

TITLE OF THESIS

"The well-being of workers in the construction industry: a model for employment assistance".

by

Priscilla Mageret James

Thesis submitted in fulfilment of the requirements for the degree

Master of Technology: Human Resource Management

in the Faculty of Business

at the Cape Peninsula University of Technology

Supervisor: Prof Braam Rust Co-supervisor: Dr. Lee Kingma

Cape Town Campus April 2011

DECLARATION

I, Priscilla Mageret James, declare that the contents of this dissertation/thesis represent my own unaided work, and that the dissertation/thesis has not previously been submitted for academic examination towards any qualification. Furthermore, it represents my own opinions and not necessarily those of the Cape Peninsula University of Technology.

Signed

Date

ABSTRACT

The construction industry is an important player in the economy of South Africa. In spite of the numerous constraints facing the industry in developing countries, it makes significant contributions to economic growth.

The construction industry is a challenging place to work (Pillay & Haupt in Hinze, Bohner & Lew, 2008). The diverse industry is, however, associated with high risk environments and employees are exposed to harsh and dangerous situations, e.g. employees have to work with dangerous machines and equipment.

The industry stands out from other industries as having the highest worker injury and fatality rates. Every construction worker is likely to be temporarily unfit to work at some time as a result of moderate injuries or health problems after working on a construction site (Shakantu, Haupt & Tookey, 2006; Smallwood, 2004).

This study was prompted by the lack of an Employee Assistance Programme for workers in a medium-sized construction company.

A non-probability sampling procedure was utilised. In order to investigate and explore the well-being of employees a research questionnaire was developed and presented to a sample of 34 male respondents in the construction company for completion.

The empirical results indicated the difficulties that the respondents are experiencing. The results further revealed the need for assistance from the employer to the respondents.

It is anticipated that the research will contribute to, firstly, an awareness of problems in the construction industry regarding the well-being of workers, and secondly to develop a model which will positively contribute to the effective development and implementation of an assistance programme for employees in the construction industry.

ACKNOWLEDGEMENTS

Upon completion of this study, thanks should go to many people who have made it possible.

My gratitude to:

- God, for giving me more than I could ever pray for.
- My husband, for his love, loyalty and concern throughout my studies.
- My parents, children, sister, family and friends, for their continued support.
- Professor Braam Rust and Dr Lee Kingma, for their kindness and guidance, and for sharing their knowledge and insight.
- Rolf Proske for his assistance and encouragement.
- Niny West, for her meticulous editing.
- The management of Alpha Civil (PTY) Ltd, for their financial support and for allowing me to do the research at the company.
- The people who participated as respondents for the empirical research, who set aside their time and shared their experiences without expecting anything in return.
- All those who understood that I had to do this.

DEDICATION

This work is dedicated to the construction industry which is entrusted with difficult and dangerous projects in order to provide for our needs. They form generations of the driving force behind prosperity, they are the builders of dreams.

TABLE OF CONTENTS

Title page	i
Declaration	ii
Abstract	iii
Acknowledgements	iv
Dedication	v
Table of contents	vi
List of Figures, Tables & Appendices	xii
Glossary	xiii

CHAPTER ONE: BACKGROUND AND AIM OF THE RESEARCH STUDY

1.1	Background	1
1.2	Literature study	4
1.3	Problem formulation	4
1.4	Research question	5
1.5	Goal and objectives of research	5
1.6	Research design and methodology	6
1.7	Feasibility of the study	8
1.8	Data collection procedure	8
1.8.1	Observation	8
1.8.2	Interviews	8
1.8.3	Focus groups	10
1.9	Release of information	10
1.10	Debriefing of respondents	10
1.11	Method of data analysis	11
1.12	Language barriers	11
1.13	Limitations	11
1.14	Contents of the research report	13
1.15	Chapter summary	13

CHAPTER TWO: LITERATURE REVIEW

2.1	Introduction	14
2.2	The construction industry	14
2.3	Definitions of an EAP	19
2.4	The need for Employee Assistance Programmes in the workplace	21
2.5	Typical areas addressed by Employee Assistance Programmes	25
2.6	Core Technology of EAP	26
2.6.1	Consultation and training	26
2.6.2	Problem identification and assessment	26
2.6.3	Constructive confrontation	26
2.6.4	Referral for diagnosis, treatment and assistance	27
2.6.5	Consultation to work organisation	27
2.6.6	Consultation with work organisation for health	27
2.6.7	Evaluation	27
2.7	Types of EAP models	27
2.7.1	In-house model	28
2.7.2	Off-site model	28
2.8	Advantages and disadvantages of various models	29
2.8.1	Advantages of the In-house model	29

2.8.1.1	Top management	29
2.8.1.2	Employees	30
2.8.1.3	EAP staff	30
2.8.2	Disadvantages of the In-house model	30
2.8.2.1	Top management	30
2.8.2.2	Employees	31
2.8.2.3	EAP staff	31
2.8.3	Advantages of the Off-site model	31
2.8.3.1	Top management	31
2.8.3.2	Employees	32
2.8.3.3	EAP staff	32
2.8.4	Disadvantages of the Off-site model	32
2.8.4.1	Top management	32
2.8.4.2	Employees	33
2.9	Selecting an appropriate EAP model	35
2.10	Conclusion	37

CHAPTER THREE: RESEARCH METHODOLOGY

Introduction	39
Research methodology	39
Research procedure	40
Permission from authorities	40
Ethical aspects	40
Harm to respondents	41
Confidentiality and anonymity	41
Deception of respondents	42
Release of findings	42
Actions and competence of researcher	42
Co-operation with contributors	43
Good working relations	43
Logistics	43
Research population	43
Sample and setting	44
Characteristics of the sample	44
Secondary data collection	45
Primary data collection	46
Pilot study	46
Interviews	46
Interview schedule	47
Focus groups	49
Observations	49
Compilation of data	50
Interpretation of results	50
Validity	50
External validity	50
Content validity	50
Face validity	51
Reflexivity in qualitative research	51
Costs	51
Limitations of the study	52
Conclusion	52
	Research methodology Research procedure Permission from authorities Ethical aspects Harm to respondents Confidentiality and anonymity Deception of respondents Release of findings Actions and competence of researcher Co-operation with contributors Good working relations Logistics Research population Sample and setting Characteristics of the sample Secondary data collection Primary data collection Primary data collection Prilot study Interviews Interviews Interviews Schedule Focus groups Observations Compilation of data Interpretation of results Validity External validity Content validity Face validity Reflexivity in qualitative research Costs Limitations of the study

CHAPTER FOUR: DISCUSSION AND INTERPRETATION OF THE RESEARCH RESULTS

4.1	Introduction	53
4.2	Analysis of findings	54
4.2.1	Employees' years of experience in the construction industry	54
4.2.2	Perceptions with regard to the well-being problems of employees	55
4.2.3	Experiences and perceptions with regard to the utilisation and the implementation of an EAP	55
4.3	Discussion of research findings	56
4.3.1	Well-being problems of employees	56
4.3.1.1	Family problems	56
4.3.1.2	Distance	57
4.3.1.3	Stress	57
4.3.1.4	Alcohol abuse	58
4.3.1.5	Implementation of an EAP within the company	59
4.4	Suggestions and recommendations	60
4.5	Chapter summary	60

CHAPTER FIVE: DEVELOPMENT OF AN EMPLOYEE ASSISTANCE PROGRAMME IN A MEDIUM-SIZED CONSTRUCTION COMPANY

Introduction	61
South African legislation in relation to the EAP	61
South African Constitution	61
Basic Conditions of Employment Act	62
Labour Relations Act (Code of Good Practice)	62
Labour Relations Act (Incapacity)	62
Employment Equity Act	62
Skills Development Act	62
Occupational Health and Safety Act	62
Compensation for Occupational Injuries and Diseases Act	62
Domestic Violence Act	62
Prevention and Treatment of Drug Dependency Amendment Act	62
Child Care Act	63
Debt Collectors Act	63
Medical Scheme Act	63
Standards for EAPs in South Africa	63
Significance and use of professional standards	64
Essential requirements for the implementation of an EAP	65
Programme design	65
Advisory/Steering/Consultative committee: Standard 1	65
Needs assessment	66
Standard 2	66
Service delivery models	67
Standard 3	67
Pricing models	68
Standard 4	68
EAP Policy	69
Standard 5	69
Policy principles	69
Confidentiality	69
Accessibility and cost	70
	South African legislation in relation to the EAP South African Constitution Basic Conditions of Employment Act Labour Relations Act (Code of Good Practice) Labour Relations Act (Incapacity) Employment Equity Act Skills Development Act Occupational Health and Safety Act Compensation for Occupational Injuries and Diseases Act Domestic Violence Act Prevention and Treatment of Drug Dependency Amendment Act Child Care Act Debt Collectors Act Medical Scheme Act Standards for EAPs in South Africa Significance and use of professional standards Essential requirements for the implementation of an EAP Programme design Advisory/Steering/Consultative committee: Standard 1 Needs assessment Standard 2 Service delivery models Standard 3 Pricing models Standard 4 EAP Policy Standard 5 Policy principles Confidentiality

	Voluntarism	70
	Job security and promotion	70
	Performance	70
	Leave	70
5.5.5.2	Conditions of participation	71
0101012	Confidentiality	71
	Limitations on right to confidentiality	71
5.5.5.3	Statement of understanding	71
5.5.5.3	Procedures	71
5.5.5.4		
	Early identification of problems	71
	Documentation	72
	Basic principles on recordkeeping	72
5.5.5.5	Types of EAP referrals	72
	Self-referral	72
	Informal referral	73
	Supervisory referral	73
5.5.5.6	The ODIR principles	74
	Observe	75
	Document	75
	Inform	76
	Refer	76
5.5.5.7		76
5.5.5.8	Aftercare	77
5.5.5.9	Feedback and reporting	77
5.5.5.10	Service needs assessment	78
5.5.5.11		78
5.5.5.11	Core EAP programmes	
		78
	HIV/AIDS – Counselling and support	79
	Management consulting	79
5.5.5.12	Marketing the EAP	79
5.5.5.13	Manager/Supervisory training	79
5.5.5.14	Programme co-ordinator	80
	Roles and responsibilities	80
	Key responsibilities include	80
5.5.5.15	Departments/Divisions in the compar	y 80
5.5.5.16	EAP and Human Resource partnering	80
5.5.5.17	Evaluation	81
	Programme review and evaluation	81
	Evaluation techniques	81
	EAP and policy disclaimers	82
5.5.6	Policy statement	82
5.5.0	Standard 6	82
5.5.7	Implementation plan	83
5.5.7	• •	
5 5 0	Standard 7	83
5.5.8	Staffing	83
	Standard 8	83
5.5.9	EAP consultation and case managem	
	Standard 9	84
5.5.10	Confidentiality	85
	Standard 10	85
5.5.11	Recordkeeping	85
	Standard 11	85
5.5.12	Professional liability insurance	86
	Standard 12	86
5.5.13	Ethics	86
	Standard 13	86
5.5.14	Direct services	87
		61

	Standard 14	87
5.5.15	Crisis intervention	88
	Standard 15	88
5.5.16	Assessment and referral	88
	Standard 16	88
5.5.17	Short-term intervention	89
	Standard 17	89
5.5.18	Monitoring	89
	Standard 18	89
5.5.19	Follow-up and aftercare	89
	Standard 19	89
5.5.20	Organisational consultation	90
	Standard 20	90
5.5.21	Training of managers, supervisors and union representatives	90
	Standard 21	90
5.5.22	Marketing	92
	Standard 22	92
5.5.23	Networking	93
	Standard 23	93
5.5.24	Networking with external community organisations and resources	93
	Standard 24	93
5.5.25	Networking with professional organisations	94
	Standard 25	94
5.5.26	Networking with external agencies	94
	Standard 26	94
5.5.27	Evaluation	95
	Standard 27	95
5.6	Summary	97

CHAPTER SIX: RESEARCH SUMMARY AND FINAL RECOMMENDATIONS

6.1	Research summary	98
6.2	Strategy for introducing and implementing an EAP at the medium-	100
	sized construction company where the research was done	
	EAPA-SA Standard 1: Advisory Committee	101
	EAPA-SA Standard 2: Needs Assessment	101
	EAPA-SA Standard 5: EAP Policy	101
	EAPA-SA Standard 21: Training	101
	EAPA-SA Standard 22: Marketing	102
	EAPA-SA Standard 3: Service Delivery Models	102
	EAPA-SA Standard 7: Implementation Plan	102
	EAPA-SA Standard 27: Evaluation	102
6.3	Duties and responsibilities of the EAP co-ordinator	104
6.4	Quality in EAP delivery	105
Rule 1	Care is based on continuously healing relationships	105
Rule 2	Customisation is based on client/company needs and values	105
Rule 3	The client/organisation is the source of control	105
Rule 4	Shared knowledge and the free flow of information are necessary	106
Rule 5	Decision-making is evidence based	106
Rule 6	Safety is a system priority	106
Rule 7	There is need for transparency in all aspects of EAP delivery	106
Rule 8	Needs are anticipated	106
Rule 9	The reduction of waste is ongoing	107
Rule 10	Cooperation among professionals is a priority	107
6.5	Barriers with regard to the implementation of an EAP	107

6.6	Limitations	107
6.7	Conclusion regarding the objectives of the study	108
6.8	Chapter summary	108
REFE	RENCES	109

LIST OF FIGURES

Figure 1.1: The Research Process	12
Figure 2.1: Distribution of worker deaths in the U.S. in 2002	15
Figure 2.2: Detrimental effect of construction activities on well-being and work performance of employees	17
Figure 2.3: How personal problems are interrelated to influence work performance	19
Figure 3.1: Description of the interview process the researcher followed	48
Figure 4.1: Procedure adopted by the researcher for the analysing of data	53
Figure 4.2: An illustration of the employees' perceptions with regard to their well-being problems	55
Figure 5.1: The primary tasks of the supervisor within the EAP	74
Figure 6.1: The advantage of an EAP in a company	100
Figure 6.2: Introduction and managing of an EAP in the company	104

LIST OF TABLES

Table 2.1: Differences between In-house and Off-site EAP models	34
Table 3.1 Characteristics of the research sample	45
Table 4.1: An overview of themes and categories identified through the application of the abovementioned approach	54
Table 4.2: Respondents' need for the implementation of an EAP	59

APPENDICES

Appendix A: Informed Consent Form	121
Appendix B: Interview Schedule: Example of questions asked in semi- structured interviews	123

GLOSSARY (Not to be seen as definitions, but rather as descriptions)

Terms/Acronyms/Abbreviations	Definition/Explanation
Aftercare	Assistance to an employee to reintegrate into the workplace following treatment.
Assessment	An appraisal of an individual or company based on careful analytical evaluation.
Best practice	A best practice is a technique or methodology that, through experience and research, has proven to reliably lead to a desired result and to ensure success.
CIDB	Construction Industry Development Board
Civil engineering	Deals with the design, construction and maintenance of the physically and naturally built environment, including bridges, roads, canals, dams and buildings.
Client	Individual/group/family member utilising the Employee Assistance Programme due to personal and/or work related problems.
Clinical	Involving or based on direct, objective and unemotional observation of an individual or company.
Construction	A process that consists of the building or assembling of infrastructure.
Counselling	Therapeutic intervention by a trained professional, i.e. social worker, psychologist or psychiatrist.
Crisis	A stressful life experience that upsets the normal functioning of an individual or family and that threatens the stability and ability to cope or function.
Customise	To make or alter individual or personal specifications in order to fit the requirements of an individual or company for a specific purpose.
EAP	Employee Assistance Programme
EAPA	Employee Assistance Professionals Association
EAPA-SA	Elected board of the South African Chapter of EAPA
EAP professional	A professionally trained person performing EAP specific related tasks, i.e. therapy, counselling, marketing and evaluating.
EAP practitioner	A person – not necessarily a professionally trained person – performing EAP specific related tasks, i.e. referral, liaison and training.

Employee	A person legally employed by an employer, whether part-time, full-time or temporarily.
Employer	Anybody having legal status and providing employment to people and providing payment for services delivered.
Ethics	A set of rules, guidelines and values that govern and guide ethical business.
Evaluation	Systematic assessment of the operation compared to a set of explicit or implicit standards.
External resource	Any acknowledged resource in the community providing services.
Fatality	An injury resulting in loss of life.
Follow-up	Feedback has to be obtained from the referring manager/supervisor on job performance after the re- entry of an employee who has undergone treatment.
Holistic	Emphasizing the knowledge of the nature, functions and properties of the components, their interactions, interdependence and their relationship to the whole.
Injury	Bodily impairments which are immediate, resulting from accidents.
Intervention	Therapeutic and professional guidance to any employee in order to overcome his/her problem.
Manager	A person in a position of supervisory power with added status and authority.
Marketing	Promotion of a specific service to potential customers and employees of existing clients.
Paradigm	A set of assumptions, concepts, values and practices that constitutes an example or model of viewing reality and perceiving how things work in the world.
Policy	Set of basic principles and associated guidelines, formulated and enforced by the governing body of an organization, to direct and limit its actions in pursuit of long-term goals.
Qualitative research	Research that deals with the quality, type, or components of a group, in order to gain insights and develop creative intervention techniques.
Quantitative research	The numerical representation and manipulation of observations, collected by sampling techniques, for the purpose of describing and explaining the phenomena that those observations reflect.

Resources	The total means available to a company for increasing production or profit, including labour, materials, assets or capital.
Service provider	An agency providing professional services to clients and customers according to a formal contract.
Standard	The agreed level of best practice or description of the ideal situation.
Supervisor	A person in position of authority and who oversees the performance of subordinate staff.
Therapy	Assessment and treatment (based on a brief solution based approach) of a troubled employee.
Training	Orientating employees and training managers through means of didactic lecturing, modelling, interaction and role-plays.
Trauma	Any event resulting in extreme emotional reactions in people, which manifest either immediately or sometime in the future. An event which is generally considered to be outside the range of ordinary human experiences, and which makes extreme demands on the inner strength of a person.
Treatment	Intervention with a troubled employee by exploring his/her feelings and guiding him/her through a process of recovery.
Troubled employee	An employee suffering any personal or work related problem, resulting in a lack of optimal economic and social functioning.
Well-being	A positive state of physical and emotional wellness.
Wellness	An employee in good shape, resulting in a high level of productivity.
Workplace / environment	An establishment at one geographic location containing one or more areas where people are at work.
Workplace programmes	An intervention to address a specific issue within the workplace.

CHAPTER ONE BACKGROUND AND AIM OF THE RESEARCH STUDY

1.1 Background

The main motivation for conducting research of this nature was to investigate the well-being of employees in the construction industry and to make recommendations on the design of an employee assistance programme that can improve well-being and productivity in the construction industry.

Starting with a research idea, an extensive review of literature gained insights into the topic and captured the current state of research relating to the topic. The literature review helped to identify gaps in the literature and to develop research questions and objectives for the study.

The Occupational Health and Safety Act, 1993 makes provision for the health and safety of employees and the protection against hazards to health and safety in the workplace.

South Africans are in the process of building a sustainable workforce that will allow economic growth and sustainability. To achieve this objective as required by South African Law, a safe, healthy and productive workforce is needed (OHS Act, 1993).

OHS legislation is a means by which the work environment can be controlled to ensure the safety, health and well-being of employees and persons likely to be adversely affected by a negative work environment.

Globally the construction industry has a poor health and safety (H&S) record and South Africa is no exception.

The manner in which construction activities are executed adversely affects the health of construction workers (Smallwood, 2000a; 2000b; 2000c). As a result, the worker may cut on time spent on activities like eating, sleeping, relaxation and time spent with family. When these activities are neglected or rushed, it could have a detrimental effect on the emotional and psychological well-being of the worker. Often there is no time for exercise, which in turn has a negative effect on the fitness level and therefore physical well-being of the worker, as construction is physically a very demanding work environment.

The nature of the workplace is changing with globalisation and technological advancement, while the prevalence of HIV/AIDS impacts negatively on both human productivity and economy growth potential; South Africa in particular is undergoing rapid change in terms of the country's socio-economic and political climate. Finding and retaining jobs that can provide a decent income and which are psychologically and socially tolerable, let alone rewarding, is becoming more of a challenge than before (Barak & Bargal, 2000:2). Workers become emotionally and psychologically drained if they have to go through the process of looking for a new job every now and then. This causes financial and emotional instability in the worker and his home, causing a lesser work performance.

Companies expect of employees to work hard, show initiative and be productive day after day. Employers worldwide are appreciating the increasing need for maximum employee productivity and effectiveness in a global economy. These objectives can be met only when the employer recognises that employees are individuals with personal lives and problems. Personal problems cannot always be left at home. The human being consists of interrelated parts and what happens to one part undisputedly affects the other. If the employee experiences imbalance/stress in one area/system of his life, it will affect other systems as he is the common denominator in all these systems, and he is changed in some way by this event or experience. What happens at home therefore affects his behaviour and performance at work.

Early detection and treatment of problems may benefit both the employee and the employer. Recently there has been a growing trend among organisations to realise the importance of the so-called human factor (Snyder & Lopez, 2002). Various disciplines highlight the importance of the "good life" and give attention to the total well-being of people (Ryff & Singer, 1998).

Survey data suggests that work-family balance is a major problem in modern society (Oswald, 2004). It is reported that almost 85% of American workers say that they want to spend more time with their families. Employees often shoulder invisible burdens that threaten both their well-being and the company they represent.

Developed countries have been known for assisting their employees with various problems, historically starting with alcoholism intervention programmes in the 1940s and from there employee assistance became more sophisticated.

2

Wellness interventions may include various programmes and services provided by employers in order to promote the health and wellness of employees. The most applied wellness intervention in organisations is the Employee Assistance Programme (EAP).

Robertson (2006:4) defines EAP as a comprehensive programme offering free, confidential assessments and short-term counselling to employees and their families. They further explained that areas of counselling include family and marital issues, emotional difficulties, alcohol and drug problems, and work related stress issues: crises intervention, programme development, referrals, follow-up and educational workshops are covered within the scope of EAPs. The intended beneficiaries of the EAP are thus the employee, the employee's family, the organisation and its constituents.

Renewed interest in assisting troubled employees, coupled with increasing demands for effectiveness in the workplace, have led to an upsurge in the development of EAPs. This follows a decrease in work performance due to health issues, personal problems and other factors, and an increase in workers staying away from work to try and sort out these problems in a satisfactory way.

EAPs are important institutional mechanisms for promoting health and emotional well-being, retaining valued employees, reducing absenteeism and improving performance effectiveness (Cooper, Dewe & O'Driskoll, 2003; Kirk & Brown, 2003; Ruiz, 2006). With the growth of personal problems at the workplace, EAPs were developed in most South African companies and organisations to deal with these problems.

Employee Assistance Programmes (EAPs) are a relatively new workplace service in South Africa, in contrast to many other "western countries" such as the United States of America (Vosloo & Barnard, 2002; Harper, 1999; Maiden, 1992:2).

The last few decades have seen unprecedented growth within the EAP field, both on national and international level. In The Journal of Employee Assistance, Burke (2004:24) defines the business of EAPs and how the scope of services has evolved from a clinical emphasis to a focus on workplace productivity. He states that employers around the world are beginning to realise that business success and the ability to compete globally, are dependent on how well human issues that affect productivity, are addressed.

In the researcher's view, the EAP field is developing rapidly in South Africa. The establishment of a professional association EAPA-SA, the development of standards and

3

ethics for practitioners and the development of formal training by tertiary institutions are indicative of this development.

A strategic and holistic approach requires that care be taken of the whole person. This means that the focus is not only on safety and medical aid assistance but also on the acknowledgement that any person coming to work comes as a whole person.

1.2 Literature study

A literature study was conducted on the relevant subject of the study, so as to provide a better understanding of the research problem and the necessary background to guide the study. Apart from the information obtained from text books, other sources such as journal articles and the Internet have been consulted.

1.3 Problem formulation

The new Dictionary of Social Work (1995:45) states that problem formulation is the process of "defining the phenomena into which the research is carried out." Mouton (1996:42) and De Vos (2005:99) state that there are three factors determining the manner in which research problems are formulated:

- the unit of analysis;
- the research goal;
- the research approach.

Bless, Higson-Smith and Kagee (2006:29) refer to the research problem as general questions about relations between two or more variables. It is stated in the form of a question.

The problem formulation for the study was based on the absence of an employee assistance programme in a medium-sized construction company. It has been widely acknowledged that the use of EAP services in most companies has helped employers to notice the social needs of their employees, especially those who considered their employees as being healthy and happy. Masi (1992:1) states that, as early as the 1980s, many employees would have been reprimanded or even fired because of the problems they have. Traditionally employers felt that employee problems were to be dealt with privately, at a distance, away from work. In the past employees felt that their employers were disinterested in their personal concerns and difficulties, however recently major changes in these kinds of attitudes and perceptions have

occurred with the development of EAPs, designed to deal with employee problems that may affect workplace performance (Masi,1992:1).

The researcher was of the opinion that an Employee Assistance Programme can have a lasting impact on the clients it aims to serve.

