THE EMPIRICAL STUDY ON A COMPARATIVE STUDY BETWEEN THE EMPLOYEE ASSISTANCE PROGRAMME AND OCCUPATIONAL SOCIAL WORK IN LIMPOPO.

5.1 Introduction

In this chapter, the researcher will discuss the empirical data that she obtained when conducting research interviews on the topic through a comparative study between the Employee Assistance Programme and Occupation Social Work in Limpopo province. This will be done by way of a discussion of the process of collecting data; and the presentation, analysis and interpretation of the collected data.

5.2 Research Methodology

The research methodology was based on the eight steps of the inductive and descriptive open coding technique by Tesch as described in Creswell (2014). These eight steps will be presented briefly as follows:

Step 1 – Reading through the data

The researcher acquired a sense of the whole by reading all the verbatim transcripts carefully. This gave ideas about the data segments and what they look like/mean. The meanings that emerged during reading were written down as were all ideas as they came to mind. The researcher carefully and repeatedly read the transcripts of all the participants and made sure that she understood them. An uninterrupted period of time to digest and think about the data in totality was created. The researcher engaged in data analysis and wrote notes and impressions as they became apparent.

Step 2 – Reduction of the collected data

The researcher scaled down the data collected to codes based on the existence or frequency of concepts used in the verbatim transcriptions. The researcher then listed all topics that emerged during the scaling down. The researcher grouped similar topics together, and those that did not have any associations were clustered separately.

Notes were written in the margins and the researcher started recording thoughts about the data in the margins of the paper containing the verbatim transcripts.

Step 3 – Asking questions about the meaning of the collected data

The researcher read through the transcriptions again to analyse them. This time the researcher asked herself questions about the transcriptions of the interview, based on the codes (mental picture codes when reading through) which existed on the frequency of the concepts. The questions were “Which words describe it?” “What is this about?” and “What is the underlying meaning?”

Step 4 – Abbreviation of topics to codes

The researcher started to abbreviate the topics that had emerged as codes. These codes needed to be written next to the appropriate segments of the transcription. Differentiations of the codes by including all meaningful instances of a specific code's data were done. All these codes were written in the margins of the paper against the data they represent with a different pen colour to the one used in Step 3.

Step 5 – Development of themes and sub-themes

The researcher listed themes and sub-themes from coded data and the associated texts and reduced the total list by grouping topics that relate to one another to create meaning of the themes and sub-themes.

Step 6 – Compare the codes, topics and themes for duplication

In this step the researcher revised from the beginning to check the work for duplication and to refined codes, topics and themes where necessary. Using the list of all codes she checked for duplication. The researcher grouped similar codes and recoded others where necessary so that they fit in the description.

Step 7 – Initial grouping of all themes and sub-themes

The data belonging to each theme was assembled in one column and preliminary analysis was performed, which was followed by the meeting between the researcher and co-coder to reach consensus on the themes and sub-themes that each one has come up with independently.

Step 8 – Recoding if necessary

The researcher and the co-coder after reaching a consensus on the themes and sub-themes identified. Finally the themes and sub-themes that emerged were written in columns to show clear distinction and interrelationship.

5.3 DATA ANALYSIS

The data collected during individual semi-structured interviews was analysed. The table below outlines the final themes and sub-themes from the findings of the study.

Table 1: Themes and sub-themes reflecting the experiences of Social Workers executing services for Employee Assistance Programme and Occupational Social Work

Main themes	Sub-themes
1. Experiences related to EAP and OSW environment	1.1 Existing training programmes viewed as helpful for practitioners who execute EAP or OSW services 1.2 An outline of beneficiaries from EAP and OSW services
2. Knowledge related to EAP and OSW and the importance thereof	2.1 Core technologies and functions of the EAP and OSW services 2.2 Registration for practising as EAP and OSW practitioners 2.3 Legislative framework that guides EAP and OSW services
3. Explanations on how EAP and OSW services are rendered	3.1 Different marketing strategies in EAP and OSW services 3.2 Various activities carried out during execution of EAP and OSW services 3.3 Service delivery models used when executing both EAP and OSW services
4. Improvement in offering of clinical services	4.1 Importance of the relevance of culturally-based models for both EAP and OSW services
5. Differences and similarities of EAP and OSW services	5.1 Explanation of similarities shared by both professions. 5.2 Explanation of differences between EAP and OSW 5.3 Explanation of EAP as a programme and OSW as a speciality 5.4 Explanation of utilising both concepts interchangeably

3.3 DISCUSSION OF FINDINGS

The findings are presented in a narrative format after which the descriptions of the findings are presented. Verbatim excerpts of the participants are presented and relevant literature to support the findings is provided. The findings of this study are discussed based on the themes and the sub-themes that emerged during data analysis based on the individual semi-structured interviews conducted with EAPs and OSWs.

Table 2: Demographic profile of EAP participants

Gender	Race	Qualifications	Current occupation	Public organisation or service provider	Number of years in experience
1. Female	African	BA Social Work	Assistant Director EAP	Public organisation	11 years
2. Male,	African	Honors degree in social work	Assistant Director EAP	Public organisation	6 years
3. Female,	African	BA Social Work	Wellness Consultant, EAP	Public organisation	15 years
4. Female,	African,	BA Social Work	EAP Practitioner	Public organisation	1 year
5. Male,	African	Honours degree in social work	EAP Wellness Consultant	Public organisation	3 years
6. Male,	African	BA Social Work	Coordinator Employee Health and wellness	Public organisation	1 year

There were six EAPA-SA members who participated in the study; two are males and four are females. They are all African. With the information provided in both tables it is clear that all respondents have Bachelor of Arts degrees in Social Work. EAPA-SA (2015) supports this statement by highlighting that EAP draws on the knowledge and skills from different professional fields and services can be provided by practitioners from different professions; Social Workers, Psychologists, Counsellors and those with backgrounds in Human Resource and Organisational Development. The length of service highlighted for both EAPA-SA members is from three years to 15 years, which

means that the respondents are well experienced in the field. Although social work is a multi-profession all the respondents are social workers by profession.

Table 3: Demographic profile of OSW participants

Gender	Race	Qualifications	Current Occupation	Public organisation or service provider	Number of years in experience
1. Female,	Africa	BA Social Work	Occupational social worker	Public organisation	13 years
2. Female	African	BA Social Work	Occupational social work supervisor	Public organisation	16 years
3. Female	African	BA Social Work	Consultant	Service Provider	34 years
4. Female,	African	BA Social Work	Occupational social worker	Public organisation	3 years
5. Female,	African	BA Social Work	Occupational social worker	Public organisation	3 years
6. Female,	African	BA Social Work	Occupational social worker	Public organisation	2 years

Six SAOSWA members participated in the study. All of the participants were females. The findings revealed that all respondent have Bachelor of Arts degrees in Social Work. The South African Council for Social Service Professions (2017) stipulates that social workers must have a qualification in social work. Therefore this highlights that occupational social work is strictly for social workers. There was only one respondent who is practicing as a service provider and of the participants, she has the longest service as an OSW *“I have 34 years working as an Occupational Social Worker”*. The length of service for SAOSWA members was from 3 to 10 years.

Theme 1: Explanation of the Experiences Related to EAP and OSW Environments

The findings pointed out that there are different and similar experiences that EAP and OSW practitioners experience in their work environment especially on their first day of employment. According to Bhoodram (2010) there are several intolerable operational experiences which the EAP and OSW undergo and these impact on their professional lives and discourage them to continue with their work and thus impact on the programmes negatively.

