

Humanitarian Human Resources Europe 2016



Barcelona, Spain 8-10 June 2016

Conference Report



Contents

Conference theme, objectives and speakers	1
Day 1 – Welcome to Humanitarian HR Europe 2016	2
Opening speakers - Organisational Resilience: HR at the Frontline	2
Day 2: Sharing and learning from experiences	4
 Working in partnership with your employee assistance programme to enha wellbeing 	
The duty of care lens	6
Mindfulness, mental health and humanitarian aid workers	6
The three legs of exceptional international field staff	7
Challenges to take care of people in humanitarian crisis	8
Your pathway to duty of care	9
Day 3 – Workshop learnings and conclusions	10
The cost of conflict at work	10
Leadership carousel	10
Working groups feedback	11
Conference resources	14
Additional useful resources and websites	14



Conference theme, objectives and speakers

Theme

Organisational Resilience: HR at the Frontline

Objectives

- Map out the current trends around resilience.
- Explore and engage with the implications, opportunities and practical solutions for humanitarian human resouces (HR) professionals.
- Share current best practices, live learning, case studies and stories from within the humanitarian sector, and from other sectors.
- Network with other HR and humanitarian specialists from the UK, Europe and around the world.
- Share experience, challenge assumptions and inspire fresh thinking.
- Shape and share recommendations for practical sectoral change.

Conference speakers

- Scott Breslin, Operation Mercy
- Jane Cocking, Independent Consultant
- Cathy Fitzgibbon, <u>British Red Cross</u>
- Judith Greenwood, CHS Alliance
- Kate Nolan, <u>CiC-EAP</u>
- Hitendra Solanki, <u>Action Against Hunger UK</u>
- Ignasi Soler, <u>Médicos Sin Fronteras</u>
- Cathrine Ulleberg, Norwegian Refugee Council
- Christine Williamson, Duty of Care International



Day 1 – Welcome to Humanitarian HR Europe 2016

The 2016 Humanitarian Human Resources (HHR) Europe conference brought together almost 70 HR and people management specialists from 13 countries to discuss the issue of HR resilience. Participants to the 29th HHR conference were welcomed by CHS Alliance Executive Director Judith F. Greenwood and conference facilitator Katy Murray who reminded them of the conference theme and asked them to think of their personal experiences and challenges, as well as their expectations for the conference.

Opening speakers - Organisational Resilience: HR at the Frontline

The conference's three opening speakers, Judith Greenwood, Executive Director of the CHS Alliance; Scott Breslin, International Director of Operation Mercy; and independent consultant Jane Cocking, formerly International Director at Oxfam GB, shared their perspectives on the conference theme.

Judith Greenwood, CHS Alliance Executive Director, started the session by highlighting issues first identified in Room for Improvement, the 1995 report that led to the creation of People In Aid, now the CHS Alliance. One of the key findings of this report was the issue of workload. Judith noted that similar issues facing the humanitarian sector 20 years ago are still present. However, there has also been a lot more research into these issues and how organisations can address them. An important point to note is that the importance of national staff is now more widely recognised. As well as this it is now recognised that issues of duty of care concern the whole organisation, not just the HR team and organisations need to be resilient to deal with these issues and challenges. Judith highlighted that the <u>Core Humanitarian Standard (CHS)</u> Commitment 8 focuses on people management, but this is also embedded throughout the CHS's Nine Commitments.

Judith highlighted a range of useful resources developed by the CHS Alliance in partnership with others:

- Austin, Lois; O'Neil, Glen; CHS Alliance for the Start Network (2015) <u>The state of surge in</u> <u>the humanitarian sector</u>
- Austin, Lois; O'Neil, Glen; CHS Alliance for the Start Network (2016) <u>Transforming surge</u> capacity: Baseline report 2015
- CHS Alliance (2015) <u>Humanitarian Accountability Report</u> (people management chapter (page 92 – 97)
- Macnair, Rebecca (1995) <u>Room for improvement</u>
- People In Aid (2014) <u>The state of HR 2014: A question of impact</u>
- Solanki, Hitendra (2015) <u>Mindfulness and wellbeing: a shift in emphasis from treatment to prevention</u>

Scott Breslin, International Director of Operation Mercy, discussed what resilience looks like on the front line. According to him it is multi-level. Aid workers are often weighed down with job demands and stresses, and what keeps them going and supports them is:



- 1. Relationships with co-workers for example
- 2. Results seeing the difference their work makes
- 3. Grit which he defines as "long-term perseverance towards a goal"

He then talked about being "fit, both for an individual worker and for an organisation". It is important to ensure individuals are the right fit for the role they are doing and are trained and supported to do so. Lastly Scott highlighted the relationship between workplace conflict, burnout, staff morale and stress. He mentioned that conflict resolution is integral to duty of care and prevention but this is often an overlooked issue. However, it is an issue that needs to be addressed to make organisations and staff more resilient.

Independent consultant Jane Cocking looked back at how humanitarian action has changed over the past 25 years, particularly looking at the issue of international versus national staff. In the past, there was more of a focus on large-scale crises that were top-down and western dominated. These days, national staff play a much larger role and their role will increase especially as crises become even more complex and fragile countries become more fragile and less accessible. Jane highlighted the need to learn from the past, make changes, think globally and help people flow around the world if we want to be resilient to these challenges.

- **Think globally:** look at the specific skills needed and apply them generally, rather than thinking in terms of national versus international staff.
- Keep the core strong: values are non-negotiable, behaviours are universal.
- Make changes: upgrade / change skill sets, build stronger networks, be flexible.

The panel discussion was followed by an engaging Q&A session, and the day ended with a mindfulness taster session led by Hitendra Solanki, Action Against Hunger UK. You can read Hitendra's paper on mindfulness and wellbeing here.



Day 2: Sharing and learning from experiences

Day 2 of HHR Europe started with a sharing of case studies on duty of care from <u>Cathrine Ulleberg</u>, <u>Norwegian Refugee Council</u> and Cathy Fitzgibbon, British Red Cross.

Cathrine Ulleberg, Norwegian Refugee Council (NRC), spoke about a critical incident that occurred at NRC, lessons learned from this incident and what policies and practices have been put in place since then. In Dadaab, Kenya, in 2012 a group of armed men attacked a car in which NRC staff were travelling. The driver was killed and four staff abducted. They were recused four days later. NRC reviewed their policies, practices after this incident. In her presentation Cathrine highlighted the key elements of a duty of care policy, and the key points to consider before, during and after any critical incident.

- **Being prepared**: It is important to ensure you have a strong critical incidence plan. Are there clear procedures, e.g. on staff follow-up steps, clear roles and responsibilities, contacting next of kin. Ensure there are systems and procedures in place, and staff are trained in how to handle such an event.
- When crisis occurs: Put the crisis plans in place, and ensure there is capacity to handle the situation. National and headquarters staff will need support, as will relatives and next of kin. In the critical incident NRC faced, there were four international staff from different countries, all with relatives in different locations, speaking different languages who needed to be contacted and supported
- After the incident: A range of support will need to be provided after any incident. This includes medical treatment, psychosocial support, administrative and financial support.
- Long term follow up: The focus and resources needed will change over time. Individual follow-up will be necessary long term, and the aim is to get staff back to normality and work when they are ready.

Lessons learned

- Organisations and management need to understand and buy-in to the duty of care policy.
- Duty of care is a shared responsibility.
- There needs to be sufficient resources and budgets available for duty of care.

Cathy Fitzgibbon, British Red Cross, shared lessons learned on duty of care in relation to the abduction and killing of a humanitarian worker in 2012. She remarked that aid organisations have a legal duty of care to their employees regardless of the type of work and operational context. This obligation is at the governance level and organisational security policies should acknowledge this. The key players in ensuring that the organisation meets its duty of care obligations are: governance, operational managers, security and HR. Cathy's full presentation is available to conference attendees. Email info@chsalliance.org for more details.

CHSAlliance

Participants then broke into group sessions on issues of employee assistance programmes, duty of care lens, mindfulness, traits of exceptional international humanitarian staff and taking care of people in humanitarian crises. Summaries of each session are below.

Working in partnership with your employee assistance programme to enhance resilience and wellbeing

In this session **Kate Nowlan of CiC** outlined what a first class employee assistance programme (EAP) should look like: responsible, robust, customer focused, professional, flexible and adaptive. EAPs are beneficial for organisations as they demonstrate duty of care, managers who gain confidence in managing mental health related issues, and employees feel cared for.