1.4 Research question

Research always commences with one or more questions or hypotheses. Walliman (2005:217) indicates that the subject of the research question gives a clear understanding of the subject to be investigated. According to Mouton (1996:65-66) this phrasing of a question, this putting into words, involves a cognitive representation of some real world phenomena. Questions are posed about the nature of the real situation.

The research question guides the researcher in determining the aim of the research. According to Creswell (1998:99), research questions are open-ended, evolving and nondirectional, they restate the purpose of the study in more specific terms, and they start with words such as *what* or *how*, rather than *why*.

The researcher formulated a research question, as opposed to a hypothesis, since not enough information with regard to the topic of the study was available to formally test any hypotheses. Grinnell (1997:12) confirmed the appropriateness of not using a hypothesis and wrote, "Qualitative studies rely on descriptive methods of data collection and generate hypotheses". The implication is that when using a qualitative approach, a research question is used in place of a hypothesis.

Based on the above information, the question in this study will be the following: How can a tailored model of employment assistance serve as the solution to the unique wellbeing problems of employees in the civil construction industry?

1.5 Goal and objectives of research

According to Fouche (2002:107 -108) a "goal" refers to a "broader, more abstract conception of the end toward which an effort or ambition is directed" – the "dream" and an "objective" refers to the "steps one has to take, one by one, realistically at grass-roots level, within a certain time span, in order to attain the dream". In the researcher's view it is the means by which the focus of the study is clearly specified and delineated.

Effective design of the research instruments requires a good understanding of the data collection framework, underpinning theories, and a clear set of research objectives.

Based on the above-mentioned research problem, the following specific objectives were pursued:

- The first objective is to examine how employees experience their working conditions.
- The second objective is to ascertain the well-being needs of employees.
- The third and final objective is to make recommendations with regard to a model of employment assistance on how to deal with the well-being problems of employees in the construction industry.

The aim of conducting research of this nature was to understand the demanding working environment of the construction industry and the factors which lead to employees being troubled. The researcher was of the opinion that an EAP can significantly improve the well-being of employees in the construction industry.

1.6 Research design and methodology

According to Mouton (1996:104-105) the main purpose of basic or academic research is to contribute to the existing body of scientific knowledge of which 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.

A research design is defined as the plan of a research project through which data is gathered in order to investigate or to realise the aim (The New Social Work Dictionary, 1995:63).

The methods used to gather research data will ultimately determine the meaningfulness of that data and therefore determine the level of success (Leedy, 1993). A good understanding of research methods was therefore imperative.

Bless, Higson-Smith and Kagee (2006:71) define research design as a programme to guide the researcher in collecting, analysing and interpreting the observed facts.

After considerable literature review, the researcher concluded that a qualitative approach would best suit the study. One of the major distinguishing characteristics of qualitative

research is the fact that the researcher attempts to understand the people in terms of their own definition of their world.

Silverman (2005:9) indicates that qualitative researchers are prepared to sacrifice scope for detail. He continues to say that qualitative researchers find detail in the precise particulars of such matters as peoples' understandings and interactions.

Qualitative methods assume that human beings are sentient and constitute the subject matter of social science research. Their activities can, therefore, only be understood by studying the meanings and logic through which they shape events in their life. A more realistic feel of the world is thus possible. Knowledge of why things are as they are in the social world necessitates examining casual linkages that explain social activities and societies, which is possible with qualitative methods. This explains the use of the method in generating explanations and building theories.

Qualitative data collection techniques involved the use of interviews which produce descriptive data and generally give people's own written or spoken words/views. Interviewing as a method of collecting data allows the researcher to explain his/her question. If the respondent is not clear on what is being asked, it allows the researcher to probe deeper, following the answer of the respondent (Brynard, 1997:29-32).

By utilising a qualitative approach, an attempt was made to understand the way of life of the participants. The complexities of their lives were captured by describing what really goes on in their everyday lives, how they operate, as well as their frame of reference.

The qualitative approach has been used in documenting the processes, followed by the conceptualisation and introduction of an EAP for a medium-sized construction company.

Applied research is designed to solve practical problems and to improve human conditions. This study calls for applied research since it focuses on a certain problem, which in this case is the well-being problems of employees in construction, and thus attempts to make a contribution towards the development of a model for employment assistance in order to manage this real-life problem.

This study is simultaneously exploratory and descriptive in nature. The exploratory method of enquiry allows the researcher to determine the well-being needs of the participants working in the construction industry. With descriptive research the researcher aims at presenting the phenomenon under investigation as accurately as possible. This is the first step in the analysing of data in a qualitative case study which Stake (1995:123) calls a "narrative description".

In this study the researcher applied the analytical description because the objective was to gain insight into the well-being needs of employees.

The approach has also been both cost and time-effective and has allowed the researcher to achieve the intended goal of the study.

1.7 Feasibility of the study

Bless, Higson-Smith and Kagee (2000:154), describe a feasibility study as a "study designed to determine whether a particular strategy or intervention is likely to reach its stated objectives." One should therefore be certain that a planned project is viable before investing a large amount of time and money into it (De Vos, 2005:208).

The research study was feasible because all the respondents were available to the researcher without having any serious time or cost implications.

A written request was submitted to the management of the medium-sized construction company to further the research study. A personal contact had also been made for assurance of the chance of being permitted for conducting research. Written permission had been granted. Costs were kept to the minimum. Respondents work for the construction company and were available for the study.

1.8 Data collection procedure

1.8.1 Observation

The researcher spent some time on site with the participants to get first hand insight on how they operate. Comprehensive field notes were made.

1.8.2 Interviews

To ensure the comprehensive collection of data the sample comprised of thirty four male employees in the construction industry who mostly have to work away from home.

The method to attain the requisite information was via personal interviews, using semistructured open-ended questions.

Semi-structured interviews are based on predetermined themes, with interviewees being asked questions relating to the themes, including probing questions. 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. Questions asked around particular themes allow interviewees to supply answers from their viewpoint. Prompts and clarifications enable them to provide elaborations on the answers given. Probing questions enable a greater depth of the interviewees' views on the themes and emerging ones to be revealed.

Semi-structured interviews use "open" and "close-ended" questioning to discover as much as possible about the specific issues related to the subject under study. Merton and Kendal (1946) state four distinguishing characteristics of the semi-structured interview, namely:

- It takes place with respondents known to have been involved in a particular experience.
- It refers to situations that have been analysed prior to the interview.
- It proceeds on the basis of an interview guide, specifying topics related to the research.
- It is focused on the respondent's experiences regarding the situations under study.

Semi-structured interviews start by asking indirect questions in order to build up a rapport with the respondents, and then explore the specific issues that the interviewer has in mind. In the semi-structured interview, the interviewer has a great deal of freedom to probe various areas and to raise specific queries during the course of the interview.

The interviews were limited to the constraints of the questions, so as to provide findings which were objective and unbiased. Two union representatives also participated.

The semi-structured face-to-face interviews afforded the researcher an opportunity to understand the closed internal worlds of the twenty two employees by studying their perceptions and experiences. The interviews uncovered a variety of difficulties that employees are experiencing.

1.8.3 Focus groups

The focus group interview is described by Schurink, Schurink and Poggenpoel (1998) as "a purposive discussion on a specific topic or related topics taking place between ... individuals with similar background and common interests."

Two focus groups were conducted with the participants at the end of the interviews to obtain consensus on what the real challenges are. During these discussions participants were allowed to air their respective opinions freely and also experience the problems and frustrations of co-workers, in order to agree on the most common areas that need intervention.

The group interviews served as a source of validation. Denzin and Lincoln (1998) indicate that groups create their own structure and meaning, in addition to clarifying arguments and revealing diversity in views and opinions.

1.9 Release of information

Strydom (2002:72) asserts that "an ethical obligation rests on the researcher to ensure that the investigation proceeds correctly at all times and that no-one can be deceived by the findings. The information must be formulated and conveyed clearly and unambiguously to avoid or minimise misappropriation by subjects, the general public and colleagues."

According to Neuman (2006:139) the researcher should ensure that the information is not released in a way that permits linking specific individuals to responses and is publicly presented only in aggregate form, such as percentages. De Vos (2005:65) indicates that the findings of the study must be introduced to the reading public in written form; otherwise it will mean very little and will not be viewed as research.

In this study all sources were recognised and acknowledged and shortcomings were admitted. The final research report would be made available to respondents who wish to peruse the results.

1.10 Debriefing of respondents

It is not anticipated that any harm will be caused to any of the respondents as a result of the proposed study. Debriefing does not appear to be relevant. At the end of the interview administration a discussion was held on the participants' perceptions of the project, so that

the research project acted as a "learning experience for both participant and researcher" Strydom (2002:73).

1.11 Method of data analysis

In De Vos (2005:333) mention is made of reducing the volume of raw information, sifting the most relevant information, identifying patterns and eventually communicating the essence.

The researcher scrutinized the data for general ideas and themes. All the material that focused around one theme was put into one category. The goal was to integrate the themes and concepts into an accurate and detailed interpretation of the research results. Prof Harry Ballard from the Cape Peninsula University of Technology assisted in analysing the data.

1.12 Language barriers

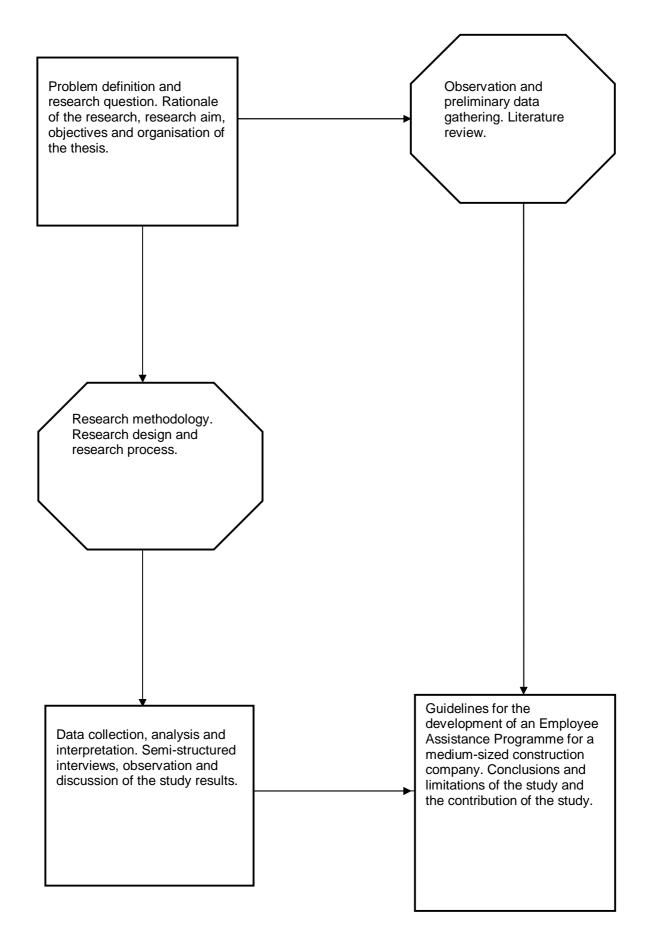
When conducting the interviews it was foreseen that language could pose a barrier. The interviews were conducted in English and Afrikaans according to the participants' choice. Whenever any indistinctness arose, the researcher could explain or illustrate the exact implication and meaning of the question.

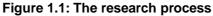
1.13 Limitations

The study was limited to the Western Cape region of South Africa. A single medium-sized construction company was selected for the case study. The outcome of the study therefore does not reflect the total well-being problems in the construction industry.

Fig 1.1 as adapted and modified from Sekaran (1984) illustrates the layout of the research process.

Figure 1.1 follows





(Adapted and modified from Sekaran, 1984)

1.14 Contents of the research report

Chapter 1 comprises of the background and aim of the research study. This is followed by a presentation of the problem statement and the objectives of the research.

Chapter 2 includes a comprehensive literature review which provides background literature together with empirical research in this area.

Chapter 3 explains the methodology of the current research; it states how data was collected and the different statistical methods used.

Chapter 4 addresses a discussion and interpretation of the research results.

Chapter 5 presents guidelines with regard to the development and implementation of an Employee Assistance Programme for a medium-sized construction company.

Chapter 6 summarizes the aim and results of the research and makes final recommendations for future research in this area.

1.15 Chapter summary

This chapter provided the framework for the research project, the background and motivation for the study, the problem formulation, the research question, the goal and objectives of the study, the data collection procedure as well as the method of data analysis.

Chapter 2 provides an in-depth discussion of the literature pertinent to the study.

CHAPTER TWO LITERATURE REVIEW

2.1 Introduction

To contextualise this study the researcher undertook a comprehensive review of relevant literature regarding the construction industry and how a model of employee assistance can serve as a resource in dealing with the well-being of employees. The literature review also includes an examination of the history of EAPs in South Africa, definitions of an EAP, models currently in practice with the advantages, disadvantages and factors that influence the organisation's choice of an EAP model, as well as the core technology of EAPs.

A fundamental human right of every worker is to be able to return home at the end of each working day, alive and healthy and in the same physical condition that he/she commenced that working day.

2.2 The construction industry

The construction industry is associated with the fabrication of houses, apartments, factories, offices, schools, roads and bridges. In addition to the manufacture of new structures, this industry also addresses alterations and repairs to existing structures.

The products of the industry are used by other industrial sectors for the production of other goods and services. For instance, the development of feeder roads, village market infrastructures, electricity and water supply will spur production of rural goods and services, thus creating employment for the rural communities.

The construction industry is labour intensive, particularly in developing countries. Construction in developing countries involves more workers per activity on site. Typically, 2-10 times as many workers per activity are utilised, compared with developed countries (Koehn & Reddy, 1999).

The construction industry differs from most other industries in that it is constantly in flux. Working conditions are very seldom the same from one day to the next, posing many challenges to the workers. The construction industry is considered to be dangerous and of a highly hazardous nature (Hinze & Olbina, 2008; Pillay & Haupt, 2008; Rowlinson, 2000). Globally the construction industry has one of the highest injury rates, very often second only to the mining sector (Hinze, 2006).

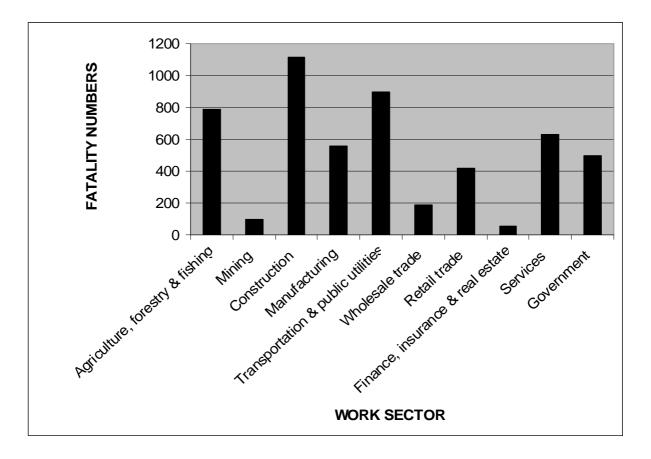


Figure 2.1: Distribution of worker deaths in the U.S. in 2002 (Source: Bureau of Labour Statistics)

(Adapted from Hinze, 2006:6)

As can be seen in the graph above the risk of a fatality in the construction industry is five times more likely than in a manufacturing based industry.

Employees are exposed to adverse weather and climatic conditions, as well as noisy and dusty, inherently dangerous work environments that are physically demanding (Coble & Haupt, 2000). Furthermore the mobility of construction employees is considered paramount to industry vulnerability (Haupt, Chileshe & Miller, 2005).

Aspects of risk and vulnerability include sub-standard living environments, high rates of alcohol abuse and the fact that employees are separated from their families for long periods of time, thus enhancing visits to prostitutes. They become HIV-positive and then return to their primary sexual partners, spreading the virus in those home communities (Fourie & Schonteich, 2002).

Across the United States, for example, construction ranks as the most dangerous industry, accounting for about 20 percent of all work-related fatalities. In the 2008 Census of Fatal

Occupational Injuries, the United Kingdom has found that construction had 969 fatalities in 2008, the largest number when compared with other industries. In the Swedish construction industry more than one in five workers reported work-related injuries (Rwamamara & Holzmann, 2005). In Australia a senior research analyst, Ian Woods, argues in the Liberty Mutual Safety Index Report of 2006 that the cost of workplace injury carried by Australian employers is an average of 6 percent of profit.

The CIDB (Construction Industry Development Board) and Construction Health and Safety in South Africa, reports the number of fatalities as 162 for the period 2007-2008. Data from the Health and Safety Executive for the period 2007-2008 shows that 31% of all fatal injuries were in the construction industry.

Cost of claims paid by FEMA (Federated Employers Mutual Association) for the period January 2009 to December 2009 reached the amount of R133 044 999, 57.

The construction industry currently has the third highest prevalence of HIV positive workers, and the industry faces an increase in lost workdays due to absenteeism and productivity decreases.

As a proactive measure to improve health and safety performance in South Africa's construction industry, the South African Federation of Civil Engineering Contractors (SAFCEC) and the National Union of Mineworkers (NUM) became the first employer and employee organisation in the nation's construction trade to enter into an occupational health and safety agreement.

The Health and Safety agreement, signed on 11 April 2006, would require SAFCEC and NUM to make a number of commitments, which include among other things:

- Encouraging their members to make occupational health and safety a way of life in the workplace;
- Providing their members with the required training opportunities, working together to achieve their joint ideals and objectives for occupational health and safety; and
- Promoting the integration of occupational health and safety into business processes and strategies.

Smallwood (2000) describes the detrimental effect of construction activities on well-being and work performance of employees as follows:

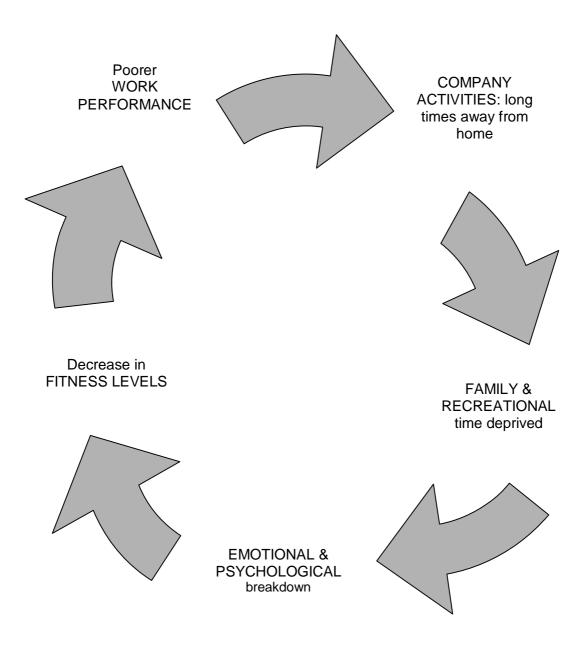


Figure 2.2: Detrimental effect of construction activities on well-being and work performance of employees

(Adapted from Smallwood, 2000)

According to the South African Department of Labour (2008), the yearly fatality and injury statistics translate into about one construction worker killed and four permanently disabled every day in South Africa.

No one is excluded from the possibility of becoming a fatality statistic. It is therefore extremely important that employees are physically and mentally healthy at all times.

The construction industry is closely linked to the economy of a country and is often a good indicator of the state of that economy (Strassman, 1975; Turin, 1969). If the construction sector and the economy of a country are so closely linked then it makes sense to effectively manage the human resources active in that industry.

People are the company. People issues are integral to the company. The management of a company is essentially responsible for its people's emotional and psychological health. The demanding working environment of employees in the construction industry should be managed by an adequate Employee Assistance Programme. As Matlala (1999:24) states: "Failure by organisations to adopt employee assistance into their culture will inevitably lead to the escalation of sickness and the deterioration of organisational performance."

The researcher agrees with the view of Oswald (2004) in Figure 2.3 with regard to the influence of personal problems on work performance.

Figure 2.3 follows

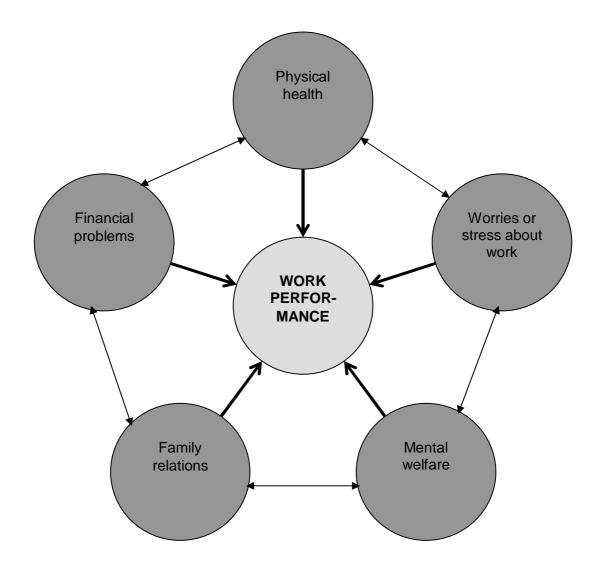


Figure 2.3: How personal problems are interrelated to influence work performance (Adapted from Oswald, 2004)

2.3 Definitions of an EAP

The evolution of an EAP and the scope and range of services it covers is evident in the various definitions of an EAP that have emerged over time. The following definitions, listed in chronological order, are indicative of available services selected by the researcher to specifically demonstrate this advancement.

 Googins and Godfrey (1987:102) define Employee Assistance Programmes as follows: "EAPs generally refer to a set of policies and programme procedures by which a work organisation legitimately intervenes in identifying and treating problems of employees that impact on or have the capacity to impact upon job performance."

• Blum and Bennet (1990:143) define EAPs as "mechanisms that provide the workplace with systematic means for dealing with personal problems that affect employees' job performance."

These two definitions outline traditional EAPs, as they have occurred since its origins as programmes that deal with employees' problems that present a risk of impacting negatively on job performance.

These two definitions, however, fall short when it comes to describing the modern EAP in that the explanations seem to limit the scope of EAP services to a micro practice in dealing reactively with the problems of individual employees. The definitions furthermore imply that the programme model for EAPs is internal in nature and designed to deal with the needs of the employee, rather than taking into consideration parallel implications for both the employer or organisation and the employee.

2.3.1 Kurzman (1993:35) defines comprehensive EAPs as "free and confidential workplace entitlements that are voluntarily sponsored by employers or trade unions, jointly or both. Inhouse (internal) and contract (external) EAPs respond to the human service needs of workers and their families and corresponding agendas of the work or employer organisation. Under the overall direction of professional health or mental health staff, such EAPs address the comprehensive current and prospective bio-psychosocial progress of education, prevention, assessment, treatment, case management and referral."

2.3.2 "Employee Assistance is the work organisation's resource that utilises core technologies to enhance employee and workplace effectiveness through prevention, identification and resolution of personal and productivity issues." (EAPA-SA new definition: E-member news September 2003).

The latter two definitions demonstrate the evolution of EAPs and the modern workplace. These definitions reflect that EAPs have become broader in focus and range of services – to ensure a more proactive focus, including not only therapeutic services, but also to facilitate prevention and education, covering a range of bio-psychosocial and organisational productivity issues. These definitions also reflect that EAP models can range from internal to external, are directed by professional personnel, can be sponsored by the employer or trade union or both and can address both the needs of the individual employee and the work organisation.

The last definition embraces the concept of core technologies for EAP, moving it closer to a professional field of practise that can be more versatile in shape and scope, reflecting the diverse and unique nature of the modern workplace. By referring to the EAP as a resource rather than a product it implies that it is dynamic and can take any shape according to the needs and direction of the modern work organisation.

2.4 The need for Employee Assistance Programmes in the workplace

According to Ntsamai (1991:19) "the workplace is the primary environment for adults ... work is perceived as a central dynamic of modern industrial society." While the workplace remains one of the most dynamic environments within which we function, it also results in problems, which place stress on the individual. Both work stress and interpersonal stress can have a significant impact on the employee's social functioning and work performance, since the individual is unable to compartmentalise or separate the different aspects of himself / herself. In essence, according to Maynard (2004:36), employee assistance is "the application of knowledge about behavior and behavioral¹ health to make accurate assessments, followed by appropriate action to improve the productivity and healthy functioning of the workplace."

Employee Assistance Programmes (EAPs) are designed to assist employees with chronic personal problems that hinder their job performance and attendance. An EAP is designed to assist in alleviating negative conditions and enable employees to realise their full potential in the workplace for the benefit of their organisation and themselves.

An EAP sponsored by an organisation offers a range of supporting services which help to cope with emotional difficulties, family issues, substance abuse, financial problems and legal issues (Cooper, Dewe & O'Driskoll, 2003). EAPs are important institutional mechanisms for promoting health and emotional well-being, retaining valued employees, reducing absenteeism and improving performance effectiveness (Cooper et al, 2003; Kirk & Brown, 2003; Ruiz, 2006).