This was evident in the following sub-themes that emerged from this theme:

Sub-themes

- 1.1 Existing training programmes viewed as helpful for practitioners who execute EAP or OSW services
- 1.2 An outline of **beneficiaries from** EAP and OSW services

Sub-theme 1.1 Existing training programmes viewed as helpful for practitioners who execute EAP or OSW services

The findings revealed that the training received prior to employment in EAP and OSW made it easier for them to execute their services. The possible training received by both professions is a Short Course in EAP, HIV and AIDS in the workplace and a Basic Military Social Work Course.

Participant 5 of EAPA-SA:... *The knowledge acquired during the short course made it a bit easier for me in the field of EAP*

Participant 5 of SAOSWA indicated that: *It wasn't challenging as I am currently studying Masters in Social Work in OSW and also did short course in EAP, and HIV and AIDS in the workplace.*

There were participants who did not undergo any prior training and they found it difficult adjusting to the workplace. The participants who did not undergo any training before employment as EAPs or OSWs did not find it as easy as those who had some background of EAP or OSW.

Participant 4 of SAOSWA: *It was challenging after the induction whereby I was exposed to military the role of social work in military things became easier.*

Participant 2 of EAPA-SA: *It wasn't easy I must be honest but the fact that I was studying Masters in EAP which I did not complete, at least I had a background and it made practice easier.*

The findings therefore highlight that training for EAPs and OSWs is crucial in making their job effective. As indicated, those who had training prior their employment found it easier to adjust to the workplace.

Sub-theme 1.2 An outline of beneficiaries from EAP and OSW services

The study findings revealed that the client systems for both EAP and OSW are employees, their dependents and the organisation. This is supported by the following comments:

Participant 6 of EAPA-SA: *We rendering service to all employees, their immediate family and the organisation.*

Participant 2 of SAOSWA: *We render services to the organisation, employees, and their dependents and also extend our services to the veterans.*

The findings therefore reveal that both EAP and OSW render services to the same beneficiaries, which means that their client systems are the same. According The Social Service Professions Act 110 of 1978, section 28(1) (gA): Regulations relating to the registration of a specialty in occupational social work, classifies client systems as recipients of occupational social work services as; (a) employees, and their family systems forming part of a work system; (b) the employing organisation; and (c) communities that have operational or geographical links to the employing organisation. Supported by the standard Committee, the EAPA-SA (2010:3) identifies the following client systems as target groups for comprehensive service delivery, (a) the organisational management and supervisory structures; (b) worker organisations; and (c) employees and their families.

Theme 2: Knowledge related to EAP and OSW and the importance thereof

The findings revealed that EAPs AND OSWs need to be knowledgeable about relevant information relating to their profession such as core technologies, legislations used in practice and the importance of registration prior to practice.

Sub-themes

- 2.1 Knowledge versus lack of knowledge related to different **core technologies and functions** used during EAP and OSW services
- 2.2 Existence of knowledge and importance of **registration for practising** as EAP and OSW practitioners
- 2.3 Knowledge related to the required **legislative framework** that guides EAP and OSW services

Sub-theme 2.1 Knowledge versus lack of knowledge related to different core technologies and functions used during EAP and OSW services

The study findings revealed that EAPs were knowledgeable of the core technologies that guide them in practice and are indeed utilising them in their practices. This is supported by the statements below:

Participant 1 of EAPA-SA: *The core technologies that I know of are: organisational profiling, case management, marketing, stakeholder management, monitoring and evaluation and training and development.*

When asked to elaborate on the one she is utilising in her practice, she explained as follows:

Participants 1 from EAPA-SA: *Organisational profile it help the EAPs to know and under the culture and dynamics of their organisation, 2) Case Management whereby we make sure that confidentiality is maintained and attend cases timeously and render short intervention, 3) Marketing to inform our employees about our services,*

4)Monitoring and evaluation to assist us check if the EAP services has impact to the organisation and employees. I use a tool designed to check the satisfactory of clients prior closing their cases so they can evaluate if I was able to assist them and give recommendations. We also evaluate the proactive programmes after the presentation to check if the programme was effective, though at times I am forced to assist some employees to assist to evaluate my services and programmes as they cannot write which, makes them be subjective not objective. 5), training and development we make sure that all our supervisors and line managers understand what EAP is, how to identify a troubled employees and the different types of referrals.

This revealed that EAPs do know, understand and utilise the core technologies.

OSW participants revealed a lack of knowledge of core technologies amongst OSWs; some of their responses may be an indication of confusion between the core technologies and the OSW practice model. This was indicated by a respondent who stated that:

Participant 6 of SAOSWA: They are empathy, confidentiality, social work values and listening skills

Participant 2 of SAOSWA: I know of restorative, promotive, work-person intervention and workplace intervention.

Participant 1 of SAOSWA: Restorative and promotive and mentioned that she had forgotten some.

This displayed confusion as most of the participants highlighted the practice model as the core technologies of OSW, although there was one respondent who knew and understood the core technologies of OWS. The mentioned view is supported by the statement below:

Participant 5 of SAOSWA: Training and development whereby we render proactive programmes and train managers and supervisors on OSW and the different referral systems, support services whereby we give support to employees and the organisations, marketing whereby we market our services the employees and

Therapeutic services whereby we render counselling to employees and their immediate families.

The above view highlights that there are similarities in the core technologies between EAP and OSW, which are Support Service/Case Management, Training and Development, Consultation, Networking, Marketing, Monitoring and Evaluation (Akabas; 1995, Kruger & Van Breda; 2001:948 and Standards Committee EAPA-SA; 2015:1). The study also revealed that not all professions utilise these core technologies as it was discovered that most of the OSWs are not knowledgeable about the core technologies.

Sub-theme 2.2. Existence of knowledge and importance of registration for practising as EAP and OSW practitioners.

Both EAP and OSW professions require registration for practicing as was discovered in the study findings. More significantly, it was discovered that they differ in terms of requirements for registration and practice.

Participant 2 of EAPA-SA: *The requirements for one to practice as an EAP must have qualifications on Human Science or BA social work.*

Participant 5 of EAPA-SA: *A registered Social Work and B Psychology*

This was elaborated by the other respondent who emphasised the following:

Participant 1 of EAPA-SA: *Social work is very relevant but also practitioners who are in human resources can do EAP. Because I believe that it doesn't help to hire someone who can only do non clinical part of EAP not provide clinical as it is the hammer of the profession.*

According to Standard Committee of EAPA-SA, (2015) EAP is a multi-professional registration, EAP services can be provided by practitioners of different professions; social workers, psychologists, counselors and those with backgrounds in Human Resource and Organisational Development (EAPA-SA, 2015). It was discovered that although EAP is a multi-disciplinary profession, social work is the leading profession

in this field as all EAPA-SA participants highlighted that they have BA Social Work degrees, (refer to demographic Table 3 above). It is also highlighted that as a requirement for one to be a registered member of EAPA-SA one must be registered with a statutory body. The study revealed that this differs for OSW. The study revealed that OSW is strictly for Social Workers. This is supported by the following comments:

Participant 5 of SAOSWA: *An honours degree registered in Social Work and masters in OSW or studying in that field.* The student also indicated that she was studying Masters in OSW.

During the interviews one of the participant emphasised on the requirements for practicing as an OSW, the participant indicated the following:

Participant 3 of SAOSWA: *Be a registered Social Work, have masters in OSW and be registered with SACSSP.*

This statement is supported by The South African Council for Social Service Professions (2017) which stipulates the following requirements for registration and recognition as a specialist in occupational social work:

- A recognised qualification in social work and registered as a social worker with the Council; and
- A master's degree and at least two years' practical experience within the scope of occupational social work services.

