



Mental Health services Coverage – Benefits and Employee Assistance Program access and use

November 2023 Data Collection



beneva

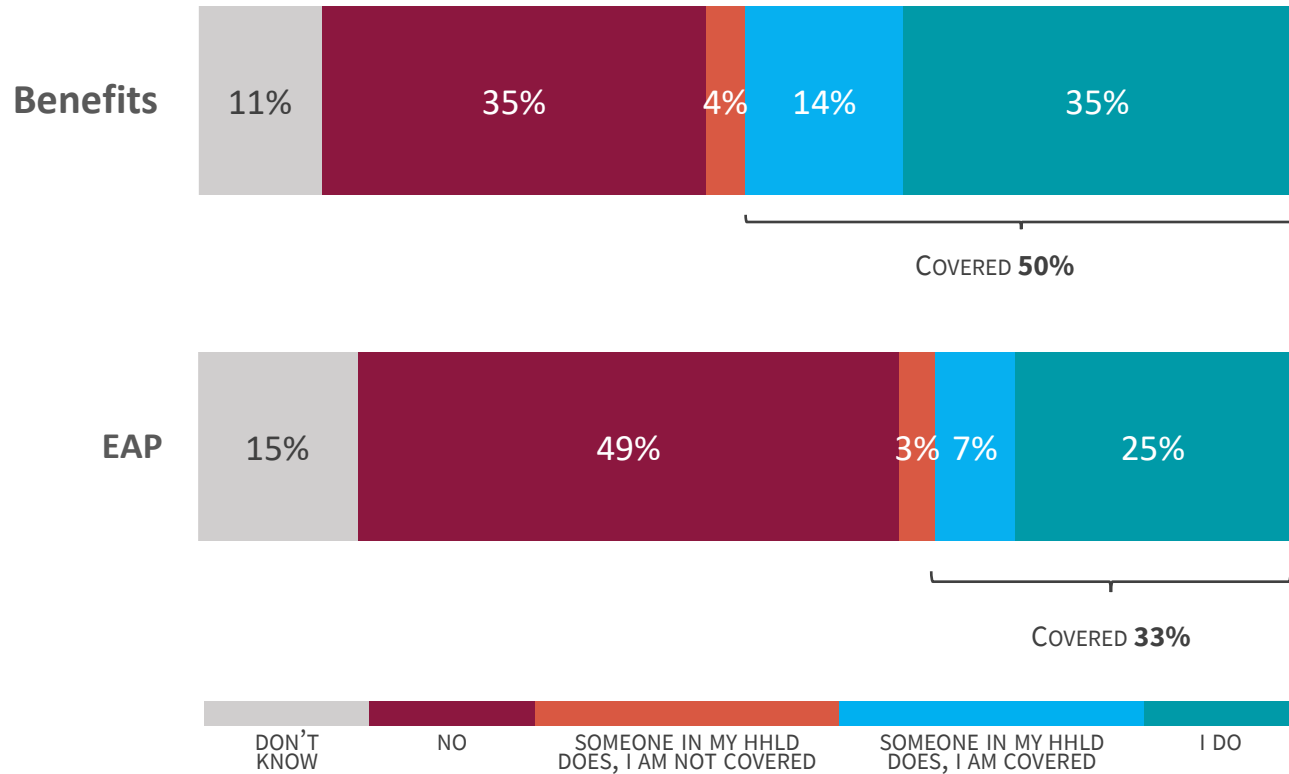
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February 2024

KEY POINTS

- Employee Assistance Program (EAP) coverage remains relatively low:
 - Only 1 in 3 Canadians (33%) report being covered by an EAP, either directly or through a household member.
 - Middle aged Canadians (35 to 55) are about twice as likely as those 18 to 34 to have access to an EAP.
- Awareness and understanding of the role of an EAP and how it operates continue to be a challenge :
 - Only 60% correctly identified the purpose of an EAP in general terms.
 - Of those who would use their benefits first – lack of awareness and understanding of the EAP is the biggest reason (35%), followed by concerns about the EAP’s effectiveness to meet their needs (25%), concerns of confidentiality breach at work (23%), and being able to choose their practitioner through their benefits (23%).
- When people have access to both an EAP and benefits, the majority (57%) would choose to reach out to their EAP first instead of their benefits for mental health support.
- Overall, the EAP is not perceived as the first solution to find mental health support :
 - Out of the whole population surveyed, 72% reported being confident about where to get mental health support. Among them, 5% would turn to their workplace for mental health support, and 3% would turn to an EAP, which represents only 10% of all people covered by an EAP.

MENTAL HEALTH COVERAGE



Benefits: Half of the people surveyed have mental health coverage through benefits, with a third (35.5%) having their own benefits and an additional 14.5% being covered under a household member’s benefits. Another third (35%) do not have coverage, and 11% are uncertain.

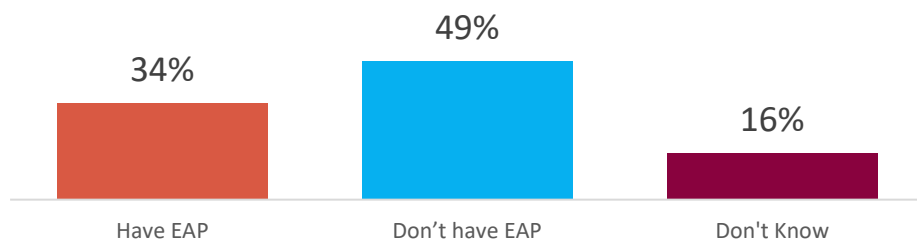
Employee Assistance Program: One-third (33%) have coverage through an EAP, with 25% having their own EAP and an additional 7% being covered through a household member’s EAP. Half do not have coverage, and 15% are uncertain.

Z3. Do you or does anyone in your household have each of the following? Base: (Poll 18: n= 3,207)

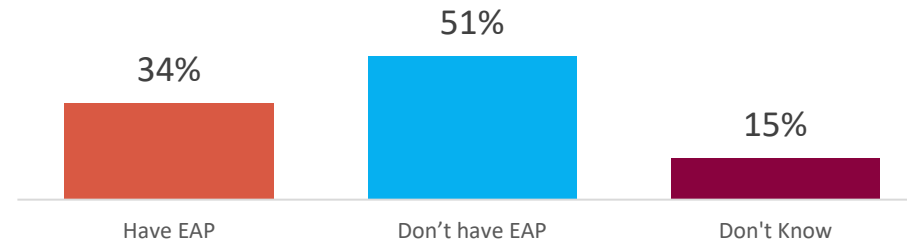
EAP COVERAGE ANXIETY AND DEPRESSION


The EAP coverage of people with an anxiety or a depression diagnosis (34%) is similar to the EAP coverage of those who do not have a diagnosis (33%).

EAP coverage of people with an anxiety diagnosis



EAP coverage of people with a depression diagnosis



 49% of people with an anxiety diagnosis and 51% of those with a depression diagnosis are not covered by an EAP.