In order for an EAP to gain leverage and insight, Lowe (2004) recommends that EA Professionals must be able to redefine employee health concerns as strategic issues affecting corporate costs and productivity. A healthy organisation will promote a working environment which will contribute to the employee's health and high performance.

¹ The American spelling of behaviour/behavioural has been retained in this instance due to a direct quote being used.

The aim of Employee Assistance Programmes is to provide supervisors/management with an alternative in dealing with employees with unsatisfactory job performance and who are exhibiting deteriorating work performance or conduct related problems.

Productivity costs are greater than medical costs for unhealthy employees. According to the July 2007 issue of the Journal of Occupational and Environmental Medicine, productivity costs, which are addressed by an effective EAP, are more than four times greater than medical and pharmaceutical costs for sick and unhealthy employees. EAPs help employees to manage a full spectrum of behavioural health issues that could adversely impact on their work and personal lives.

The origins of present-day Employee Assistance Programmes can be traced back to the world of American industry in the late 1800s. EAPs are a relatively new workplace service in South Africa, in contrast to other 'western countries' such as the United States of America (Vosloo & Barnard, 2002; Harper, 1999; Maiden, 1992).

The development of EAPs in South Africa, influenced by various professions, has evolved as a result of different organisational needs which occur in varying forms and levels of sophistication. These depend on staffing, availability of resources and capacity within organisations. According to Du Plessis (1991:35) EAPs were established in South Africa for several reasons. Some were formed to seek alternative ways of managing poor performance within an organisation, while others were set up to express the concept of "internal social responsibility."

The first EAP in South Africa was introduced by the Chamber of Mines (COM) of South Africa. EAPs began to emerge in South Africa in the early 1980s (Maiden, 1992:2). Maiden (1992:3) states that EAPs in South Africa have become the social conscience of the organisations in which they are ensconced.

Since the 1980s many South African companies have recognised the potential of EAPs to play a role in improving employees' performance by improving their health, mental health and life-management knowledge and skills.

Terblanche (1992:18), as cited in Maiden (1992:17), concurs with Maiden that the 1980s was the period during which Employee Assistance Programmes were developed in South Africa. Terblanche sketches the historical development of the EAP within the industrial context of the Chamber of Mines in South Africa. In 1983 the Chamber of Mines appointed a consultant to study the feasibility of Employee Assistance Programmes for the mining industry. The analysis indicates that due to undesirable working conditions at the Chamber of Mines that led to alcohol/drug problems and/or mental illnesses, a social worker was appointed to assist the organisation in dealing with such problems. Terblanche (1992:19) claimed that this study represented a milestone in the historical development of EAPs in South Africa. The concept of EAP was accepted in principle and the Chamber of Mines introduced the first of seven counselling centres, providing services that have since developed significantly and that are still in existence today – although in a totally different format.

The South African based programmes were modelled around the programmes current in the United States at the time. Therefore the South African programmes skipped the initial introduction of EAPs as solely substance abuse programmes. The demand to ensure the effective management of employees and their well-being started to grow in the early 1990s.

Maiden (1992) can be quoted as stating that South African organisations have skipped a generation of development, and had more advantages than their counterparts, as they were able to develop their programmes more rapidly. In addition, the diversity of the South African workforce and the history of the socio-political culture have groomed South African EAP Practitioners to manage a variety of problems.

In the researcher's view the historical development of EAPs in South Africa has been a complex process. EAPs have evolved from Social Welfare – Occupational Social Work, Human Resource Management, Occupational Health and the Mental and Medical Health Fields. This view is acknowledged by Du Plessis (2001:103) in her statement that "while social workers appear to be the preferred profession in staffing EAPs, they are certainly not the only ones, as nurses, psychologists and Human Resource personnel all play important roles as well."

Employee Assistance as such has become fairly sophisticated in a short space of time but is still in its early stages in terms of developing as a single pure product. The researcher is of the opinion that the unique South African First world/Third world dichotomy is mirrored in the development of EAPs. EAPs with different levels of sophistication and forms occur in different parts of the country, depending on the ranks of EAP personnel in the different workplaces, and also on the availability of resources and proper capacity within those programmes.

The EAP was viewed by employees for the most part as an agent of change in the social conditions of the work environment. More and more South African companies are recognising the role that EAPs can play in improving employees' health and life-management

23

skills and how an improvement in these areas can impact on work performance. Other organisations consider it a form of internal social responsibility. South African EAPs have to contend to a greater degree than their international counterparts with HIV/AIDS and related problems (EAP Strategy for Gauteng Provincial Government, 2003/2005:16).

There is limited information available about the EAP as a developing profession in terms of how programmes occur in South Africa, specifically in the construction industry.

In the evolution of South African EAPs, there is still a tendency for organisations to focus the primary function of the EAP on the individual, (which includes the family and small group) and to a lesser extent on the organisation. In comparison, EAPs internationally are focused equally on the individual and the organisation as clients. This enables the EAP to contribute to the core of the business (Harper, 1999:17).

A number of issues, including HIV, put the human factor high on companies' agendas. Many South African companies have been reviewing and considering the role of EAPs in their infrastructure to help them improve and maintain employees' health and productivity.

Employee Assistance Programmes (EAPs) provide management and labour with the means to improve job performance and worker health through assistance to employees and their families regarding alcoholism, substance abuse and other related behavioural problems.

Participation in an EAP may occur voluntarily or through supervisory, peer or medical referral. Employee Assistance Programmes attempt to resolve employee concerns by directing workers to appropriate treatment or self-help groups (EAPA, 1990). A joint EAP is just another structure through which the union can continue to fight for the betterment of workers' and their families' lives at and away from the workplace.

Two important features of an EAP are that it is confidential and there is no cost involved for the employee. The EAP assists employees whose performance is impaired by emotional and behavioural difficulties related to personal or occupational stress. The aim is on timely identification, assessment and referral of troubled employees/underachievers to specialist treatment (internal or external services), followed by successful reintegration into the work environment, <u>NOT</u> the termination of employment.

The main goals of the EAP are to enhance productivity, as well as social functioning. The main objective of the EAP is to provide constructive assistance to any employee who may be experiencing any form of personal problems. A further objective is to prevent a decline of

performance from employees who normally deliver satisfactory job performances and live up to their potential. The objective is <u>NOT</u> to terminate the employment of troubled employees.

Troubled employees are at least 20% less productive than the average worker. Being preoccupied with problems will result in failing energy levels and lack of concentration (Bailey & Leland, 2006). Workers who abuse substances are:

- Absent and late three times more often.
- Have 3.6 times more accidents.
- Are 5 times more likely to file a worker's compensation claim.

Employers are becoming increasingly aware of the fact that employees who are in distress may place the organisation at risk through their behaviour, and that the subsequent losses to the company in very basic ways may be extremely expensive.

The Employee Assistance Programme is a programme in which everyone can win. What is to be gained from it can be positively translated to the employee's work, his family, his health and his loyalty and service to the company for which he works.

2.5 Typical areas addressed by Employee Assistance Programmes

- Career counselling
- Alcohol/Drug abuse programmes
- Counselling for marital/family problems
- AIDS education/Support groups
- Counselling for mental disorder
- Financial counselling
- Retirement counselling
- Termination/Outplacement assistance
- Legal counselling
- Health education/Health risk screening
- Emotional distress
- Major life events, including births, accidents and deaths

Recent national worksite surveys have shown that EAPs are gaining acceptance and popularity in many companies. Years of research and outcome studies have shown striking evidence that an EAP will:

- Improve productivity
- Increase morale
- Reduce health care costs
- Reduce on-the-job accidents and injuries
- Retain employees

2.6 Core Technology of EAP

According to Herlihy (2002:12-13) "the 'Employee Assistance Core Technology' or EAP Core Technology represents the essential components of the employee assistance (EA) profession. These components combine to create a unique approach to addressing work organisation productivity issues and 'employee client' personal concerns affecting job performance and ability to perform on the job."

The researcher is of the opinion that, being a workplace resource, an EAP model should be flexible and, as Maynard (2004:36) asserts, employee assistance core technology should not be viewed as defining the field but rather as "the heart, but not the boundary, of our work."

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

2.6.1 Consultation and training

Consultation combined with training and support to organisational leadership (managers, supervisors and unions), seeking to manage the troubled employee, enhance the work environment and improve employee job performance, as well as to provide an outreach service to employees and their families about the utilisation of EAP services.

2.6.2 Problem identification and assessment

This refers to confidential and timely problem identification/assessment services for employees and clients with personal concerns that may affect job performance.

2.6.3 Constructive confrontation

This entails the use of constructive confrontation, motivation and short-term intervention when counselling employees/clients to address problems that affect job performance.

2.6.4 Referral for diagnosis, treatment and assistance

This includes referral of employees/clients for diagnosis, treatment and assistance plus casemonitoring, follow-up and aftercare services.

2.6.5 Consultation to work organisation

Consultation to work organisation involves establishing and maintaining effective relations with treatment and other service providers and managing provider contracts.

2.6.6 Consultation with work organisation for health

The purpose of consultation to work organisation is to encourage availability of, and employee access to employee health benefits covering medical and behavioural problems, including but not limited to alcoholism, drug abuse and mental/emotional disorders.

2.6.7 Evaluation

Identification of the effects of EAP services in the work organisation and individual job performance.

The researcher is of the opinion that the core technology defines the Employee Assistance field and its core functions, as well as the common elements in EAPs. The core technology, however, does not describe the proactive nature of many EAPs satisfactorily. The core technology is limited in describing the prevention and development/empowerment dimensions of current EAP services. The primary focus is still on managing the troubled employee rather than the health and wellness focus of many EAPs. The researcher's view is aligned to Bennet and Attridge (2008:4) who indicates that "preventive services for mental health, addictions and workplace behavioral² issues are now ready to be considered a core component of what EAPs do and how they are valued."

2.7 Types of EAP models

The modern workplace is a dynamic entity that is continuously evolving with the changes in the economic, social and political situation. From the one person micro-enterprise to the macro-enterprise that distributes thousands of personnel within a variety of occupational groups, levels and geographical locations, workplaces are unique and complex entities.

² The American spelling of behavioural has been retained in this instance due to a direct quote being used.

According to Cunningham (1994:22) the "workplace is too complex to have 'pure' forms of counselling models ... combination models are the norm rather than the exception. Blended models provide wider choice for an employee ... this brings a richness rather than a dilution of purity."

Different authors have identified various types of EAP models and there is not a single model that fits all organisations. As a workplace resource, EAP also has to be dynamic and indivdually customised to fit the needs of the modern work organisation that it serves. 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).

The literature distinguishes between the following EAP models: the in-house model or external models, the contract model, the consortium model and the hot line model.

There are two main types of EAP models, namely in-house and off-site models. Each model is discussed below.

2.7.1 In-house model

The In-house model, which is also called an internal programme, is a programme staffed by personnel who are employees of an organisation they serve (Myers, 1984:70). According to the EAPA Standards, internal programmes offer services rendered by EAP professionals employed by the organisation (EAP-SA, 1999:20).

From the above definitions it is evident that an In-house model offers services within an organisation, in the form of the staff members running the programme, which provides a direct link between the EAP and the employee's workplace.

An In-house EAP model may either be administered by an employer or by a union only.

2.7.2 Off-site model

According to Straussner (1990:6) work organisations or unions make a contractual agreement with a self-employed social worker, or personnel employed by an organisation that offer EAP services.

EAPA standards state that external programmes offer services delivered by EAP professionals under contract with an organisation (EAPA-SA, 1999:20).

Social workers provide services concentrating on the needs of an organisation, and programmes offered are sponsored by an organisation.

2.8 Advantages and disadvantages of various models

When dealing with advantages and disadvantages of each model, three categories will be used, namely top management, employees and EAP staff. This is because what may be an advantage to top management and company shareholders may not be beneficial to middle and lower level employees, and vice versa (Straussner, 2001:53).

2.8.1 Advantages of the In-house model

2.8.1.1 Top management

Corporate policy

According to Goldstein (1997:26) an In-house EAP is likely to reflect corporate policy more closely and be more able to provide services to match the company's goals. This will enhance integration with other company programmes, such as training of supervisors to detect employee performance problems.

• Knowledge of an organisation

Cagney (1999:64) states that an internal EAP knows the organisation in a way that few external vendors ever will, and is positioned to deliver high-quality organisational services designed for the specific organisation. Cagney (1999:65) further mentions that the internal EAP fits logically into a group of Human Resources. It is a unique position from which to contribute to other areas in an organisation and to identify collaborative tasks between various human resources, whilst focusing on its core components.

• Communication within an organisation

Kunnes (1993:25) believes that communication within an organisation and on-site problem capacity are advantages of the In-house model. This leads to ownership of the programme, and the feeling that "it's our programme", which encourages employees to make use of it. It also makes the EAP more credible with some supervisors within the organisation.

• Internal programme control

An internal model allows for closer management of EAP professionals. Bruce (1990:131) emphasises that if the organisation provides the EAP, it is a much better position, as costs attached to the programme can be controlled more effectively.

2.8.1.2 Employees

Accessibility

Goldstein (1997:26) mentions that In-house programmes are more accessible to employees, which can encourage early intervention. He further indicates that the model has a higher utilisation rate than other models, most probably because it is more accessible.

2.8.1.3 EAP staff

• Referrals

Masi (2000:320) states that EAPs that provide services on site tend to have a balance between self-referrals and those referred by line or Human Resources. This tendency identifies accessibility and trust as big issues in the EAP referral process. It also shows the importance of raising awareness of existing services.

Merrick (2002:45) is of the opinion that firms can "grow their own" EAPs, as services which are provided internally may have a better understanding of the culture of the organisation. This should certainly increase the effectiveness of programmes offered and employee response to them.

2.8.2 Disadvantages of the In-house model

2.8.2.1 Top management

• Size of the organisation

Phillips and Older (1988:134) raised criticism about the fact that the model only caters for large organisations, as small companies could not justify full-time staff. One could also envisage smaller organisations paying an internal specialist's salary at periods when EAP service requirements are low.

• Knowledge of organisation

Hartwell, Steele, French, Potter and Zarkin (1996:807) highlight the fact that the high fixed cost of an internal EAP would make it financially difficult to consider this option.

2.8.2.2 Employees

• Confidentiality

The major concern about internal programmes is that they may be perceived as being too closely identified with any particular department, group or person in the organisation, therefore being difficult to protect the confidentiality of employee's problems (Cagney, 1999:64). Taking these issues into account, organisations should seriously consider where they locate their EAP offices and how they go about their referral process if they wish to use this model.

2.8.2.3 EAP staff

• Termination

Terminating EAP services is more difficult in the In-house model (Myers, 1984:93). The main difference is that EAP personnel must be either reassigned other duties or outplaced. A counsellor could as well be used by individual employees of an organisation.

2.8.3 Advantages of the Off-site model

2.8.3.1 Top management

• Costs

External models allow vendors to take advantage of economics of scale and centralised administrative services that lower the cost for the employer. The advantages of using EAPs outside the employer organisation depend largely on the availability of a greater width of expertise, and diminish the concern about confidentiality and potential conflicts of interest (Cagney, 1996:66).

2.8.3.2 Employees

Confidentiality

Most employees prefer an external EAP model, believing it is more likely to maintain confidentiality. Moss (2002:10) concluded that most employers contract with third-party providers with whom they have an arm's length relationship, which helps to avoid a breach of confidentiality. Employers therefore place a high premium on confidentiality regarding their employees' problems, and favour the external EAP for this reason.

• Convenience

As an EAP makes provision for both an employee and the family members, the family members may be more willing to seek help from an external EAP, because of its more convenient hours and location (Goldstein, 1997:26). This is a very important factor when personal issues such as substance abuse need to be addressed, as such support from the employee's family is essential for their recovery.

2.8.3.3 EAP staff

• Professional staff

External EAPs often have a more diverse staff contingent, consisting of experts able to handle different types of client problems. It also provides small employers access to Human Resource consultation services that they would otherwise have been lacking (Cagney, 1999:66).

2.8.4 Disadvantages of the Off-site model

2.8.4.1 Top management

• Lack of ownership of the programme

Phillips and Older (1988:136) are of the opinion that an external model usually means no on site counselling capacity and no ownership of an EAP by the organisation that may have some supervisors who are reluctant with "outsiders". This could decrease the number of referrals made to the EAP.

• Less effective control

Not having ownership of an EAP may also result in less effective control of EAP costs by an organisation. As counselling time would presumably be the most important cost factor, an EAP provider may have little difficulty in justifying escalating bills. Conversely, managers in the organisation may be reluctant to initiate necessary EAP sessions for their staff, since every consultation incurs costs which do not reflect favourably on the budget for which they are accountable.

• Lack of knowledge of the organisation by service providers

Lack of knowledge of the organisation and insufficient communication between the service centre and work organisations can create frustration between the service provider and management. During busy times or in fast-paced organisations this could inhibit staff members in utilising the EAP due to the extra administrative tasks.

2.8.4.2 Employees

• Lower utilisation rate

Masi (2000:320) states that EAPs that provide an off-site service only tend to be used far less as part of a core Human Resource and business practice. Dependent on the reason for the company's investment in an EAP, this could be seen as counter-effective.

• Knowledge of the organisation

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. This therefore is not beneficial to the employer.

It is interesting to note from the above and following information that not one model is preferred over the other but different circumstances call for a specific model. This therefore suggests that different issues lead to the choice for different models.

Maiden (1999:8) acknowledged that the combination approach is most probably the ideal one, if the infrastructure is primarily maintained by the organisation and the servicing is outsourced with the option of it being managed. This allows for equal ownership and a healthy balance of power between the EAP vendor and the funder. Cunningham (1994:22) concurs with Maiden by stating "it is becoming more difficult to think in terms of 'pure' EAPs that are solely in-house or contract EAPs".

Table 2.1: Differences between In-house and Off-site EAP models

In the researcher's opinion the differences between the two models can be summarised as follows:

In-house model / internal programme	Off-site model / external programme
1. EAP services are easily accessible.	1. EAP services could be less convenient
	for some employees.
2. Location visible within workplace, which	2. Location ensures anonymity of user and
could endanger privacy.	guarantees privacy.
3. Patterns of communication already	3. Lines of communication between EAP
exist inside the organisation.	service provider and the organisation need
	to be established.
4. Supervisor has direct contact with EAP	4. Confidentiality is ensured since reports
staff, which could threaten confidentiality.	are mostly the only access the supervisor
	has with EAP staff.
5. Employees' family members can feel	5. Family members of employees are more
threatened to access EAP services if it is	likely to utilise EAP at a separate venue.
located at the workplace.	
6. Immediate response/EAP services	6. Time between referral and response
possible in crisis situations.	dependant on service provider's waiting
	list.
7. EAP services can be accessed during	7. EAP services to be rendered outside of
working hours, which does not infringe on	working hours and could be more
employee's free time.	convenient as the employee is more
	relaxed after hours.
8. EAP provider is familiar with the	8. EAP provider has only a broad view of
company policies, procedures and goals -	the organisation.
the EAP services will be in line with	
above.	
9. Level of referrals is high due to	9. High proportions of self-referrals due to
"ownership" of EAPs by service providers.	employees' confidence in outside agency
	to deliver services.
10. Suitable for large organisations with	10. Suitable for small and medium
high turnover and a large human	enterprises for whom it is cheaper to
resources department.	outsource EAP services than to employ
	staff to deliver services.

As workplaces have become more complex, so too has the multifaceted EAP in trying to meet the demands of their client system. Many employers are using a combination of models such as:

- Where there is one main worksite, as well as smaller separate units of worksites, organisations may opt for an in-house programme for the main worksite and a contracted programme with a vendor (with its variations) for the smaller outside units.
- A well-developed comprehensive in-house EAP may offer to contract its services to one or more outside organisations.
- An assisted in-house EAP where some of the programme services may be outsourced, for example, prevention programmes or specialist counselling.
- An EAP vendor may integrate with a behavioural/managed health care provider to offer a range of services to members via the managed care services which might be the model of choice with regard to self-insured employers. With the development of Managed Care in the US, EAP providers have intentionally diversified their product lines to meet the needs of client organisations that prefer, for example, an EAP/Managed Care combined service.

2.9 Selecting an appropriate EAP model

According to Fleisher and Kaplan (1988:31-34) factors that will influence a decision on the model to be considered for an organisation include:

• Size of workforce

Companies with a workforce less than 500 or 1000 may not be able to implement an inhouse EAP because they may be unable to support their own employee counselling programme. These companies may utilise the combination approach.

• Distribution of workforce

Geographical distribution of employees is another key factor in determining the model of EAP selected and may result in many variations of models, as companies seek to find a model which would fit their unique situation. A company whose employees are concentrated within one site may opt for a different model than a company whose employees are dispersed over a wide geographical area.

EAPs may be run in-house but may also collaborate with external contractors for certain services, or alternatively be completely in-house and contract with outside resources or send out practitioners to conduct face-to-face consultations if necessary.

Mission

According to Fleisher and Kaplan (1988:32) a company doing sensitive government work may prefer an in-house EAP to protect the confidentiality of their work. They may opt for an off-site location close by so that family members can use the service without the necessary clearance.

• Cultural climate

Fleisher and Kaplan (1988:32) assert that "unless the cultural climate of the organisation is conducive, the realisation that troubled employees cost millions of dollars in health care and lost productivity, will not lead to the implementation of an EAP." Only if executives and managers are convinced of the effective impact of an EAP on individual work performance and productivity will they allocate the necessary resources to launch an EAP model that is manned by adequately proficient staff.

• Allocation of resources

Funds allocated for hiring staff, marketing, training and prevention programmes are directly linked to the type of EAP model selected. The amount of funds a company is likely to invest/spend on launching and developing an EAP is linked to available resources parallel to identified areas of priority.

• Target population

According to Fleisher and Kaplan (1988:33) determination must be made of how narrow or broad-brush the programme should be. Should an EAP only operate as a resource imparting information and operating as a referral service, or if counselling is to be offered, should it be restricted to job related problems? Services can range from problem identification and referral only to the provision of a full range of services, incorporating all the core technologies of EAP and maybe even integrate health/work life and other related services which are traditionally not covered by an EAP model.

• Administrative considerations

Fleisher and Kaplan (1988:34) state that decisions related to sponsorship, location and staffing present many possibilities for potential EAP combinations, and influence the utilisation of EAP services.

• Funding source

Fleisher and Kaplan (1988:34) mention the alternatives in identifying a funding source. Should employees contribute? Should all of the services be paid for by the employer or should some expenses covered by medical aid funds or personal insurance? The answers to these questions depend on the financial strength of the organisation or whether stakeholders like the union or employees have the capacity in investing in the development of an EAP.

2.10 Conclusion

If there were to be a competition between the different EAP models for providing the best EAP service, there would be no clear winner. The advantages and disadvantages of the models need to be looked at from an organisational point of view in terms of its goals and commitment to employee well-being.

"The combined EAP/Managed Care System is the standard for the future" (Miller, 1992:68), recommended as an integrated EAP/Work-life/Human Resources Programme with services in career development, childcare, eldercare, health promotion and retirement counselling amongst others.

Each EAP model has its own set of qualities that would make it appropriate for the needs and requirements of a specific organisation and therefore the responsibility lies with the employer to evaluate and select the model that will provide them with the best results.

Given that workplaces are so unique, in the researcher's opinion it seems logical that EAPs need to be designed in accordance with the special characteristics and needs of each individual organisation. EAPs as a whole have developed some specific core technologies, which, if inherent in the programme, then it is really just a matter of preference which model is chosen by a company.

The researcher believes that EAPs are essential to the progress of an organisation and may be integrated with other employee support and care services, but the resulting complex programme should be named differently to prevent misunderstanding about the defined concept of an EAP model.

Chapter 3 explains the methodology of the current research and the procedure that was followed to collect the data.

CHAPTER THREE RESEARCH METHODOLOGY

3.1 Introduction

This chapter aims to provide a description of the research methodology, the process and procedure that was followed to gather data throughout the current research.

3.2 Research methodology

"Research methodology is the 'how' of collecting data and the processing thereof" (Brynard & Hanekom, 2006:35). The two basic methodologies adopted by researchers are either quantitative or qualitative in nature, or a combination of both.

Qualitative research is distinguished from quantitative research as follows:

- The research is conducted in the natural setting of social actions.
- The focus is on process rather than on outcome.
- The primary aim is to gain firsthand understanding of actions and events or the problem under study.
- The researcher builds a complex, holistic picture, analyzes words and reports detailed views of informants.
- Qualitative researchers aim to create a rich description of the phenomenon of interest (Streubert-Speziale & Carpenter, 2003).

The present research is exploratory in nature. The case study is but one of several ways of doing social research. Case studies are the preferred method when "how" or "why" questions are being posed and the focus is on a contemporary phenomenon within a real-life context.

In other words, you should use the case study method because you want to understand a real-life phenomenon in depth (e.g. Yin & Davids, 2007). An important advantage of qualitative methods is that they allow the investigator to interact with the research subjects in their language and on their own terms (Kirk & Miller 1986:9). Curran and Blackburn (2001:121) have emphasised this advantage as a great strength of the method in handling micro level research issues. The design was found appropriate for this specific study. The literature yielded the impression that well-being in the construction industry is underresearched in the South African context and it is important that this area should be explored.