This has proved to be correct as the entire SAOSWA group of participants who are practicing as OSWs are registered Social Workers. They also have more than 2 years practical experience within the scope of SWS though it was found that only one respondent is studying towards that field.

Sub-theme 2.3 Knowledge related to the required legislative framework that guides EAP and OSW services

From the data obtained, it was discovered that there is no legislation for EAP while OSWs have regulations. This was discovered by one of the respondents who mentioned that:

Participant 1 of EAPA-SA: *EAP doesn't have any EAP-specific legislation...*

Although it was discovered that EAP doesn't have any EAP-specific legislation it was revealed that there is legislation which they are utilising.

Participant 1 of EAPA-SA: *EAP doesn't have any legislation but using the general legislation that are guiding the workplace such as Labour Relations Act 66 of 1995, Constitution of the Republic of South Africa 1996, Occupational Health and Safety Act 85-1993, Compensation for Occupational Injuries and Diseases Act 1997.*

This statement was also indicated by another respondent

Participant 3 of EAPA-SA: *The legislation used are Labour Relations Act 66 of 1995, Code of Good practice, Constitution of the Republic of South Africa 1996, Occupational Health and Safety Act 85-1993, Compensation for Occupational Injuries and Diseases Act 1997.*

From what the respondent indicated, it is clear that there is no legislation specific for EAP but practitioners rely on general legislation which is utilised in the workplace. During the interview it was discovered that there are standards which are used as guiding tools for EAPs. The researcher's findings are supported by the following statements:

Participant 5 of EAPA-SA: *I am using EAPA-SA standards and other supporting legislation and policies. To give you examples I would say Constitution of South Africa, Labour Relation Act and Work Policies.*

Participant 2 of EAPA-SA: *Social Work Act 110 of 1978, EAPA-SA Standards, EHW Strategic Framework that indicate the scope of practice focusing on the 4 pillars and departmental EAP policy.*

The standards document is a document that aims at providing a benchmark for Employee Assistance practice, promoting the establishment of quality EAP, describing the scope of EAP services, enhancing the quality and functioning of existing EAP and operationalising programme standards and guidelines for EAP (Standard Committee, 2015:1). Therefore this document is found to be useful in empowering and guiding the EAPs on how to implement the EAP services.

The findings revealed that there is no legislation in OSW. This was discovered during the interviews when most of the participants highlighted that they rely on general legislation as well. This is supported by the following responses:

Participant 1 of SAOSWA: *I am using the Constitution of the Republic of South Africa 1996, Occupational Health and Safety Act 85-1993, EHW strategic framework.*

Participant 4 of SAOSWA: *Social work policies and legislation within the workplace.*

This also proves that OSWs are also using general legislation and work policies. It was indicated that OSWs are being regulated by the Social Service Professions Act 110 of 1978, section 28(1) (g): Regulations relating to the registration of a specialty in occupational social work, 2010. There was only one participant out of the six participants who mentioned the OSW regulation.

Participant 3 of SAOSWA: *Social work Act 110 OF 1978 which also regulate OSW and Code of Conduct.*

It is clearly proven that both professions, EAP and OSW, do not have their own legislation. While EAPs are guided by the EAPA-SA Standards document the OWSs are utilising the regulations from Social Service ACT 110 of 1978.

3. Explanations on how EAP and OSW services are rendered

The findings pointed out that there are different and similar services that EAP and OSW practitioners are utilising when implementing EAP and OSW services. This is evident in the following sub-themes that emerged from this theme.

Sub-themes

3.1 Various **marketing strategies** in EAP and OSW services

3.2 Various activities carried out during execution of **EAP and OSW services**

3.3 **Service delivery models** used when executing both EAP and OSW services

3.1 Various marketing strategies in EAP and OSW services

There are different ways whereby a product or service can be marketed. It is clear that for people to know and understand the service well, it should be well marketed so that it can be utilised effectively and efficiently. The study revealed that there are several ways whereby both EAP and OSW are being marketed. This is supported by the following statements from the respondents:

Participant 1 of EAPA-SA: *Through intranet, all email users, posters, word of mouth through presentations during meetings, and flyers.*

Participant 3 of EAPA-SA: *Through emails, posters, word of mouth during presentations, and flyers.*

One other respondent further elaborated on what marketing is and also indicated the types of marketing strategies which he utilises.

Participant 5 of EAPA-SA: *Marketing is when we put awareness out there just so people understand what we are talking about. This is when we use pamphlets and burners and also on the internet on the website where we publish information just, as I have indicated so people understand what we talking about.*

The above statements were indicated by the EAPs. It was discovered during the interviews that EAPs and OSWs utilise the same methods to market their programmes and services. This is supported by the following direct quotations from the participants

Participant 1 of SAOSWA: *Through emails, word of mouth during presentations, print media such as posters and flyers.*

Participant 5 of SAOSWA: *Posters, email, during parade in the morning and afternoon and station lecture*

Participant 3 of SAOSWA: *networking by utilising word of mouth method of marketing.*

The Standards Committee EAPA-SA (2015:1) explains marketing as the promotion and 'selling' of EAP programmes, services and interventions to stakeholders, providing necessary information regarding programme details and content, accessibility and confidentiality, as well as encouraging participation and utilisation. Whereas Akabas (1995) and Kruger and Van Breda (2001:948) view it as a promotion of OSW services and programmes, utilisation is thus contributing to the work organisations' goals and objectives. The researcher is of the opinion that both descriptions of marketing are means of alerting people to services so as to ensure utilisation. It was discovered that both EAP and OSW are utilising similar methods to market their programmes and services, which are word of mouth, presentations, print media whereby they use posters, flyers and banners, and intranet whereby they post information for all employees to see it.

Sub-theme 3.2 Various activities carried out during execution of EAP and OSW services

There are several different activities that need to be executed during implementation of both EAP and OSW. From the collected data, such activities had been confirmed as:

Participant 3 of EAPA-SA: *I do disease management in terms of educational programmes and life style conditions, render therapy, sports activities, capacity building e.g. financial management and stress management, supervisory training, executive wellness and absenteeism management.*

Participant 4 of EAPA-SA: *therapeutic services, proactive programme (which include retirement planning, financial management, gender based violence, substance abuse), promotion of physical wellness are mainly the sports activities, management of HIV and AIDS in the work place, implementation of occupational health and safety in the workplace and lastly is the health and promotion being guided by the health calendar to render relevant programmes or even do the health screening wellness.* Some of the OSWs highlighted the following:

Participant 3 of SAOSWA: *Implementing workplace systems intervention, profiling of organisation, worksite assessment, training and development for employees”.*

Participant 1 of SAOSWA: *We do financial management (Money Wise), substance dependency programme, pre-retirement programme, and therapeutic services (casework).*

Participant 2 of SAOSWA: *Military Community Wellness Committee (MCWC) whereby the manager of the unit is the chairperson of the committee, which aims at tracking the tendencies of problems in the unit and how they can improve and best solve them. Supervisory training, whereby all supervisors are trained on how to identify a troubled employee, keep records of incidents and the different referral system. We render therapeutic services and also facilitate different proactive programmes being guided by the annual nation health calendar.*