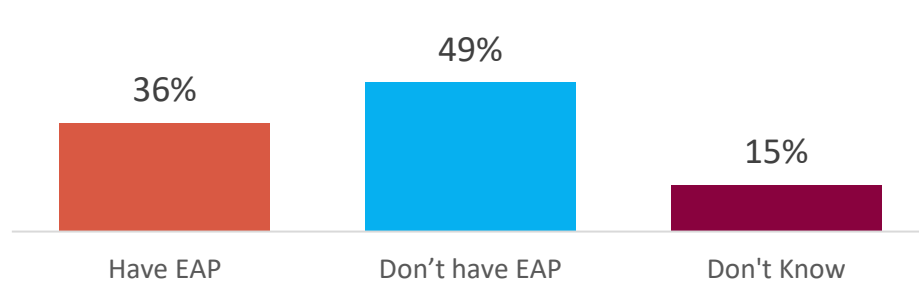
A1Ar1: An anxiety disorder - Have you ever, either before or since the COVID-19 outbreak, received a diagnosis from a healthcare professional (with anxiety diagnosis n=844)

A1Ar2: Depression - Have you ever, either before or since the COVID-19 outbreak, received a diagnosis from a healthcare professional (with depression diagnosis n=852)

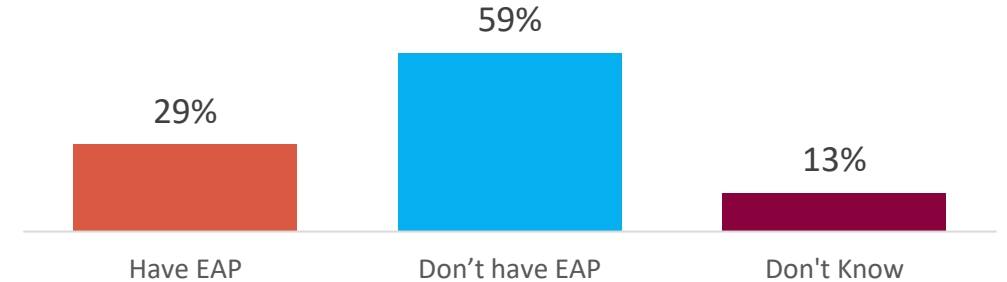
EAP COVERAGE MOOD DISORDERS AND CHRONIC PAIN

The EAP coverage of people with a mood disorder diagnosis (36%) is close to the coverage of those who do not have a diagnosis (33%). People living with chronic pain tend to be less covered (29%).

EAP coverage of people with a mood disorder diagnosis



EAP coverage of people currently living with chronic pain

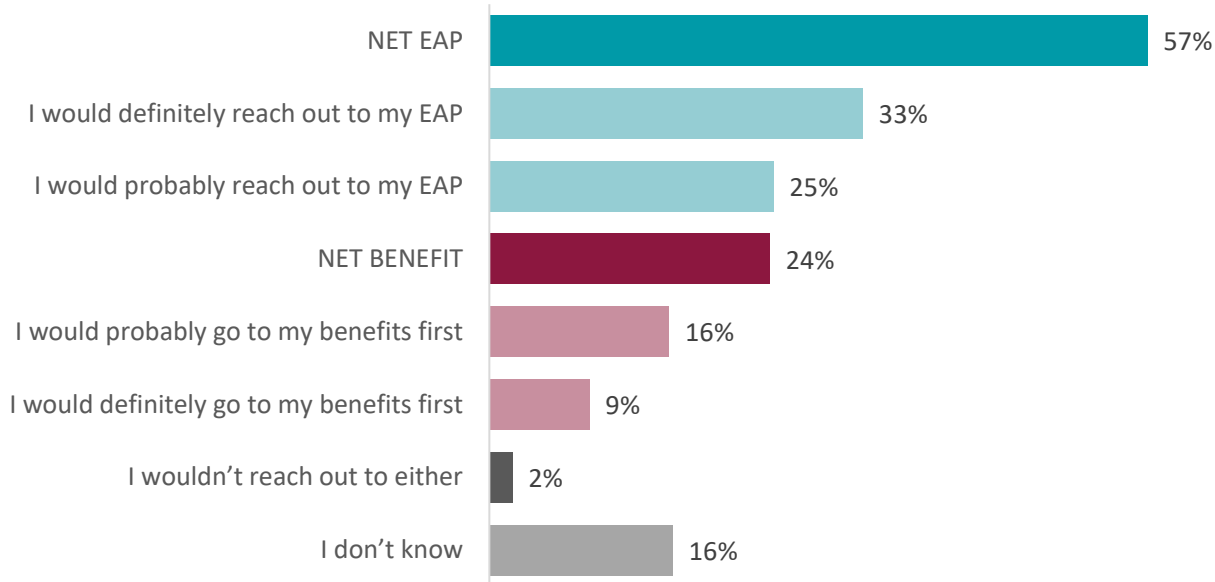


! 49% of people with a mood disorder diagnosis are not covered by an EAP. People living with chronic pain tend to be less covered, as 59% of them are not covered by an EAP.

A1Ar3: Another mood disorder - Have you ever, either before the COVID-19 outbreak or since it, received a diagnosis from a healthcare professional (with another mood disorder n=339)

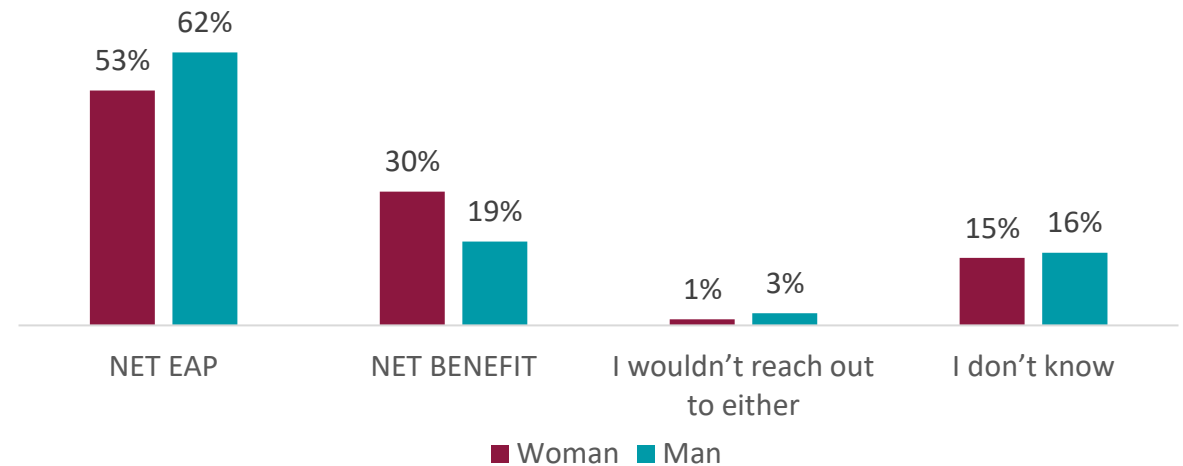
A10NEW1: Chronic pain is defined as pain that persists or recurs for more than 3 months. Which of the following describes you best? ("currently live with chronic pain n=872)