The research method that was used in this study was qualitative in nature in order to get indepth information. This method is much more subjective and uses different methods of collecting information, mainly individual, in-depth interviews and focus groups. The nature of this type of research is exploratory and open ended. In this study a relatively small number of people were interviewed in order to understand human behaviour and the reasons that govern such behaviour. The aim of this qualitative research was to deepen the understanding about employee assistance in the company. It helps the researcher to give reasons for specific behaviour and it helps to 'flesh out the story'.

Effective design of the research instruments requires a good understanding of the data collection framework, underpinning theories, and of course a clear set of research objectives.

As set out in chapter one, the research aimed to address the following objectives:

- The first objective is to examine how employees in construction experience their working conditions.
- The second objective is to ascertain the well-being problems of employees in construction.
- The third objective is to make recommendations with regard to a model for Employee Assistance on how to deal with the well-being problems of employees in the construction industry.

3.2.1 Research procedure

3.2.1.1 Permission from authorities

A letter had been drafted by the researcher to the management of the company to get permission for the study. The researcher visited the different construction sites to inform employees about the intended study. The researcher is an employee of the company and this made the process of establishing links with the employees more efficient.

3.2.1.2 Ethical aspects

Ethical acceptability is a primary issue in any research study. Fouche (2005:118) states that ethics is a set of moral principles which is suggested by an individual or group, is subsequently widely accepted, and which offers rules and expectations about the most correct conduct towards experimental subjects and respondents.

The ethical aspects according to Rubin and Babbie (2005:71) pertaining to the study was dealt with in the following manner:

- The nature, purpose and procedures of the study were explained to the participants.
- Respondents were informed about their right to remain anonymous and their right to confidentiality during the interview. All participants signed an informed letter of consent.
- A commitment was made to maintain honesty, emotional acceptance and empathy.
- It was decided that feedback would be provided to respondents.
- The research proposal was approved by the Ethics Committee of CPUT.

Bless and Higson-Smith (2000) also name ethical issues which had been mentioned by Babbie (2001), i.e. privacy, voluntary participation, anonymity and confidentiality.

• Harm to respondents

Strydom (2002:64) describes how subjects might be harmed in a physical and/or emotional manner by being subjected to pertinent questioning, and he reminds the researcher that an ethical obligation rests with him/her to predict and protect respondents from any potential harm.

The research does, however, not involve any dangerous situation for the participants. The research itself would have positive consequences for the respondents, in that they would be able to contribute towards the development of a model for employment assistance in the construction industry.

• Confidentiality and anonymity

It is normal practice for work organisations to want all of the abovementioned assurances to protect the organisation's reputation and public image.

Bless, Higson-Smith and Kagee (2006:142) indicate that confidential information provided by respondents should be protected and not made available to anyone. The researcher respected the respondents' freedom to participate, and did not coerce them into participating. Neuman (2006:135) states that after respondents have given permission to participate in a study they need to know what they are being asked to participate in, so that they can make

an informed decision. In this study all the respondents were guaranteed complete confidentiality and interviews were conducted at the respondents' convenience.

• Deception of respondents

According to Bailey (1982:436) deception involves studying respondents without informing them of their contribution to the study or failing to elaborate on the true nature of the study.

Strydom (2005b:61) believes that no form of deception should be inflicted on respondents, and if this happens inadvertently, it must be rectified. In this study the researcher provided a full explanation of the purpose of the study to the selected respondents. The researcher ensured that no false information was given about the reason and anticipated outcomes of the study (Walliman, 2005:364).

• Release of findings

Strydom (2002:72) asserts that an "ethical obligation rests on the researcher to ensure that at all times the investigation proceeds correctly and that no one is deceived by the findings."

Strydom (2005b:65) also indicates that in releasing the findings, information must be formulated and conveyed clearly and unambiguously. The researcher was aware of accuracy regarding information, objectivity, plagiarism and shortcomings, and was intent on following all the necessary precautions and regulations, so as to make this research as valuable, legitimate and understandable as possible. The researcher ensured that the final report was carefully prepared, all sources were recognised and acknowledged, shortcomings were admitted and the final research report would be made available to respondents who wish to peruse the results.

• Actions and competence of researcher

Strydom (2002:69) describes how a researcher needs to be competent in undertaking a research project, especially with regard to planning, accurately reporting findings, honouring ethical guidelines, communicating in a respectful manner with respondents and carrying out the entire research process in a professional manner. In planning and executing this study, the researcher relied heavily on guidance from the study supervisor and professional ethics as a social worker.

42

• Co-operation with contributors

Any individual who had been involved, was acknowledged in the research report and in writing by the researcher.

• Good working relations

Finally, respect will be maintained at all times to maintain a good working relationship for the study and even after research. Bless, Higson-Smith and Kagee (2006:146) discuss relationships with organisations and state that organisations will be interested in learning the results they have supported. It is therefore necessary to give feedback of the research findings, so that it can be of maximum use and improve the lives of the people involved. The findings of the study will be introduced in written form and will be submitted to the company where the study was executed, the South African Federation for Civil and Contracting Engineers, as well as to the Cape Peninsula University of Technology.

3.2.1.3 Logistics

The logistics of the study included access to the respondents at their convenience. The researcher had to determine methods to fit in the time for the completion of the interviews, so as not to disrupt the respondents' work activities.

3.3 Research population

There are many definitions of population, but the simplest definition seems to be McBurney's (2001:248) reference to population as the 'sampling frame'. A population therefore sets boundaries on the study unit.

De Vos (2005:199) summarises this as units of persons, units of events or case records, or organisation units.

The study population used in the present research consisted of employees in a mediumsized construction company. The total staff account for the company is 111. Participants in the study were represented in terms of race, marital status, occupational levels and years of service.

3.4 Sample and setting

Bless and Higson-Smith (1995:88) note that a sample is a subset of the population, and must have properties that makes it representative of the whole.

A sample is studied in order to understand the population from which it is drawn. When developing the sample, the researcher needs to consider feasibility, time, access and cost implications (De Vos, 2002:199).

In this study, purposive sampling procedures were used. According to Singleton, Straits, Straits and McAllistaire (1998), cited in De Vos (2002:207) this type of sampling is based entirely on the judgement of the researcher, in that a sample is composed of elements that contain the most characteristic, representative or typical attributes of the population. Only information-rich cases are selected and studied in depth. The researcher had purposively targeted employees in a construction company to participate voluntarily in the current study. This means that the researcher selected individuals for the study that could purposefully form an understanding of the research problem and the central phenomenon under study. The company employs 112 permanent employees and the total sample comprised of 34 full time male employees of the company. None of the participants were previously involved in well-being studies.

3.4.1 Characteristics of the sample

A total of 34 male employees (30.3% of the total staff count) were included into the sample. The few female employees in the company were excluded from the study, as they are all office based and do not work on construction sites.

Participants in the study were well represented in terms of race, marital status, position in the company and years of experience within the construction industry. The component of the company that was involved in the study, were the employees who work on distant construction sites.

Employees that are married form about 50% of the sample. Coloured employees were best represented in the sample with less African and White employees participating. The company is further well represented in terms of Afrikaans, English and African speaking employees.

The characteristics of the total population are reflected in the table below:

Years of experience in construction	Less than two years	1
	Two to five years	2
	Five to ten years	20
	Ten years and more	11
Position in the company	General worker	14
	Bricklayer	4
	Carpenter	5
	Site Clerk	3
	Supervisor	3
	Site Foreman	2
	Site Agent (Engineers)	3
Home language	African	13
	Afrikaans	20
	English	1
Race	African	13
	Coloured	12
	White	9
Marital status	Single	10
	Married	18
	Separated	3
	Divorced	2
	Widowed	1
Gender	Male	34
	Female	0

Table 3.1 Characteristics of the research sample

3.5 Secondary data collection

A literature study was conducted on the relevant subject of study to provide a better understanding into the research problem and the necessary background to guide the study. Information was drawn from text books, academic journal articles and research theses on the subject.

The researcher relied on her own experience gained from working as a social worker and human resource manager in the human science and human resource sector.

The researcher met with the management of the company to obtain formal and written permission to conduct the study.

From the above theoretical background, open-ended questions had been constructed to be used during interviews.

3.6 Primary data collection

Data collected by the researcher him/herself is termed the primary data (Brynard & Hanekom, 2006).

Prior to initiating the data collection process, introductory sessions were held with the employees on the construction sites to discuss the purpose, scope and benefits of the research, as well as confidentiality aspects and the concept of volunteerism. The researcher must approach the subject as a "collaborator" and an equal in the research process, as it is the support and confidence of these individuals that make it possible for the research to be completed (Burns & Grove, 2003). The researcher ensured that the questions in the interview were not threatening or obtrusive in any way. There will be no hidden agendas with regard to the purpose of the study. The researcher used these visits to glean in-depth information about the unique environment and working conditions of employees.

3.7 Pilot study

According to De Vos et al. (2002:210) a pilot study forms an integral part of the research process. Its function is the exact formulation of the research problem, and a tentative planning of the modus operandi and range of investigation.

The pilot study was conducted on two employees in order to establish that the questions posed during the interview were easily understood and that the expected types of responses were elicited. No potential practical problems in the proposed procedure were identified from this trial study.

3.8 Interviews

Interviews are one of the major approaches in collecting data in qualitative research. A qualitative research interview attempts to understand the world from the subject's point of

view as expressed in normal language. The interview allows the subjects to convey to others their situation from their own perspective and in their own words. The qualitative interviewer encourages the subjects to describe as precisely as possible what they experience and feel and how they acted. The focus is on nuanced descriptions of how they depict the qualitative diversity, the many differences and varieties of a phenomenon, rather than on ending up with fixed categorisation (Kvale, 2007:12).

Semi-structured interviews are based on predetermined themes, with interviewees being asked questions related to the themes, including probing questions. Semi-structured interviews were adopted for the study in order to create knowledge in the study context. Prior to the study, informed consent was obtained from all the respondents who agreed to participate in the study. Each participant signed an informed consent form (see Appendix A). To maintain the focus of the sessions, an interview schedule was used. The semi-structured face-to-face interviews afforded the researcher an opportunity to understand the closed internal worlds of the 34 employees, by studying their attitudes and perceptions with regard to their well-being. The questions in the interview schedule made provision for the relatively systematic collection of data. Forty minutes was allocated per interview and this was sufficient time for the needed data to be obtained. The interviews were concluded by asking the interviewee if he wished to ask any questions.

3.8.1 Interview schedule

The questions were carefully prepared so that the issues to be explored would be reflected in the basic research question. The questions were 'open-ended' for flexibility and depth of information. The interviews were audio taped and the researcher recorded the answers of respondents in verbatim format. A summary of the central questions and issues explored during the interviews is shown in appendix B.

Figure 3.1 follows

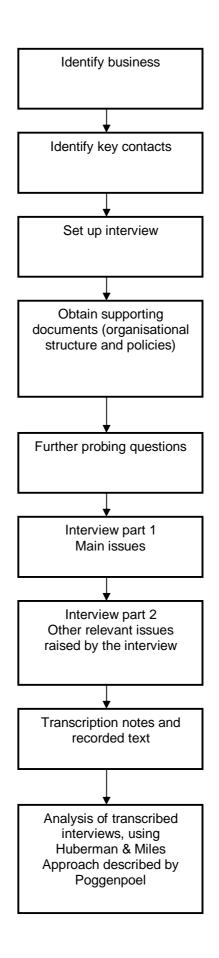


Figure 3.1: Description of the interview process the researcher followed

3.9 Focus groups

Two focus groups were conducted with the participants at the end of the interviews, in order to validate the information that was obtained during the interviews. During these discussions participants were allowed to air their respective opinions freely and also experience the problems and frustrations of co-workers with regard to their working environment, in order to agree on the most common areas that need intervention.

The group interviews served as a source of validation. Denzin (1998) indicates that groups create their own structure and meaning, in addition to clarifying arguments and revealing diversity in views and opinions.

The data gathered from the focus groups correlated with that obtained from the interviews.

All information was handled in a confidential manner, so as to guarantee that no emotional harm will come to employees due to their participation in the study. Except for the researcher and the supervisor of the researcher, no one will have access to the research data and no one will be able to identify individuals from the information cited in the research report.

The results of the study are intended to benefit all parties involved. Results and recommendations will be reported to the management of the company and the unions, by means of a written report, and to the respondents by an oral presentation.

To establish reliability of the processing data, the researcher requested the National Human Resource Director of SAFCEC (South African Federation for Civil Engineering Contractors) to verify the data, which was subsequently checked for agreement.

The researcher believes that the benefits of the research outweigh the potential sources of harm – such as negative feelings that may have manifested as a result of the interviews and the focus groups. It is possible to distinguish the elements that impact on the well-being of employees.

3.10 Observations

The goal of obtaining rich data justified a research design that combined other methods of collecting primary data, such as observations. This involves observing workplace relationships among the workers and work processes/procedures, recording, description, analysis and interpretation of research subjects' behaviour. The present study adopted a

participant observation technique in which the researcher was introduced to all the employees of the project sites upon the first visit. This afforded the researcher an opportunity to develop rapport with employees. Observations on site related to the living and working conditions on the distant construction sites of the company. Recording of observations involved writing field notes during and after each day's activities.

3.11 Compilation of data

The results and contents of the site visits, semi-structured interviews and focus group discussions were documented through audio and note taking.

3.12 Interpretation of results

Tabulations, comparisons and deductive reasoning were used to analyse the results, once all the information were compiled.

3.13 Validity

Validity pertains to the degree that a method investigates what it is intended to investigate, "the extent to which our observations indeed reflect the phenomena or variables of interest to us" (Pervin, 1984:48). With this open concept of validity, qualitative research can, in principle, lead to validate scientific knowledge.

3.13.1 External validity

Case studies rely on analytic generalization, in which the investigator strives to generalize a particular set of results to some broader theory. Analytic generalization can be used even if your case study involves a single case (Yin & Davids, 2007:43).

3.13.2 Content validity

This refers to the correctness and appropriateness of the questions included in the questionnaire or interview. A preliminary interview was conducted with a construction worker and a construction manager to test the validity of the interview.

3.13.3 Face validity

Due to the researcher's day-to-day involvement in the construction industry as a Human Resource Manager and experience accumulated during previous employment as a social worker, the respondent groups were well understood. The face validity was therefore maintained.

3.14 Reflexivity in qualitative research

Reflexivity places emphasis on the need for critical reflections on how knowledge is constructed on the part of the researcher. This calls for discovering one's biases, paying attention to ethical issues and confronting alternatives in the planning, conducting and writing up of the research. It stresses knowledge production as a reflexive process, ensuring quality research (Guillemin & Gillam, 2004).

Curran (2001:159) admits that small business researchers need to be reflexive in relation to the research methods and research strategies they adopt while staying committed to reporting facts as they are.

In qualitative research, reflexivity needs to be engrained in the choices of paradigm, the research strategies, research design, and the analysis and interpretations of field data. Each of these facets of the research process will require a conscientious effort to examine ways of enhancing the achievement of the final outcome of quality research.

3.15 Costs

The study had included the following items that required financial resources:

- Typing of interview data
- Analysis of the data
- Telephonic costs to set up appointments for the completion of the questionnaires
- Transport costs to the participants on the construction sites
- Administrative costs such as editing.

3.16 Limitations of the study

The study is limited by the fact that very little research has been done on the well-being of employees in the construction industry and on a model for employment assistance.

3.17 Conclusion

This chapter served as a synopsis of the research methodology and procedure followed to answer the research question and reach objectives as set out in the research proposal. A strict protocol was followed to collect the data.

Chapter 4 presents the discussion and interpretation of the research results.

CHAPTER FOUR

DISCUSSION AND INTERPRETATION OF THE RESEARCH RESULTS

4.1 Introduction

This chapter presents the results of the research conducted and the analysis thereof. The findings arising from the analysis will also be discussed comprehensively.

Figure 4.1 summarises the procedure that the researcher followed with the transcribing and analysing of the data obtained from the interviews and focus groups.

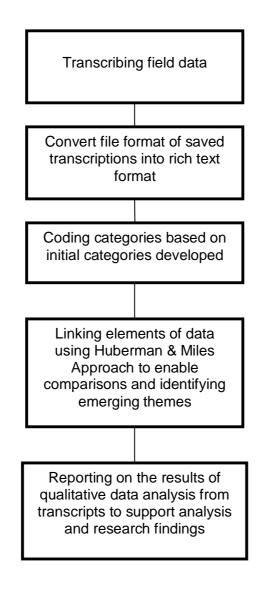


Figure 4.1: Procedure adopted by the researcher for the analysing of data

Data analysis was done manually. The information obtained from the sample of employees during the semi-structured interviews were transcribed and analysed using the Huberman and Miles Approach, as described by Poggenpoel (1998:340). Responses in the semi-structured open-ended questions during the interviews were recorded and categorised (AC 01 to AC 34).

The data collected from the interviews focused on four areas:

- the employees' years of experience within the construction industry;
- the employees' perception of their well-being;
- employees' knowledge and experience with regard to an EAP;
- employees' perception with regard to the need for an EAP within the company.

Table 4.1: An overview of themes and categories identified through the application of the abovementioned approach

Themes	Categories
1. Employees' perceptions with	1.1 Family separation problems
regard to their well-being	1.2 Distance
	1.3 Stress in the workplace
	1.4 Alcohol abuse
2. Experience and perceptions with	2.1 Employees' knowledge and
regard to an EAP	perceptions of EAP
	2.2 Employees' need for an EAP within
	the company

4.2 Analysis of findings

4.2.1 Employees' years of experience in the construction industry

The respondents' years of experience in the construction industry varied from 2 to 32 years. These included experience within the company where the study was conducted and elsewhere in the construction industry.

4.2.2 Perceptions with regard to the well-being problems of employees

The intention here was to obtain insight into the difficulties that employees are experiencing and which affect their well-being. The noticeable trend identified was the respondents' comparative and unanimous experiences of the same problems.

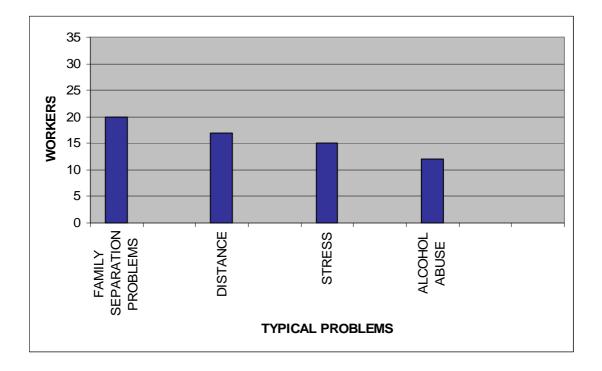


Figure 4.2: An illustration of the employees' perceptions with regard to their well-being problems.

4.2.3 Experiences and perceptions with regard to the utilisation and the implementation of an EAP

None of the respondents had any experience of EAP services. The general view was that employees regarded an EAP as a necessity for the company and a service from which employees can benefit. Frost (1990:45) maintains that employee awareness of an EAP is the first step towards the utilisation of the EAP.

4.3 Discussion of research findings

4.3.1 Well-being problems of employees

4.3.1.1 Family problems

A large number of respondents (31.3%), as seen in Figure 4.2, referred to family problems as being a result of their working conditions.

Family problems are often put down to the following:

- The tradition that employees in construction work long hours and over weekends;
- they are often away from home and their families for extended periods of time;
- the competitive nature of the industry causes a constant drive to meet deadlines;
- employees find it difficult to achieve a balance between work and family;
- they regularly miss out on important family events and milestones, such as births, funerals, birthdays, school events and general events deemed important for family members to share;
- nurturing family relationships become problematic.

Research by Covin and Bush (1993) has shown that conflicts between family and working life are related to aspects such as:

- increased health risks for parents;
- poor morale;
- reduced life satisfaction;
- absenteeism;
- poorer work performance;
- decreased productivity.

Kossek and Ozeki (1998) explored the relationship between work and family, and the work – family conflict. The study indicated that work interference with family life (work-to-family conflict) is likely to hurt a worker's job satisfaction.

Companies must realise how important the work-family balance is to the productivity and creativity of their employees. As the Human Resource director of one company points out

(Martinez, 1997:38): "When companies are willing to recognise that blood is thicker than water, it shows employees that their employer really cares about them, and that galvanizes loyalty."

4.3.1.2 Distance

Twenty six percent of respondents (26.6%) experience distance as a problem due to limited time being available to attend to personal and family matters.

The construction industry is constantly in flux and employees are frequently re-located. Families, whose members live at a distance from one another, face difficult issues. The families may feel overwhelmed by the challenges of arranging services over long distances.

Isolated employees had a substantially higher probability of developing cardiovascular diseases at a younger age than those in less adverse environments (Johnson & Hall, Public Health: October 1988:78).

The impact of distance on the family lives of employees can be a key issue for EAP professionals, as the company loses money due to absenteeism when employees have to attend to personal and family matters.

4.3.1.3 Stress

Twenty three percent (23%) of respondents regarded the long hours and unsafe working conditions in the construction industry as stressful.

Stress can be defined as the arousal of mind and body in response to an environmental demand (the stressor). The relationship between work, stress and well-being has been long established (Jahoda, 1982; Warr, 1982; Gottfredson & Duffy, 2008). Research has shown that feelings of job-related well-being and context-free well-being are positively correlated and that stress, attitudes about the organisation's task demands and visible resources impact on the way in which an individual feels about his/her life in general (Fisher, Katz, Miller & Thatcher, 2003).

The number of stress-related claims by American employees had doubled in the last decade, according to the EAP Association in Arlington, Virginia.

Symptoms of stress can result in the following:

- poor coping skills;
- general irritability;
- jumpiness for no apparent reason;
- insecurity;
- general physical exhaustion;
- emotional fatigue;
- difficulties with concentrating on work.

The topic of work-related stress has been receiving increasing attention in the area of occupational health over the last three decades, especially in the world of work and business. Occupational stress contributes to a significant portion of worker compensation claims, health care costs, disabilities, absenteeism and productivity losses. It is clear that problems caused by stress have become a major concern to both employers and employees. Ramanathan (1992) found that EAPs are an effective means for helping employees deal with stress, as they are often unable to find a solution and remedy of their own accord – very often they do not even realise that their work performance is being adversely affected.

4.3.1.4 Alcohol abuse

Eighteen percent (18.7%) of respondents indicated that alcohol abuse occurred over weekends. Alcoholism was presumed to be the most prevalent problem in organisations and was reported to cause deterioration in job performance (Erfurt & Foote, 1977) in a large number of the cases.

Alcohol and drug abuse can interfere with an individual's employment and can often lead to the following:

- Lost productivity;
- accidents;
- absenteeism;
- high employee turnover rates;
- increase in medical claims.

Construction workers who abuse alcohol and other drugs cause danger, not only to themselves, but also to their colleagues and the general public.

Safety in the construction industry is paramount. Subject to the provisions in the Occupational Health and Safety Act, Act 85 of 1993, an employer shall not permit any person who is or who appears to be under the influence of intoxicating liquor or drugs, to enter or remain at a workplace. Employees who generally perform well, but drink too much, can greatly benefit from EAP counselling and assistance. An EAP focuses on rehabilitating them, which often benefits their work and personal lives.

When the issue of workplace substance abuse is addressed by establishing comprehensive programmes, it is a "win-win" situation for both employers and employees, according to the U.S. Department of Labour.

A study of the economic impact of substance treatment in Ohio State University (2009) found significant improvements in job-related performance after the effective implementation of an EAP in the company:

- a 91 percent decrease in absenteeism
- an 88 percent decrease in problems with supervisors
- a 93 percent decrease in mistakes at work
- a 97 percent decrease in on-the-job injuries

PARTICIPANTS (34)						
1. ✓	2. ✓	3. ✓	4. ✓	5. ✓	6. ✓	7. ✓
8. ✓	9. ✓	10. 🗸	11. ✓	12. 🗸	13. 🗸	14. ✓
15. ✓	16. 🗸	17. ✓	18. ×	19. 🗸	20. 🗸	21. ✓
22. ✓	23. ✓	24. ✓	25. ✓	26. ✓	27. ✓	28. 🗸
29. ✓	30. 🗸	31. ✓	32. ✓	33. 🗸	34. ✓	
Need for EAP		33	د		%	97.1
No need for EAP		1	7		%	2.9

Table 4.2: Respondents' need for the implementation of an EAP

4.3.1.5 Implementation of an EAP within the company

Ninety seven percent (97%) of respondents indicated the need for the implementation of an EAP as a service within the company, as indicated in the table above. The literature revealed the demanding working environment of the construction industry. It is therefore imperative that construction companies effectively utilise an EAP to retain these scarce skills and to

assist employees in the demanding working environment that they have to face on a daily basis.

Frost (1990:45) maintains that employee awareness of an EAP is the first step towards the utilisation of the EAP.