Although programmes and services may vary according to names, the study revealed that the programmes being implemented by EAPs and OSWs are more similar. Their scope of practice is similar in terms of implementing clinical services, non-clinical services and preventative services. Therefore implementing these services would be found easier especially for the EAPs as they use the EAPA-SA Standard document which highlights all the components of the document clearly. The EAPSA-SA standards are as follows: programme design, implementation, management and administration, clinical services, non-clinical services, preventative services, networking and monitoring and evaluation (Standards Committee EAPA-SA 2015:4-33). The study also revealed that both EAP and OSW utilise the National Health calendar as a guiding tool

when implementing preventative programmes. It was discovered that some OSWs are implementing EAPs in their workplace as they deviated from what is highlighted in the Social Service Professions Act 110 of 1978, section 28(1) (g). This is supported by the following direct quotes from respondents:

Participant 5 of SAOSWA: *Therapeutic services, proactive programmes such as substance dependency and sexual harassment, we do absenteeism management through sick interview to check trend of sick leave for employees, facilitate application for Ill health retirement process especially career discussion to see if there is a need for temporary placement while the client recovers.*

Participant 6 of SAOSWA: *Proactive programmes such as substance dependency and sexual harassment, we do absenteeism management.*

Therefore, it is clear that there is confusion amongst other departments and organisations when it comes to implementation by OSWs.

Sub-theme 3.3 Service delivery models used when executing both EAP and OSW services

There are several models that are utilised when implementing both EAP and OSW. It has been gathered from the collected data that EAPs use different models to OSWs. This is supported by Jacobson (2011:84) highlighting that EAP models are categorised into three models, namely, in-house, off-site and combined models. The study revealed that the model used most by EAPs is the in-house model. This is supported by the following comments:

Participant 5 of EAPA-SA: *In-House Model.*

Participant 1 of EAPA-SA: *100% In-House model, there is no budget to refer to external professional.*

It was further discovered that the EAPs mostly utilise the in-house model because of the financial constraints that comes with using other models. The following direct quotes support the view of the researcher:

Participant 4 of EAPA-SA: *In-house model, as I am only one rendering the services, and can only refer where there will not be any financial implications. Mostly refer to governmental institutions.*

Participant 6 of EAPA-SA: *In-House Model, because we don't have a budget for referring to external service providers.*

Only one respondent mentioned that their organisation utilises combined models and they only utilise external service providers for medical assistance. This is supported by the following statement:

Participant 3 of EAPA-SA: *Combined model, we refer to external service provider for medical assistance.*

In terms of OSW, collected data revealed a lack of knowledge in terms of the practice models of OSWs. It is general knowledge that most occupational social workers are employed and work in-house to businesses and departments. However the 3rd participant proved that the opposite is also possible, by being an external consultant. This was discovered when most participants indicated that they utilise the in-house model. For OSW practice models refer to chapter 3. This is supported by the following comments:

Participant 6 of SAOSWA: *We deliver needs of employees and organisation.*

Participant 2 of SAOSWA: *In-House Model.*

Participant 3 of SAOSWA: *External, I am a consultant.*

Therefore, this proves that there is a lack of consistency between the EAP models and OSW practice models amongst OSWs. Although most lacked knowledge of the practice models, there was one respondent who indicated that their organisation is implementing the practice model by Van Breda as explained in chapter three.

Participant 5 of SAOSWA: *We are using restorative, promotive, workplace and work person intervention.*

The researcher is of the opinion that although there might be some confusion, there are organisations which are implementing models correctly.

Theme 4: Improvement in offering of clinical services

The study revealed there is a need for improvement in terms of clinical services. This was evident in the following sub-theme that emerged from this theme.

Sub-theme

4.1 Importance of the relevance of **culturally-based models** for both EAP and OSW services

It was discovered from collected data that both EAPs and OSWs utilise similar therapeutic models when rendering therapy. The most utilised models are person centred and task centred therapeutic models. This is sustained by the following statements by EAPs:

Participant 5 of EAPA-SA: *I am utilising Person-Centred approach*

Participant 6 of EAPA-SA: *Person-Centred approach*

Some OSWs shared the same sentiment as indicted:

Participant 1 of SAOSWA: *Person-Centred approach*

Participant 4 of SAOSWA: *Person-Centred approach*

Although there were other therapeutic models that were highlighted, most participants stated that the person-centred model is the most applicable for all races, cultural and ethnicity groups. Some of the participants indicated that the reason they find the therapeutic model applicable is because it focuses on the person as a client, as is supported by the following direct quotes:

Participant 5 of EAPA-SA: *Because it focuses on empowering clients to be able to overcome their difficulties, challenges and obstacles;*

Participant 4 of SAOSWA: *Because it helps the client to be independent and self-sufficient*

These statements are supported by Sepucha, Uzogarra, O'Connor (2008) and Gill (2013) as they argue that the person-centred approach is not just about giving people what they need or providing them with necessary information. It is about working together with them towards appropriate solutions and also considering people's desires, values, family situations, social circumstances and lifestyles and seeing the person as an individual. The other approaches which were highlighted are task-centres, system theory and resilience theory. The participants elaborated that these therapeutic models can be integrated with the person-centred therapeutic model, as demonstrated by the following responses:

Participant 2 of SAOSWA: *Yes, because person-centred approach focuses on the individual, systems theory emphasise that everyone has a sense of belonging somewhere and resilience talks about support systems from family, friends, and workplace. She further indicated it is best to use the model which works best for you as a professional. You can integrate the models according to the identified problem.*

Participant 3 of EAPA-SA: *Person-Centred approach, because I need to facilitate quicker results I am in the environment need a person to be able to cope, stand up and get back work as it focuses more on the challenges the person have. She further explained that she integrates the person-centred approach with the task-centred approach because it gives them responsibility to take responsibility and own up to the problem one is experiencing and the resolution they made to resolve the problems.*

Although the participants stated that the therapeutic models currently in use are applicable in their work environment, they also believed that introducing traditional cultural based therapeutic models would bring improvement in implementation of clinical services, especially therapy. Out of the twelve EAPs and OSWs who were interviewed ten felt that there is a need for implementation of a traditional cultural based therapeutic model. This is supported by the following statements:

Participant 3 of EAPA-SA: *Yes because not necessarily black and white it includes different religion. The manner in which we deal with issues is different from men to women even from one race to another and even cultures. E.g. the in terms of bereavement, the manner in which we blacks deal with memorial services and funerals are different from how white people do them. They do small intimate things for close family and friends while black it is about the community, family and friends. Another example how white experience bereavement is also different from blacks, you will want facilitate after care programme for them prior they return to work but they immediately after the burial come back to work and continue with their normal day to day life while blacks will be on extended leaves and so forth trying to come with terms of their loss. The reason being different cultures, ethnicity groups and races have their own way of dealing with issues. Therefore a cultural based approach would be helpful to assist professions to understand the sociological background of multicultural issues of the clients they serve.*

Participant 5 of EAPA-SA: *Personally I would say yes there is a need. I think it will assist clients as we are from diverse cultural backgrounds and race. Understanding one's culture will assist in ensuring effective therapeutic services. That is when you get to understand people and their culture and it makes it easier to understand them.*

Participant 4 of SAOSWA: *Yes, because you come across different people from cultures and belief, which means one needs to understand their point of reference when helping them to resolve the problems.*

From the information obtained during the interviews it is clear that introducing the cultural traditional model is a necessity as it would indeed bring improvement when implementing clinical services. This is supported by Padhi, (2016:20) who indicated that Cross-cultural training can put a negotiator in a beneficial position over his or her competitors. The researcher is of the opinion that it is important to understand the client's way of thinking, beliefs and why they behave in a certain way. Therefore understanding the client's cultural diversity makes it easy to understand their point of reference. It is evident that within the workplace we serve people from many different cultural groups.