Kate gave an overview of the services provided through CiC's EAP which includes online structured counselling, online self-assessments, resilience tools, peer support and a managerial helpline. She then suggested ways of building awareness of mental health issues as part of duty of care in organisations and useful strategies for managers under pressure.

Strategies for building awareness of mental health issues:

- Educate managers and include national staff.
- Implement comprehensive training programmes to spot first symptoms of stress.
- Teach managers to recognise behavioural change use webinars, face-to-face training.
- Leadership culture of understanding.
- Employee assistance/psychological support.

Strategies for managers under pressure:

- Mandatory training programmes for colleagues.
- Communicate regularly with staff regarding support structures (24/7 helplines, EAP, counselling).
- Roll out stress awareness programmes across the organisation.
- Implement wellbeing and wellness strategies with information about diet, exercise, rest, mindfulness.
- Ensure staff take holidays, have adequate space for social support.



The duty of care lens

Christine Williamson, Duty of Care International, discussed how duty of care is used internationally by courts around the world. Organisations are accountable against their own policies and these policies will be used in a court of law. It is up to the court to decide if the organisation has been reasonable or not. By using the duty of care lens, we strengthen our organisational resilience, which is better for employees, better for the organisation and better for those we serve. We improve the lives of others while ensuring the wellbeing of staff.

Duty of care charter:

- Our commitment
- Our relationships
- Our minimum standards
 - We prepare
 - We develop
 - We support
- We monitor and improve

A great starting point for looking at our duty of care is to break it down through the entire employee life-cycle. We can then look at minimum standards for each step of the cycle and go beyond them. Monitoring and evaluating organisational policies and practices is important. Christine suggested some mechanisms for this:

- Agree a group of people who will monitor indicators and review practices (duty of care team).
- Agree areas to monitor and why.
- Use existing mechanisms to monitor areas of policy and practice e.g. introduce key performance indicators (KPIs) or metrics for absence, conduct, turnover, health and safety instances, staff care interventions.
- Schedule of monitoring and time frames.

Mindfulness, mental health and humanitarian aid workers

Hitendra Solanki, Action Against Hunger UK, started the session by explaining what mindfulness is and the benefits of mindfulness. Mindfulness is paying attention in a particular way: on purpose, in the present moment and non-judgmentally. It is not a cure for all ills. The benefits of mindfulness on mental health have been studied for over 30 years These include enhanced attention, improved memory, stress reduction and self-insight¹. There are also benefits for organisations that use mindfulness such as increased productivity and reduced absenteeism.

Mindfulness is a potential best practice approach in preparing humanitarian staff for managing stress, anxiety and potential burnout common in the sector. According to Hitendra we need to shift the duty of care emphasis to prevention, and mindfulness can help do this.

As part of the <u>Start Network</u> <u>Transforming Surge Capacity Project</u> which Hitendra is involved in, pilot training was developed to explore how mindfulness-based approaches contribute towards greater individual resilience through a more proactive and preventative based methodology in a

¹ This includes research from Chambers etc al (2008), Farb et al (2010), Moore and malinowksi (2009). For more details on this see Hitendra's <u>presentation</u> and paper on <u>mindfulness and wellbeing</u>.



supportive manner within the project organisations. The training was delivered in the Philippines to over 60 staff from several international humanitarian organisations. The training has had positive results for participants since and the project is following participants for six to nine months after the training. Videos, audios and printed materials will be available in the coming months.

Hitendra also introduced participants to his recently published paper on mindfulness and wellbeing.

The three legs of exceptional international field staff

Scott Breslin, Operation Mercy, started his session defining duty of care as, "responsibility to avoid acts or omissions likely to cause harm to staff, clients, or others". He outlined what he sees as the three levels (or legs) of duty of care and three levels of responsibility for care.

Levels of duty of care	Levels of responsibility of care
 Minimal - No law is broken. There is no obvious neglect of staff. Better - Reasonable effort is being made to protect staff (and clients) from foreseeable harm. 	 Self-care Organisational level (HR policies) Government regulations
 Best - Reasonable effort is being made to help staff thrive and to protect staff (and partners) from foreseeable harm. 	

Through his research, Scott has found that three foundational traits contribute to the longevity and success of expatriate field leaders in the international aid sector: relationships, results and grit. The three legs are interdependent. He highlighted that grit is a part of resilience, but there is a difference between the two. Gritty people and resilient people show different qualities as listed in the table below.

Qualities of gritty people	Qualities of resilient people
 Goal orientated 	 Emotional regulation
 Long-term 	 Impulse control
Perseverance	 Causal analysis
	Self-efficacy
	 Realistic optimism
	 Empathy reaching out

There are also five characteristics of resilient and gritty people that are important in self duty of care:

1. Purse healthy relationships (comradery, community, conflict resolution)



- 2. Seek life-long learning
- 3. Process joy and sorrow
- 4. Develop physical stamina (exercise, nutrition, rest)
- 5. Build inner character (perseverance, realistic optimism, humility)

Challenges to take care of people in humanitarian crisis

Ignasi Soler, head of the HR management unit at Medicos Sin Fronteras (MSF) Spain, highlighted important questions to address to ensure we are properly caring for staff working in insecure settings. In doing so, he was challenging all in attendance to face some dilemmas and accept there might not be definite answers but that was not an excuse to avoid these.

1. How to support staff when access is restricted?

Ignasi suggested using technology, such as Skype, but that there also needs to be back-up options such as mobile or satellite phones. Ask staff what they would find helpful, what they need. Build empowered teams and enable trust so that staff feel confident in making decisions. Indeed, MSF Spain has a practice of "remote" management that empowers national staff to make decisions and is in effect "shared" management. It is important to also bring people "out" for trainings and briefings – that is, all staff, national and international.

2. Is there a tension between an organisation's duty of care and its operational ambitions?

MSF Spain's operational strategy and mandate often focus on responding to situations in conflict areas, where there are few or no other actors such as Syria, South Sudan, Yemen. When most agencies evacuate their teams, MSF sends its in. In such contexts, national staff are often also victims of the conflict themselves, and are the most exposed. The risk of death in these areas is high, which poses some challenges to duty of care policies and practices.

3. What standards exist in multicultural environments?

There are complexities when working in multicultural environments. Plans made at head office, or ways of working, may not make sense to national staff. For example, hours of work may be different between countries. At head office working five days per week may be fine, but for national staff this may be unrealistic if most people work six days a week. Are we even sure that all staff understand what duty of care means and covers? The feasibility of rolling out an effective duty of care framework might be affected by an internal lack of acceptance or awareness: when people don't ask for support, does that really mean there is no need to provide any? We must ensure we anticipate issues and there are mechanisms in place before staff ask for them. From an organisational perspective, it is important to understand why people do what they do and their motivation to engage in this kind of jobs, taking into account all the cultural nuances and local understanding/approaches in the context.

4. Are we transferring risks to national staff?

Ensure there is informed consent for all staff and the risks they face.



Your pathway to duty of care

In her second session **Christine Wiliamson of Duty of Care International** explored how participants can use the employee life cycle to influence key people in their organisations in order to get duty of care high up on the agenda of their organisation.



Christine recommends starting with the minimum standards for each step of the cycle, and going beyond. She believes that by using the duty of care lens, we strengthen our organisational resilience which is better for employees, better for the organisation and better for those we serve. She also highlighted the importance of ongoing monitoring and evaluation - by using the duty of care lens to review and prepare policies and practices, we can learn and improve.

Day two finished with an energising drum circle session.



Day 3 – Workshop learnings and conclusions

Day three started with a workshop by Scott Breslin on the cost of conflict at work. This was followed by a leadership carousel where Scott Breslin, Judith F. Greenwood and Jane Cocking circulated amongst groups of participants for discussions on the topic of organisational resilience. Participants then shared their learnings from the conference and their working groups.

The cost of conflict at work

Scott believes that conflict at work is a serious issue, but one we can do something about. According to Scott, unmanaged conflict is the largest reducible cost in organisations today and the least recognised. "If we don't deal with a conflict, it's like an infection – it spreads and increases in complexity and is more expensive to fix," he said.

He highlighted findings from a workplace conflict study by CPP Global Human Capital Report in July 2008:

- 31% of managers think they deal with workplace conflict well.
- But many organisations thought they did not have a problem.
- 43% of non-managers thought their bosses did not manage it well.
- 29% of employees deal with workplace conflict "frequently".
- The average employee spends 2.1 hours per week (12 days per year) dealing with workplace conflict.
- 50% of HR staff spend one to five hours per week on it.

Managers are key in dealing with conflict but employees also need to be self-aware. Workplace conflict is a serious condition between workers whose jobs are interdependent, who feel angry (emotionally upset), who believe the other person is at fault and whose behaviour is causing a business problem.