LIKELIHOOD TO REACH OUT TO EAP FIRST

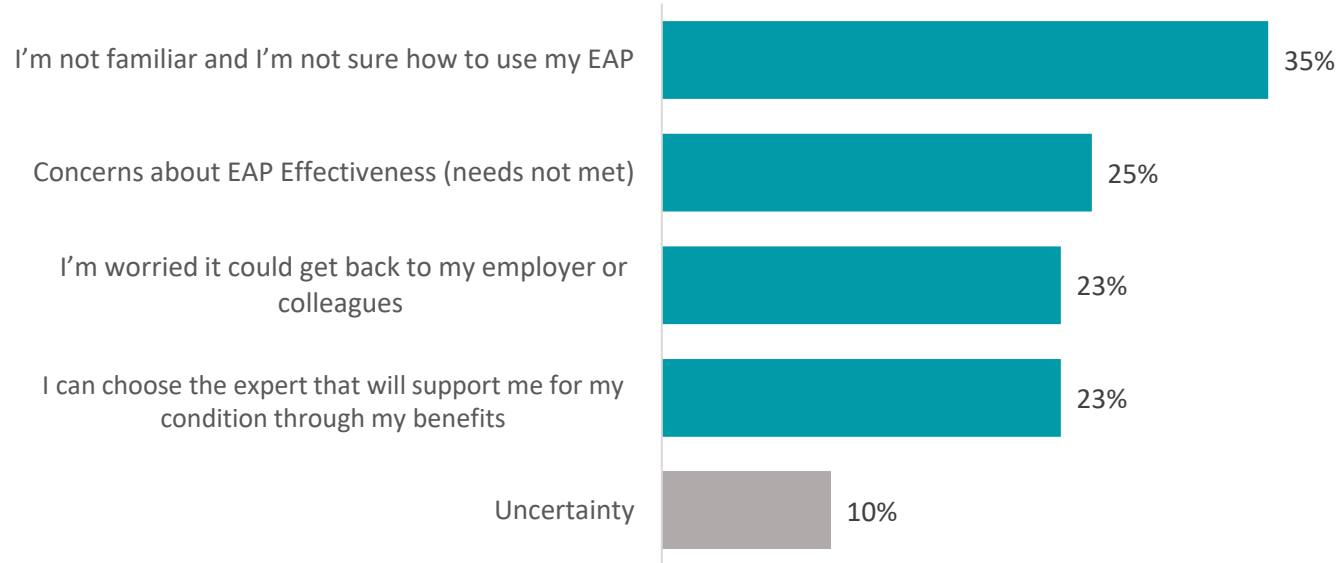


Among those who have access to both an EAP and benefits, more than half (57%) would reach out to their EAP first if they were experiencing a mental health challenge, rather than using their benefits as the go-to. 24% would likely go to their benefits first.

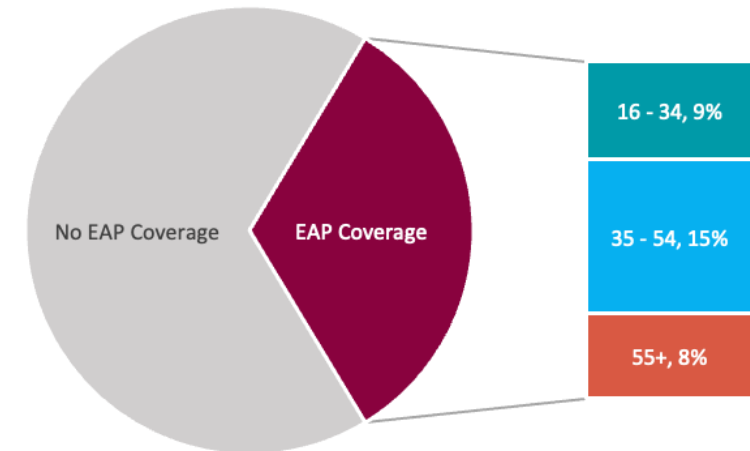
Distinctions can be observed between genders : 62% of men would reach out to their EAP first, compared to 53% of women, while 30% of women would use their benefits first, compared to 19% of men.



REASONS TO CHOOSE BENEFITS OVER EAP



Age-based EAP coverage across the entire population



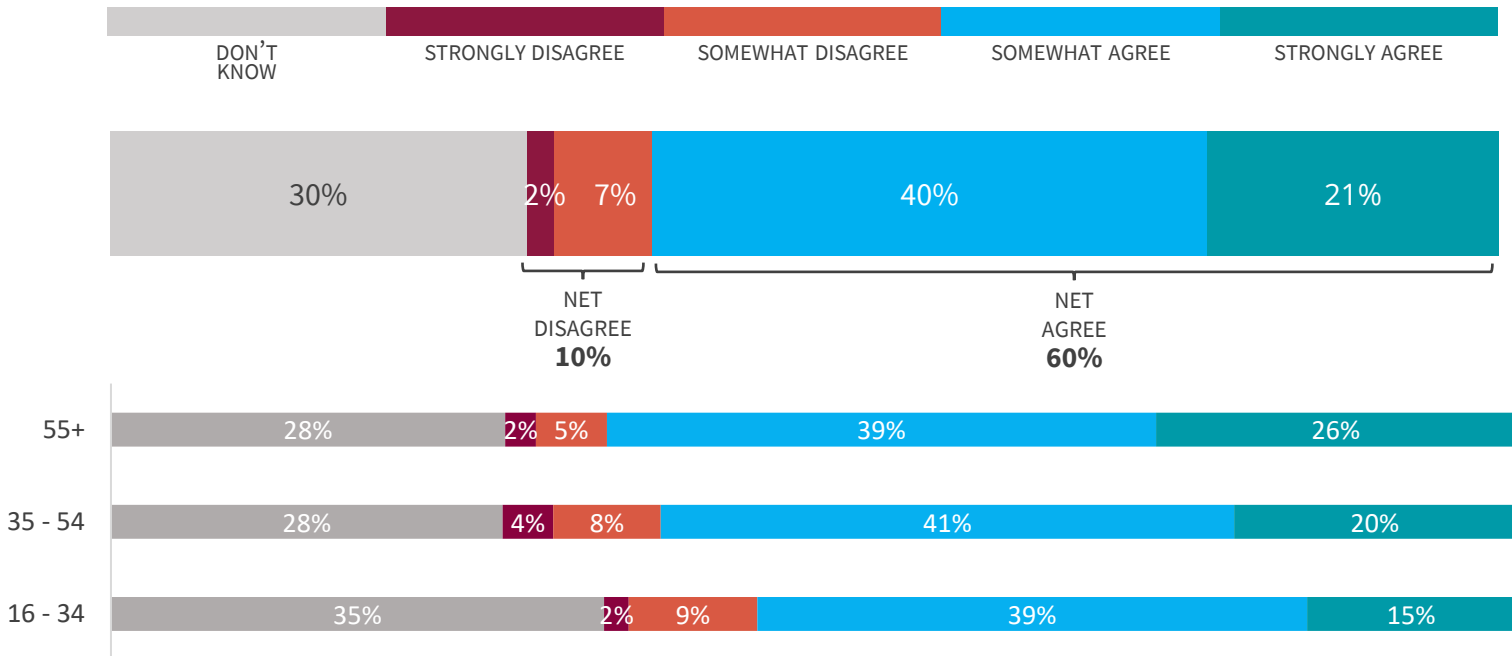
Among those who have access to an EAP but would not reach out to it first, more than three in ten (35%) say that they are not familiar with it and are not sure how to use it, 25% are concerned about the EAP's effectiveness to meet their needs, 23% worry about a confidentiality breach (with employer or colleagues), and 23% report preferring to choose the expert for their condition through their benefits.

Z3C. Why would you choose to use your benefits immediately rather than reach out to your EAP first? Base: (Poll 18: n= 226)

PURPOSE OF EAP

LEVEL OF AGREEMENT WITH THIS STATEMENT

“The primary goal of an EAP is to maintain employees in the workforce while they face a mental health issue and/or to return them back to the workforce once they’ve resolved their mental health issue?”