Theme 5: Differences and similarities of EAP and OSW services

The findings revealed that there are differences and similarities between EAP and OSW. This was evident in the following sub-themes that emerged from this theme:

Sub-themes

- 5.1 Explanation of **similarities** shared by both professions
- 5.2 Explanation of **differences** between EAP and OSW
- 5.3 Explanation of EAP as a programme and OSW as a speciality
- 5.4 Explanation of utilising both concepts interchangeably

Sub theme 5.1: Explanation of similarities shared by both professions

The findings revealed that there are similarities between the two professions. The similarities that were discovered between the two professions are therapy, proactive programmes, core technologies and the fact that they both focus on workplace problems. This is proven through the following direct quotes from participants:

- **Therapeutic Services**

As aforementioned that therapeutic services was also discovered as one of the similarities between EAP and OSW, this was proved during the interviews by the following responses:

Participant 1 of EAPA-SA: *Therapeutic services, services must be marketed and all render prevention programme.*

Participant 5 of EAPA-SA: *I would say that their similarities are on their clients and employees and their dependents, and I would say both render clinical and non-clinical services. And when I say clinical I mean therapy and non-clinical I mean proactive program.*

SAOSWA participants also shared the same sentiments as they say the following:

Participant 3 from SAOSWA: *Both requires social work skills when rendering therapy, renders proactive programmes and share same client systems whom are employee and their immediate families.*

Participant 5 from SAOSWA: *Both render therapeutic services and proactive programme.*

Both EAP and OSW render therapy and were indeed proven during the interviews with the participants. This is also supported by Klarreich et al. (1985) when they highlighted that both Occupational Social Workers and EAP practitioners provide short-term free confidential counselling to employees to support their well-being in the workplace and in their personal lives.

- **Proactive Services**

The study also revealed that another similarity between EAP and OSW is proactive programmes. This is supported by the above mentioned response under therapeutic services as participants highlighted both proactive and therapeutic services. Proactive programmes were also discovered as one the similarities shared by both professions. Proactive programmes are part of the training and development which is facilitated in the workplace. Training and development form part of the core technologies; it was discovered that both EAPs and OSWs also share these similarities. This was discovered when participants from EAPA-SA and SAOSWA highlighted the core technologies for both professions and the ones they utilise. This is supported by sub-theme 2.1 where knowledge of core technologies was discussed.

- Client Systems

Although most participants indicated therapy, proactive programmes and core technologies as the EAP and OSW similarities, client systems was also highlighted as another similarity. This is supported by the following comments:

Participant 2 of EAPA-SA: *All employees, who are on our pay roll and their immediate families.*

Participant 4 of EAPA-SA: *Organisation, employee and their dependents*

Participant 6 of EAPA-SA: *All employees and some services are extended to their dependents.*

Some participants from SAOSWA indicated similar facts about the workplace programme:

Participant 4 from SAOSWA: *Organisation, employee and their dependents.*

Participant 6 from SAOSWA: *Organisation, employee and their dependents.*

The findings discovered that the client systems are also another similarity between EAP and OSW. The findings are also supported by the Standard Committee EAPA-SA (2010:3) and Social Service Professions Act 110 of 1978, section 28(1) (gA) which identifies the following client systems (a) the organisational management and supervisory structures; (b) worker organisations; and (c) employees and their families from both EAPs and OSWs.

Sub- theme 5.2 Explanation of differences between EAP and OSW

The findings revealed that there are differences between EAP and OSW. The differences that were discovered are service delivery, requirements for practice and scope of practice for both professions.

- **Service Delivery Models**

It was discovered from the data that the service delivery and practice models being utilised by EAPS and OSWs are different. These findings are supported by the following remarks:

Participant 5 of EAPA-SA: *In-House Model*

Participant 3 of EAPA-SA: *Combined model, we do refer to external service provider for medical assistance*

Masi (2000:407) and Jacobson (2011:84) highlighted that EAP models are categorised into three groups, namely, in-house, external model and combined model. It was discovered that the most utilised model is the in-house model. Although, participants explained that, their reason for utilising the in-house model is solely because of financial constraints. This is supported by the following direct quotes from participants:

Participant 1 of EAPA-SA: *100% in-house model, there is no budget to refer to external professional.*

Participant 4 of EAPA-SA: *In-house model, as I am only one rendering the services, and can only refer where there will not be any financial implications. Mostly refer to governmental institutions.*

Out of six participants only one participant mentioned using a combined model. This is because most organisations do not have budgets to refer to external service providers. The difference was discovered during the interviews when one SAOSWA participant of out 6 indicated that the practice model for OSW differs from EAP.

Participant 5 of SAOSA: *Restorative, promotive, workplace and work person intervention.*

The practice models for OSW are also supported by Van Breda (2007:4) highlighting them as follows; restoration interventions, promotive interventions, work-person interventions and workplace interventions.

- **Requirements for Practice**

The findings revealed that there are differences between EAP and OSW when it comes to requirements for practice. It was discovered that EAP is a multi-disciplinary profession, whereby social workers and other professionals can practice as EAPs. These findings are supported by the following responses;

Participant 2 of EAPA-SA: *Human Science and BA Social Work.*

Participant 4 of EAPA-SA: *BA Social or B Psychology and short course in EAP as a basic.*

Participant 5 of EAPA-SA: *“A registered Social Worker and B Psychology.*

Registration with EAPA-SA is dependent on the professionals such as social workers or psychologists being registered with their professional statutory bodies, either the South African Council for Social Services Professions or the Health Professions Council of South Africa (Standard document for EAPA-SA, 2015:3). The standard document further highlights that EAP draws on the knowledge and skills from different professional fields, and professional development occurs through continuing education (EAPA-SA, 2015). EAP is a multi-disciplinary profession hence registrations for EAPA-SA membership is open to other different professionals. One of the participants also elaborated more on the differences between EAP and OSW. This participant indicated the following:

Participant 3 of SAOSWA: *OSW focus on individuals as employees and the larger systems that may be contributing factors which cause their problems. Whereas EAP focus on employee and might include family with the aim of ensuring that the employee is productive. OSW is strictly for social workers whereas EAP does include non-social worker such as: chaplains, nurse, psychologist and even human resource personnel.*

The OSW highlighted that the requirement for their practice is social work. This is supported by the following statement;

Participant 1 of SAOSWA: *A registered Social Work.*

Participant 4 of SAOSWA: *An Honours degree registered Social Work.*

The findings revealed that OSW is a social work field, therefore only social workers can practice OSW. These findings are supported by the South African Council for Social Service Professions (2017) which highlight that to be registered and recognised as an occupational social worker one must be a registered social worker with the Council. The above verbatim words revealed that the requirements for practicing as EAPs are different from requirements for practicing as OSWs.