A whole organisational approach is necessary to deal with this issue, and is one that takes into account different cultures and ways of working. Scott proposed a working group on behalf of the CHS Alliance to go further with these ideas and a number of participants agreed to be part of this. The CHS Alliance will share further news on this later this year.

Leadership carousel

Scott, Judith and Jane shared their experiences as leaders and the following discussions with participants were based around developing resilient teams and how HR can influence senior leaders. The key points from discussions are summarised below.

	Developing resilient teams		HR influencing senior leaders
•	Go with the majority – the rest will follow or	٠	Remember we're here together to achieve a
	leave.		goal – what is the shared goal?
•	Unlocking globally mobile pool of	•	Keep focused.
	employees.	•	Close relationship between HR and



Develop shared purpose.	operations gives good results.
 Don't send people in to do jobs if they don't have the emotional capacity or skills to do the job. 	 Ensure there is a common understanding of the issue. Useful to propose a solution but can discuss solution and best options. Share different perspectives - can we talk
 Celebrate genuine success on things that really matter. 	 Share different perspectives – can we talk about this issue? Have policies in place and ensure leader is aware of responsibilities; clarity of issues.

Working groups feedback

During the conference participants formed working groups on a number of topics. On day three, before the conference finished, each group presented their learnings on each of the topics. Summaries of each are listed below.

Торіс	Minimum standards of care		
Issues and	• Time.		
challenges	Buy-in/ownership.		
	Needs and expectations.		
	Monitoring.		
	Follow-up and compliance.		
	Lack of policy at local level.		
	Difference in headquarters / local approach.		
Solutions and	 Develop process checklists – roles and responsibilities. 		
recommendations	 Share information – pre-reading before commencement. 		
	Have a tailored approach and be flexible.		
	 Know the essentials for those emergency deployments. 		
	 Identify gaps - use tools. 		
	• Develop KPIs for induction – accountability and assessment. Follow up		
	with staff – are they going through the stages?		
	 Make the time – protected days, hold each other to account. 		

Торіс	Building resilient people
Issues and	 Lack of awareness of the issue in organisations.
challenges	 Lack of understanding of staff wellbeing needs
	Reactive rather than proactive policies.
Solutions and	 Proactively create a preventative wellbeing policy.
recommendations	 Conduct a needs assessment of psychosocial needs of individuals. This will need to be reviewed.
	Proactively identify champions / exemplars.
	 Develop the capacity of champions. Nurture them through shared responsibility and peer support networks.
	 Identify a standard to look up to.
	Create a monitoring and evaluation framework that includes wellbeing.



Торіс	Building resilience into organistaional culture – how do we influence as HR?
Issues and	Organisational awareness.
challenges	• Lack of focus on wellbeing or no culture of wellbeing in organisation.
	Mission trumps staff welfare.
	 Remote people management structures don't always support
	wellbeing.
	Resistance by managers to wellbeing programmes.
Solutions and	 Organise debriefing seminars, policies / procedures.
recommendations	 Develop a connected wellbeing package / toolkit (include cultural options).
	 Communicate with staff about wellbeing, debriefing etc.
	 Provide counseling / peer support.
	 Analyse positive wellbeing stories, learn from these, share.
	Have a culture of being able to say no.

Торіс	Influencing staff to use wellbeing resources available			
Issues and	Stigma and culture.			
challenges	Resource and time.			
	 Cynicism me 	entality.		
	 Fear of impl 	ications/ vulnerability.		
	 Lack of awar 	reness of what is availa	able.	
	 Lack of know 	vledge about risk and i	impact of stress / k	ournout / post-
	traumatic st	ress syndrome (PTSD)		
Solutions and	Wellbeing and r	esilience resources ca	n contribute to sup	ported, productive
recommendations	staff and lead to	better humanitarian	outcomes. Strateg	ies outlined below.
	Raise	Remove stigma	Performance	Sharing
	awareness	and change culture	and induction	across
				organisations
	- HR being	- Role model and	- Advocating on	- During a
	an	positive stories of	long-term view	response,
	example.	what has worked.	(you help no-	joint
	- Effects of	- Mandatory pre-	one if you are	education
	cumulative	and post-	burned out).	and
	stress on the body.	deployment assessments as	- Appraising	awareness. - Cross
	- Training	standard.	managers on staff wellbeing.	organisational
	managers	- Annual wellbeing	- Buddy system.	wellbeing
	to	sessions for	- Opting out of	events
	recognise	everyone as	appointments	particularly in
	&	standard.	schedule as	large scale
	influence	- In-house	standard.	responses.
	staff.	psychologist.		- HR space.



Торіс	Duty of care for local and international staff
Issues and	Salary and benefits.
challenges	Security.
	Partners.
Solutions and	Raise awareness with partners.
recommendations	• Review policies, if there is a gap look at where you want to be, what
	resources are needed and who is responsible.

Торіс	Business case for duty of care
Details	See presentation from working group <u>here.</u>



Conference resources

Day 1 opening speakers presentations & useful resources:

- Judith Greenwood, CHS Alliance: Welcome to HHR Europe 2016
- Jane Cocking, independent consultant: Building a resilient humanitarian sector
- Scott Breslin, Operation Mercy: Organisational Resilience

Day 2 resources

- Scott Breslin, Operation Mercy: The three legs of exceptional international field staff
- Kate Nowlan, CiC, Employee Assistance: Working in partnership with your employee assistance programme to enhance resilience and wellbeing
- Cathrine Ulleberg, Norwegian Refugee Council: Duty of care
- Christine Williamson, Duty of Care International: <u>The duty of care lens</u> and <u>Your pathway to</u> <u>duty of care</u>

Day 3 resources

- Scott Breslin, Operation Mercy: The cost of conflict at work
- Hitendra Solanki: <u>Understanding Our Minds by Cultivating Mindful Awareness</u>

Additional useful resources and websites

- CHS Alliance resource library
- CHS Alliance networks / LinkedIn groups
- Duty of Care international resources
- EISF (European Interagency Security Forum) resource library
- Interhealth training and events (e.g. resilience risk assessment, resilience and stress management)
- International Location Safety resources
- <u>Start Network website resources</u>
- Surge capacity online platform

BUILDING A RESILIENT HUMANITARIAN SECTOR

AND HOW TO LOOK AFTER YOURSELF AT THE SAME TIME......

WHAT YOU CAN EXPECT....

- A SHORT LOOK BACK
- A LONGER LOOK FORWARD
- REFLECTIONS ON WHAT THAT MEANS FOR US ALL IN THE ROOM
- REMINDERS TO US ALL ABOUT OURSELVES

LOOKING BACK 25 YEARS....



- FOCUSSED ON 'THE BIG ONES'
- TOP DOWN & WESTERN DOMINATED
- BUT IT WASN'T ALL BAD...

LOOKING FORWARD

- THE EXPONENTIAL GROWTH IN NEED FROM 125m TO???
- INCREASING COMPLEXITY & INEQUALITY
- FRAGILE COUNTRIES WILL BECOME MORE FRAGILE & LESS ACCESSIBLE
- MIDDLE INCOME COUNTRIES WILL BECOME MORE VULNERABLE – BUT STRONGER

WHICH COULD LEAVE US...



BUT IT CAN'T BECAUSE....





WHAT THIS ALL MEANS FOR THOSE OF US IN THE ROOM

LEARN – CHANGE – COME THROUGH STRONGER

THINK GLOBALLY



NOTE: This measure captures changes in drought, flood and high temperature only.

• SEE THE SPECIFIC SKILLS

- APPLY THEM GENERALLY
- HELP PEOPLE TO FLOW
 AROUND THE WORLD

KEEP THE STRONG CORE



FOR ORGANISATIONS AND INDIVIDUALS:-

VALUES ARE NON-NEGOTIABLE

BEHAVIOURS ARE UNVERSAL

AND ADD TO IT....

CHANGING SKILL SETS

BUILDING STRONGER NETWORKS

• BUILT IN FLEXIBILITY

AND DON'T FORGET TO LOOK AFTER YOURSELF...