Six in ten people surveyed (60%) agree with this correct statement of what an EAP is designed to do.

The unfamiliarity with the purpose of an EAP is higher among individuals aged 16 to 34, reaching a rate of 35%.

Z3D. To what extent do you agree or disagree with the following statement: The primary goal of an EAP is to maintain employees in the workforce while they face a mental health issue and/or to return them back to the workforce once they’ve resolved their mental health issue? Base: (Poll 18: n= 3,207)

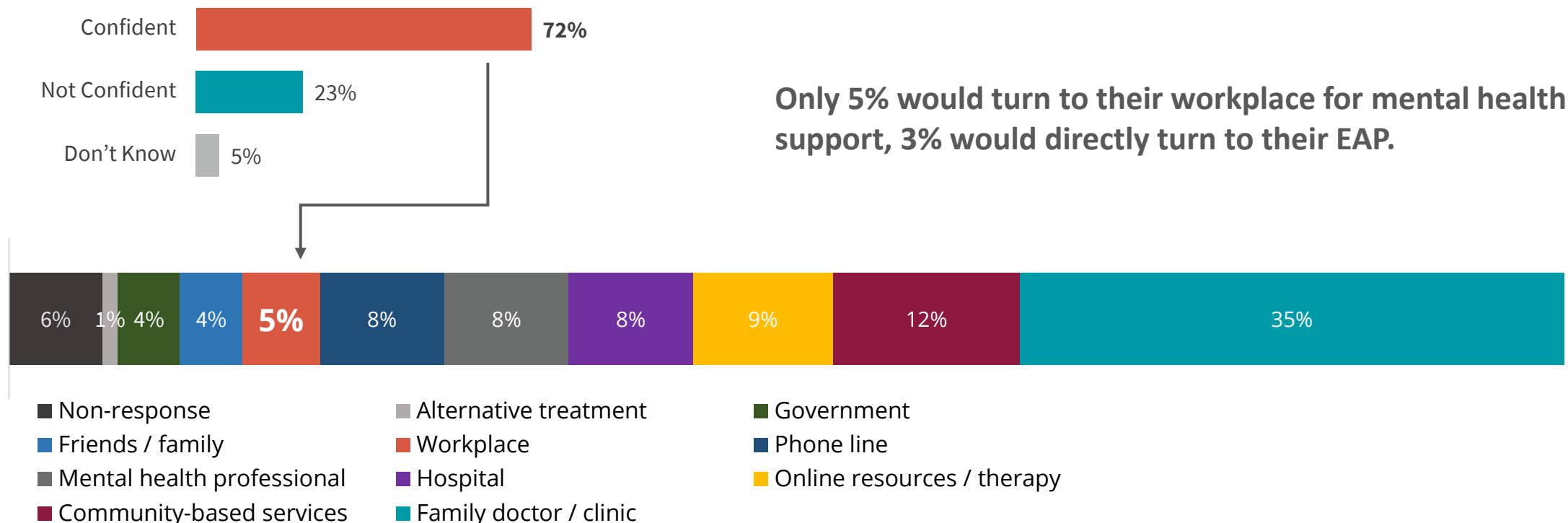
Only 5% of Canadians would turn to their workplace for mental health support

In August 2023, 72% of respondents reported being confident about where to get mental health support.

These people said they would most likely turn to:

1. Family doctor / Medical clinic (35%)
2. Community-based services (12%)
3. Online (9%)

Only 5% would turn to their workplace for mental health support, 3% would directly turn to their EAP.



B25: If you or someone in your immediate family or circle of friends needed mental health supports, how confident are you that you would know where to get them? (Poll 17, n=2,310)

B25B: Where would you go for mental health supports if you or your family or friends needed it? (open-ended) (Poll 17: n= 1,665)



FOCUS ON MOOD DISORDERS

Do people with a mood disorder diagnosis access or use EAP and benefits differently ?



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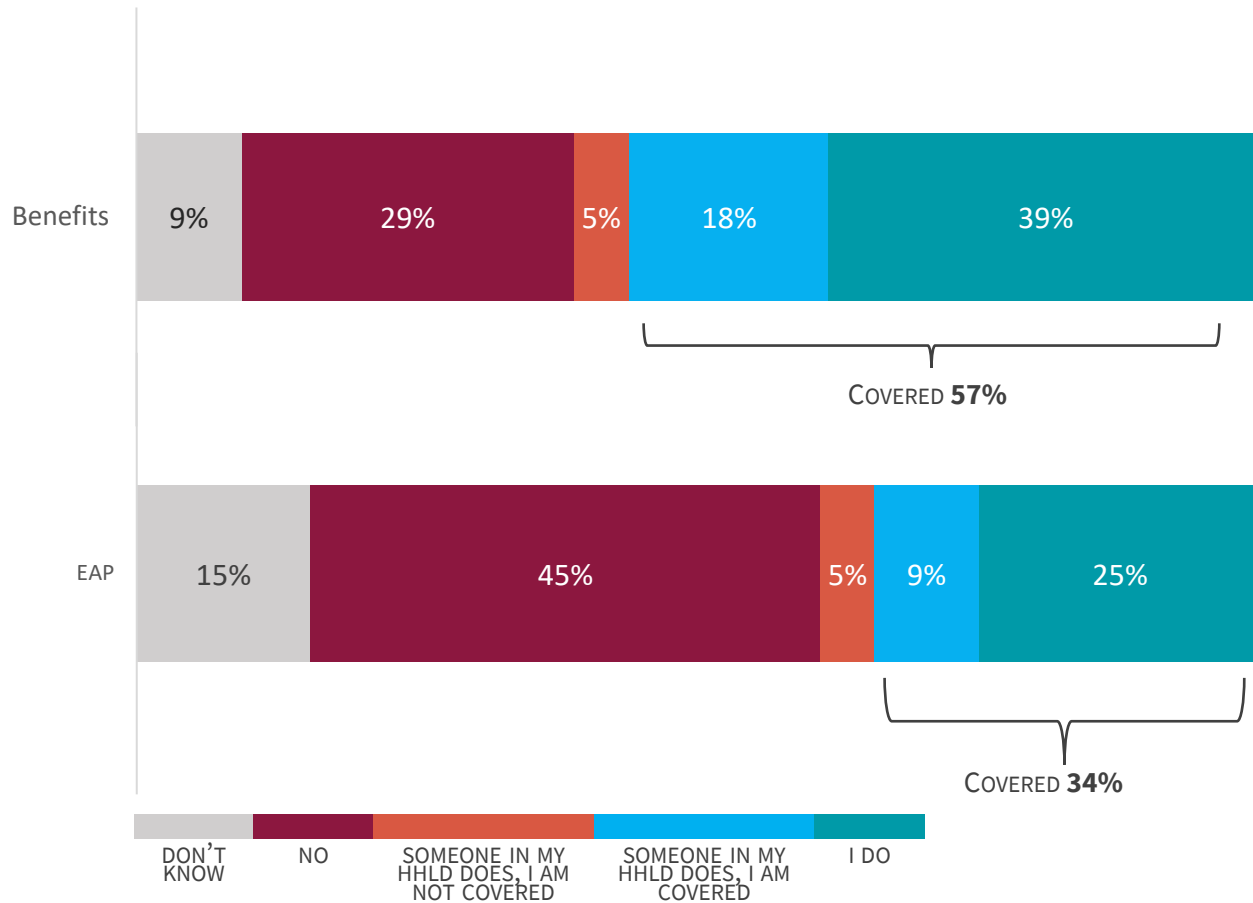
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KEY POINTS FOR PEOPLE WITH DIAGNOSIS OF MOOD DISORDER