An EAP programme design must be based on an assessment of organisational and employee needs, as they relate to EAP utilisation.

The researcher believes that the well-being issues raised in the investigation report as presented above should enhance the implementation and utilisation of an EAP in the company.

4.4 Suggestions and recommendations

The results gathered after reviewing the perceptions of participants with regard to their wellbeing, proved that employees in the construction industry are experiencing well-being problems and that these problems need attention.

A large percentage of participants (97%) indicated that they are in favour of an EAP for the company.

EAPs have proven their value to countless organisations by helping individuals and their families who struggle with alcohol abuse, family problems and serious emotional problems.

4.5 Chapter summary

This chapter served to analyse the data and discuss the findings with the aim of addressing the research objectives.

Chapter 5 will focus on the requirements for the development and implementation of an EAP within the construction industry as a source to assist with the well-being problems of employees.

CHAPTER FIVE

DEVELOPMENT OF AN EMPLOYEE ASSISTANCE PROGRAMME IN A MEDIUM-SIZED CONSTRUCTION COMPANY

5.1 Introduction

The success of any company depends heavily on the productivity and work performance of its human resources. Sometimes employees' personal problems spill over into the workplace. This may negatively affect their job performance, those of colleagues and office morale.

An EAP is a cost-effective way to enhance productivity, increase morale, decrease medical expenses and, most of all, promote employee well-being.

In order for an EAP to be effective in the workplace, it must be a strategic intervention, designed to produce organizational benefits quantifiable by outcomes measurements, through a system-led approach to people management.

5.2 South African legislation in relation to the EAP

Legislation has played a significant role in the development of EAPs in South Africa by providing, although indirectly, a mandate for EAP services. Labour legislation, such as the Labour Relations Act, No. 66 of 1995 and the Occupational Health and Safety Act, No. 29 of 1996, place the responsibility on employers to manage behaviour risks that employees bring to the workplace, as well as risks that the workplace brings to the employee. Employers should also ensure that the enforcement of corporate regulations and related discipline should be progressive and in essence provide assistance to employees who are incapacitated by problems that might inhibit productivity. Care should be taken to make sure of an employee's guilt or misconduct before punishment or dismissal is applied. Employers are therefore under pressure to put in place mechanisms for mentoring and managing employees and draw a parallel in terms of the impact they have on the workplace.

There are numerous Acts that impact on EAP, and EAP practitioners should be aware of the following existing legislation:

5.2.1 In accordance with the **South African Constitution**, Act 108 of 1996, all persons have the right to choose trades, occupations and professions. All persons have the right to work and to have access to health care services and appropriate social services.

5.2.2 The **Basic Conditions of Employment Act**, Act 75 of 1997, ensures that the working conditions of unorganised and vulnerable workers meet minimum standards. It removes rigidities and inefficiencies from regulation of minimum conditions of employment and promotes flexibilities.

5.2.3 The **Labour Relations Act**, Act 66 of 1995, the Code of Good Practice: Where dismissal is imminent, advice must be given to troubled employees regarding the fact that they may receive counselling prior to dismissal and after.

5.2.4 The **Labour Relations Act**, Act 66 of 1995, Incapacity: Whether suffering from ill health or injury, dismissal depends on the degree of incapacity, and alternative positions should be considered in case of an incapacity to perform their normal job.

5.2.5 The **Employment Equity Act**, Act 55 of 1998, promotes equal opportunity and fair treatment through the elimination of unfair discrimination.

5.2.6 The **Skills Development Act**, Act 97 of 1998, provides for the continuous development of skills of the workforce and a resultant improvement in the standard of living of the workers.

5.2.7 The **Occupational Health and Safety Act**, Act 85 of 1993, promotes and monitors health and safety in all areas of work.

5.2.8 The **Compensation for Occupational Injuries and Diseases Act**, Act 130 of 1993, requires that advice must be given to traumatized clients regarding claims. As a result of the trauma workers often forfeit or botch claims, just to experience financial difficulties later due to medical bills.

5.2.9 The **Domestic Violence Act**, Act 116 of 1998, affords victims maximum protection against domestic violence of any kind. Advice must be given on application according to this Act, as those aspects could result in high stress levels, impacting or causing an employee to become a troubled employee.

5.2.10 The **Prevention and Treatment of Drug Dependency Amendment Act**, Act 14 of 1999, outlines the services to be rendered to assist persons who are dependent and addicted to drugs and alcohol.

62

5.2.11 The **Child Care Act**, Act 74 of 1983, which advises employees on how to act and even report such cases.

5.2.12 The **Debt Collectors Act**, Act 114 of 1998, requires advice to employees regarding loan sharks and repayment of loans.

5.2.13 The **Medical Scheme Act,** Act 131 of 1998, states no discrimination against members on the basis of state of health. Advice must be given to troubled employees in respect of difficulties with payment.

Confidentiality and **trust** are essential factors in EAP. In accordance with the South African Constitution, Section 14 (d) includes the right to privacy.

5.3 Standards for EAPs in South Africa

The first formal standard of practice for EAPs was written by the Employee Assistance Programme Association (EAPA) in the USA in 1981. This produced the foundation that forms the basis of all EAP standards of practice today (Hoskinson, 1989).

The Standards for Employee Assistance Programmes in South Africa were developed in 1999 by the Employee Assistance Professionals Association – South African Chapter (hereafter known as EAPA-SA) and revised in 2005 as guidelines for the implementation of EAPs. The 27 standards represent not only the national agreed level of professional best practice for EAPs, but also outline the basic principles and key elements that these programmes should contain.

The EAP Association (EAPA) is the largest, oldest and most respected professional association for persons in the Employee Assistance Programme field. EAPA represents more than 7000 individuals and organisations with an interest in employee assistance in 107 Chapters around the globe.

EAP-SA was created as a Branch of EAP international in 1999 and is committed to the following objectives:

- To provide leadership in promoting the national and regional growth and development of EAPs in both the public and private sector workplaces.
- To devise and maintain EAPs and EAP professional practitioner standards.

According to the EAPA-SA (2005:7) "Adherence to professional standards and guidelines ensures viable programmes. The purpose of the non-regulatory guidelines is to assist all relevant stakeholders in establishing quality EAPs in accordance with international best practices and enhancing existing EAPs. While the application of the standard criterion will ensure creation of quality EAPs, these guidelines should not inhibit the opportunity for organisations to develop customised employee assistance models. In recognising this flexibility, many of the guidelines illustrate that there are a variety of ways in which standards can be implemented."

When designing, implementing or evaluating an EAP, each organisation should apply these standards and guidelines based on its own unique organisational culture and operation. The word "standard" is defined in the Oxford English Dictionary as the "required expected or accepted level of quality" and also as the "specified level of proficiency". It is defined by EAPA-SA (2005:6) as "the agreed level of best practice or description of the ideal situation".

5.4 Significance and use of professional standards

Adherence to professional standards and guidelines ensures viable programmes. The guidelines are non-regulatory and its purpose is to assist all relevant stakeholders in establishing quality EAPs in accordance with international best practices and enhancing existing EAPs.

The application of the contents of "Standards for Employee Assistance Programmes in South Africa" will ensure quality EAPs, but should not limit the importance of organisational customisation. In recognising this flexibility, many of the guidelines illustrate that there are a variety of ways in which standards can be implemented. When designing, implementing or evaluating an EAP, each organisation should apply these standards and guidelines, based on its own unique organisational culture and operation (EAPA-SA, 2005:7).

The researcher is of the opinion that the implementation of the standards will ensure that there is uniformity in the application and that, while the standards can be adapted and customised to the organisation, the foundation would be similar.

The findings of this current research study indicated that an EAP in the construction industry is imperative, and not just a nice trimming to have.

Construction companies should customise EAPs to suit their specific needs and demands. An ideal and suitable model will contribute to the enhancement of an effective service to employees (Terblanche, 1992:19). There are, however, essential requirements that should be adhered to.

5.5 Essential requirements for the implementation of an EAP

Although the standards are not the focus of the study, the standards document provides a very good framework of best practices for any person or organisation who wishes to implement an EAP.

The following guidelines are linked to the EAPA-SA. The text in **bold print** is the actual standard as it appears in the standards document of 2005 as best practices/guidelines.

5.5.1 Programme design

Advisory/Steering/Consultative committee

Standard 1

There should be an advisory committee at the highest possible level within the organisation/company involving representatives from all segments of the workplace.

Googins and Godfrey (1987: 164-165) describe the Advisory Committee as the formal mobilisation of support necessary for the EAP and its services to become known, needed, trusted and accepted throughout the corporation or union.

Googins and Godfrey (1987: 164-165) identify some of the stakeholders of the Advisory Committee as representatives from labour, management, personnel, labour relations, medical personnel and others within the client system whose combined expertise help shape the EAP and in doing so, develop a degree of ownership of the programme that can assist the development of the model in its quest for legitimacy.

The functions of the Advisory Committee, according to Googins and Godfrey (1987:164-165) and Stoer-Scaggs (1999:41) can be summarised as:

- Programme support and legitimacy
- Resource for information-organisational profiling and needs assessment
- Ensure linkages with all relevant stakeholders

- Programme design advice on policy, goals, objectives, implementation plan and procedures, programme services
- Marketing of the EAP
- Evaluation and critical feedback regarding the programme initiatives
- Ongoing review of operations
- Supporting EAP confidentiality safeguards

The purpose of this standard is to ensure that all relevant role players in the organisation contribute to and participate in the effective design and operation of the EAP. The researcher views programme design as one of the most important standards, as its purpose is to provide the EAP with information on the different role players within the organisation.

5.5.2 Needs assessment

Standard 2

Programme design shall be based on an assessment of organisational and employee needs as they are related to EAP utilisation. The background information and organisational data to be considered in the programme design will include at least:

- Organisational profile and needs;
- employee needs;
- supervisors and union representatives needs;
- health care profile and needs.

Berman, Sulsky, Pargament, Balzer and Kausch (1991:22) explain that "Needs Assessment" is a tool to answer the question: What type of EAP is best suited to the characteristics, problems and resources of this particular organisation/company?

According to Berman et al. (1991:22-25) the process of conducting a needs assessment involves a variety of different data collection methods, and the benefits of conducting an EAP needs assessment include:

- It provides an external, objective check to the subjective process of planning an EAP.
- It can identify problem areas in which EAP services may be cost-effective.

- The composition of the workforce in terms of age, sex and marital status, for example, may indicate the need for different types of services.
- It can identify barriers to the use of the EAP which can be addressed prior to implementing services.
- The information can serve as a benchmark for determining if and how well the programme is working.
- It provides information on the size and scope of the relationship between job performance and personal problems.
- It can provide an estimate of the savings that can be produced by having an EAP.

Grissom, Baldadion and Swisher (1988:81) offer an additional benefit of needs assessment in that "the needs assessment process is itself one method of promoting awareness of services whilst simultaneously gathering data in support of programme development".

The process of needs assessment in EAP is a planned and systematic effort of engaging with a client system, with the purpose of understanding its characteristics, functioning needs, goals and resources in order to design a beneficial intervention, develop a relationship and to set baseline data for later evaluation.

5.5.3 Service delivery models

Standard 3

There should be an appropriate model for service delivery for specific employer organisations, reflecting detailed procedures.

According to Gould and Smith (1988:10) "... not all EAP models are equally viable for any particular organisation/company. It is likely that whatever model emerges is the result of a dynamic combination of organisational size, complexity and resources, as well as management philosophy, community resources and organisational history (especially the extent and nature of 'people problems' among the workforce)."

Selecting an appropriate model

According to Fleisher and Kaplan (1988:31-34) factors that will influence a decision on the model to be considered for an organisation/company includes:

- Size of workforce
- Distribution of workforce
- Cultural climate
- Allocation of resources
- Target population
- Range of services
- Administrative considerations
- Funding source

The researcher is of the opinion that the criterion as outlined in the Standards Document (2005:10) should be the main consideration in choosing an appropriate model. The Advisory Committee should also be consulted in this regard.

5.5.4 Pricing models

Standard 4

Pricing of EAPs should be negotiated and agreed upon by the service provider and the employer after different models have been considered. Models should be transparent and acceptable to all role players involved.

Myers (1984:79) indicates that "in choosing an EAP model, the decision-maker must balance EAP costs with anticipated benefits." Cost considerations should include the following:

- Marginal expenditure or change in costs caused by adding additional client services, e.g. an assessment and referral service is only slightly cheaper than a programme that also includes some short-term counselling;
- service comparability in-patient versus out-patient treatment, cost versus effectiveness;
- method of pricing for the different programme models per capita costs versus the overall costs;
- workforce size some experts believe that at least 3000 employees are needed to justify the cost of an in-house programme.

The allocation of financial resources to an EAP is a serious issue for both internal and external models, and the standard should offer generic guidelines for all types of programme models.

Standard 5

The policy shall describe the EAP in its entirety.

Klarreich and Jones (1985:12) refers to the policy as an instrument that demonstrates company support and endorsement which, if well constructed, enables successful programme administration, but when poorly conceived and established, can cause the EAP to "flounder and die".

Googins and Godfrey (1987:125) caution, however, that while the policy is important, it is not sufficient to guarantee success. He explains that the policy must be put into operation to be effective and its services must be compatible with performance appraisal systems, grievance processes, disciplinary procedures, insurance policies and above all the protection of employee privacy through strict confidentiality in order for the EAP to be viable. The policy describes the strategic and operational framework for the EAP and the implementation thereof.

Myers (1984:123-129) refers to the policy as an "EAP statement" which incorporates goals, policies and procedures.

The researcher suggests the following guidelines with regard to an EAP policy:

5.5.5.1 Policy principles

• Confidentiality

Confidentiality should be maintained regarding all contact with the EAP to the extent allowed by law. Should an employee be referred to the EAP by the supervisor, the programme will confirm for the supervisor, upon his request, that the contact was or was not made and provide the dates on which the meetings took place. No other information will be released to the supervisor or any other person without the consent of the employee or the obligation of a legal requirement to do so.

• Accessibility and cost

The EAP is a free, confidential counselling service and accessible to all categories of employees in the company and their families. If treatment or extended services are needed, the employee will be referred to local community agencies, hospitals, clinics or private practitioners. The EAP will endeavour to facilitate an effective link with such outside service providers. In the case of an outside resource, the cost will be for the cost of the employee.

• Voluntarism

Utilisation of the services offered by the EAP is voluntary, even when strongly recommended by management.

• Job security and promotion

It is the responsibility of all supervisory personnel to ensure that an employee's participation in EAP services will not jeopardize that person's job security or promotion opportunities.

No employee shall have his or her job security or promotion opportunities jeopardized because of his/her participation or failure to participate in the EAP.

• Performance

An employee's continued refusal to co-operate with the treatment objectives and/or procedure will be dealt with under the normal disciplinary practice, which occurs as a result of continued poor performance. Employees who participate in EAP services will generally be subject to the same performance standards that existed prior to EAP involvement.

• Leave

Upon referral by the EAP for treatment at an appropriate community agency, the employee should make appropriate use of leave time (e.g. sick leave, vacation leave, family responsibility leave) as he/she deems necessary.

5.5.5.2 Conditions of participation

• Confidentiality

Confidentiality within the normal applicable limits is assured to all employees who use EAP services. Access to personal and clinical information is only available to EAP personnel. Consent is always a prerequisite for disclosure of client information, except when otherwise required by contract or by law.

• Limitations on right to confidentiality

Section 36 of Constitution – Limitations of rights clause: where a therapist has reason to suspect child abuse and/or sexual abuse, according to the Prevention of Family Violence Act 133 of 1993.

If an employee is imminently suicidal, or if an individual is perceived to be dangerous to others, this breach of confidentiality is justified according to Section 8 of the Occupational Health and Safety Act, Act 85 of 1993.

If an employee needs psychiatric or medical attention, and the employee must undergo medical examinations for health and safety hazards, the Basic Conditions of Employment Act of 1997, Sections 17 & 90 justifies this breach. This also applies to night work.

5.5.5.3 Statement of understanding

Prior to the first session the client must read a statement of understanding that informs the client about the benefits and limitations of the EAP services. It explains treatment alternatives, objectives, rules and expectations. It must be easy to read, preferably only one page.

5.5.5.4 Procedures

• Early identification of problems

EAP must keep the manager's focus on the employee's job performance. The manager/supervisor must ensure that the employee knows what is expected regarding job performance, rules and pertinent policies. The supervisor must be alert, through continued

observation, to changes in work and behaviour patterns. If deterioration should occur, the supervisor must start written documentation and refer to the EAP.

• Documentation

Documentation format should be consistent, and all entries must be signed and dated by the EAP practitioner. All records must be kept in a locked, secured location. Individual EAP records should be kept separate from personnel and medical records. The only records available to other departments will be collected for statistical use and be aggregate in nature to protect the identity of the employee.

• Basic principles on recordkeeping include the following:

Individual participation: Employees should have the right to see and propose corrections to their records.

Collections limitation: Information about employees should only be collected lawfully and with the consent of the client.

Record requirements: Records containing personal information should be accurate, relevant, timely and completed, so that they will serve the purpose for which they are maintained.

Use limitation: There should be limits on internal uses of information and that information should only be used for the purpose for which it is collected or with specific consent of the individual.

Disclosure limitations: You need legal authority or the consent of the client in order to make a disclosure.

Security: To provide reasonable degree of protection of records.

Accountability: Those people who keep records are responsible for maintaining those records and will be held accountable for any breach of confidentiality.

5.5.5.5 Types of EAP referrals

• Self-referral

Initiated by an employee, in cases where the employee has personal problems which he deems serious enough to possibly interfere with his work performance and/or health in the foreseeable future.

• Informal referral

An employee seeks help at the suggestion of a colleague, family member, a friend or where supervisors assist employees by offering the option of EAP to those employees whose work performance had deteriorated.

• Supervisory referral

When work performance has deteriorated below an acceptable level and might lead to disciplinary action, the supervisor makes a formal referral as a constructive alternative to discipline. This offer may, however, still be declined by the employee as the EAP is voluntary.

Supervisors are essential to the EAP, since they are the first to notice any drop or change in work performance of an employee, and the early identification of problems is key to the success of the EAP. Supervisors are the link between top management and all employees. First line supervisors are the EAP's most significant asset, since they are in a position, both to refer troubled employees and to support employees who voluntarily make use of the service.

As supervisory referral forms part of a wider performance management strategy, the supervisor will be advised whether:

- The employee has kept the appointment
- The employee accepted or rejected the offer
- The employee will or will not need time away from work
- The supervisor has to be involved in setting the date on which the employee is expected to return to work.

The researcher concurs with Googins and Godfrey (1987:147) (see Figure 5.1) with regard to the manner in which they explained the tasks of the supervisor in the EAP.

Figure 5.1 follows

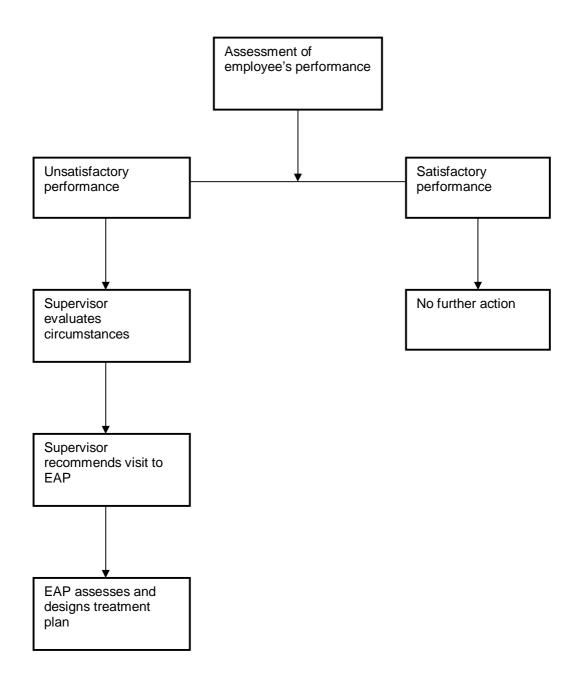


Figure 5.1: The primary tasks of the supervisor within the EAP (Googins & Godfrey, 1987:147)

5.5.5.6 The ODIR principles

The ODIR principle as cited by SANCA (South African National Council for Alcoholism and Drug Dependence) during their training programmes, must be applied by supervisors and managers when they utilise the process of constructive confrontation with an employee with regard to performance related problems. Since the early 1980s SANCA has played an important role in rendering industrial consultative services and contracting to run EAPs within workplaces.

The ODIR principle stands for:

- Observe
- Document
- Inform
- Refer

Observe

The supervisor should be able to recognise and identify changes in employees' work performance or ability to perform, in order to ensure early identification and referral. Quality and quantity of work, attendance, punctuality and changes in behaviour may serve as indicators.

It is recommended that supervisors be attentive to employees who start presenting with problems such as absenteeism, non-performance, insubordination and changes in behaviour. Supervisors must ensure that the employee understands what is required of him/her in terms of job performance. It is not recommended to allow a series of misdemeanours to build up before employees are approached.

Document

Academics in the field of EAP recommend that supervisors should document the information pertaining to incidence/s immediately, as the written documentation will serve as factual evidence for the referral of the troubled employee. Documentation after introduction of corrective measures is also important in order to assess whether progress occurs after EAP intervention.

The following information should be recorded:

- The nature of the incident;
- All details pertaining to the incident;
- The date;
- The time;
- The reason for concern;
- Which action was followed to inform the employee.

It is not recommended to rely on the ability to recall all the events, as important information may be omitted. In the event of disciplinary action being instituted, proper and accurate documentary evidence is essential. In the absence of proper documentation, the supervisor will be challenged to support his or her argument.

Inform

It is imperative for supervisors to bring noticeable change/s in the work performance to the attention of the employees concerned. During the first constructive confrontation session, the supervisor must advise, and prove in writing, the employee of the detected pattern of poor performance.

Constructive confrontation is the process of informing the employee of shortfalls identified. If after a set period of time the supervisor's ongoing observation and documentation reveals that there is no sustained improvement, it is recommended that a further informative session should be arranged and consideration to disciplinary action may be reviewed. During this session supervisors are cautioned not to get involved in employees' personal problems, but rather refer them to the appropriate professionals.

Supervisors must also document the resolutions agreed upon during the constructive confrontation interview, especially information regarding time frames for review, goals and objectives.

Refer

Supervisors play an integral role throughout the referral process. Supervisors are encouraged to take appropriate action from the onset of detecting performance related problems. When it is evident that an employee's work performance is being negatively affected by a personal problem, the supervisor should refer the employee to the EAP. Referral to the EAP should not be considered for punitive reasons, neither should it be recommended as a sanction during the disciplinary process, although the EAP process and discipline can be implemented simultaneously. Furthermore, the fundamental principles underpinning the EAP process, such as confidentiality, must be stressed to the employee.

5.5.5.7 Follow-up

The supervisor will receive feedback from the EAP practitioner, especially in the case of a formal referral. Documentation regarding follow-up services assists in evaluating the

effectiveness of the EAP services. It must be reinforced that the nature of the employee's problem/s is strictly confidential and information will only be disclosed with the employee's signed consent to release the information.

5.5.5.8 Aftercare (In case of treatment for alcohol/drug abuse)

The supervisor should assist the EAP practitioner with the aftercare of employees after their re-entry into the workplace, by monitoring job performance and attendance. Supervisors should also inform the EAP practitioner of noticeable changes that occur.

The supervisor plays a vital role in the reintegration of the employee into the workplace after intervention. Research has proven that the supervisor must be objective and supportive towards the employee, as well as his/her colleagues upon the employee's return from extended absence from work, due to treatment or rehabilitation (SANCA, 2000).

It is recommended by leading programmes and researchers that the supervisor should meet with the employee prior to the employee's return from extended absence, as it will reduce the anxiety that is being experienced by the employee.³

5.5.5.9 Feedback and reporting

The employee must sign a release of information. Feedback would be important because of:

- How the employee is performing at work;
- attendance;
- relationship with co-workers;
- general information about the employee's progress.

Monthly performance interviews will have to be conducted with the employee for a year, to ascertain how the employee's recovery programme is progressing and to ensure him/her that their well-being is of concern to management. Measuring and maintaining employee satisfaction is very important to ensure that his/her loyalty remains constant.

Examples: Individual client response cards Surveys with:

³ Source: <u>http://www.oehc.edu/EAP</u> sup guide asp

- Employees who have used the EAP;
- total workforce;
- managers and supervisors who referred employees for EAP services.

5.5.5.10 Service needs assessment

A service needs assessment refers to the evaluation of a number of employees in need of the EAP service.

5.5.5.11 Core EAP programmes

• Counselling

The purpose of the EAP counselling would be to prevent, identify and treat personal problems that adversely affect job performance. Everyone experiences personal, emotional, psychological or behavioural problems from time to time, to a greater or lesser extent.

Most people want to get rid of these problems and continue with a productive, happy life, but sometimes they cannot solve these problems without help. Until it is reported, no-one knows how serious they can get, so it is imperative that professional people identify, assess and treat these problems as early as possible.