HHR Europe 2016 Organisational Resilience

Operation Mercy - Scott Breslin









1. Multi-level



2. Fit



RIGHTS RESPECTED – PEOPLE PROTECTED

RENORWEG


Session content



Lessons learned

What NRC has put in place



Incident











Being Prepared

- Crisis management plans
- Systems and procedures
- Internal & external support mechanism
- Trainings





When Crisis occurs

- Crisis plans in place
- Capacity to handle situation
- HR admin procedures
- Providing support to staff and Next of Kin
- Internal and external support system



After incident



- Medical treatment and support
- Psychosocial support
- Individual support
- Administrative and finical support
- Long term support



Long term follow-up



- Focus and resources over time
- Individual follow-up over time
- Administrative and financial support
- Social support
- Strive to get staff back to normality and work



Duty of Care and Staff Care

- Organisation and managements understanding and buy in
- Shared responsibility
- Organisational structure
- Resources
- Budgets







Scott Breslin

CHS Alliance HHR Conference Barcelona 8-10 June 2016

Best

Reasonable effort is being made to *help staff thrive* and to *protect staff* (and partners) from foreseeable harm.

Better

Reasonable effort is being made to protect staff (and clients) from foreseeable harm.

Minimal

No law is broken. There is no obvious neglect of staff.



Duty of Care Responsibility to avoid acts or omissions likely to cause harm to staff, clients, or others

Three Levels of "Duty of Care"





Three levels of responsibility for care





Self-care

the study

(a grounded theory collective case study)



- 12 exceptional expatriate field leaders
- from 9 different nations in Europe and N. America

currently working for **10** different NGOs

in **10** Muslim majority countries

for an average of **12** years each









Resilient people display





Gritty people display



Resilience

8

- 1. Emotional Regulation The ability to stay calm under pressure and control emotions, attention, and behavior.
- 2. Impulse Control- The ability to control one's initial impulses/beliefs about a situation and remain goal-focused
- 3. Causal Analysis The ability to accurately identify the causes of our problems.
- 4. Self Efficacy Confidence that we can solve the problems we are likely to experience.
- 5. Realistic Optimism A reality based belief that the future can be positive.
- 6. Empathy the ability to read other people's cues to their psychological and emotional states.
- 7. Reaching Out The ability to deepen relationships and take on new challenges. A thinking style that is not riskadverse

Grit

- 1. Sustained perseverance towards
- 2. Long-term goals







Interdependent & Mutually Empowering





A wrongful understanding of grit/perseverance

Pre-Event(s) Worldview Reframing

If your worldview is framed well for the real world you might save yourself from an initial burse or two. Read, Read, Read! Practice DEBRIEFS after movies, books, news articles, etc.

Interview people who have real life experience

Be a vicarious learner.

Building resilience (shaping your square peg for reality)



Understanding Trauma





Trauma has objective and subjective components



Group Discussion 10 min

"Please come quickly," the elder said over the phone. "Sema has fallen into the well." Cheryl, a development worker, had been working with a cluster of villages for several years in Afghanistan. She had learned Dari and Pashtun well. Sema, was a severely disabled 11 year old girl whom Cheryl had taught to read. Being near by, Cheryl jumped into a vehicle. She arrived at the scene in 5 minutes to find Sema laying unconscious and blue surrounded by a group of onlookers. No one was doing anything. Cheryl worked quickly to revive Sema, all the time desperately praying quietly, "Please God. Help her survive! I know you can!" 20 minutes later, a village elder pulled Cheryl away, saying, "It is too late. It was her time."

Pre-Event(s) Worldview Reframing Case studies & vicarious learning. Relational support Talk regularly with loved ones, counselor, support group, etc. Adopt New Perspectives Find a view of reality that aligns closer with lived reality.. Develop New Plans Revise life plans based on the new perspectives.



Path to healing/resilience includes others





Everyone is a genius, but if you judge a fish by its ability to climb a tree, it will live its whole life believing that it is stupid.

-A. Einstein







Five characteristics of resilient/gritty people

OPERATION MERCY



Interdependent & Mutually Empowering





Human Resource Policy





Employment/Labour Law for Caregivers





Self-Care for sustainable thriving





Pursue Healthy Relationships

Comradery Community Conflict Resolution

1st Habit of Sustainable Thriving




Conflict Resolution



1. **Overlook** (no big deal!) expectations?)

2.

Discuss

(missed

3. Negotiate (win-win or agree to disagree?) **Mediate** (get help)

4.

5.

Try to resolve conflict not just manage it

Mary, a social worker has been working with Ishik, Sahba, and, Parlak and a dozen other orphaned girls since they were 7 years old. Mary was their teacher, mentor, and friend. Now all the girls are turning 18 and compelled to leave the orphanage which has been their home for 17 years. Recently, members of the local mafia had been hosting lavish picnics for the girls and promising them jobs and places to stay when they leave the orphanage.

In spite of Mary's coaching the girls lacked many basic life skills, are naïve, and crave attention. One day, Mary learns that Ishik, Sahba, and Parlak were picked-up from the orphanage in a black limousine. They were never seen again.







Build Inner Character

Perseverance Realistic Optimism (Hope) Humility

5th Habit of Sustainable Thriving



Perseverance (Grit)

Realistic Optimism (Hope)

Humility

Three character traits of successful people





8 Exercises (or habits) to build character

Learn to listen and hold conversations with different types of people

5.

6. Stop looking for the approval of others

8.

7. Find the good in a setback Say something true and positive to three people every day for one month



8 Exercises (or habits) to build character



Complete the handout

break

The Cost of Conflict at Work

Building Conflict Resolution into our Organisational Culture



CHS Alliance HHR Conference – June 2016 – Barcelona

Scott Breslin



Definition:

Workplace Conflict is a condition between workers:

1. Whose jobs are interdependent. Not inderingry disasternation of the sterns

- 3. Believe the other is at fault.
- 4. Whose behaviour is causing a business problem.



5,000 full-time employees in nine countries: Belgium, Brazil, Denmark, France, Germany, Ireland, Netherlands, UK, and USA.

Only 31% of managers think they deal with workplace conflicts well.

*CPP Global Human Capital Report, July 2008

43% of non-managers think their bosses don't deal with conflict as well as they should.



29% of employees deal with workplace conflict "frequently"

The average employee spends 2.1 hours a week dealing with workplace conflict. (i.e. 12 days/year

In Germany and Ireland the average was 3.3 hours a week. 50% of HR workers questioned spent 1-5 hours/week.

1 in 6 recently witnessed a dispute escalate in duration and/or intensity.

Estimate the monthly cost of wasted time at your workplace using 2.1 hours/week per employee as a baseline.





Cost Factors





"Unmanaged conflict is the largest reducible cost in organizations today and the least recognized."

Dr. Daniel Dana, Conflict Resolution (2001)

Workload and conflict are the two biggest sources of workplace stress.

Anna Maravelas (2005)





Can you IMAGINE a workplace where:

100% of the staff have self-mediation/ conflict management training within 3 months of starting employment? Every manager and team leader has managerial mediation training?

90% of all workplace conflicts involving 3-5 parties was handled without HR or mediation specialist intervention?



- 1. Would this improve staff wellbeing and resilience? Is this our duty of care?
- 2. What are the barriers to implementation at your workplace?





Joseph Lancaster Public School Pioneer



The Lancaster Method

INTERIOR of the CENTRAL SCHOOL of the BRITISH & FOREIGN SCHOOL SOCIETY, BOROUGH ROAD. and the second data to \$ \$1. By the State

CHS Alliance HHR Conference – June 2016 - Barcelona



BRITISH SYSTEM of EDUCATION.

Working in Partnership with your EAP to enhance resilience & wellbeing

Humanitarian HR Europe Conference 2016 Kate Nowlan – CEO, CiC Employee Assistance





What does a first class EAP look like?

- Responsive, robust and customer focused
- Professional in all aspects clinical and commercial
- Flexible and adaptable



Who benefits?

- The organisation demonstrates Duty of Care
- The employee feels supported by employer in confidential setting
- Managers confidence in managing mental health concerns which impact performance.



EAP as 'resilience tool' – provides holistic care

- Local clinical support, Skype & 24/7 telephone
- Staff and dependents feel supported
- Essential programme for struggling families trying to adjust to cultural difference or separation
- Don't forget 'trailing spouse'
- Online / digital access build awareness
- Help with child and eldercare
- Managing finances while away
- Work/life balance and self-care



Issues we work with

Anger Stress Bereavement Depression . Fears RELATIONSHIP ISSUES Redundancy and work issues Trauma . Abuse Change and major life events



The Full Service

- Available 24 hours a day, 7 days a week, 365 days a year
- Available to all employees, partners and dependants*
- Free and confidential
- Staffed by experienced counsellors
- Referrals to:
 - Structured Support

Information Services

External Support

Mediation services for conflict at work





Secure Online Structured Counselling



Computer-based CBT

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Call our Adviceline on 0800 085 1376 or +44 (0)20 7938 0963

Customer Support Messenger - Google Chrome		
https://messenger.providesupport.com/messenger/0v12472gd0v8t14gwtgj455u26.html	Ci	C.
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Hello, I'd like to know more about the EAP	formation, adv Brought to you on's Employee ne (EAP), the s ractical tips, fr g reading. Wha you will find he th. day use ividual vary to of it hjoy a	ou by site esh otever
		-
	Send Live Support	
	Powered by ProvideSupport.com	

Managerial Adviceline – part of the EAP

- Coaching for Managers
- Duty clinician for out of hours emergencies
- How to deal with difficult conversations
- Supporting managers in the field
- Sharing best practice





"I think the service needs to be promoted more. It needs to be more explicit about the sorts of things the service can help with and what tools/ services are available to help. The support I received was invaluable and I wouldn't have known to call CiC."

