

Employee assistance programs lack a comprehensive approach to addressing intimate partner violence

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A new study by researchers at the Johns Hopkins Center for Injury Research and Policy and RTI International finds employee assistance programs (EAPs), a standard benefit offered to employees at most large companies, are failing to identify individuals who abuse or have the potential to abuse their intimate partner, despite well-known risk factors for intimate partner violence perpetration. While previous research has documented the extent to which EAPs offer workplace support for victims of intimate partner violence, this is the first study to examine the involvement of EAPs in screening and offering treatment to persons who perpetrate violence against their partners. The report is published in the current issue of *Violence and Victims*.

"Intimate partner violence has significant workplace impacts, and EAPs are therefore well-positioned to address this major public health problem," explained study author Keshia Pollack, PhD, an assistant professor with the Johns Hopkins Center for Injury Research and Policy, part of the Johns Hopkins Bloomberg School of Public Health. "Unfortunately, the majority of programs we studied are neglecting a critical aspect of this issue by not addressing intimate partner violence perpetration."

The <u>Centers for Disease Control and Prevention</u> (CDC) estimates the annual costs of lost productivity due to intimate partner violence victimization at more than \$700 million, with more than 7.9 million paid



workdays lost per year in the U.S. Just as victimization impacts the workplace, <u>negative consequences</u> stem from perpetration as well. Studies show perpetrators' <u>work performance</u> and productivity is affected because of missing work, showing up late or leaving early, difficulty concentrating and errors on the job.

Twenty-eight different EAPs were included in the study. Researchers captured detailed information on the types of intimate partner violencerelated activities (i.e., screening and assessment, services provided, and case management and follow-up) offered via representatives from each EAP. While several EAPs reported that the detection of intimate partner violence perpetration would be possible through their general, standardized assessment procedures, only three EAPs reported that their standardized assessment covers risk for intimate partner violence, and none reported using a standardized tool or protocol which specifically asks about intimate partner violence perpetration. Similarly, many EAPs reported that the services they offer to intimate partner violence perpetrators were the same as those they offer to victims of intimate partner violence (e.g., development of a safety plan) despite the fact these services are not relevant for addressing perpetration of abuse, and none reported that they offer direct treatment or intervention services specifically for intimate partner violence perpetrators.

"Screening for risk factors associated with intimate <u>partner violence</u> perpetration is critical, as EAP clients rarely self-identify as perpetrators," said lead study author Jennifer L. Hardison Walters, MSW, research analyst with RTI International. "Previous research found that the vast majority of workers who interfaced with their EAP for alcohol abuse treatment were engaging in abusive behaviors towards their partners." Other factors associated with risk of perpetrating violence against an intimate partner include depression, personality disorders and marital conflict and instability.



"Because of the large population they serve and their expertise in helping employees identify and resolve problems, EAPs are in a unique situation to address <u>intimate partner violence</u> perpetration," concluded Pollack. "Moving forward, experts from public health, social work and criminal justice should assist EAP administrators to comprehensively address this public health problem."

More information: "Approaches Used by Employee Assistance Programs to Address Perpetration of Intimate Partner Violence", *Violence and Victims*.

Provided by Johns Hopkins University Bloomberg School of Public Health

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