- **Scope of Practice**

Scope of practice was also pointed out as one of the differences between EAP and OSW. The study revealed that although there are some of the programmes and activities that both EAP and OSW are practicing, while as, some are not being rendered. This is supported by the following responds:

Participant 2 of EAPA-SA... *therapeutic services, sick leave analysis which assist us to track how employees utilise their sick leaves, misuse of both annual and sick leave days, a proactive programme whereby we try to alert people on issues affecting them, promotions of physical wellness are mainly the sports activities, management of HIV and AIDS in the work place, implementation of occupational health and safety and screening wellness*

Participant 4 of EAPA-SA...*therapeutic services, proactive programme (which includes retirement planning, financial management, gender based violence, substance abuse), promotion of physical wellness are mainly the sports activities, management of HIV and AIDS in the work place, implementation of occupational health and safety in the workplace and lastly is the health and promotion being guided by the health calendar to render relevant programmes or even do the health screening wellness.*

Participant 6 of EAPA-SA... *I render debriefing, Therapeutic services, physical wellness, proactive programmes*

It was clearly proven correct when SAOSWA participants indicated different programmes from EAPA-SA. This is supported by the following responses:

Participant 1 of SAOSWA... *We render financial management (Money Wise, substance dependency programme, pre-retirement programme, and therapeutic services (casework).*

Participant 2 of SAOSWA.... *Military Community Wellness Committee (MCWC) whereby the manager of the units are the chairperson of the committee, which aims at tracking the tendencies of problems in the unit and how they can improve and best solve them. Supervisory training, whereby all supervisors are trained on how to*

identify a troubled employee, keep records of incidents and the different referral system. We render therapeutic

Participant 3 of SAOSWA.... *Implementing workplace systems intervention, profiling of organisation, worksite assessment, training and development for employees*

With information provided by both EAPA-SA and SAOSWA's participants it is clear that EAP and OSW's scope of practice differ. The study revealed that they both render therapeutic services and proactive programmes but EAP also deals with absenteeism management, physical wellness and wellness screening. This is supported by the Standards Committee (EAPA-SA 2015:4-33) which highlights that EAP scope of practice consists of various components which are derived from the EAPA standards which identify the specific actions required when implementing employee assistance programmes.

The EAPSA-SA standards are as follows: programme design, implementation, management and administration, clinical services, non-clinical services, preventative services, networking and monitoring and evaluation. Whereas the Social Service Professions Act 110 of 1978 outline the scope of practice for Occupational Social Workers as tools employed to assess the workplace challenges, to determine the cause of those challenges and be able to implement relevant interventions. This is done through work-focused assessments, work-focused interventions, work-family interventions and work-focused policy and programme development.

Sub-theme 5.3: Explanation of EAP as a programme and OSW as a speciality

When participants had to explain their understanding about the two concepts, it was discovered that most view EAP as a programme whereas they view OSW as a speciality. This is supported by the following remarks:

Participant 3 of EAPA-SA: *my understanding is that OSW is a specialised field with social workers to do social services in the workplace, whereas EAP is a specialised field with overlapping professionals focusing in the workplace it is very broad. She*

further indicated that: *EAP is bigger than OSW because EAP overlaps other professions.*

Participant 5 of EAPA-SA: *Well EAP is a programme that is designed to assist employees to address their personal and work related problems in order to ensure productivity. OSW is a specialised field in Social Work aimed at, you know, assisting employees to address their personal problems.*

Participant 6 of EAPA-SA: *EAP is a program designed to help employees with every need so that they are able to perform. You said Occupational Social Work is a specialised field in Social Work while EAP focuses on helping employees to be productive for the sake of service delivery.*

A participant from SAOSWA shared the same sentiment by indicating the following:

Participant 3 of SAOSWA: *OSW is a specialised field in social work, which uses skills, competencies and social work knowledge. She further highlighted that OSW uses 100% in house model. EAP is a programme in human resource.*

This finding is supported by the definition of both concepts. EAP is defined as “work-based programmes and services offered by the employer to employees as a workplace resource, based on specific core functions and technologies to address the organisational business needs and enhance workplace and employee effectiveness through the prevention, identification, and resolution of personal and productivity issues” (Barker, 2003:141; Standards Committee of EAPA-SA, 2010:2). This means that EAP is a work-based program designed to assist employees to address problems that may affect productivity. Straussner (1990: 21) defines OSW as “a specialised field of practice addressing the human and social needs of the work community through a variety of interventions, which aim to foster optimal adaptation between individual and environment”.

Sub-theme 5.4: Explanation of utilising both concepts interchangeably

The findings revealed that though there are differences between the two concepts there are participants who still view them as the same. With the differences that were

discovered during the findings, it has been proven that both concepts are different and mean different things. Four participants of EAPA-SA out of the six highlighted that EAP and OSW cannot be used interchangeably as they are two different concepts. This is supported by the following statements:

Participant 2 of EAPA-SA: *No, because they offer two different services.*

Participant 3 of EAPA-SA: *No, with EAP not all professionals are Social workers.*

Most of the participants from SAOSWA also highlighted that EAP and OSW cannot be used interchangeably as they mean different things. Four participants out of six did not agree to EAP and OSW being used interchangeably. This is supported by the following comments:

Participant 3 of SAOSWA: *No, EAP is limited it is programme, while OSW is a specialised field in social work.*

Participant 6 of SAOSWA: *No, because they offer different services.*

These verbatim quotes are supported by the definition of both concepts as explained in sub theme 5.3, although most participants believed that the two concepts can be used interchangeably. This is supported by the following:

Participant 4 of EAPA-SA: *Yes, it will just depend on the organisation, what they prefer to call the professional as the responsibilities are more less the same.*

Participant 6 of EAPA-SA: *Yes, because there is not much difference especially looking at the difference and similarities*

Some participants from SAOSWA also shared the same belief, as indicated below:

Participant 1 of SAOSWA: *Yes, because we are all aimed at assisting employees*

Participant 4 of SAOSWA: *Yes, because there is no difference I can even say they are the same thing.*

These respondents believed that there are not many differences; hence they can be used interchangeably. One emphasised that this is because they are both aimed at assisting employees.

5.4 CONCLUSION

In this chapter, the researcher discussed the main findings of the study, with the purpose of comparing EAP and OSW, by exploring their similarities and differences. The major findings in terms similarities which were discovered are that they both render therapeutic programmes, proactive programmes, operate with workplace issues and all have core technologies. Although some OSW does not implement the core technologies due to lack of information about them. The differences which were discovered were service delivery model, requirements for practice and scope of practice for both professions. Data saturation, as related to the major themes and sub-themes, was achieved and confirmed by the identification of more verbatim quotes from the transcriptions provided in the data analysis. The themes and sub-themes were discussed and supported by relevant literature.

CHAPTER 6: KEY FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction

This chapter will be outlining a summary of the research study, conclusions of the study and recommendations of the research study. The recommendations will be based on the themes identified and the limitations of the study.

6.2 Summary of the study

6.2.1 The goal of the study

The goal was to compare the Employee Assistance Programme and Occupational Social Work in the South African Context, as practiced in Limpopo Province.

6.2.2. The objectives of the study

The research study strived to achieve the following objectives:

- To theoretically conceptualise the Employee Assistance Programme and Occupational Social Work;
- To explore and describe the difference between the Employee Assistance Programme and Occupational Social Work; and
- To explore and describe the similarities between the Employee Assistance Programme and Occupational Social Work.

6.2.3 Research questions

The researcher was guided by the following research questions throughout the period of conducting this study:

- What are the differences between the Employee Assistance Programme and Occupational Social Work?
- What are the similarities between the Employee Assistance Programme and Occupational Social Work?

6.2.4 Research Findings

The key findings of this study will be discussed in the following themes that emerged as part of the research findings. Data was collected from members from the South African Occupational Social Workers' Association and the Employee Assistance Professionals Association of South Africa.