A manager on his experience after calling the Managerial Adviceline for support in assisting an employee with a bereavement.





Well Online



Web address: www.well-online.co.uk Company Username:

Company Password:

24x7 access to Well Online

- Practical tools
- On-line chat
 - Archive of monthly help sheets
- Managers site


Did you find this useful? What was difficult/easy about the experience?

Was I able to observe my thoughts in a non-judgmental way, reminding myself that they are not facts?

CiC invites you to experience Mindfulness practice for the next five weeks. In week 3, you will receive a call from one of our Adviceline advisers to discuss

benefits. Try to practise some of the exercises every week, particularly

reflect on your ongoing practice:

Ask yourself these questions when you have finished each one to help you

programme of exercises in order that you can experience the greatest potential

Download the Mindfulness helpsheet

© Copyright CiC 2014 **Terms & Conditions | Privacy Policy | Diversity Statement** well-online.co.uk

An Invitation to a Mindful Life

* We recommend you listen to these files using headphones



Well Online The Mindfulness Zone



Welcome Member | Logout



Online Self Assessments





Online Self Assessments



Relentless day-to-day



"Any idiot can face a crisis. It is this day-to-day living that wears you out." Anton Chekhov (1860-1904)

What leads to a 'breaking point' are the difficult team dynamics, the lack of privacy, the lack of support, the loneliness and isolation. For relief workers it is the day-to-day frustration and stress that leads to burnout



Invitation to share experience

DISCUSSION

- Example of when you or a member of your team was confronted with a stressful event, at work or at home.....
- How did you react?
- Could you have used your EAP or internal resources? How could an EAP have offered support?

Employer Awareness – Duty of Care - train your staff

- Educate managers emotional intelligence – include national staff
- Implement comprehensive training programmes to spot first symptoms of stress – psychic inoculation.
- Teach managers to recognise behavioural change – webinars, face to face training
- Leadership culture of understanding
- Employee assistance/psychological support



Global trauma support

- Rapid Interventions
- Onsite specialist support with expert network of clinicians
- One to one or Group Sessions
- 24/7 telephone support from EAP
- Natural disasters, RTAs, Conflict zones, death at work, suicide
- Ensure language / cultural fit







Talk about a time when you were aware of an increase in stress or burnout symptoms at work after a critical incident

- What could have been different?
- Where could you turn for support?

Did you remember the EAP ???? Was there organisational support?

How easy is it for your organisation to offer a full programme to national staff?



Working in Partnership

Using Management Information to analyse emotional health of organisation



Online EAP Reporting

CIC Page	Homepage	Users	Materials	Usage	Logout
EAP Usa	ige Report	ts for T	EST CUS	TOMER	
Contract sta	rt date: 2 April	2012			
All fields mus	st be completed	11			
Company					TEST CUSTOMER -
Period (mont	th)				1 month
Report To					Dec 2015 -
Name					Aidan Warren
E-mail					aidan.warren@cic-eap.co.uk
				Submit	Add to Schedule
				Reset	View Schedule
					Cic
					supporting organisations

Managed Referrals Portal

Notificatio	on Portal				
Welcome to th	e web portal fo	r your online noti	fications.		C:C .
Referral Lis	CiC				
					supporting organisation
New Notific	ations				
		Reference			
30/10/2012		HE000167	View		
08/11/2012		HE000168	View		
Notification	- Austiting A	tion			
Date	s Awaiting Ac Reference	Viewed On	Viewed By		
	HE000291	17/11/2014	Kathyrn Dovaston	View	
17/11/2014					

Notifications Which Have Been Actioned

Date	Reference	Actioned On	Actioned By	
22/04/2014	HE000253	22/04/2014	Kathyrn Dovaston	View
30/10/2012	HE000167	30/10/2012	Kathyrn Dovaston	View

Sample Management Information report



supporting organisations

Reporting Includes:

- Account Management Commentary & Trend Analysis
- Number of calls & repeat calls
- Number of referrals to counselling & cases, sessions
- Total instances of usage
- Total work issues & personal issues and graphical representations
- Anxiety levels (Work and Personal)
- Caller Type
- Equality & Diversity information / data
- KPI & Matching Data
- Comparative data to other Organisations





EAP Usage – Example 1

Usage Information – Previous 12 Months



EAP Usage – Example 2

Usage Information – Previous 12 Months



supporting organisations

A total of 147,926 employees covered

Helpsheets.....bespoke

Stress and Anxiety



"Stress is basically a disconnection from the earth, a forgetting of is an emergency. Nothing is that important. Just lie down.* Natalie Goldberg, American author (born 1949)

"Any idiot can face a crisis, It is Anton Chekhov, Russian playwright (1960-1904)

Chinese Proverb

www.eie.awe.en.uk

If you're having difficulty sleeping, if you're feeling unusually irritated with your partner, if you're drinking a little more than usual, if you're feeling isolated and lonely, if you're struggling with work deadlines; if you're experiencing any of these symptoms and many besides but aren" quite sure what the matter is, there's a good chance you're suffering from stress.

The Health and Safety Executive (HSE) has estimated that a total of 13.5 million working days were lost in 2007/08 due to work-related stress, depression and anxiety. If the picture at work isn't very encouraging, home life isn't much bottor

According to government statistics, one in three households in Britain is now occupied by only one person. The gradual erosion of commun and family structures underpinning that statistic has led to a loss of social support that has left millions feeling increasingly lonely, vulnerable ... and stressed.

unts, it can turn into anxiety, which can have a debilitating impact on both long-term physical and emotional wellbeing. At the extreme end of the spectrum lie so-called anxiety disorders, which almost always require professional help.

But the good news is that there is an awful lot that we can do to take responsibility for our levels of stress and anxiety. We can't always do something about the demands that are placed on us, but we can always do something about how we respond. If you'd like to discuss any of the issues raised in this Helpsheet, the CiC 24-hour Confidential Care Adviceline is available for practical and emotional support.

Stross and Anviaty

The Power of Optimism



While there is no should that My tare by constrained and M Wood, Harp And short.

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Highundes k. Gandki, rullat political and unit tool busine 2.800-19011

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Making Lasting Changes



The outious paradox is that when I accept myself just as I am, then I can change." Carl Rogers, American psychologist and founder of Person-Cantrad Therapy (1902-1987) " It is not the strangest of the species that survives, nor the

responsive to change." Charles Derwin, English naturalist (1909 - 1882)

"When we are no longer able to change a situation, we are chellenged to change ourselves,"

Victor Frankl, Austrian psychiatrist (1905-1997)

www.cic-esp.co.uk

It's that time of year egain. We've polished off the last of the Christmas turkey, the bumper box of chocolates is finished, and the empty bottles have all gone to the recycling bin. And so it is that the thoughts of millions of people turn towards New Year's resolutions

The festive season can leave many of us feeling more than a little fragile, physically, emotionally and financially. But the dawn of a new year also suggests the possibility of a fresh start, a chance to turn the page. So the beginning of January has always been a moment to stop and take stock of the changes that we would like to make in our lives

From stopping smoking to getting fit to being a better friend to eating more healthlig to spending less, the list of personal improvements stretches far into the months ahead. This is the year, we say to ourselves when we're going to break all those bad habits. This is the year when we'll become, well, better.

And yet if we're completely honest with ourselves, we know that many of our good intentions will not get far beyond the planning phase. Even If we do make a start on changing a particular behaviour, something tells us that it won't be long before we slide back.

But it doesn't have to be this way. Lasting change is possible, but in order to be lasting it needs to be planned, gradual and above all, realistic. If you'd like to discuss any of the issues raised in this Heinsheet, the CIC 24-hour Confidential Care Adviceline is available for practical and emotional support.