- This part of the report focuses on people with a diagnosis of mood disorder (anxiety, depression or another mood disorder).
 - Their EAP coverage (34%) is identical to the global EAP coverage (33%).
 - Among those who have access to both benefits and EAP, more people would reach out to their EAP first (56%) rather than their benefits when facing a mental health challenge, like in the global analysis (57%).
- A deeper analysis is conducted with further segmentation based on age, gender, visible minorities, newcomers, LGBTQ2S+, and employment sectors.
 - Men are more inclined than women to reach out to their EAP first (66% vs 48%) if they are facing mental health challenges.
 - More people aged 35-54 report having access to an EAP than people aged 16-34 (44% vs 33%). If they have access to both EAP and benefits, they are also more likely to reach out to their EAP first (59% vs 48%).
 - While visible minorities report a higher rate of EAP coverage than average (41%), LGBTQ2S+ and Newcomers report lower EAP coverage rates (27% and 32%).
 - More people working in public-oriented services or information-oriented services report having access to an AEP (60% and 49%), than people working in the primary and secondary sectors or in trade-oriented services (40% and 31%).

MOOD DISORDERS EAP COVERAGE

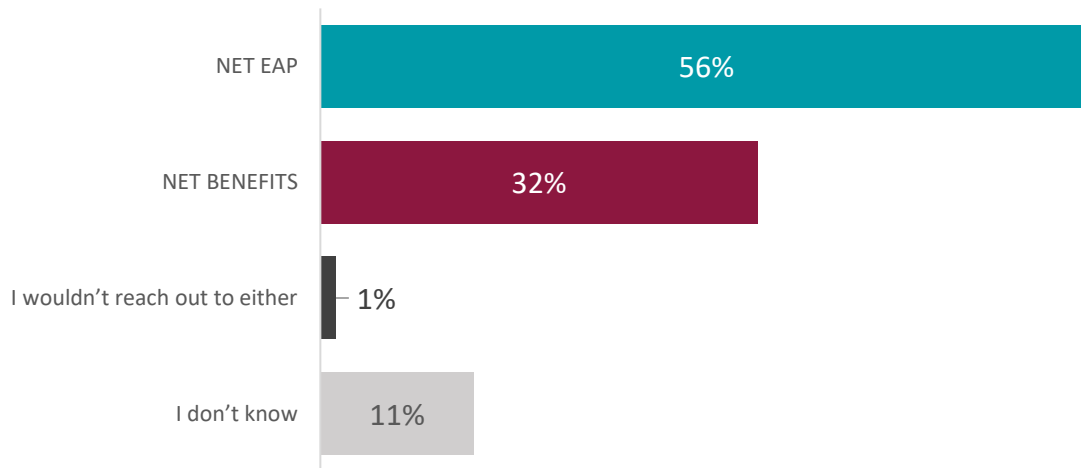


Benefits: More than half (57%) of the people with a diagnosis of mood disorder report being covered by benefits, with 39% having their own benefits and an additional 18% being covered under a household member’s benefits. Another third (29%) don’t have access to benefits, and 9% are uncertain.

Employee Assistance Program: One in three (34%) of those with a diagnosis of mood disorder are covered by an EAP, with 25% having their own EAP and an additional 9% being covered through a household member’s EAP. Less than half of them (45%) don’t have access to an EAP, and 15% are uncertain.

MOOD DISORDERS LIKELIHOOD TO REACH OUT

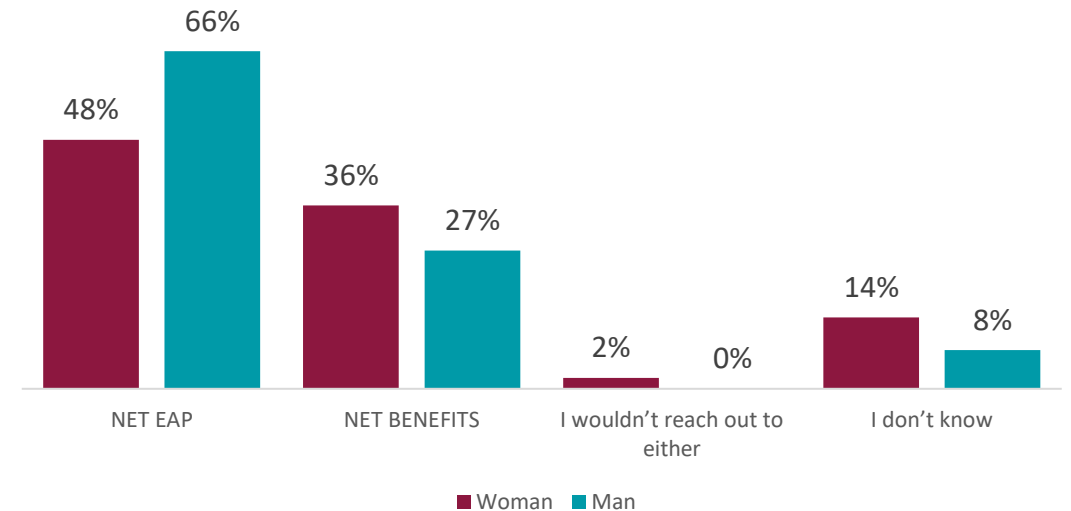
Mood disorders: Likelihood to reach out



Among those with a mood disorder diagnosis and who have access to both an EAP and benefits, more than half (56%) would reach out to their EAP first if they were experiencing a mental health challenge, rather than using their benefits as the go-to. One in three (32%) would likely go to their benefits first.

Distinctions can be observed between genders : 66% of men would reach out to their EAP first, compared to 48% of women, while 36% of women would use their benefits first, compared to 27% of men.

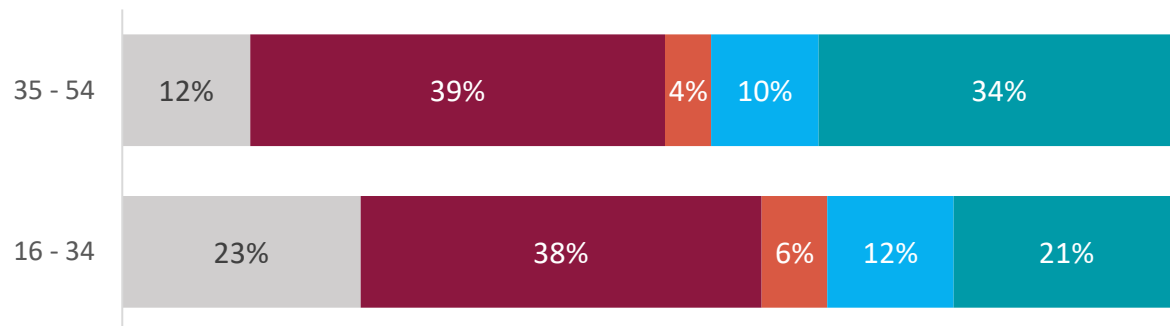
Mood disorders: Likelihood to reach out by gender