EAP counselling can be defined as a problem-focused form of individual / family out-patient counselling that:

- Seeks resolutions for problems in living (e.g. parenting concerns, emotional stress, marital and family distress, alcohol/drug related problems) rather than basic character change;
- emphasises client skills and resources;
- involves setting and maintaining realistic goals that are achieved in a one to five month period;
- encourages clients to practise behaviour outside the counselling session which will promote therapeutic goals.

The range of sessions is built upon extensive experience, but is still intended as a guideline, not an absolute maximum. If a problem requires long-term specialized care, a referral should be made to the appropriate specialists. Follow-up is an integral part of the counselling process. It is conducted telephonically or in person by the counsellor after the formal brief counselling has ended and before the case is closed. Its purpose is to accomplish the following goals:

- Support the gains made by the client counselling;
- maintain a therapeutic relationship with the client until the client feels strong enough to take the next step in treatment;
- ensure that the client does not need further clinical intervention.
- HIV/AIDS Counselling and support

The development of a company policy for dealing with the pandemic is an important step in the current and future management of this disease and the consequences thereof in the workplace. The EAP will provide supportive counselling to employees and their families in this regard.

• Management consulting

EAP will provide support and advice to managers on job related issues of employees.

5.5.5.12 Marketing the EAP

A commitment by marketing the EAP services to penetrate from the very top through every division and to be shared and supported by employees will have to be made. Marketing the EAP services to employees and their families should increase programme utilisation for both self-referrals and supervisory referrals. It should encourage family participation and create a positive image of the programme.

5.5.5.13 Manager/Supervisory training

It will be in the best interest of everyone involved to ensure that managers/supervisors at the company receive intensive training in the marketing and administering of the EAP. They will also need to be followed up on the progress they have made in identifying and referring employees accordingly.

5.5.5.14 Programme co-ordinator

• Roles and responsibilities

The role of the programme co-ordinator is primarily an administrative one, but the overall responsibility is maintaining the role and status of the EAP in the company at all times, so that all employees are aware of the possibility of help with their problems.

• Key responsibilities include:

- Co-ordinating and monitoring EAP function in the company;
- liaising with EAP services;
- maintaining the integrity of the system and programme;
- evaluating of the programme;
- monitoring the overall effectiveness of the EAP policy and procedures;
- advising on implementation procedure;
- contributing to the evaluation procedure.

5.5.5.15 Departments/Divisions in the company

The various departments/divisions will be responsible for:

- Identifying the needs of employees that require EAP services;
- outreach to and education of employees and their families about the availability of EAP services;
- consultation with and training to managers on how to manage troubled employees and to improve job performance;
- use of constructive confrontation, motivation and short-term intervention with employees on job performance issues;
- referral of employees for diagnoses, treatment, assistance, case monitoring and follow-up.

5.5.5.16 EAP and Human Resource partnering

Human Resource issues that are related to EAP:

• Employee relations (conflicts among staff, collaboration on "troubled work areas" and promotion)

- Organisational development (critical incident debriefing, co-identification of organisational dysfunction)
- Training and development (collaboration on training for HIV/AIDS, substance abuse, preventing workplace violence, sexual harassment, health and safety codes)
- Employee health (referral of employees with stress-related conditions and personal problems)

Human Resource policies must advise EAP on:

- Health and safety codes;
- guidelines on ill health retirement and disability;
- employee benefits;
- grievance procedures.

5.5.5.17 Evaluation

Programme review and evaluation

EAP evaluation is the measuring of the appropriateness, effectiveness and efficiency of EAP operational activities with the goal to ensure a cost-effective and relevant service to employees and their family members.

Evaluation techniques

- Data analysis with regard to utilisation and productivity
- Surveys: Client feedback, client progress questionnaires, supervisory referral surveys
- Interviews with clients

The policy will be reviewed on an annual basis to reflect the current research, as well as occupational and employment standards related to EAP.

EAP policy disclaimers

The use of EAP does not negate the employee or his/her supervisor's responsibility in adhering to policies and procedures. Normal employment conditions will apply for all those participating in the EAP.

The EAP will not necessarily prevent disciplinary action for serious offences or continued unsatisfactory work performance. It is expected that an employee will make every effort to successfully complete counselling within a reasonable time period and that his/her work performance will improve after the counselling.

5.5.6 Policy statement

Standard 6

The policy statement shall provide the guarantees, principles, the rights and responsibilities of the various stakeholders, such as the user, the employer and the provider.

Myers (1984:117-120) describes a policy statement as one that explains:

- The significance of employee problems and the proportion of the workforce usually affected.
- That an EAP is being implemented to address these problems through a combination of prevention and confrontation services.
- The problems to be treated in the EAP.
- That client confidentiality is assured for all referrals and EAP records.
- How family members are covered by the Medical Aid fund if they are eligible for services.
- Client services that the organisation/company will provide.
- The responsibilities and involvement of the union if applicable.
- Disclaimers regarding the EAP and management's authority to discipline deficient employees, union prerogatives to present members or client employees' employment and career advancement.

Many authors do not make a distinction between the policy and the policy statement. However, the policy statement summarizes the essence of the EAP policy – reflecting its core concepts and values, main principles and elements of the EAP. It is a statement that summarizes the essential elements of the policy for quick and user-friendly reference to the EAP.

5.5.7 Implementation plan

Standard 7

An implementation plan shall outline the actions and schedule needed to establish an operationally effective EAP.

According to EAPA-SA (2005:12-13) the implementation plan should reflect all the essential core technologies of an EAP and should stipulate the required actions, time frame and resources. This plan should be signed off by all stakeholders and reviewed annually during the evaluation process.

Maynard and Farmer (2004:31), in discussing strategies of implementing an EAP, maintain that these steps are of utmost importance in establishing an EAP because it will determine the following:

- Who supports the programme;
- how many employees will use its services and for what type of problems;
- how many supervisors and managers will avail themselves to take advantage of the expertise and assistance put forward by EAP staff;
- what contribution the programme will make to the company's goals.

An implementation plan can spell out the operational schedule of the EAP for a specific time period and therefore give effect to the policy.

5.5.8 Staffing

Standard 8

An appropriate number and suitably qualified EAP professionals shall be available to achieve the stated goals and objectives of the programme.

According to Emener, Yegedis, Hutchison and Richard (2003:52), the EAP co-ordinator needs to possess comprehensive knowledge, proficiency and expertise in:

- dealing with the diagnosis and treatment of alcoholism;
- marriage and family counselling;
- dealing with general emotional problems;
- other typical problems, such as financial and legal troubles;
- conducting basic interviews;
- basic counselling methodologies;
- case management procedures.

As he or she is the hub around which the employee assistance service will be delivered, all these functions must be carried out efficiently and professionally.

Adhering to this proficiency standard is crucial in creating and sustaining a successful EAP. Allocating trained personnel with the right degree of expertise to fulfil multiple roles in running the EAP will ensure legitimacy of the programme, client satisfaction and customised services that will not only add value to the lives of employees, but also enhance overall organisational functioning.

5.5.9 EAP consultation and case management

Standard 9

Every EAP professional who provides services shall be subjected to ongoing consultation and/or case management.

EAPA-SA (2005:14) motivates these standards by stating that EAP professionals have a potentially profound effect on their clients and, via consultation and case management, clients are assured of authentic, quality services. This consultation and case management also help prevent isolation and professional burn-out in the EAP professional, therefore support to EAP professionals is crucial. Although these individuals are trained not to get involved in their cases, it is sometimes very difficult not to. To stay emotionally detached is sometimes not easy, which causes a lot of stress in the professional, which necessitates good support.

Standard 10

The written policy shall include a statement on confidentiality which must be consistent with all professional standards, ethics and legal requirements which regulate the management of information.

While confidentiality is crucial to the success of an EAP, Misretta and Inlow (1991:85-86) caution that this is a difficult legal issue for EAP professionals. There are limitations to confidentiality mandated by statutes in certain states, which exempt the EAP professional from keeping information confidential. These limitations include the following:

- When the purpose of client disclosure is in the furtherance of a crime or fraud;
- when the client has waived the right of privilege;
- when the disclosure relates directly to facts or circumstances of homicide;
- when a lawsuit for malpractice has been filed against the professional;
- when child abuse is being investigated;
- when an individual is posing a serious risk to others.

In all of above cases the laws of that particular state can overrule the privileged information clause and enforce the divulging of the relevant information.

5.5.11 Recordkeeping

Standard 11

The EAP shall maintain records.

According to EAPA-SA (2005:14) the record keeping system needs to capture and maintain records on:

- administrative matters;
- meeting documentation;
- clinical information;
- corporate client information;
- evaluation data;
- marketing and promotional material;

• training material.

This has to be done in order to ensure quality and continuity in the care of patients, e.g. for follow-up and continuity, should a particular EAP professional be unable to continue with a case.

Recordkeeping can also enable the EAP professional to provide important feedback to management on the profile of problems presented for purposes of:

- identifying trends regarding specific problems among workers;
- adapting the planning of programmes;
- monitoring the utilisation and referral of sources.

This type of information can also assist the EAP advisory committee to design and evaluate EAP programmes.

5.5.12 Professional liability insurance

Standard 12

All EAP professionals shall have adequate professional liability insurance.

The nature of EAP work is very sensitive and professionals should create means to protect themselves against legal action by clients alleging malpractice. EAPA-SA (2005:15) indicates that the objective of this standard is to take the precautions necessary to address legal challenges concerning the delivery of services and to sufficiently maintain financial resources to ensure continuation of the programme during and following litigation.

5.5.13 Ethics

Standard 13

EAP professionals shall register and maintain their registration with their respective statutory and/or professional councils and adhere to the codes of practice of such bodies.

Some of the ethical issues relating to EAP practice discussed by White, Sharar and Funk (2001:38); Winegar (2002:56-58) and Caron (2003) include:

- Privacy and confidentiality
- Conflict of interest balancing 'individual client' versus 'organisation'
- Informed consent
- Termination of services does it end when the employee no longer works for the employer?
- Competence of EAP practitioners/contractors/referral resources
- Shift to cost containment/managed care
- Loss of boundaries around employee assistance functions and competencies
- Misrepresentation in marketing/advertising

This standard focuses on the registration with professional bodies, rather than describing what ethical practice means for EAP professionals. The standard would achieve its purpose better if it outlined the ethical issues involved in Employee Assistance Practice.

5.5.14 Direct services

Standard 14

Trauma debriefing

The EAP will offer trauma defusing and trauma debriefing services for employees, family members and the organisation/company.

According to Antai-Ontong (2001:127) trauma or critical incident refers to a powerful and overwhelming event that lies outside the range of usual human experience. It has the potential to exhaust one's normal coping mechanisms, resulting in psychological distress and disruption of natural adaptive functioning. A breakdown in proper mental functioning could easily follow if the affected individual is not able to deal with the psychological demands following this critical incident. Debriefing helps minimize the possibility of staff members misinterpreting their own personal reactions and being vulnerable to post-traumatic stress disorder.

The researcher is of the opinion that trauma intervention is particularly useful in the construction industry where there is a high incidence of trauma or critical incidents, such as personal injuries on duty or experiencing a colleague being seriously injured, which must be properly dealt with as part of the EAP service delivery.

Standard 15

The EAP will offer responsive intervention services for employees, family members and the organisation/company in crisis situations.

According to Roberts (1999:223) a crisis can be defined as a subjective reaction to a stressful life experience that threatens the individual's stability and ability to cope or function; while crisis intervention is the process where the clinician enters as an objective mediator into the life situation of an individual or a family in an attempt to alleviate the impact of the crisis, and to help mobilize the resources of those differentially affected.

5.5.16 Assessment and referral

Standard 16

EAP professional or an assessment service under contract to the organisation/company will:

- Conduct an assessment to identify employee and/or family member and/or organisational problems;
- develop a plan of action; and
- recommend or refer the individual(s) to an appropriate resource or intervention.

According to Googins and Godfrey (1987:128) an assessment is a particularly important function in EAPs where referrals for extended treatment are frequently made. Because the solution to a problem flows from its definition, an erroneously or poorly defined assessment may lead to misguided treatment. EAPs are rarely complete treatment centres and referral mechanisms are necessary to link the programme with external treatment systems to provide employees with appropriate and effective services.

The assessment serves as an entry-level service to determine a solution or plan of action and is the essential first step in the process of EAP case management, which forms part of EAP core technology.

Standard 17

EAP professionals will determine when it may be appropriate to provide short-term intervention services and when to make a referral to community resources.

Taute (2004:22) suggests that short-term therapy is an important approach for EAPs, since it helps the Employee Assistance professionals to provide a cost-effective, time limited therapy to benefit both the employer and employee. The goal should be to restore normal functioning in the quickest, most effective way possible, since the bottom line in the world of work is that time is money.

5.5.18 Monitoring

Standard 18

The process of referral will be reviewed and monitored to ensure progress.

Googins and Godfrey (1987:128) maintain that "monitoring is perhaps the most neglected function within an EAP." Googins and Godfrey further explain that a well-defined mechanism for case monitoring is essential to monitor progress of treatment parallel to work performance, or to identify relapse and recidivism.

Failure to monitor the impact of intervention can impact negatively on the effectiveness of the intervention as a whole.

5.5.19 Follow-up and aftercare

Standard 19

The EAP will ensure that follow-up and aftercare services are provided to EAP clients, supervisors and union representatives.

According to Darick (1999:11) follow-up services are an important aspect of EAP care and may take many forms, depending on the type of referral. The purpose of follow-up services includes:

- Ensuring that the programme remains effective and that the employee is improving as a result of clinical intervention;
- providing feedback to the referring supervisor on compliance and progress;
- supporting the gains made during therapy;
- maintaining the therapeutic relationship between the professional and client until the client feels strong enough to take the next treatment step;
- communicating restored status of employee's work proficiency by the EAP to the employer;
- checking whether the employee who has been referred to longer-term care has in fact been able to access that resource.

The follow-up and aftercare service also forms an essential part of the case management process.

5.5.20 Organisational consultation

Standard 20

The EAP professional will consult with the organisation/company when developments and events, such as retrenchments or mergers, impact on employee well-being and fall within the EAP and the EAP professional's area of expertise.

Blair (2001:36) maintains that, to add value to the organisation/company, the EAP should be positioned as a strategic partner, providing management consultation in order to explain relevant aspects of human behaviour and find solutions to human resource issues.

The function of organisational consultation makes the EAP an organisational resource, rather than just a beneficial 'product'.

5.5.21 Training of managers, supervisors and union representatives

Standard 21

EAP professionals will provide training for supervisors and union representatives in order to give them an understanding of the EAP.

Beidel and Brennan (2006:29-30) maintain that supervisory referrals can provide an effective interface with the job performance and development coaching processes that most

supervisors are expected to perform as part of their job descriptions. Beidel and Brennan also argue that EAP supervisory training provides clear value to individual managers and the organisation in general by ensuring that managers, supervisors and shop stewards are familiar with, understand the dimensions of, and are prepared to fully engage the supervisory referral process and the dynamic EAP consultation process.

An EAP professional should train supervisors on:

- Procedures for referring employees who are experiencing job performance problems;
- The positive impact that the EAP may have on the organisation (EAPA-SA, 2005:20-21).

Training is vital for a successful EAP. The content of training programmes often includes:

- General description of the EAP and the EAP policy
- Information on company policy and procedures
- An explanation of the EAP itself
- Making a referral to the EAP
- The role of the manager/supervisor
- Importance of documentation
- Signs of declining job performance
- Constructive confrontation
- Consultation services for managers/supervisors
- Follow-up and reintegration after the employee returns to work
- Coaching on identifying, confronting and referring an employee with job performance problems (Googins & Godfrey, 1987:126).

The researcher believes that if EAPs prioritise and unite this standard on training together with the next standard on marketing, the EAP will achieve the solid foundation it needs. The acceptance, and to a certain extent, the success of the programme, is dependent on supervisory and labour referrals for assistance. Employees spend more time with their supervisors and union representatives than they do with the EAP, and this opportunity to enhance skills and expertise can be utilised to improve the programme for future use by other employees.

Standard 22

EAP professionals will ensure the availability and use of promotional material and educational activities, which encourage the use of the programme by supervisors, managers, union representatives, peers, employees and family members.

Marketing should be ongoing, realistic, honest, specific and consistent (EAPA-SA, 2005:21). Googins and Godfrey (1987:126-127) state that the EAP should establish methods of calling attention to its services. They go on to indicate that no programme can survive without visibility, recognition and repeated exposure. If peers, union representatives and supervisors do not know about the existence, firstly, and the services, secondly, of an EAP, no referrals can be made. It is not enough to leave marketing up to the word of mouth principle – active marketing has to be done in order to provide the right of existence and freedom of the company to the EAP and its professionals.

Oher (1999:92) mentions that the key to the successful internal marketing plan of an EAP is rooted not only in the knowledge of where the programme currently is, but where the organisation wants it to go. The author continues that the goals and objectives of any EAP marketing campaign can be summarised in five primary areas:

- To increase employees knowledge of the EAP and its services, activities and key components;
- To increase familiarity and comfort with the EAP's operations and to enhance the acceptance and use of the service by employees, managers, labour representatives and the organisation's leadership;
- To increase utilisation of the programme at all levels throughout the organisation;
- To enhance the integration of the EAP within the host or contract organisation, and to promote a feeling of ownership for the programme on the part of the organisation and its managers and employees; and
- To maintain the visibility of the EAP and its presence as a vital contributor to the organisation's productivity and efficiency, and to the well-being and general work life of employees and managers.

The following methods can be used:

- Staff and union meetings;
- leaflets attached to payslips;
- wallet cards;
- induction sessions;
- supervisory training;
- EAP brochures, which should be available in all the languages that are used by employees, so that the literature is accessible to all of them.

5.5.23 Networking

Standard 23

The EAP, being an integral part of the organisation, should network with the various internal departments.

Googins and Godfrey (1987:125) state as follows: "Linkages to relevant organisational units assures two-way communication, as well as functional integration into the culture and operations of the company. Linkages also assist in contributing to the dynamics of the work community, and it can become a vehicle for both the EAP and work groups to better understand one another. This can also assist the organisation to identify and deal with larger systemic problems in a department or corporate division, or in the formulation of company policy."

5.5.24 Networking with external community organisations and resources

Standard 24

The EAP shall identify, utilise and evaluate healthcare delivery systems and community resources which provide quality assistance at an affordable cost for the organisation, employees and their family members.

Rozensky and Wiens (2006:21-23) indicate that many people experience significant stressors, including economic loss, loss of life and family conflict following natural disasters.

There are often barriers in soliciting the support of external community organisations and relevant resources. There are, however, social networks within the family and community that can be accessed for help. It is important for the EAP to understand the needs of communities and the resources that are available. EAPs should also be able to identify alternative sources of assistance. This will be of particular assistance to workers in the construction industry who have to work away from home for long periods, and who might need these resources.

5.5.25 Networking with professional organisations

Standard 25

EAP professionals shall maintain and upgrade their knowledge by belonging to an organisation specifically designed for EAP professionals, attending training and/or professional development programmes and maintaining regular ongoing contact with other EAP professionals.

According to EAPA-SA (2005:24) the criteria for this standard include:

- Membership of EAPA-SA;
- regular attendance of EAP related professional conferences or training programmes;
- active participation in related professional organisations;
- share information about new developments and technologies with others in the field;
- become involved in professional organisations for staff working in the EAP related fields of human resources.

5.5.26 Networking with external agencies

Standard 26

EAP professionals shall be informed and encouraged to network with external bodies which impact on EAP activities.

An EAP staff member is responsible for gathering copies of regulations, laws and rulings in areas relevant to EAP practice, such as:

- confidentiality of records;
- drug testing of clients;
- workers' compensation;
- vocational rehabilitation (EAPA-SA, 2005:25).

Wingate (2006:10) states that while choices for treatment should include specialist intervention, it is vital for the EAP to also have a network of alternative service providers. Employees should always feel comfortable with the professional help that has been provided for and assigned to them – when there is any kind of discomfort, the programme will not produce the required results.

5.5.27 Evaluation

Standard 27

EAP professionals evaluate the appropriateness, cost-effectiveness and efficiency of EAP operational activities.

The goal of this standard is to ensure cost-effective and relevant services to employers and employees and their dependents.

Emener and Yegedis et al. (2003:125) cite six possible reasons for evaluating an EAP:

- Vindication: To illustrate the programme is valuable and to justify the programme's existence.
- Marketing: To convince others that expansion and extension of the programme is worthwhile.
- Verification: Verifying worth and impact are important to a programme's survival.
- Improvement: Analysing facts about a programme cannot only specify strengths and weaknesses, but also suggest their magnitude and overall impact on programme outcomes (results and effects).
- Understanding: Knowledge and understanding of how and why a programme works.
- Accountability: Direct funders insist on holding programmes accountable for producing results.

The evaluation of any EAP should also take into account the ten types of evaluative studies, as researched by Yamatani (1993:65-81):

- Service needs assessment establish the potential number of employees that may need EAP services.
- Compliance or legality assessment determine whether EAPs comply with legal rules and regulations.
- Programme adequacy examine the appropriateness of EAP service availability, usage and utilisation rates.
- External resources an examination of outside agencies used, including the extent and satisfaction.
- Programme effort the need to assess the processes in the implementation of the programme.
- Programme effectiveness an assessment of the extent of change related to interventions.
- Programme benefit equity an assessment of the equitable distribution of services to different population groups.
- Client satisfaction obtaining opinions of clients about services delivered.
- Cost/benefit assessment of programme implementation, costs versus benefits generated.
- Programme constraint analysis identification of sources of programme limitation.

According to Emener, Hutchison and Richard (2003:303-305) programme evaluation data must be analysed for the purpose of programme modification. Evaluating information can provide concrete evidence of the benefits of input by personnel. Programme evaluation can also assist a professional EAP in evaluating and possibly modifying their professional services.

The researcher is of the opinion that the Standards document is very well crafted and lays out in detail the crucial elements of an EAP.

The standards can also assist EAPs in their focus when dealing with the troubled employee, in order to ensure that productivity is not compromised.

The standards can give direction to EAPs in managing work issues according to prescribed guidelines.

The standards can, above all, assist the EAPs to position themselves within an organisation/company to improve the functioning of the workplace.

It can be concluded that the above mentioned guidelines for the development of a model for employment assistance can be utilised to address the well-being needs of employees in the construction industry.

5.6 Chapter summary

This chapter presented practical guidelines based on EAP standards with regard to the development, the implementation and management of an EAP in a construction company.

The final chapter will focus on a summary of the study and final recommendations for further research in this field.

CHAPTER SIX

RESEARCH SUMMARY AND FINAL RECOMMENDATIONS

6.1 Research summary

In conclusion, if employee well-being was only about injury on duty and career performance, it could be said that the workforce is treated like machines. Machines are serviced so that they do not have mechanical failure, and when they do, the nuts and bolts are tightened and replaced.

In the recent past the human factor has moved to the centre stage in the organisational arena. Human resource management is the strategic and coherent approach to the management of an organisation's most valued asset – the people working there, who individually and collectively contribute to the achievement of the business' objectives.

The role that human resource management can play in gaining a competitive advantage for the organisation is empirically well documented. The turbulent business climate, caused by increased global competitiveness, is challenging managers to utilise their employees more effectively to gain competitive advantage.

Organisations that wish to remain competitive in today's rapidly changing global marketplace, need to address the issue of achieving productivity and quality through their employees.

EAPs are grounded in the humanistic paradigms of Western organisational behaviour that organisations have a moral responsibility to come to the aid of an individual employee when he or she is experiencing difficult times. This paradigm emphasized that organisations should meet the needs of their employees in order for them to remain productive and satisfied despite stressful experiences in their work and non-work lives.

The Human Resource field as a whole has made significant contributions to the development of EAPs, and was the line of work where practitioners became involved in looking at EAPs as a profession. Up till 1989 the Institute for Human Resource Management hosted the National EAP Committee, but in 1997 the name was changed to the South African Chapter of the Employee Assistance Professionals Association (EAPA-SA).

Hartley (2006) reinforces that EAPs should be the heart of Human Resource management, whereby managers view the programme as leading them to their success and also to that of

their employees. EAPs have expanded human resource consultation to offer more services to employers.

Employees are not merely to be 'serviced', but they are to be assisted and coached, nurtured and empowered towards becoming who they are meant to be. Managers and human resource practitioners should embrace the opportunity to contribute to the well-being of employees.

The business world at large and South African construction companies in particular are in a strategy crisis. The industry is currently experiencing a critical shortage of qualified as well as experienced engineers and artisans. Companies are challenged to retain employees and their institutional knowledge.

According to Brian Middleton, managing director of SRK Consulting, the problem is that we are not getting the work done, which is exacerbated by a shortage of technical people.

The current position in the company that served as the case study is that, when the services of an engineer or artisan are terminated, either through resignation or retirement, it is very difficult to replace these scarce skills. This puts some additional strain on the remaining employees.