Making Lasting Changes 1



Benefits of professional EAP

- The staff found this very useful to be have someone to talk to about the sudden loss of their colleague, the service was excellent as was the advice/ support. Very quickly put together with 100% service.
- The discussions prior to implementation were helpful, the team listened to our needs and have met them without fail to date, providing flexibility and working in true partnership with us to ensure our staff are getting an excellent and responsive service



What is good mental health?

Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

(Source: World Health Organisation)



Peer support?



Mentoring Peer Support Use experience from those who 'know'

EAP can help set up professional scheme



Understanding psychological impact of overseas assignments – be proactive

EAP resilience training builds awareness:

- Relationship problems family and work colleagues
- Addiction disorders
- Burnout
- Homesickness
- Financial matters
- Loneliness and isolation
- Shock of new cultural norms



Strategies for managers under pressure

- Mandatory training programmes for colleagues to boost EI, ER
- Communicate regularly with staff re support structures (24/7 helplines, employee assistance programme, counselling). Work with your EAP.
- Roll out stress awareness programmes across the organisation.
- Implement wellbeing and wellness strategies with information about diet, exercise, rest, mindfulness. How easy is this across the globe?
- Ensure staff take holidays, have adequate space for social support.

EAP is a programme for you.....

- Build robust relationship with your provider
- Know your account manager
- Keep them in the loop as organisation changes, and HR contacts move
- Health & Safety / OH to link across organisation
- Ask your EAP to help you.....design resilience training programmes together
- Conflict Resolution / Mediation



Just a final reminder.....

- Don't forget the EAP is in place for you as HR consultants as well as for staff
- Communicate, communicate
- Plan initiatives together
- ROI? Staff are supported 24/7.....



THE DUTY OF CARE LENS

1



Christine Williamson Duty of Care International

Session framework

- The Duty of Care Doctrine
- The moral, legal, financial imperative the carrot & stick
- Minimum standards using a duty of care lens
- The importance of monitoring, learning, transforming– how to keep the standard high?
- Ticking time bomb what is our community responsibility?
- Resources available keeping up to date

Duty of care:

- is an employer's moral, legal, financial obligation towards its employees
- touches upon all aspects of an employee's experience with an organisation – from recruitment to exit.
- is multi-dimensional and multi-layered
- must be adaptable and in tune with a changing organisation
- must be continuously reviewed

Doctrine of duty of care

- Tort law is used in the UK and parts of the EU
- The word tort is derived from the French word of the same spelling which means "mischief, injury, wrong, or calamity" from the Latin tortus meaning "twisted"
- In the law of tort, rights and duties are owed to everyone and by everyone
- One of the main ways to claim for compensation through the doctrine of a Duty of Care - when one party is liable to another in negligence

http://www.lawmentor.co.uk/resources/essays/discuss-development-concept-duty-care-tortneglige/

Want to know more: duty of care case law

- Donoghue v Stevenson [1932] snail in ginger beer (UK)
- Chapman v Hearse (1961) second car collision (Aus)
- Endeavour Energy v Precision Helicopters Pty Ltd [2015] (Aus)

Want to Steve Dennis v NRC [2012] (Norway) Security management - accountability know Information management more: • Following policy – armed escort Physical & psychological support duty of Article: odihpn.org/blog/dennis-vs-norwegiancare case refugee-council-implications-for-duty-of-care law **Can you get sued?** [being updated!]

www.securitymanagementinitiative.org

The Stick

Employers have a legal duty of care towards their employees to ensure the health, safety and wellbeing of their employees

Demonstrating concern for the physical and mental health of your workers shouldn't just be seen as a legal duty - there's a moral duty and a clear business case, too.

The stick – what pushes you

3 part test under English law

- Harm must be a "reasonably foreseeable" result of the defendant's conduct
- A relationship of "proximity" must exist between the defendant and the claimant
- It must be "fair, just and reasonable" to impose liability

foreseeable preventable proximity reasonable fair, just



Have you had a significant moment!

Duty of Care International - your people matter

The carrot

- Our people are our most valuable resource
- Valued and trusted employees are more likely to be engaged, committed and productive.
- The benefits of happy, secure and motivated employees far outweigh the cost of taking those reasonable and necessary steps to ensure their health, safety and wellbeing.
- Prevention is better than cure!

Think longer...it will cost less

- We practice what we preach we improve the lives of others whilst ensuring the wellbeing of our staff
- What further incentive does an employer need?

The carrot – what drives you

Using the lens



Duty of Care is the lens we look through when developing and reviewing all our policy and practices

Starting point – the basic minimum standards

- Ensuring a healthy & safe work environment
- Learning reviews & knowledge management takes place

- Providing adequate training and feedback on performance
- Ensuring staff do not work excessive hours
- Providing for rest & relaxation
- Protecting staff from discrimination, bullying & harassment
- Providing communication channels for employees to raise concerns
- Consultation employees son issues which concern them



Be great - minimum standards e.g...

We prepare:

- Operational plans and budgets will reflect our responsibilities for staff management, support, development and well-being.
- We recruit and select employees in an effective, fair and transparent way [recruitment policy]
- Communication and implementation of new policy and practice is as important as its development. Training will be provided on new policy where necessary.
- Pre-employment checks and health assessments take place before confirmation of employment for higher risk roles
- Security management and local security plans are reviewed regularly and employees trained in their use. Security plans have a schedule and method of review in high risk environments.

Be great - minimum standards e.g...

We support:

- Our working environment is supportive and inclusive our work is strengthened by the diversity of our employees. We are committed to equality of opportunity and embrace diversity in our workforce [Diversity Policy]
- We provide good access to relevant, user-friendly policy and practice and any new information that will affect employees

We develop:

• We foster a learning environment and ensure there are mechanisms to capture new learning, knowledge and innovative ideas
Minimum standards

foreseeable preventable proximity reasonable fair, just

Have you had a significant moment!

- Take a cheese or 2!
- Discuss with your neighbour a challenge/gap you are experiencing with your Duty of Care [Chatham House...]
- What would be the **minimum** you put in place to improve the situation?

14

It's not enough to know it:

So, you've got your statements of intent – your minimum standards.

So what?

Monitoring & transforming your practices





Monitoring – collect data and use it

Benchmark & analyse what's your perfect storm – your triggers?

Health, Safety, Security

- No of high risk roles identified annually
- Number of breaches of health, safety and security measures and response
- Records are maintained of work-related injuries, sickness, accidents and fatalities, and are monitored to help assess and reduce future risk to staff.
- Number of employees using staff care interventions, mandatory for higher risk roles [work with providers to understand themes]
- Number of occupational health cases and how long to resolve
- Time spent on resolving significant ER cases [inc conflict]
- Number of potential/actual personal injury claims
- No of managers attending duty of care training

Indicators – yes or no!

- Organisational plans and budgets include Duty of Care activities.
- Values and behaviours are understood by all employees and volunteers and integrated with day to day working practices
- Key policy and practice is kept up to date, legal, accessible and relevant for each location
- All travellers receive contextual briefings and debriefings [especially on return from difficult travel or deployment]
- High risk roles are attending mandatory briefings, training and accessing the appropriate support [staff care policy]
- Salary & benefits are relevant and awarded fairly and consistently
- Job descriptions are up to date

Triggers for a health evaluation

- High turnover of employees over a period of time – pressure of work/management?
- Absence rates are high
- Serious incident has taken place
- Location operating in a very high risk situation over long periods of time [cumulative stress]
- Difficult for travelers to access due to risk
- Little access to recreational activities
- Restrictions on movements/curfews due to security
- Serious employee relations issue
- Delivery of work hampered by security or underperforming team

Mechanisms for monitoring

- Agree a group of people who will monitor indicators and review practices [Duty of Care Team]
- Agree areas to monitor and why
- Use existing mechanisms to monitor areas of policy and practice e.g. introduce KPIs/metrics for absence, conduct, turnover, H&S instances, staff care interventions
- Schedule of monitoring and time frames

Monitoring - collect data and use it It's about asking the right question!

Duty of Care International - your people matter

Monitoring & transforming our practices

Take your standard and discuss how you would monitor, use the data and transform this?

Duty of care charter

- Our commitment
- Our relationships
- Our minimum standards
 - \circ We prepare
 - \circ We develop
 - \circ We support

Duty of Care International - your people matter

• We monitor and improve

Cost & ROI

Take up of services

- Studies/data on turnover, absence and sickness rates, mental health and now conflict resolution...what else?
- How much management time is spent on these and how does this affect productivity and the quality of work?
- Are we losing Innovation, energy, ideas...?
- Are we providing the right interventions?
- What does prevention look like...or may be...
- What does great look like and then what hinders this?
- What prevents individuals looking after themselves?
- Have you identified roles exposed to higher risk?