Responded yes and/or: anxiety, depression, mood disorder (no duplicates) **Z3B_NEW**. If you had a mental health challenge, how likely would you be to reach out to your EAP rather than use your benefits immediately? Base: (Poll 18: n= 350)

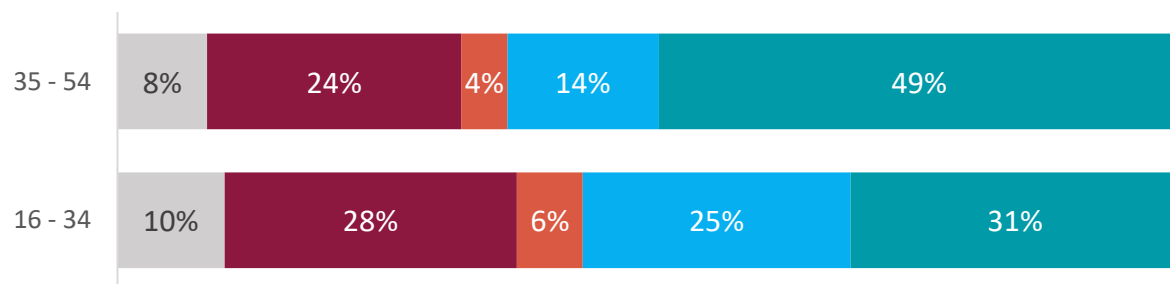
MOOD DISORDERS EAP COVERAGE BY AGE

Mood disorders: EAP Coverage by age



Employee Assistance Program: Less than half (44%) of those aged 35-54 and with a diagnosis of mood disorder report having access to an EAP, either through their own EAP or through a household member's EAP, compared to one-in-three (33%) of those aged 16-34.

Mood disorders: benefits coverage by age



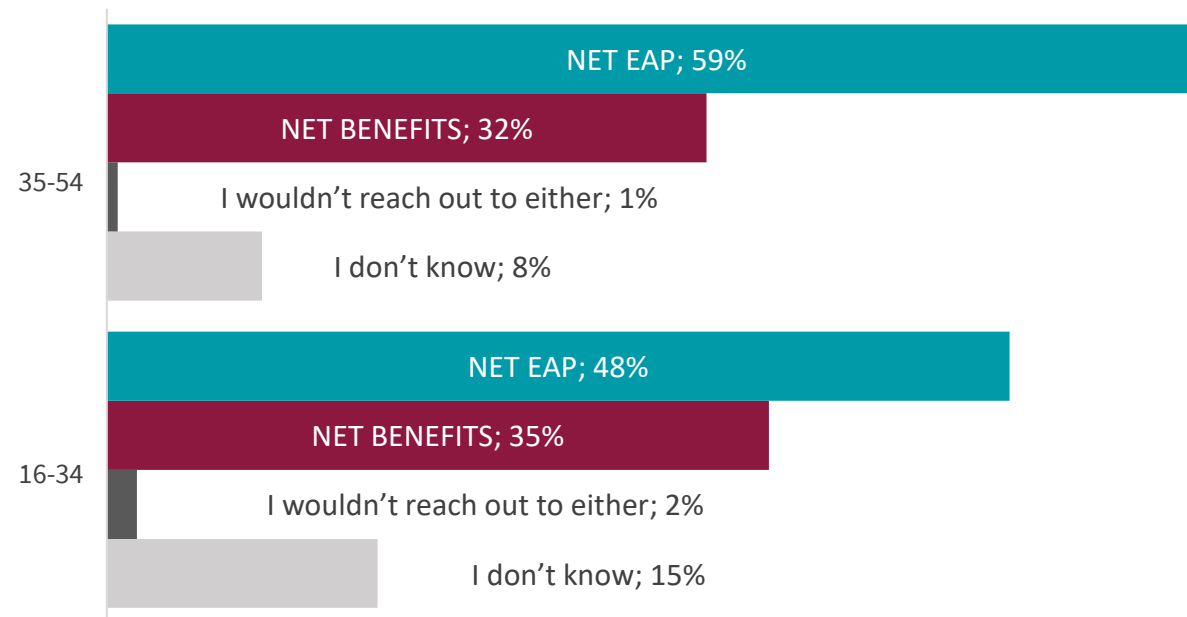
Benefits: Two in three (63%) of those aged 35-54 and with a diagnosis of mood disorder report having access to benefits, either through their own benefits or through a household member's benefits, compared to more than half (56%) of those aged 16-34.



MOOD DISORDERS LIKELIHOOD TO REACH OUT BY AGE

Among people that have access to both an EAP and benefits, distinctions can be observed by age : 59% of those aged 35-54 and with a mood disorder diagnosis would reach out to their EAP first, compared to 48% of those aged 16-34 and with a mood disorder diagnosis; while 35% of the later would rather use their benefits first, compared to 32% of the 34-54 years old.

Mood disorders: Likelihood to reach out by age

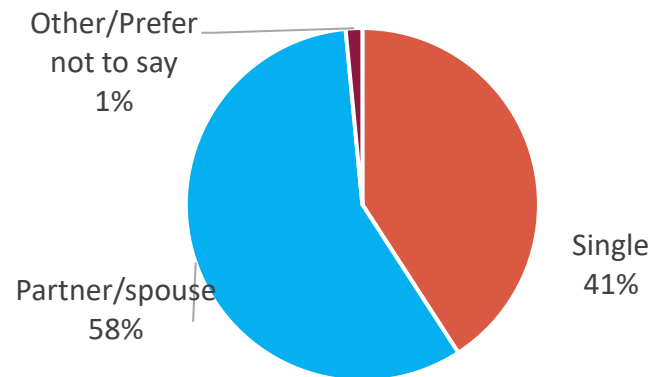


MOOD DISORDERS PROFILES COVERED BY AN EAP

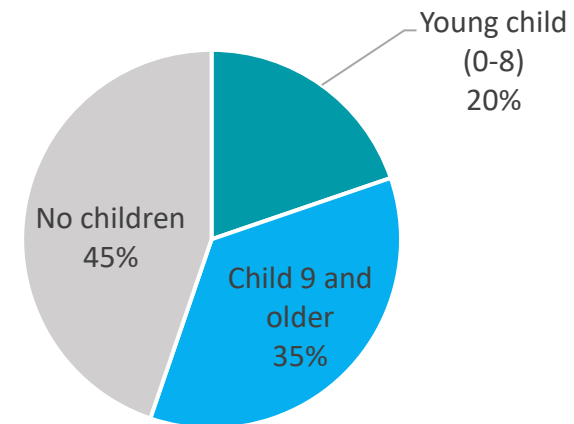
Among people aged 18 to 54 who received a diagnosis of mood disorder and who have access to an EAP, 58% live with a spouse or partner, while 41% live without a spouse or partner.

Within the same group of people, 45% don't have children, 35% have children aged 9 and older, and 20% have children under 9 years old.