Knowledge related to EAP and OSW and the importance thereof

OSW participants revealed a lack of knowledge of core technologies amongst OSWs; they displayed confusion between the core technologies and the OSW practice model. The study also revealed that both EAP and OSW professions and practitioners require registration with statutory councils for practicing and also associations for both EAP and OSW. The findings revealed that there is no legislation specific for OSW and EAP; they both rely on the legislation in general.

Differences and similarities of EAP and OSW services

Under this theme, it was discovered that that both EAP and OSW share similar client systems, as their service beneficiaries. The other similarities that were discovered between the two professions are therapeutic services, proactive programmes, core technologies and the fact that they both focus on workplace problems.

The findings revealed that there are differences between EAP and OSW as well. The differences that were discovered are service delivery, requirements for practice and scope of practice applicable for both professions. It was also discovered that EAPs are guided by the EAPA-SA Standard document which outlines how EAPs should be executed. The study confirmed that the EAP is indeed a specialist inter-disciplinary programme whereas OSW is a social work field of specialisation.

6.3 Conclusions of the Study

With the findings that were discovered in the study, the researcher concludes that although EAP and OSW have similarities, they are two different professions. Neither EAP, nor OSW can replace the other, as they are not identical. EAP is a programme which aims at assisting employees to address work related and personal challenges in order to ensure productivity in the workplace, whereas, OSW is a specialised field in social work with the purpose of addressing social challenges at the workplace with

various interventions and social work skills. Therefore, EAP and OSW cannot be used interchangeably because they differ.

6.4 Recommendations of the study

The following recommendations are made:

- Since insufficient literature, focussing on differences and similarities of EAP and OSW, could be found, future research should be conducted on possible differences and similarities.
- The researcher recommends that for effective and efficient services to be rendered by OSWs and EAPs, basic training or qualifications relating to EAP or OSW are required. It is also the responsibility of the employer to ensure that necessary ongoing information is provided to keep professionals and practitioners updated with new information and new developments in their respective fields. This will assist in ensuring that services and programmes are being implemented effectively so that their objectives are met in the workplace.
- It is recommended that organisations and departments where OSWs are practicing be trained on the OSW core technologies. Training of organisations and departments is the responsibility of universities in cooperation with the SACSSP and SAOSWA, to ensure that the OSWs utilise the relevant core technologies.
- The researcher recommends that legislations for both EAP and OSW be developed which formulate among other things the rights, regulations and responsibilities, to authorise the individuals and authorities for whom services are rendered.
- Lastly it is recommended that SACSSP recognises and registers EAP professions as one the social science specialities.

6.5 Conclusion

The study has highlighted the differences and similarities between EAP and OSW in Limpopo area. The researcher is of the view that EAP and OSW are two different professions, therefore they should be treated as different professions and cannot be applied interchangeably.

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Annexure 1 Ethical clearance letter from the University of Pretoria



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Humanities
Research Ethics Committee

13 April 2018

Dear Ms Mojapelo

Project: A comparative study between Employee Assistance Programmes and Occupational Social Work in the Limpopo Province, South Africa
Researcher: K Mojapelo
Supervisor: Prof LS Terblanche
Department: Social Work and Criminology
Reference number: 17256331 (GW20180320HS) (Group research)

Thank you for the application that was submitted for ethical consideration.

I have pleasure in informing you that the Research Ethics Committee formally **approved** the above study at an *ad hoc* meeting held on 13 April 2018. Data collection may therefore commence.

Please note that this approval is based on the assumption that the research will be carried out along the lines laid out in the proposal. Should your actual research depart significantly from the proposed research, it will be necessary to apply for a new research approval and ethical clearance.

We wish you success with the project.

Sincerely

MS

Prof Maxi Schoeman
Deputy Dean: Postgraduate and Research Ethics
Faculty of Humanities
UNIVERSITY OF PRETORIA
e-mail: PGHumanities@up.ac.za

cc: Prof LS Terblanche (Supervisor)
Prof A Lombard (HoD)

Research Ethics Committee Members: Prof MME Schoeman (Deputy Dean); Prof KL Harris; Dr L Blokland; Dr K Booyens; Dr A-M de Beer; Ms A dos Santos; Dr R Fasselt; Ms KT Govinder; Dr E Johnson; Dr W Kelleher; Mr A Mohamed; Dr C Puttergill; Dr D Reyburn; Dr M Soer; Prof E Taljard; Prof V Thebe; Ms B Tsebe; Ms D Mokalapa

Annexure 2 Permission letter from EAPA-SA Board

Brooklyn Medpark,
1148 Jan Shoba Street,
Brooklyn, Pretoria 0001
Tel: 012 346 4430
E-mail: admin@eapasa.co.za
Website: www.eapasa.co.za
P.O Box: 11167, Hatfield, Pretoria 0028
Company reg number: 201000022108



10 November 2017

ENTERPRISES UNIVERSITY OF PRETORIA
FACULTY OF HUMANITIES
DEPARTMENT OF SOCIAL WORK AND CRIMINOLOGY
140 LUNNON ROAD
HILLCREST, PRETORIA

Attention: Prof L.S. Terblanche

RE: REQUEST FOR PERMISSION TO CONDUCT RESEARCH BY GROUP OF MASTERS STUDENTS IN EAP FIELD.

1. Your e-mail dated 10 October and previous communication in this regard has reference.
2. The Employee Assistance Professional Association of South Africa (herein referred to as EAPA-SA) acknowledges receipt of your request to perform research study under the envisaged title: **A Comparative Study between Employee Assistance Programme and Occupational Social Work.**
3. Your request has been submitted to EAPA-SA Board of Executives for consideration and this application was successful.
4. You are hereby informed of the decision of the EAPA-SA Board to grant permission to conduct your research study using EAPA-SA members as population for your study, and that the permission has been granted conditional upon submission of the following documents to EAPA-SA before the study commence:

Ensuring excellence in Employee Assistance Programmes

Executive Committee: Mr. Tinyiko Godfrey Chabalala, Mr. Kelly Manzini,
Dr. Pravesh Bhodram, Ms. Thiloshni Govender & Mr. Tshifhiwa Mamaila.

4.1 A copy of the Ethical clearance approved by the Department Faculty Ethics Committee of the University.

4.2 A copy of the data collection instrument (questionnaire) and informed consent form.

5. Furthermore, you will be required upon completion of the study to submit a copy of the final report to EAPA-SA and also share the results of your findings through presentation during EAPA-SA Annual Conferences and/ or Chapter Seminar or meetings.

6. Please note that EAPA-SA reserves the right to revoke this permission should the study compromise the confidentiality clause as presumed will be stipulated under the Ethics of the research proposal. More-over, EAPA-SA cannot be held accountable for any responses or lack of responses by its members towards the study.

NB: EAP-SA will first inform the EAPA-SA membership about the permission being granted, and that an online survey will follow soon.

EAPA-SA wishes you all of the best during the study and looking forward to the conclusion.

Regards



Tinyiko Godfrey Chabalala

President of EAPA-SA

Date: 10 November 2017



Ensuring excellence in Employee Assistance Programmes

Executive Committee: Mr. Tinyiko Godfrey Chabalala, Mr. Kelly Manzini, Dr. Pravesh Bhoddram, Ms. Thiloshni Govender & Mr. Tshifhiwa Mamaila.