Organisational resilience

By using the duty of care lens, we strengthen our organisational resilience...

> better for employees better for the organisation better for those you serve

World Humanitarian Summit

"safeguarding humanity requires safeguarding humanitarians"



High-Level Leaders' Roundtable on "Uphold the Norms that Safeguard Humanity"

Brendan McDonald <u>@7piliers</u>

Time is ticking...

Is this a time bomb – and if so what should we be doing as a community about this?



Resources

dutyofcareinternational.co.uk/resources



Questions?



Your pathway to duty of care

1



Christine Williamson Duty of Care International

Session framework

- Why duty of care the carrot & stick
- Building on what you're already doing employee life cycle approach
- Monitoring and transforming
- Your pathway for 3 areas what's going well, not so well, what hinders, your minimum standards and making the change
- Resources keep up to date

The carrot

- Our people are our most valuable resource
- Valued and trusted employees are more likely to be engaged, committed and productive.
- The benefits of happy, secure and motivated employees far outweigh the cost of taking those reasonable and necessary steps to ensure their health, safety and wellbeing.
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Think longer...it will cost less

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The carrot – what drives you

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The stick – what pushes you

foreseeable preventable proximity reasonable fair just



Want to know more: duty of care case law

Steve Dennis v NRC [2012] (Norway)

- Security management accountability
- Information management
- Following policy armed escort
- Physical & psychological support

<u>Article: odihpn.org/blog/dennis-vs-norwegian-refugee-council-</u> <u>implications-for-duty-of-care</u> foreseeable preventable proximity reasonable fair, just



Have you had a significant moment!

Duty of Care International - your people matter

Employee cycle & duty of care



Recruitment



- Job descriptions
- Assessments interviews, tests
- Health checks, psychological clearance
- References/background checks
- High risk roles

Contracts, policy, systems & practice



- Vision, mission, goals
- Work planning, staff structures, decisions
- Resourcing surge capacity
- Systems, policy & practice (employee handbook)
- health framework high risk roles

Insurance

Induction



Role briefing

- Country/programme/team
- Organisation induction
- HR employee manual
- Development
- Technical/digital
- Health, Safety, Security

• Financial

Performance & development

Performance (day-to-day management)

- Management & support
- Work plans excessive working hours, priorities
- Protect from discrimination, bullying & harassment
- Channels to raise concerns
- Consultation and employee engagement

Development (& support)

- Employee management & support
- Performance management
- Health, Safety & Security stress & resilience, mental health, first aid
- Effective briefing/debriefing
- Career/development
- Leadership & management development
- Learning reviews & knowledge management





11

Health, safety, security – (deployment & travel)

- Health & safety policy
- Security management practices
- Health, travel, pre-deployment, fitness to travel, technical/psychological briefings
- Training context specific, security briefing, stress management, building resilience
- Peer support
- Risk assessments, learning reviews
- Monitoring mechanisms



the employee cycle & security management



Transition

- Knowledge management
- Exit interview/debriefing learning for next recruit
- Health check
- Post deployment debriefing



- Knowledge management
- Debriefing
- Exit interview, health & post deployment debriefing
- Performance management
- Health, Safety, Security
- Career/development
- Leadership & management development
- Learning reviews & knowledge management
- Management & support
- Work plans
- Discrimination, bullying & harassment
- Channels to raise concerns
- Consultation and employee engagement



Employee cycle & duty of care

- Clearly defined job descriptions Assessments, background/health checks, References Vision, mission, goals Contract Work plans, structures, decisions Policy **Systems** Systems, policy & practice Practice Health framework Insurance **Role briefing** Country/programme/team Organisation induction
 - HR/IT/Finance/HSS

Starting point – the basic minimum standards

- Ensuring a healthy & safe work environment
- Learning reviews & knowledge management takes place

- Providing adequate training and feedback on performance
- Ensuring staff do not work excessive hours
- Providing for rest & relaxation
- Protecting staff from discrimination, bullying & harassment
- Providing communication channels for employees to raise concerns
- Consultation employees son issues which concern them



Using the lens



Duty of Care is the lens we look through when developing and reviewing all our policy and practices



Your pathway...6 questions

What? (Why?)

Who?

How? Where? When?


Your pathway...

- Pick 2-3 areas/incidents/cheeses you'd like to strengthen or learn from:
- Discuss with your neighbour:
- Go through cycle what's going well, not so well, what hinders?
- what would great look like
- On left state what you would like to change & why
- On right how you will do this, and who should be involved
 [Chatham House rules]

Organisational resilience

By using the duty of care lens, we strengthen our organisational resilience...

> better for employees better for the organisation better for those you serve

World Humanitarian Summit

"safeguarding humanity requires safeguarding humanitarians"



Brendan McDonald @7piliers

Time is ticking...

Is this a time bomb – and if so what should we be doing as a community about this?



Resources

dutyofcareinternational.co.uk/resources



Questions?



CHS Alliance

Barcelona Conference

Hitendra Solanki

June 2016

Understanding Our Minds by Cultivating Mindful Awareness

Mindfulness & Wellbeing

Humanitarian Aid Workers & Mental Health: A Shift of Emphasis from Treatment to Prevention

Member Login

a



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Mindfulness and Wellbeing: A Shift of Emphasis from Treatment to Prevention

In recent years, there has been an awareness of mindfulness-based approaches to stress reduction, along with evidence on its benefits towards supporting personal and organisational wellbeing. In the paper, Mindfulness and Wellbeing, released today, Hitendra Solanki, explores the current wellbeing support available to aid workers and examines the concept of...

By Hitendra Solanki 09/12/2015



Staff care: why we should all care about mental health

Organisational duty of care and the need to support aid workers' mental health has hit the news recently, helping to bring attention to these key issues. Moving past the headlines, our People, Capacity and Development Manager, Em Lacroix, explores what it means for the sector, its agencies and its workforce.

By Emmanuelle Lacroix 08/12/2015

Desk Based Research

humanitarian news and analysis IRIN-

- Select a country -

Anne Analysis Gobal Issues Africa e Asta e Middle East e Plusteaus



HC International Federation of Red Gross and Red Cresnent Statelles



Cynthild B. Enikesson 1

Humanitarian Emergency

Purpose of the Paper

- Rough snapshot of the situation regarding Wellbeing Practices
- Sampling of the situation prior to deeper study of wellbeing approaches
- Breadth wider, Depth exploratory
- A more academic approach envisioned
- Longitudinal study of Aid Workers & Organisations planned-greater depth



A Journey through the Paper

from Individual to Organisational Change

Department for International Development



'there is a broad recognition of the need to better support communities themselves to become more resilient and prepared for disasters', especially as, 'humanitarian disasters are increasing in number and complexity every year and this trend is expected to continue'.



More skills and competencies required to build this capacity to fulfil our collective humanitarian mandate

and to be the *'right people'*, in the *'right places'*, doing the *'right things'*,

A need to consider the implication of these requirements on aid workers.





As our staff help to meet this humanitarian mandate, and build the resilience and preparedness of crisis affected communities,

what are we doing as agencies to actually better support and build the resilience and preparedness of our own crisis affected staff?





Individual Level Resilience







COPEN ACCESS DE PEER-REVIEWED

Psychological Distress, Depression, Anxiety, and Burnout among International Humanitarian Aid Workers: A Longitudinal Study

Barbara Lopes Cardozo D, Carol Gotway Crawford, Cynthia Eriksson, Julia Zhu, Miriam Sabin, Alastair Ager, David Foy, Leslie Snider, Willem Scholte, Reinhard Kaiser, Miranda Offf, Bas Riinen, Winnifred Simon



Ranking: 2013 SJR (SCImago Journal Rank) Score: 0.288 | 35/73 Emergency Medicine | 64/115 Public Health, Environmental and Occupational Health (Scopus®)

Predeployment Mental Health and Trauma Exposure of Expatriate Humanitarian Aid Workers Risk and Resilience Factors

Cynthia B. Eriksson1

This is a highly important question.



Clinical studies show that aid workers, in the field, and *even office based*, struggle under heavy workloads, tight deadlines, and tough working environments, often experience stress, anxiety, depression, and burnout





'approximately 30% of international staff of five humanitarian aid and development agencies surveyed after their return from their assignments reported significant symptoms of post-traumatic stress disorder (PTSD)'.