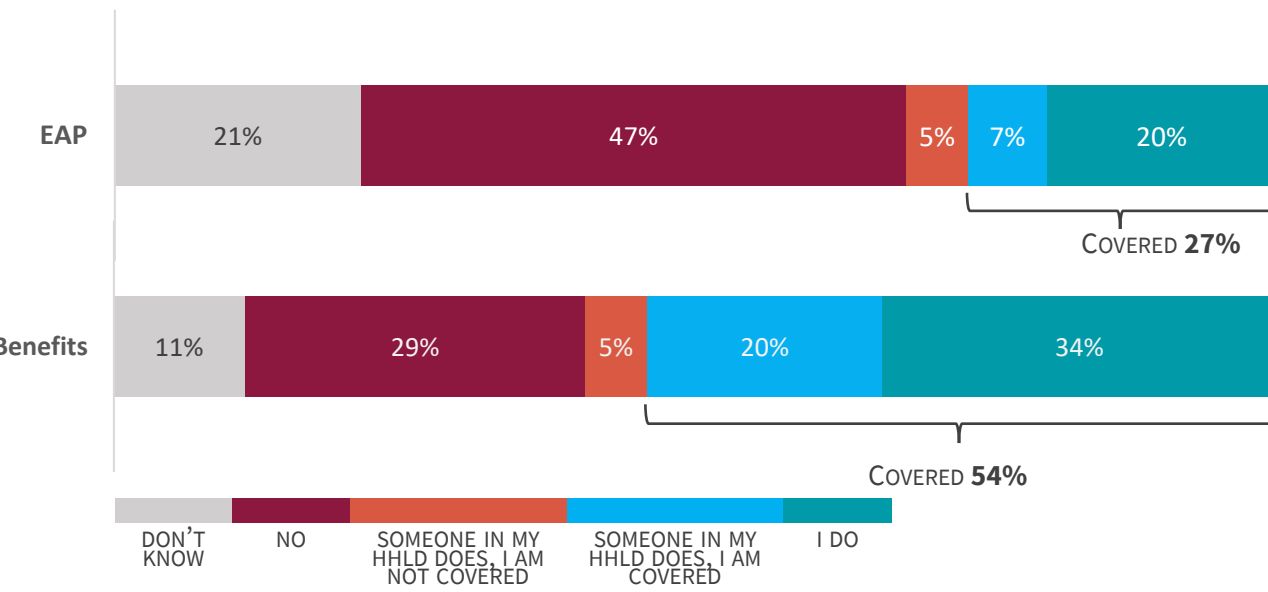
Mood disorders : EAP coverage - Partner



Mood disorders: EAP Coverage - Children

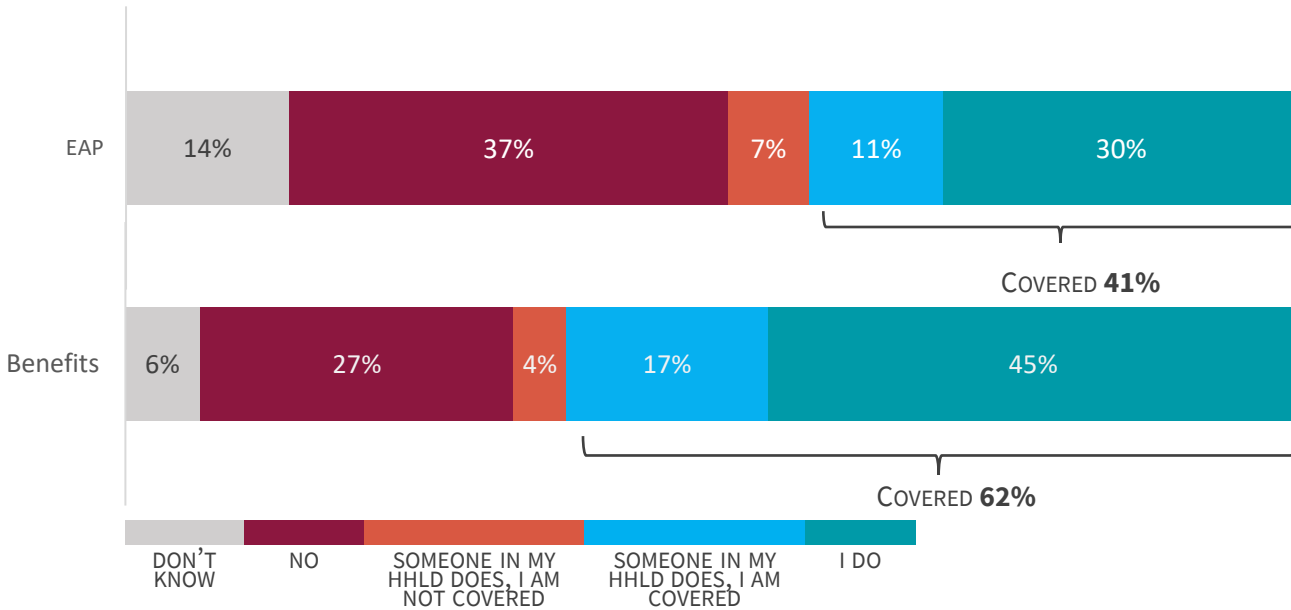


MOOD DISORDERS EAP COVERAGE FOR LGBTQ2S+



Less than a third (27%) of people from the LGBTQ2S+ communities and with a diagnosis of mood disorder report having access to an EAP, either through their own EAP or through a household member's EAP. More than half (54%) report having access to benefits.

MOOD DISORDERS EAP COVERAGE AND LIKELIHOOD TO REACH OUT FOR VISIBLE MINORITIES



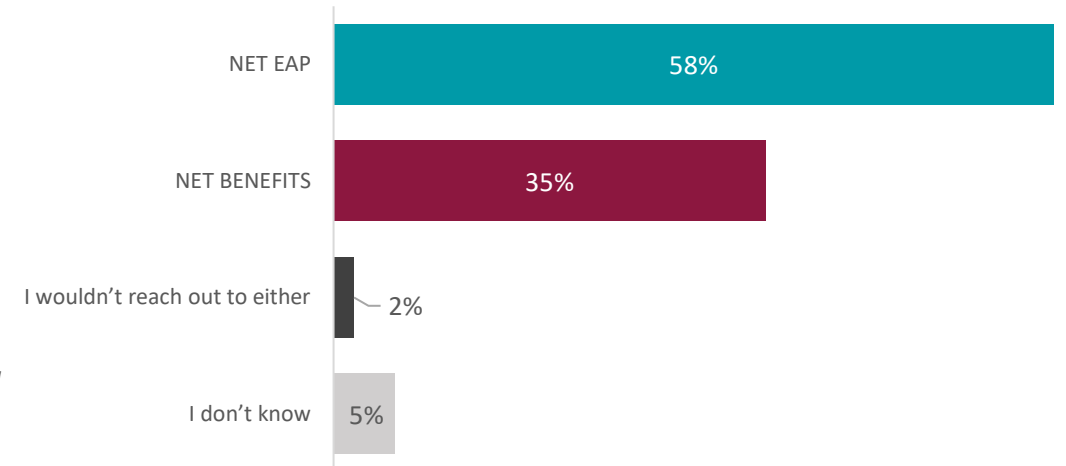
Less than half (41%) of those who identify as a visible minority and who received a diagnosis of mood disorder report having access to an EAP, either through their own EAP or through a household member's EAP.

Two in three (62%) report having access to benefits.

Among those who have access to both an EAP and benefits, 58% would reach out to their EAP first if they were experiencing a mental health challenge, while 35% would likely go to their benefits first.