The literature revealed the demanding working environment of the construction industry. It is therefore imperative that construction companies effectively utilise an EAP to retain these scarce skills and to assist employees in the demanding working environment that they have to face on a daily basis. The effectiveness of EAPs for individuals is to improve quality of life and to promote emotional well-being. The benefits of such a programme to employers have been proven in many studies.

The researcher is of the opinion that the advantage of an EAP can be summarised as explained in Fig 6.1.

Figure 6.1 follows

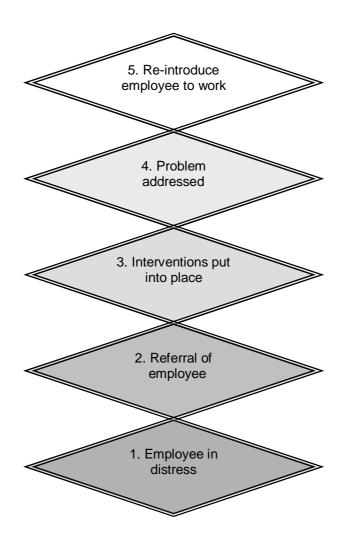


Figure 6.1: The advantage of an EAP in a company

This study was concerned with the determination of well-being in the construction industry. The sample of the study covered all the departments of the company and included engineers and artisans.

Ninety seven percent of employees participating in the study are in favour of an EAP for the company. This response strongly justifies the consideration for an EAP within the company.

6.2 Strategy for introducing and implementing an EAP at the medium-sized construction company where the research was done

6.2.1 Discuss research results with management, the unions and employees in order to gain support and endorsement for the intended EAP. Senior management must support the programme and take it as one of those programmes that, when properly utilised, will assist the company to attain the employer's strategic goal.

The researcher maintains that the company should utilise the EAPA-SA standards as a benchmark for the implementation of an EAP.

The researcher believes that the following standards can play a crucial role in the establishing of an EAP within the company.

- 6.2.2 **EAPA-SA STANDARD (1)** An **Advisory Committee** should be elected to operate at the highest possible level within the company, involving representatives of all segments of the workforce and the union, EAPA-SA (2005:7). The committee will serve as consultant to offer guidance on programme development in accordance to needs that are identified.
- 6.2.3 **EAPA-SA STANDARD (2)** A **Needs Assessment** based on organisational and employee needs should be done as this relate to EAP utilisation. The researcher believes that the problems identified by this study together with the results of a needs assessment will serve to inform the program design.
- 6.2.4 **EAPA-SA STANDARD (5)** The **EAP Policy** should be customised according to the employee's and the company's values, strengths and desires. The EAP policy statement should be made highly visible within the company.
- 6.2.5 **EAPA-SA STANDARD (21) Training** should equip supervisors, managers and union representatives with the requisite knowledge and experience to fulfil their functional roles regarding the EAP in terms of access and utilisation.

Intensive training for supervisors about EAP processes and their role in the application thereof is crucial. Supervisors are essential to the EAP, since they are the first to notice any change in the work performance of an employee, and the early identification of problems is key to the success of an EAP. Supervisors who have insight into the functioning of the EAP and who believe in the benefits of the programme will access the services of the EAP and refer appropriately. The training course offered to supervisors should preferably not be part of a general induction programme, but should be offered separately and in a very practical way. Supervisory training for managers and supervisors should be conducted in a structured manner, at least once or twice a year to educate them about the EAP services, referral procedures, principles of the EAP and to provide feedback on the operation of the programme.

- 6.2.6 **EAPA-SA Standard (22) Marketing**. An extensive and rigorous marketing strategy should be put into place and implemented. Appropriate marketing and promotion of the programme will encourage utilisation of its services. Employees and their families should be informed about the various methods of utilising the EAP, such as self-referral, supervisory referral and referrals by a colleague or family member, as highlighted in the study. This could also provide the reason why a combination of the in-house and off-site EAP model is a viable option for a medium-sized company in the construction industry. Regular information sessions should be arranged and posters put up wherein employees will be assisted on how to deal with whatever problem they may have.
- 6.2.7 **EAPA-SA Standard (3) Service Delivery Models.** The researcher realises that is up to the management and HR of the company to make a decision about the selection of an appropriate model for service delivery. The specific models and combination thereof are explained in chapter two of this research report.
- 6.2.7 **EAPA-SA Standard (7) Implementation Plan.** An implementation plan that outline the schedule and actions of the EAP should be submitted to managers and other role players in the company. The implementation plan should also include a monitoring and evaluation process.
- 6.2.8 EAPA-SA Standard (27) Evaluation. Standard Documents of Employee Assistance Professionals Association prescribe the evaluation of services as a prerequisite for developing an EAP. An evaluation strategy should be implemented as the EAP must be evaluated on a regular basis to determine the effectiveness of the programme. Extensive literature has been reviewed and this confirmed that the evaluation of an EAP is vital to its success.

The researcher believes that the following should also be taken into consideration:

- 6.2.9 A designated budget should be allocated for employee costs, EAP staffing, training, marketing and insurance coverage. EAP personnel will be responsible for financial management and reporting. This financial reporting should be linked to EAP performance and indicators that demonstrate value to the company.
- 6.2.10 Confidentiality: Assurances should be given that all problems handled by the EAP will be treated with the utmost confidentiality. Employees should be informed on how information is recorded and kept within the EAP unit.

- 6.2.11 The EAP should play a vital role during induction in order to prepare employees and their families emotionally for the demanding working environment in the construction industry.
- 6.2.12 The EAP should be introduced to address the profound impact of HIV and AIDS interventions in the construction industry.
- 6.2.13 EAPs should ensure that their target population has access to multidisciplinary services, even if these services are contracted on a need basis.
- 6.2.14 The EAP staff should be located where employees would feel free to consult with them.
- 6.2.15 Those employees who are not willing to use services rendered by the company should be provided with details of alternative service providers who could be contacted. They should, however, be informed of the advantages and disadvantages of using an outside service provider as opposed to the one within the company.

The researcher is of the opinion that the strategy for the implementation and managing of an EAP within the company where the research was done can be summarised as in Fig 6.2.

Figure 6.2 follows

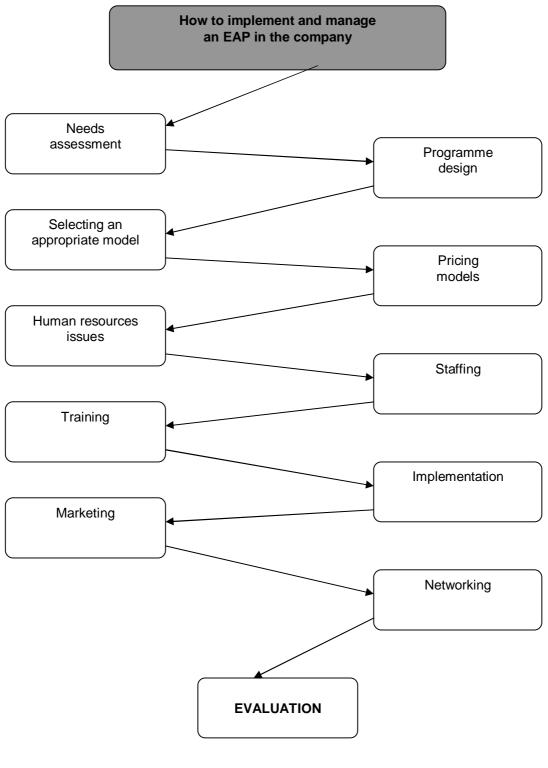


Figure 6.2: Introduction and managing of an EAP in the company

6.3 Duties and responsibilities of the EAP co-ordinator

 Assist in implementing standard operating procedures and practices for EAP service delivery which ensure client confidentiality and timely, ethical service of a high quality;

- ensure effective and confidential record-keeping and data management reporting systems;
- assist in evaluating EAP procedures and outcomes in terms of utilisation, quality of services provided and the attainment of programme objectives;
- co-ordinate and control logistics necessary for implementing training programmes for members;
- assist in the awareness activities for employees and family members;
- co-ordinate monthly feedback to management.

6.4 Quality in EAP delivery

In the International Journal of Mental Health (Vol. 34, 2005:37-54) Daniels, Teems and Carroll suggested ten rules to ensure quality in the delivery of EAPs. These ten rules were developed as a first step towards ensuring that quality standards are assured in the field of delivering EAPs in the USA. They are briefly discussed below and should serve as service delivery standards for the EAP in the company.

Rule 1: Care is based on continuously healing relationships

EAP clients receive services whenever and wherever they need them. Services are offered in many forms, including face-to-face counselling, via the Internet or telephonically. Another critical component of this rule is the idea that EAPs have ongoing and regular follow-up with clients and providers.

Rule 2: Customisation is based on client/company needs and values

EAPs are designed to meet the most common types of needs, as well as the capacity to respond to individual client and company choices and preferences. Clinical interventions, as well as all other services provided by EAPs, are customised according to the client's and company's values, strengths and desires.

Rule 3: The client/organisation is the source of control

Clients/organisations have the necessary information they need to make decisions about EAP interventions and services that impact on them. This rule also suggests that EAPs have ongoing associations with various units within the organisation that could impact on the programme or clients.

Rule 4: Shared knowledge and the free flow of information are necessary

It is essential for clients/organisations, in order to be able to make their own decisions about their care, that they have access to information about their situation and possible interventions, consequences of choices and other information. This is not a regular practice in EAPs. It is incumbent on EAP practitioners to educate clients about their record content and to implement the proper policies and procedures to assure confidentiality. However, the EAP cannot hide behind confidentiality when a work organisation must have information that impacts on the well-being of its workforce.

Rule 5: Decision-making is evidence based

Clients/organisations receive services based on the best available scientific knowledge. Services do not vary from practitioner to practitioner or from location to location. EAPs make referrals to services that are also evidence based.

Rule 6: Safety is a system priority

Clients/organisations receive services that are emotionally and physically safe. This requires that EAPs be compassionate, caring and trusting. EAPs also pay great attention to systems and processes that ensure safety and prevent errors.

Rule 7: There is need for transparency in all aspects of EAP delivery

Clients/organisations understand that all facets of EAP operations are transparent. While services are transparent, this is balanced with the need to protect sensitive client information to the greatest extent possible. By providing information about the performance of EAPs and their referral resources, clients and companies are better able to make decisions about using the services and choosing among alternative interventions.

Rule 8: Needs are anticipated

Implicit in this rule is the idea that EAPs carefully plan their services and that these plans are based on dialogue and observation about needs and desires of clients and organisations. EAPs are typically good at reacting to events; now the field must develop the ability to anticipate what these events might be.

Rule 9: The reduction of waste is ongoing

One challenge for the EAP field is to develop basic performance measures around timeliness, availability, staffing requirements and other indicators of successful programme access. Minimising waste must become an important lens through which EAPs operate, particularly in a larger environment of shrinking resources. Interventions, outreach efforts, training and other programme components will be conducted in ways that do not waste the resources (including time) of EAP staff, those serviced by EAPs and those supporting and hosting EAPs.

Rule 10: Co-operation among professionals is a priority

There is active collaboration and communication between clinicians, practitioners and outside programmes to ensure that information is appropriately exchanged and care is coordinated. This rule implies that EAPs have good working relationships with all those involved in the provision of client care. In the EAP environment, collaboration may also involve managers, supervisors, unions and other that assist clients with getting care.

6.5 Barriers with regard to the implementation of an EAP

A huge barrier will be a designated budget for the EAP. A proposal with emphasis on how the company can benefit from an EAP will be presented to senior management in order to get their support. A recommendation will also be made to training institutions to incorporate the EAP into their curriculums in order for managers to be informed about how the EAP can make a difference in the management of employees.

6.6 Limitations

The literature review revealed that very limited research had been done on the utilisation of an EAP within the construction industry. The study was limited to the Western Cape region of South Africa. A single construction company was selected for the case study.

It is strongly recommended that this study be repeated with a larger sample of participants. More information will be needed to effectively incorporate an EAP into the company's strategy of getting and keeping healthy, happy employees. This study, however, forms the base on which a detailed study can be executed, especially among the bigger construction companies. This study includes guidelines for a model of employment assistance for the construction industry in the South African context. However, this model is not nearly exhaustive in theory or application and future research could include the growth and intensification of this important aspect of well-being.

The recommendations need to be implemented with caution as the current study remains limited in terms of generalisation and population validity.

Apart from future research proposed, it is hoped that this study will add valuable research material to the limited literature available on the topic. It is also envisaged that the research findings will be utilised by construction companies. The implementation of an EAP within the construction industry can play a magnificent role in managing the well-being problems of employees.

6.7 Conclusion regarding the objectives of the study

The objectives of the study were:

- To ascertain the well-being problems of employees in the construction industry.
- To make recommendations with regard to a theoretical model of assistance to deal with the well-being problems of employees in a construction company.

The researcher has been able to meet the objectives of the study in that:

- The well-being problems of the employees had been identified;
- the perceptions with regard to the implementation of an EAP by employees had also been determined;
- recommendations were provided regarding guidelines for the implementation of an EAP in a construction company.

6.8 Chapter summary

This is the chapter that ends this dissertation by summarising the conclusions that were drawn from the literature review and the empirical study. The goals and objectives set by the researcher were reached. The study successfully explored and scientifically described the most common well-being problems of employees in a medium-sized construction company. Guidelines for the implementation of a model for employment assistance have also been provided as a result of knowledge gained through this study.

LIST OF REFERENCES

Anderson, R.C. 1999. *Promoting Employee Health: A Guide for Worksite Wellness*. 2nd ed. Chicago: American Society of Safety Engineers.

Antai-Ontong, D. 2001. Critical Incident Stress Debriefing: A health promotion model for workplace violence. *Perspectives in Psychiatric Care*, Vol. 37(4):125-139.

Arnett, J.J. 2006. *Emerging adulthood: the winding road from late teens through the twenties.* New York: Oxford University Press.

Babbie, E. & Mouton, J. 2001. *The Practice of Social Research.* Cape Town: Oxford University Press Southern Africa.

Babbie, E. & Mouton, J. 2004. *The Practice of Social Research.* Cape Town: Oxford University Press Southern Africa.

Bailey, K.D. 1982. *Methods of Social research*. 2nd edition. New York: The Free Press. Bailey, K. & Leland, K. 2006. *Watercooler wisdom: how smart people prosper in the face of conflict, pressure and change*. Oakland: New Harbinger Publications.

Barak, M.E.M. & Bargal, D. 2000. Social Services in the Workplace: Repositioning Occupational Social work in the New Millenium. New York: Haworth.

Basic Conditions of Employment Act, Act 75 of 1997.

Beidel, B. & Brennen, K. 2005. *Health, Wellness and Productivity: Best Practice Requires EAP Involvement.* EAPA International, 35:36.

Beidel, B. & Brennan, K. 2006. Supervisory Referrals: Always a best practice. *Journal of Employee Assistance*, 36(3):29-30.

Bennet, J.B. & Attridge, M. 2008. Adding prevention to the EAP core technology. *Journal of Employee Assistance*, 38(4):4-6.

Berk, L.E. 2007. *Development through the lifespan.* 4th ed. Boston: Allyn and Bacon. Berman, P.S., Sulsky, L., Pargament, K., Balzer, W.K. & Kausch, D. 1991. *The Role of Needs Assessment in the design of Employee Assistance Programs: A Case Study.* Employee Assistance Quarterly, 6(3):21-35.

Blair, B. 2002. Providing Added Value to Employers. *EAPA Exchange*, (32):21-23 March/April 2002.

Bless, C. & Higson-Smith, C. 1995. *Fundamentals of Social Research Methods, an African Perspective.* 2nd ed. Kenwyn: Juta & Co. Ltd.

Bless, C., Higson-Smith, C. & Kagee, A. 2000. *Fundamentals of Social Research Methods, an African Perspective.* 3rd ed. Cape Town: Juta.

Bless, C., Higson-Smith, C. & Kagee, A. 2006. *Fundamentals of Social Research Methods, an African Perspective.* 4th ed. Cape Town: Juta.

Blum, T.C. & Bennet, N. 1990. Employee assistance programs: Utilisation and referral data, performance management and prevention concepts. In: Roman, P.M. (ed.) *Alcohol problem intervention in the workplace: employee assistance programs and strategic alternative,* 143-162. Quorum Press: Westpoint, CN.

Bodie, M. & Estreicher, S. 2007. *Workplace discrimination, privacy and security in an age of terrorism.* New York: Book-Aspen.

Boxall, P. & Purcell, J. 2008. *Strategy and Human Resource Management.* 2nd ed. New York: Palgrave Macmillan.

Bradman, L.H. 1999. Apples to Apples. *Journal of Employee Assistance*, 33(3):7.New York: Quoram Books.

Brewerton, P. & Millward, L. 2001. Organisational Research Methods – A guide for Students and Researchers. London: Sage Publications.

Brewster, C., Carey, L., Dowling, P., Grobler, P., Holland, P. & Warnich, S. 2003. Towards a 'European' model of Human resource management. *Journal of International Business Studies*, 25(3).

Bruce, W.M. 1990. Problem Employee Management: Protective Strategies for Human Resource Management. Library of Congress.

Brynard, P.A. & Hanekom, S.X. 1997. *Introduction to research in Public Administration*. Pretoria: Van Schaik Publishers.

Brynard, P.A. & Hanekom, S.X. 2006. Introduction to research in Management Related

Fields. 2nd ed. Pretoria: Van Schaik Publishers.

Burgess, K.M. 2001. *The Employee Assistance Program: An Appropriate Model for Supporting Expatriates and their families overseas.* 8th Asia Conference, 3-5 Dec 2001. Taipei.

Burke, J. 2004. Defining the business of EAPs. *Journal of Employee Assistance*, 34(4), 24-28.

Burke, J. & Sharar, D.A. 2009. Do "free" EAPs offer discernible value? *Journal of Employee Assistance*, 39(3):6-9. Volume 39, Number 3, 6-9. 2009.

Burns, N. & Grove, S.K. 2003. *Understanding nursing research.* 3rd ed. Philadelphia: W.B. Saunders Company.

Cagney, T. 1999. Models of Service Delivery. In Oher, J.M. (ed.) *The Employee Assistance Handbook.* Wiley & Sons.

Campbell, D. & Graham, M. 1988. *Drugs and Alcohol in the Workplace – A Guide for Managers.* New York: Facts of file Publications.

Caron, C. 2003. Ethics in EAP Practice. EAPA Exchange, 1(1).

Coble, R.J. & Haupt, T.C. 2000. *The Management of Construction Safety and Health.* Rotterdam: Balkema.

Compensation for Occupational Injuries and Diseases Act, Act 130 of 1993.

Construction Industry Development Board – Health and Safety Report. 2007-2008. Construction Project Management. Published by: The Chartered Institute of Building. *Asia Pacific Building and Construction Management Journal*, 2000. 3rd ed.

Cooper, C.L., Dewe, P. & O'Driskoll, M. 2003. Employee Assistance Programs. In Quick, J.C. & Tetrick, L.E. *Handbook of Occupational Healthy Psychology. (Eds.)* Washington DC: American Psychological Association.

Covin, T. & Bush, T. 1993. Attitudes toward work-family issues: the Human Resource Professional Perspective. *Review of Business Journal*, Vol. 15 (2), 25-29.

Creswell, J.W. 1998. *Qualitative Inquiry & Research Design. Choosing among five Traditions.* Thousand Oaks: Sage Publications.

Creswell, J.W. 2005. *Qualitative Inquiry & Research Design.* 2nd ed. Thousand Oaks: Sage Publications.

Crous, E. 2008. *Employee financial wellness: A corporate social responsibility.* South Africa. Published by GTZ Centre for Cooperation with the Private Sector/PPP.

Cunningham, G. 1994. Effective Employee Assistance Programs for EAP Counsellors and Managers. California: Sage Publications.

Curran, J. & Blackburn, R. 2001. *Researching the small enterprise*. London: Sage Publications.

Cushway, B. 1999. *Human Resource Management.* Published in association with PriceWaterhouseCoopers.

Daft, R.L. 2008. *New Era of Management.* Second Edition, New York: Thomson South-Western Corporation, USA.

Daniels, A.S., Teems, L., & Carroll, C.D. 2005. Transforming Employee Assistance Programs by Crossing the Quality Chasm. *International Journal of Mental Health* Vol 34(1): 37-54.

Darick, A.A. 1999. Clinical Practices and Procedures. In Oher, J.M. (ed.) *The Employee Assistance Handbook*. Wiley & Sons.

Debt Collectors Act, Act 114 of 1998.

Denzin, N.K. & Lincoln, Y.S. 1998. *Collecting and Interpreting Qualitative Materials*. New York: Sage Publishers.

Department of Labour, Annual report 2008.

De Vos, A.S. 2002. Intervention Research. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. 2002. *Research at grass roots: for the Social Science and Human Service Professions*. 2nd ed. Pretoria: Van Schaik.

De Vos, A.S. 2005. *Research at grass roots: for the Social Science and Human Service Professions.* 3rd ed. Pretoria: Van Schaik.

Dickman, J.F., Emener, W.G., Hutchison, W.S. (Jnr). 1984. *Counselling the Troubled Persons in Industry: A Guide to the Organizational Implementation, Evaluation of Employee Assistance Programs.* Springfield: Charles Thomas. Dickman, J.F. 2003. Ingredients of an Effective EAP in Employee Assistance Programs: Wellness/Enhancement Programming.

Domestic Violence Act, Act 116 of 1998.

Dong, X., Men, Y. & Haile, E. 2005. *Work-related fatal and nonfatal injuries among U.S. construction workers, 1992-2003.* CPWR.

Du Plessis, A.W. 1991. A society in transition: EAPs in South Africa. *EAP Digest,* March/April, 35-58.

EHS Today. 2006. The magazine for Environmental, Health and Safety Leaders. *South Africa's Construction Industry Moves to Improve Safety Performance*.

Emener, W.G., Yegedis, B.L., Hutchison, W.S. & Richard, M.A. 2003. *Employee Assistance Programmes: Wellness/Enhancement Programming.* 3rd ed. Illinois:Charles C. Thomas Publishers.

Employee Assistance Professionals Association. 1990.

Employee Assistance Professionals Association. 1992. EAPA Standards for Employee Assistance Programs, Part 11: Professional Guidelines. USA: The Employee Assistance Professionals Association, Incorporated.

EAP-SA, 1999. Standards for Employee Assistance Programmes in South Africa. Standard Committee of EAPA -SA.

Employee Assistance Professionals Association South Africa Chapter. 2005. *Standards for employee assistance programmes in South Africa.* Johannesburg: EAPA-SA. Employment Equity Act, Act 55 of 1998.

Erfurt, J. & Foote, A. 1977. Preventing Workplace Substance Abuse. Beyond Drug Testing to Wellness. *Institute of Labour and Industrial Relations.* The University of Michigan, 1977. Evian, C. 2000. *Primary AIDS Care.* 3rd ed. Durban: Jacana Education.

Fauria, T.M. 2009. *Commodity or craft: the choice is ours.* Journal of Employee Assistance, 39(3):13-15.

Federated Employees Mutual Association, Annual report 2009.

Fisher, J., Katz, L-A., Miller, K., & Thatcher, A. 2003. South Africa at Work:

Applying Psychology to Organisations. Johannesburg: Witwatersrand University Press.

Fleisher, D. & Kaplan, B.H. 1988. Employee Assistance Counselling Typologies. In Gould, G.M. & Smith, M.L. Social Work in the Workplace: Practice and Principles. New York:

Springer Publishing Company.

Fouché, C.B. 2002. Problem formulation. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at Grass Roots for the Social Science and Human Service Professions.* 2nd ed. Pretoria: J.L. van Schaik.

Fouché, C.B. & Delport, C.S.I. 2005. *Research at Grass Roots for the Social Science and Human Service Professions*. 3rd ed. Pretoria: J.L. van Schaik Publishers.

Fourie, P. & Schonteich, M. 2002. Die, the beloved countries: human security and HIV/AIDS in Africa. *Politeia*, 21(2):6–30.

Franklin, L. 2003. *An Introduction to workplace Counselling. A Practical Guide.* New York: Palgrave Macmillan.

Frost, A.K. 1990. Assessing Employees' Awareness: A first step to Utilisation Employee Assistance. *Journal of Employee Assistance*, Vol. 6 (1):45-54.

Gauteng Provincial Government. Department of Social Development. 2005. (O) Available: <u>Htpp://www.gssc.gpg.za/brandstatement.htm.</u>

Gerber, P.D., Nel, P.S. & Van Dyk, P.S. 1993. *Human Resources Management.* 2nd ed. Halfway House: Southern Books.

Goldstein, T.F. 1997. Employee assistance programmes. *Journal of Compensation and Benefits*, 13(2), September/October: 23-26.

Googins, B & Godfrey, J. 1987. *Occupational Social Work*. New Jersey: Prentice Hall, Inc. Goss, D. 1994. *Principles of Human Resource Management*. London: Routledge Publishers Inc.

Gottfredson, G.D. & Duffy, R.D. 2008. Using a theory of vocational personalities and work environments to explore subjective well-being. *Journal of Career Assessment*, 16(1):44-59. Gould, G.M. & Smith, M.L. 1988. *Social Work in the Workplace: Practise and Principles.* New York: Springer Publishing Company.