Annexure 3 Permission letter from SAOSWA Board



South Africa Occupational
Social Workers Association
Unit 16
Northcliff Office Park
203 Beyers Naude Drive
Northcliff
2115
info@saoswa.co.za
www.saoswa.co.za

"YOUR SPECIALISATION PARTNER"

24 October 2017

Prof Lourie Terblanche
Department of Social Work and Criminology
University of Pretoria

Dear Prof Terblanche,

AUTHORISATION OF RESEARCH PROJECT BY MASTERS EAP STUDENTS

The correspondence between SAOSWA and yourself earlier this year regarding an academic research project in 2018 by Masters EAP students of your university has reference.

We hereby confirm that we have agreed that your Masters EAP students may contact SAOSWA's National Executive Committee for purposes of this research project. The National Executive Committee will facilitate contact between your students and eight SAOSWA members as respondents in the envisaged research project.

Kind regards,

MRS ARISTA BOUWER
National Chairperson
SAOSWA National Executive Committee

Annexure 4 Informed Consent Form



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Humanities
Department of Social Work and Criminology

Our Ref: Prof L S Terblanche
Tel: (012) 420-3292
E-mail: lourie.terblanche@up.ac.za

Principal Investigator
Kedibone Irene Mojapelo
University of Pretoria
Lynnwood Road,
Pretoria, 0028

INFORMED CONSENT FORM

Participant's Name:
Date:

I wish to give my permission to participate in the research project according to the details provided below:

1. **Title of Study:** *A comparative study between Employee Assistance Programmes (EAP) and Occupational Social Work (OSW) in the Limpopo Province, South Africa.*
2. **Purpose of the Study:** The purpose of this study is to compare occupational social work and employee assistance programmes, in order to explore the differences and similarities between OSW and EAP.
3. **Procedures:** The telephonic interview will take approximately 1 hour. All data collection events will be scheduled according to the convenience of the respondents.
4. **Risks and Discomforts:** There are no known emotional risks or discomforts associated with this project, although fatigue may be experienced and/or stress when participating in the project.
5. **Benefits:** There are no known direct benefits for participating in this study. However, the results of the study may help researchers gain a better understanding of the differences and similarities between EAP and OSW.
6. **Participant's Rights:** Any respondent may withdraw from participating in the study at any time.
7. **Financial Compensation:** There will be no financial compensation offered for participating in the project.
8. **Confidentiality:** In order to record exactly what is said, a digital recorder will be used. The records will be listened to only by the Principal Investigator and authorised members of the research team at the University of Pretoria.
9. **The results will be kept confidential and only released if requested by the respondent.** The results of this study may be published in professional journals or presented at professional conferences, but no records and/or identity will be revealed unless required by law.
10. **Any questions or concerns, can be taken up with Mojapelo Kedibone at 0817707009 at any time during the day.**

Room 15, Level 10, Humanities Building
University of Pretoria, Private Bag X20
Hatfield 0028, South Africa
Tel +27 (0)12 420 3292
Email lourie.terblanche@up.ac.za
www.up.ac.za

Fakulteit Geesteswetenskappe
Departement Maatskaplike Werk en Kriminologie
Lefapha la Bomotho
Kgoro ya Modiro wa Leago le Bosenyi

I understand my rights as a researcher subject, and I voluntarily consent to participation in this study, I understand what the study is about and how and why it is being done. I will receive a signed copy of this consent form.

I am also aware that all raw data generated through this study will be stored at the University of Pretoria for a period of 15 years for archival and possible future research.

Subject's Signature

DATE

K Mojapelo
Signature of Investigator

Annexure 5 Interview Schedule

A Comparative Study between Employee Assistance Programmes and Occupational Social Work in the Limpopo Province, South Africa.

Interview schedule for telephonic interviews

Introduction

Self-Introduction – Good day, my name is Kedibone Mojapelo, a student at University of Pretoria; MSW (EAP). I am conducting a study on a comparative study between Employee Assistance Programmes and Occupational Social Work in the Limpopo Province, South Africa.

Length: 60- minutes

Primary goal: To see things the way you see them by having a conversation with a focus on your experiences as an EAP/OSW, your opinions and what you think or feel about the topic covered. Please be advised that our telephonic conversation would be recorded for research purposes as stipulated in the consent form.

1. Consent

1.1 Are you comfortable to participate in this interview?

Consent was obtained from the study participant.

Consent was NOT obtained from the study participant.

(In this instance the telephonic interview will be terminated).

2. Identifying Information

2.1 Gender:

2.2 Race

2.3 Highest qualification obtained

2.4 Which institution did you study at?

3. Background Information

Request the participant to briefly talk about him/herself: General information about their educational background and work experience, mostly about experiences and perspectives on the profession.

3.1 Occupation

3.2 Number of years in profession:

3.3 Are you employed by public organisation or a service provider?

3.4 Any other qualification or courses that you studied relating to your profession?

3.5 Share some information on your first job in the Occupational Social Work or EAP field

4. Core Areas of Intervention

4.1 What are the core technologies/functions of EAP/OSW?

4.2 Which of those core technologies/functions do you practice on a regular basis?

4.2 What service delivery and practice model is practiced within your organisation?

4.3 What is the scope of practice (Programmes/Services) that you offer?

4.4 Who are the client systems for EAP/OSW in your practice?

If you are rendering therapeutic services, please specify which therapeutic approach you follow (for example, Solution-focused brief therapy):

.....
.....

Are you of the opinion that the current therapeutic approach applied in your workplace, is suitable for all race/cultural groups? Yes No Not applicable

Please motivate your answer for the above question

.....

Share your views on the need for a typical culturally-based therapeutic model within the EAP field:

.....
.....

4.5 How do you market your services to them?

4.6 Mention any differences in terms of the theory learned during your studies and present practice?

5. Requirements for Practice

5.1 What qualifications are needed for practice?

5.2 Are you registered with any statutory council?

If yes please specify?

5.3 What are the requirements for registration?

5.4 Are you a registered member with the Employee Assistance Professionals Association of South Africa /South African Occupational Social Workers' Association?

5.5. What are the requirements for registration?

5.7 What are the legislation (policies) that guide your practice?

6. Thoughts on Research Topic

6.1 What are the similarities between EAP and OSW in theory and practice?

6.2 What are the differences between EAP AND OSW in theory and practice?

6.3 Please explain in your own words what you understand about EAP and OSW?

6.4 Do you think it would be possible to use the concepts interchangeably?

7. Additional Information

7.1 Do you have any concerns or experiences regarding this topic that I might not have not addressed?

8. Closure

Thank you very much for your time and participation in this study. Should you feel that there is some information that you had omitted please do not hesitate to contact me anytime. The information obtained during this interview will be transcribed and emailed to you as part of member-checking to ensure trustworthiness.

Annexure 6 Declaration Form Storage of data



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

FACULTY OF HUMANITIES
RESEARCH ETHICS COMMITTEE

Declaration for the storage of research data and/or documents

I/ We, the principal researcher(s) Mojapelo Kedibone Irene
and supervisor(s) Prof L.S Terblanche
of the following study, titled A Comparative study between Employee
Assistance Programme and Occupational Social Work in South
African Context; Limpopo Province.
will be storing all the research data and/or documents referring to the above-mentioned study in the following
department: of Social Work and Criminology

We understand that the storage of the mentioned data and/or documents must be maintained for a minimum of 15 years from the commencement of this study.

Start date of study: 2017-01-28
Anticipated end date of study: 2018-11-09
Year until which data will be stored: 2033

Name of Principal Researcher(s)	Signature	Date
<u>Mojapelo Kedibone Irene</u>		<u>2018-11-09</u>

Name of Supervisor(s)	Signature	Date
<u>Prof. L.S. Terblanche</u>		

Name of Head of Department	Signature	Date