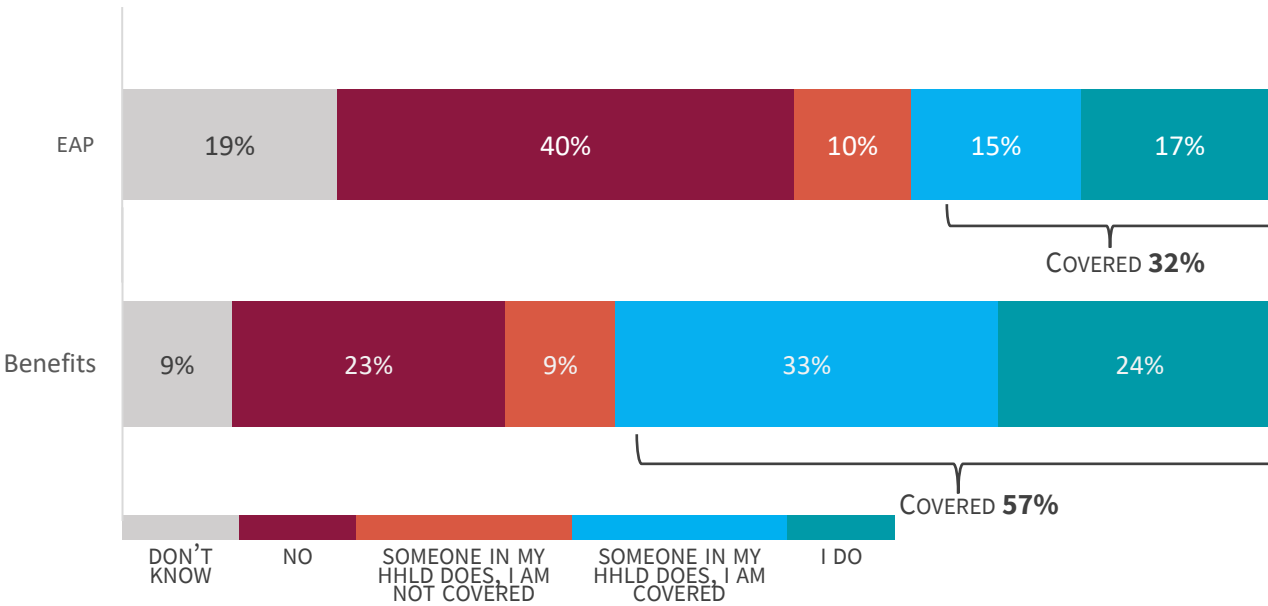
It's important to note that the sample size for this analysis was limited (n=60), therefore the results must be interpreted with caution.

Mood disorders: Likelihood to reach out - Visible Minorities



MOOD DISORDERS

EAP COVERAGE FOR NEWCOMERS



One in three (32%) of those who identify as newcomers in Canada and who received a diagnosis of mood disorder report having access to an EAP, either through their own EAP or through a household member's EAP. More than half (57%) report having access to benefits.

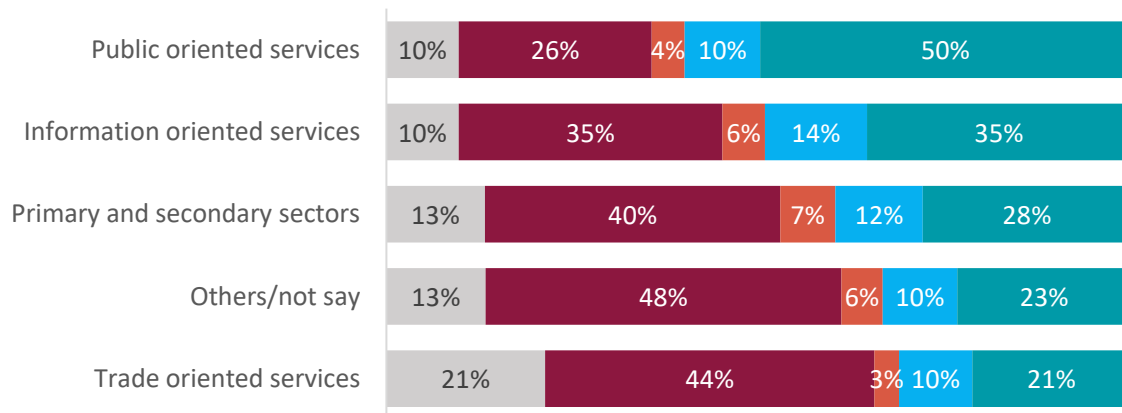
In this sample, 54% arrived in Canada within the last 5 years, and 46% arrived 6 to 15 years ago.

MOOD DISORDERS

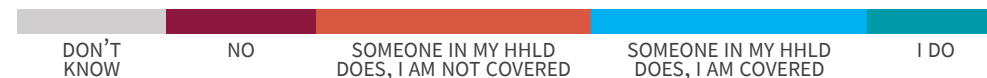
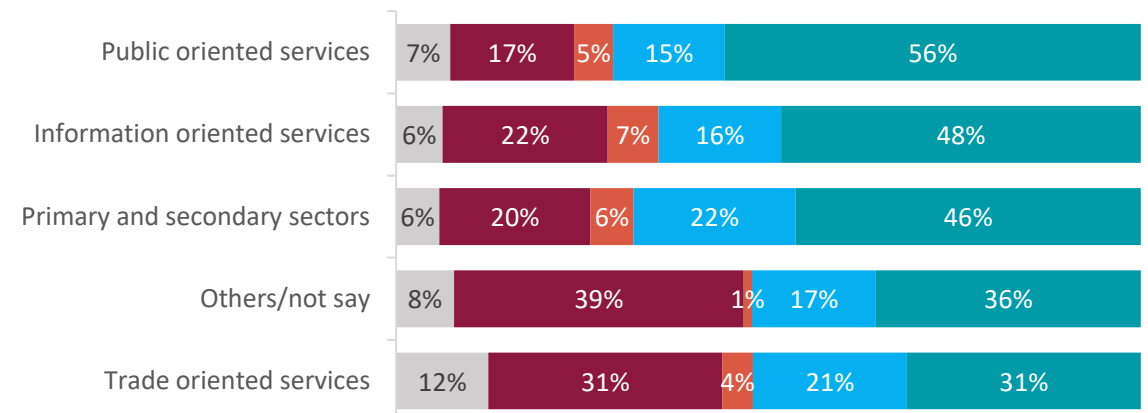
EAP COVERAGE BY EMPLOYMENT SECTOR

People with a diagnosis of mood disorder and working in Public oriented services report the larger EAP coverage rate (60%), followed by people working in Information oriented services (49%), and those in the Primary and Secondary sectors (40%). People working in Trade oriented services report the lowest EAP coverage rate (31%).

Mood disorders: EAP COVERAGE - EMPLOYMENT SECTOR



Mood disorders: BENEFIT COVERAGE - EMPLOYMENT SECTOR



Public oriented services (Health Care; Childcare; Emergency – Police, Fire, EMT; Janitorial and maintenance; Education; Government; Military). Information oriented services (Technology / IT; Finance and insurance; Scientific and technical; Management of companies and enterprises; Information and cultural industries; Arts, entertainment and recreation). Trade and sale-oriented services (Retail; Trade & distribution; Delivery; Transportation, trucking and warehousing; Restaurants and accommodations). Primary and secondary sectors (Agriculture; Mining, quarry and oil and gas extraction; Manufacturing; Utilities; Construction).



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