Grinnell Jr, R.M. 1997. Social Work Research and Evaluation: Quantitative and Qualitative

Approaches. Illinois: F.E. Peacock Publishers Inc.

Grissom, R.G., Baldadian, K.C. & Swisher, J.D. 1988. The Case of Needs Assessment: A Study in Three Disparate Work Settings. *Employee Assistance Quarterly*, 4(2):75-82. Guillemin, M. & Gillam, L. 2004. Ethics, Reflexibility and "Ethically Important Moments" in *Research Qualitative Inquiry*. April 2004, Vol. 10: 261-280. Mansholt Publication Series. Hackett, P. 1979. *Success in Management Personnel*. Publication info: London AbeBooks.co.uk. Published by John Murray, 1979.

Harden, J.M., Omdahl, F. & Omdahl, B.L. 2006. *Problematic Relationships in the Workplace*. New York: Peter Lang.

Harper, T. & Maiden, P.R. 1999. *Employee Assistance Services in the new South Africa*. New York: Haworth Press.

Harrison, R. 1994. *Human Resource Management.* Published by John Storey (Ed.) London and New York. Routledge.

Hartley, M. 2006. Be Proactive, Not Reactive. *The Journal of Employee Assistance, Quarterly*, 2(4):36-42.

Hartwell, T.D., Steele, P., French, M.T., Potter, F.J., Rodman, N.F. & Zarkin, G.A. 1996. Aiding troubled employees: The prevalence, cost and characteristics of employee assistance programs in the United States. *American Journal of Public Health,* 86:804–808. Harvard Business Review No. 90085: *Managing with people in mind.*

Haupt, T.C. 2001. The Performance Approach to Construction Worker Safety and Health. PhD Dissertation, University of Florida.

Haupt, T.C. & Smallwood, J. 2004. HIV and AIDS in SA construction: attitudes and perceptions of workers. *Journal of Construction Research*, 5(2):311-327.

Haupt, T.C., Smallwood, J.J. & Chileshe, N. 2005. Aspects of HIV and AIDS Interventions within the South African Construction Industry. In: Smallwood, J.J. & Haupt, T.C. (eds). CIB WW99 Working Commission, 4th Triennial International Conference: Rethinking and Revitalizing Construction Safety, Health, Environment and Quality. Port Elizabeth, South Africa, May 17-20, 2005. pp. 267-280.

Haupt, T.C., Chileshe, N., & Miller, S. 2005. Report on Construction Management and Civil Engineering Education at Universities of Technology, Working Report 0205. Southern African Built Environment Centre ETDP-SETA and Cape Peninsula University of Technology.

Health and Safety Statistics, 2007/2008 *Health and Safety Executive Journal*. Herlihy, P.A. 2002. Employee Assistance and World/Life Core Technologies. *EAPA Exchange*, 32 (5), 10 -13. IAEAPE: Member Publication.

Hinze, W.J. 2006. Analysis of construction worker injuries that do not result in lost time. *Journal of Construction Engineering & Management* Mar 2006, Vol.132, Issue 3:321-26. Hinze, W.J. & Olbina, S. 2008. Problem areas in personal fall protection. In

Hinze, J., Bohner, S. & Lew, J. (eds). *Proceedings of CIB W99, 14th Rinker International Conference*, Mar 2008, Gainesville, FL, pp. 406-18.

Hooper, M. 2004. Employee Wellbeing: A hard Issue. *People Dynamics Magazine, 22 (2), 10-12* March.

Hoskinson, L. & Reddy, M. 1989. Counselling in UK Organisations: An ICAS Report. Milton Keynes: Independent Counselling and Advisory Service.

http://www.powergrp.co.za/press mar06.htm: Power Group of Companies, Annual Report 2006.

International Conference: 2004. *Evolution of and directions in construction safety and health.* Gainsville, F.L.:456-642.

Jackson, S.E. 2000. *Managing Human Resources – A Partnership Perspective.* Seventh Edition, Cincinati: South Western Cengage Learning.

Jahoda, M. 1982. *Employment and Unemployment: A Social-Psychological Analysis*. Cambridge University Department of Social and Political Science, 1997: Cambridge University Press.

Johnson, J.V. & Hall, E.M. Job Strain, 1988. Work Place Social Support and Cardiovascular Disease: A Cross-Sectional Study of a Random Sample of the Swedish Working Population. *American Journal of Public Health*: 78(10):1336-1342.

Kirk, J., & Miller, M.L. 1986. Reliability and validity in qualitative research. Beverly Hills:

Sage Publications.

Kirk, A.K. & Brown, D.F. 2003. Employee assistance programs: A review of the management of stress and wellbeing through workplace counselling and consulting. *Australian Psychologist*, 38(2):138-143.

Klarreich, S.H & Jones, C.R. 1985. *The Human Resource Management Handbook*. Greenwood Press.

Koehn, E. and Reddy, S. (1999) Safety and construction in India, in Singh, A., Hinze, J. and Coble, R.J. (eds) *Proceedings of the 2nd International Conference of CIB Working Commission W99, Implementation of Safety and Healthon Construction Sites,* Honolulu, Hawaii, Taylor & Francis, Lisbon, Portugal, pp. 39–44.

Kossek, E.E. & Ozeki, C. 1998. Work-family conflict, policies, and the job-life satisfaction relationship: A review and directions for organizational behavior – Human Resources research. *Journal of Applied Psychology*, 83(2):139–149.

Kunnes, R. 1993. Internal EAPs and External Case Manager. Getting the best from both. *EAP Digest*, 13(2) January/February:25-37.

Kurzman, P.A. 1993. Employee Assistance Programs: Towards a comprehensive Service Model. In Kurzman, P.A. & Akabas, S.H. *Work and Well-being: the Occupational Social Work Advantage*. Washington D.C.: NASW Press.

Kvale, S. 2007. *Doing Interviews. The SAGE Qualitative Research Kit.* 1st ed. London: SAGE Publications.

Labour Relations Act, Act 66 of 1995: The Code of Good Practice.

Labour Relations Act, Act 66 of 1995: Incapacity.

Leedy, P.D. 1993. *Practical research: Planning and design*, 5th ed. New York: Macmillan. Lowe, G. 2004. Creating healthy, productive organizations. 2nd Quarter. *Journal of Employee Assistance*.

Mahlahlane, C. 2003. The Factors Influencing Supervisory Referrals to the Employee Assistance Programme in Telkom Pretoria. *Unpublished MSD (EAP) dissertation*. University of Pretoria. Prof L.S. Terblanche, January, 2003.

Maiden, R.P. 1992. *Employee Assistance Programs in the New South Africa.* New York: The Haworth Press Inc.

Maiden, R.P. (ed). 1999. *Employee Assistance Programs in the New South Africa*. New York: The Haworth Press Inc.

Marshall, C. & Rossman, G.B. 1989. *Designing qualitative research.* Newbury Park: Sage. Martinez, M. 1997. The proof is in the profits: Why top companies now view family-friendly policies as a competitive tool. *Working Mother*, May 1997.

Masi, D.A. 1992. Employee Assistance Programs. In Masi, D.A. (ed). The Amalgamated Handbook for Employee Assistance and Counselling Programs. New York: American Management Association.

Masi, D.A. 1992. The AMA Handbook for Developing Employee Assistance and Counselling Programs. AMACOM, USA.

Masi, D.A. 2000. International Employee Assistance Anthology. 2nd ed. Washington: Dallen Inc.

Masi, D.A., Freedman, M., Jacobson, J.M. & Back-Tamburo, M. 2002. *Utilisation factors and outcomes for EAP and work-life programs: Comparing face-to-face, telephone and online services experiences.* College Park, MD: University of Maryland.

Mathis, R.L. & Jackson, J.H. 1999. *Human Resource Management – Essential Perspectives*. Cengage Learning, EMEA (2005).

Matlala, S. 1999. Prioritising health promotion and employee wellness. *People Dynamics* 17(6):22-25.

Maynard, J.B. 2004. Maintaining our Heart. Journal of Employee Assistance, 34 – 36.

Maynard, J.B. & Farmer, J.L. 2004. Strategies of Implementing an EAP. In Klarreich, S.H., Francek, J.L. & Moore, C.E. The Human resource Management Handbook. New York: Praeger Publishers.

McBurney, D.H. 2001. Research methods. 3rd ed. Brooks/Cole. 1994:119-140. Wakefield. McKenna, E. & Beech, N. 1995. *The Essence of Human Resource Management. International Educational Manual.* London: Prentice Hall. Medical Scheme Act, Act 131 of 1998. Mertens, D.M. & Ginsberg, P.E. 2009. *The handbook of Social Research Ethics.* Sage Publications.

Meyer, T.N.A & Italia, B. 2004. *Building Human Capital: South African Perspectives*. International Investment Perspectives, OECO Publishing.

Miles, M.B. & Huberman, A.M. 1994. *Qualitative data analysis: an expanded sourcebook.* Thousand Oaks: Sage Publications.

Miller, R.E. 1992. Employee Assistance Programme providers as wellness resources: A review of major EAP providers. *Wellness Perspectives*, 8(4):68. EAP Quarterly, Volume 10, 1995.

Misretta, F.M. & Inlow, L.B. 1991. Confidentiality and the Employee Assistance Program Professional. *American Association of Occupational Health Journal*, 39(2):84-86.

Moss, E.L. 2002. Employee Assistance Programmes: Valuable benefit, liability concern. *Research Quarterly*,15(11), July: 10-11.

Mouton, J. 1996. Understanding social research. Pretoria: J.L. van Schaik.

Mouton, J., Muller, J., Franks, P. & Sono, T. 1998. *Theory and method in South African Human Sciences Research: Advances and innovations.* Pretoria: Human Sciences Research Council.

Mouton, J. 2001. *How to succeed in your Masters & Doctoral Studies - A South African Guide.* Pretoria: Van Schaik.

Myers, D.W. 1984. *Establishing and building Employee Assistance Programs*. London: Quorum Books.

Nel, P.S. 2008. *Human Resource Management.* 7th ed. Pretoria: Oxford University Press. Neuman, W.L. 2006. *Social research methods.* Boston: Pearson.

New dictionary of Social work. 1995. Revised and Comprehensive edition. Terminology Committee for Social work. Pretoria: Government Printers.

Newell, S. 2002. Creating the Healthy Organisation – Well-being, diversity & ethics at work. Ntsamai, N.M. 1991. *Mental Health in the Workplace*. In Social Work Practice (1991): 1 p. 19-21 March.

Occupational Health and Safety Act, Act 85 of 1993.

Oher, J.M. 1999. *Employee Assistance Handbook*. New York: Wiley and Sons. Ohio State University, 2009. <u>www.osu.edu</u>

Oswald, A.J. & Blanchflower, D.G. 2004. Well-being over time in Britain and the USA. *Journal of Public Economics* (88):1359-1386.

Pervin, L.A. 1984. Personality. New York: Wiley.

Phillips, B.D. 2005. Gender and disasters. *Journal of Employee Assistance*, 35(2):25-27. Phillips, D.A. & Older, H.J. 1988. Models of Service Delivery. In Dickman, F.,

Challenger, B.R., Emener, W.G. & Hutchison, W.S. Employee Assistance Programme.

Illinois: Charles C. Thomas Publishers. Pillay, K. & Haupt, T.C. 2008. The Cost of Construction Accidents: An Exploratory Study. In Hinze, J., Bohner, S. & Lew, J. (eds). Proceedings of CIB W99 14th Rinker International Conference. Evolution of and developments in construction safety and health (pp. 433 – 444). Gainesville, Florida: M.E. Rinker, Sr. School of Building Construction.

Poggenpoel, M. 1998. Data analysis in qualitative research. In De Vos, A.S. (ed).

Research at grass roots: a primer for the caring professions. Pretoria: Van Schaik. pp. 334-353.

Prevention and Treatment of Drug Dependency Amendment Act, Act 14 of 1999. Price, A. 2000. Human Resource Management in a Business Context. 2nd Edition. London: Thomson Learning.

Prilleltensky, I. & Prilleltensky, O. 2007. Webs of well-being: the interdependence of personal, relational, organisational and communal well-being. Basingstoke and New York: Palgrave MacMillan.

Ramanathan, C.S. 1992. Stress and job satisfaction: Implications for occupational social work. *Employee Assistance Quarterly*, 6(2):27-39.

Rwamamara, R.A. & Holzmann, P. 2005. The Healthy Construction Workplace: Best Practices for the reduction of WMSDs among Swedish Construction workers. *Licentiate Thesis*, Luleå Technology University, Sweden. 2 Impasse De La Rade, F -06300 Nice,

France.

Roberts, A.R. 1999. Crisis Management and Brief Treatment. Theory, Technique and Applications. Chicago: Nelson-Hall Publishers.

Robertson, J. 2006. Counsel stress at the heart. Employee benefits. Available at: <u>http://www.employee</u> benefits.co.UK.

Rowlinson, S., Langford, D. & Sawacha, E. 2000. Safety behaviour and safety management: Its influence on the attitudes of workers in the UK construction industry. *Engineering Construction and Architectural Management*. Volume 7, Issue 2, June 2000. Rozensky, R.H. & Wiens, B.A. 2006. Assisting rural employees, following critical events. *Journal of Employee Assistance*, 36(2):21-23.

Ruiz, G. 2006. Expanded EAPs lend a hand to employers' bottom lines. *Workforce Management,* Journal of Occupational Behaviour, Washington DC: American Psychological Association. 85(1):46-47.

Ryff, C.D & Singer, B. 1998. *The contours of positive human health.* Oxford University Press.

Safety Conference Report. Sydney, Australia. October 2009. Ian Woods, Senior Research Analyst, AMP Capital Investors.

Safety World. Your role in an Employee Assistance Program.

htpp://www.safetyworld.com/Flbook-3-13 [2006].

Saunders, M., Lewis, P. & Thornhill, A. 2007. *Research Methods for Business Students.* Harlow: Prentice Hall.

Schular, R.W. & Jackson, S.E. 2006. *Human Resource Management – International Perspectives.*

Schurink, W.J., Schurink, E.M. & Poggenpoel, M. 1998. Focus Group Interviewing and Audio-Visual Methodology in Qualitative Research. In De Vos, A.S. (ed). Research at Grass Roots: A Primer for the Caring Professions. Pretoria: JL van Schaik Publishers. Sekaran, U. 1984. *Research methods for managers: a skill-building approach.* New York: Wiley, Chichester.

Shakantu, M.W., Haupt, T.C. & Tookey, E.J. 2006. Construction Automation and Robotics: Their contribution to improved Health and safety on Construction Sites. In Haupt, T.C. & Smallwood, J.J. CREATE (eds). *Proceedings 3rd South African Construction Health and Safety Conference: A team approach to Construction Health and Safety.* Cape Town, South Africa. 7-9 May. Port Elizabeth. pp. 142-150.

Silverman, D. 2005. *Doing qualitative research: a practical handbook.* 2nd ed. London: SAGE.

Simelane, S.N. 2007. Perceptions of supervisors regarding their referral role within the Employee Assistance Programme. Pretoria: University of Pretoria. (MSD *Mini Dissertation*). Singleton, R., Straits, B.C., Straits, M.M. & McAllistair, R.J. 1998. *Approaches to Social Research*. New York: Oxford University Press.

Sisson, K. & Storey, J. 2002. *The Realities of Human Resource Management – Managing the Employment Relationship*. Buckingham: Open University Press. Skills Development Act, Act 97 of 1998.

SKR Consulting Engineers and Scientists. *An Introduction to Mining business Improvement Initiatives- Mapping the Steps to Increased Profits*, Minex Conference, 2009.

Smallwood, J.J. 2000. A study of the relationship between Occupational Health and Safety, Labour Productivity and Quality in the South African Construction Industry, *Unpublished PhD (Construction Management) thesis*, University of Port Elizabeth].

Smallwood, J.J. 2000. Environmental practices in construction. Proceedings of International Conference Sustainable Building 2000, Maastricht, The Netherlands, 22 – 25 October, 198 –200.

Smallwood, J.J. 2004. The Influence of Clients on Contractor Health and safety (HEALTH AND SAFETY). In *Proceedings of the ARCOM 2004 Conference*, vol. 2, Edinburgh, United Kingdom, 1–3 September, edited by Khosrowshahi, F. ARCOM, Reading, pp. 1 095-1 105.

Snyder, C.R. & Lopez, S.J. 2002. *Handbook of Positive Psychology.* Oxford University Press.

South African Constitution, Act 108 of 1996.

Sparrow, P.R. & Cooper, C.L. 2003. The Employment Relationship – Key Challenges for HR. London: Buttworth- Heinemann, 2003.

Stake, R.E. 1995. The art of case study research. London: Sage.

Standards Committee of EAPA-SA. *Standards for Employee Assistance Programmes in South Africa.* Hatfield, Pretoria: Visual Media.

Stewart, G.L. & Brown, K.G. 2009. Human Resource Management – Linking Strategy to Practice. New York: John Wiley.

Stoer-Scaggs, L. 1990. Employee Assistance Quarterly 6 (No. 1): 67-73.

Stoer-Scaggs, L. 1999. Employee Assistance Programs in Higher Education. In Oher, J.M. (ed). *The Employee Assistance Handbook*. New York: Wiley & Sons.

Strassman, W.P. 1975. Building technology and employment in the housing sector of developing countries. Michigan State University, East Lansing.

Straussner, S.L. 1990. *Helping Troubled Employees: An analysis of selected Employee Assistance Programmes under Management Auspices.* New York: The Haworth Press Inc. Straussner, S.L.A. (ed). 2001. *Ethnocultural Factors in the Treatment of Addictions.* New York: Guilford.

Streubert, H.J. 2002. *Qualitative Research in Nursing: Advancing the Humanistic Imperative*. London: Lippincott Williams & Wilkins.

Streubert-Speziale, H.J. & Carpenter, D.R. 2003. *Qualitative research in nursing: Advancing the humanistic imperative.* 3rd ed. Philadelphia: Lippincott.

Strydom, H. 2002. Sampling and sampling methods. In De Vos, A.S. (ed)., Strydom, H., Fouche, C.B. & Delport, C.S.L. *Research at grassroots. For the social science and human service professions.* 2nd ed. Pretoria: J.L.van Schaik.

Strydom, H. 2002. The Pilot Study. In De Vos, A.S. (ed)., Strydom, H., Fouche, C.B. & Delport, C.S.L. *Research at grassroots. For the social science and human service professions.* 2nd ed. Pretoria: J.L.van Schaik.

Strydom, H. 2005. Ethical aspects of research in the social science and human services profession. In De Vos, A.S. (ed)., Strydom, H., Fouche, C.B. & Delport, C.S.L.

Research at grassroots. For the social science and human service professions. 3rd ed. Swanepoel, B., Erasmus, B., Van Wyk, M. & Schenk, H. 2003. South African Human Resource Management: Theory and Practice. 3rd Edition, Cape Town: Juta.

Taute, F.M. 2004. The appropriateness and necessity of short-term therapy in the context of the Employee Assistance Programme. Social Work/ Maatskaplike Werk Magazine, 40(1):15-24.

Terblanche, L.S. 1992. The State of the Art of EAPs in South Africa: A Critical Analysis. In Maiden, R.P. (ed), *Employee Assistance Programs in South Africa.* New York: The Haworth Press.

Terblanche, L.S. 2009. Labour welfare in South Africa. *Journal of Workplace Behavioral Health*, 24(1-2):205-220, Jan/Jul. University of Pretoria Research Report 2009.

Terre Blanche, M., Durrheim, K. & Painter, D. 2006. *Research in Practice: applied methods for the social sciences.* Cape Town: UCT Press.

The Magazine for Environment, Health and Safety Leaders: South Africa's Construction Industry Moves to Improve Safety Performance, by Katherine Torres.

Torres, K. 2006. South Africa's Construction Industry Moves to Improve Safety Performance. *The Magazine for Environment, Health and Safety Leaders*, April 2006. Turin, D.A. 1969. The construction industry: Its economic significance and its role in development. University College Environmental Research Group, London. In Haupt, T.C. 2001. The Performance Approach to Construction Worker Safety and Health. Ph.D. Dissertation, University of Florida.

Vosloo, S. & Barnard, A. 2002. A qualitative assessment of the development of employee assistance practice in South Africa. *South African Journal of Labour Relations*, 26 (4):33-60.

Walliman, N. 2005. Your Research Project: A Step-by Step Guide For The First-time Researcher. 2nd ed. London: Sage.

Warr, P., Cook, J. & Wall, T. 1982. Scales for the measurement of some work attitudes and aspects of psychological well being. *Journal of Occupational Psychology*. 52:129-148. Welman, J.C. & Kruger, S.J. 2001. *Research Methodology*. Oxford Southern Africa.

White, W.L., Sharar, D.A. & Funk, R. 2001. Elevating the business ethics of Employee Assistance. *Behavioural Health Management*, 21(4):38.

Winegar, N. 2002. *Employee Assistance Programmes in Managed Care*. New York: Best Business Books.

Wingate, B. 2006. Mid-life Eating Disorders and the workplace. *Journal of Employee Assistance*, 36(1):9-10.

Wood, J.V., Tesser, A. & Holmes, J.G. 2008. *The self and social relationships.* New York: Psychology Press.

Woods, I. 2006. The Australian Liberty Mutual Workplace Safety Index Report 2006. EHS Today, The Magazine for Environment, Health and Safety Leaders.

Yamatani, H. 1993. Suggested top ten evaluations for employee assistance programmes: An overview. *Employee Assistance Quarterly*, 9(2):65-82.

Yin, R.K. 2006. Case Study Research, Design and Methods. Thousand Oaks, Sage Publications.

Yin, R. K. & Davis, D. 2007. Adding new dimensions to case study evaluations: The case of evaluating comprehensive reforms. In Julnes, G. & Rog, D.J. (eds). *Informing federal policies on evaluation methodology: Building the evidence base for method choice in government sponsored evaluation.* New Directions for Evaluation, no. 113, pp. 75-93. San Francisco: Jossey-Bass.

APPENDICES

APPENDIX A: INFORMED CONSENT FORM

Participant's Name: _____

Date: _____

- Investigator: Priscilla James Human Resource Manager Alpha Civil (PTY) Ltd P.O. Box 799 WORCESTER 6849
 - 1. **Title of study:** Well-being of employees in the construction industry: a model for employment assistance.
 - 2. **Purpose of the study:** The purpose of the study is to explore the well-being of employees in this company in order to make recommendations for the development, marketing and implementation of an Employee Assistance Programme.
 - 3. **Procedures:** I will be asked to participate in an interview to share my own experiences and opinions of working in the construction industry.
 - 4. **Risks and discomforts:** There are no known risks or discomforts associated with this study.
 - 5. **Benefits:** I understand there are no direct benefits to me for participating in this study. However, the results may help the researcher to gain a better understanding of how we perceive and experience our working conditions in the construction industry and how an EAP can be to the advantage of the employees and the company.
 - 6. **Participant's rights:** I may withdraw from participating in the study at any time.

7. **Confidentiality**: I understand that my comments / inputs will be treated with confidentiality by the researcher. The results of the study may be published for professional purposes.

I understand my rights as a researcher subject, and I consent to voluntary participation in this study.

Subject's signature

Signature of researcher

Date

APPENDIX B: INTERVIEW SCHEDULE: EXAMPLE OF QUESTIONS ASKED IN SEMI – STRUCTURED INTERVIEWS

The objective of the interview was to get insight into the well-being problems of employees in the construction industry.

- 1.1 How long have you been working in the construction industry?Please include years of experience in other construction companies.
- 1.2 What is your position in the company?
- 2.1 Tell me about all the difficulties and problems that you experience in your job.

2.2 How often do you have to work away from home?

2.4 What is the average distance that you normally have to work away from home?

- 2.5 Do you have a family?
- 2.6 How often do you come home for a weekend?
- 2.7 How do you deal with problems and crises in your family while away from home?

2.8 What are the most common problems that you experience in your relationships that can be directly linked to your work?

2.9	What are the stressors that you experience in the execution of your daily tasks?
-----	--

2.10 How do you deal with these stressors?

2.11 How do you keep yourself busy over the weekend that you have to stay on the construction site?

2.12 Do you agree with the assumption that alcohol and drug abuse are common problems over weekends on the construction sites?

2.13 What do you think can be the reason for alcohol and drug abuse over weekends?

2.14	How do yo	ou feel about th	e long	working	hours?
------	-----------	------------------	--------	---------	--------

2.15 Tell me about the possible dangers and safety risks in your job.

3. How much do you know about an EAP?

3.1 Have you ever been referred to an EAP by the work?

3.2 If yes, what was your experience with the EAP services?

3.3 Do you think that the company needs an EAP?

3.4 If yes, please explain how an EAP can be to your assistance.

3.5 How can an EAP be to the assistance of your family while you are away from home?

3.6 How can an EAP be to the benefit of the workforce?

4. Any other comments or suggestions that you would like to make with regard to my study.