A joint study by the Antares Foundation and the Center for Disease Control & Prevention (CDC) in 2012

OCHA IRIN news report in 2010, also reported that, following exposure to 'high-impact stress',

'3-4 percent of MSF workers developed severe mental illness, mainly depression or psychosis, when in the field'.

http://www.irinnews.org/report/90226/health-aiding-aid-workers



UNHCR, 2013

Table 4: Top Stressors for Staff in Bangladesh and Pakistan

Category of Stressor	Bangladesh		Pakistan	
	focus groups	individual interviews	focus groups	individual interviews
Status of employment contracts, including short-term contracts; late renewal of contracts; lack of long-term job security.	100%	77%	62%	20%
Workload, described as more work than one person can be expected to handle, competing task demands, conflicting deadlines, too much paperwork, bureaucracy, and inequitable distribution of work.	100%	85%) 77% (80%
Relationship with supervisors including competing requests from many informal 'supervisors' i.e. people of higher authority; along with frequent changes in supervisors and the associated changes in management style and performance expectations.	80%	77%	85%	20%
Family concerns, including family separation and not enough time for family.	80%	69%	46%	20%
Feeling undervalued, described by participants as not feeling appreciated or recognized for one's contributions to the organization.		77%	62%	40%
Working hours.		54%	69%	60%
Relationships with work colleagues, including team tension and conflicts.		84%	77%	60%
Safety concerns including a fear of travel late at night, the lack of adequate training or equipment to deal with emergencies.		31%	92%	40%
Sexual harassment.	0%	20%	77%	6%



In a Guardian survey of 754 aid workers

79% said they had experienced a mental health issue

and

93% said these were work-related

(November 2015)





Stress & Standards

Standards & Competencies





'quality criterion for Commitment 8' states that staff should,

'be supported to do their job effectively'

Commitment's key actions states that staff will need to work,

'to agreed objectives and performance standards',

.....'that staff develop the necessary personal, technical and management competencies to fulfil their role and understand how the organisation can support them to do this'

Importantly, the CHS states under the 'Organisational Responsibilities' section that

'policies are in place for the security and the wellbeing of staff'. Core competencies and Behaviours required for

'demonstrating leadership in humanitarian response'

is

'self-awareness'

to

'show awareness of your own strengths and limitations and their impact on others'.

Also

'critical judgement',

'listening and creating dialogue'.

	Humanit				is nor n	
Keeping	crisis-affecte	d people at th	e centre of wi	nat we do		cbh
Competency Domains	Understanding humanitarian contexts and applying humanitarian principles	Achieving results	Developing and maintaining collaborative relationships	Operating safely and securely at all times	Managing yourself in a pressured and changing environment	Demonstrating leadership in humanitarian response
Outcomes	Understand operating contexts, key stakeholders and practices affecting current and future humanitarian interventions	Be accountable for your work and use resources effectively to achieve lasting results	Develop and maintain collaborative and coordinated relationships with stakeholders and staff	Operate safely and securely in a pressured environment	Adapt to pressure and change to operate effectively within humanitarian contexts	Demonstrate humanitarian values an principles, and motivate others to achieve results in complex situations, independent of one's role, function or seniorit
and Core Bohaviours humanitari > Demonst informed by skills and knowledge Application and under humanitarian response, informed by skills and knowledge Application and under humanitari > Demonst Reduction, recovery > Apply und politicat an and under humanitari > Demonst understand and diversi humanitari > Take into needs, skill experience poople and response.	humanitarian centext - Demonstrate understanding of the phases of humanitarian response including preparedness and contingency, Disaster Risk Reduction, response and recovery. - Apply understanding of the political and cultural context and underlying causes of the humanitarian crisis.	tan centext quality and impact rate > Demonstrate understanding of agency project cycle management. response and of effective projects and programmes. Actively participate in the design and implementation of effective projects and programmes. > Maintain focus on delivery of timely and appropriate resources.	Listening and creating dialogue Actively listen to new and different perspectives and experiences of crisis- affected people, stakeholders and team metobers. Establish and maintain clear dialogue with crisis- affected people or other stakeholders. Working with others	the form building a must that	Adapting and coping Remain focused on your objectives and goals in a rapidly changing environment: Adapt calmly to changing situations and constraints. Recognise personal stress and take steps to reduce it. Remain constructive and positive under struss to be able to tolerate difficult and challenging environments.	Self-awareness Show awareness of your own strengths and limitations and their impact on others. Demonstrate understanding of your skills and how they complement those of others to build tear effectiveness. Seek and reflect on feedback to improve your performance.
	 Demoestrate understanding of the gender and diversity dimensions of hemanitarian situations, s Take into account the needs, skills, capacities and people and apply these in the response. Applying humanitarian standards and principles 	 Contribute positively in the team to achieve programme objectives. Share useful information and knowledge with colleagues, partners and crises-allected people as and when appropriate. Actively participate in networks to access and 	Managing personal safety and security Build and sustain acceptance for your work in	Maintaining protessionalism Take responsibility for your own work and its impact on others: Plan, prioritise and perform tasks well under pressure. Maintain ethical and professional behaviour in	Motivating and influence ethers Sommunicate hemanitarian values and encourage others to share them. Inspire confidence in others. Speak out clearly for organisational beliefs and	

Micro Level (Individual Level)

Macro Level

(organisational Level)

Standards & Competencies



Commitment's key actions states that staff will need to work, 'to agreed objectives and performance standards','that staff develop the necessary personal, technical and management competencies to fulfil their role and understand how the organisation can support them to do this'

'quality criterion for Commitment 8' states that staff should,

'be supported to do their job effectively'





'show awareness of your own strengths and limitations and their impact on others'.

demonstrating leadership in humanitarian response'









'critical judgement',

'listening and creating dialogue'.

A Burden to Perform and Deliver Competently to the Standards Required

Voices

Amy Brathwaite

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The New Hork Times

The Opinion Pages | OP-ED CONTRIBUTOR

A Crisis of Anxiety Among Aid Workers

By ROSALIE HUCHES MARCH 8, 2015



An idyllic Mediterranean beach in Tunisia is not usually a place of high anxiety, but that's where I spent the worst day of my life. I hadn't slept in three nights and called in sick to work because I could no longer think. I felt I was losing my mind and spent the day as a zombie on the beach, feeling empty and alone on the sand.

It was 2011 and the Libyan war was at its height. I was working on the border of Libya and Tunisia for the United Nations refugee agency, interviewing refugees from sub-Saharan Africa who had been living in Libya when the war broke out. My job was to recommend who should be resettled in a Western

SYNOPSIS:

Kick at the Darkness" is a documentary that explores the psycho-social impact of working in high stress emergencies. The topic is presented through a series of candid interviews with

individuals whose experiences span from the 2004 Tsunami, to the bombing of the United Nations building in Iraq, 2005 Pakistan earthquake response, ongoing conflicts in Darfur, South Sudan, Somalia and Chad, the 2010 Haiti Earthquake, and 2013 Typhoon in the Philippines.

The documentary explores how working in environments with intense suffering, devastation, conflict or volatility can manifests itself among staff, and delves into some of the coping mechanisms commonly used when support is not always available through humanitarian organizations. Although research in the area of staff care began over two decades ago, there is a sense that the support is either unnecessary, inappropriate or insufficient. In addition, during instances of intense stress, there could be a dismissal of fears or suppression of anxiety. This project aims to combat the lack of dialogue among the aid community about the impact of stress

Amy Brathwaite

'The counsellor used the word traumatized and as if on cue, something inside of me shattered in to a million little pieces. Tears started and did not stop. I was not ok. I was not the same joyful person who had arrived. My hope had fallen down'

Haiti

Rosalie Hughes

'From my air-conditioned bedroom I saw the faces of those I'd interviewed that day and wondered if they were lying awake in the sweltering tents, thinking of all they had lost. Increasingly sleepless, it became harder to pretend that everything was fine. Finally, I realized I needed help. I emailed a human resources officer asking if mental health support was available. I never heard back. I survived the remaining months of my contract and then left the organization. I spent the next couple of years dealing with recurring insomnia'

Tunisia






Global development professionals network Aid worker wellbeing

Steve Dennis and the court case that sent waves through the aid industry

Last week aid worker Steve Dennis won a case against his former employer, the Norwegian Refugee Council, after he was kidnapped on the job in 2012. What impact will it have on the sector?

Holly Young

y @holly_youngBB

Saturday 5 December 2015 09.22 GMT



< Shares

800

Save for later



Aid worker Steve Dennis: 'I thought going to court was the last resort, but eventually I had exhausted every other option.'

Most popular in US



Alexander Litvinenko: the man who solved his own murder | Luke Harding

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theguardian



New England Patriots v Denver Broncos: AFC championship game live!



The rise and fall of Sarah Palin: plucked away from Alaska, she lost her soul



Aldi confirms up to 100% horsemeat in beef products



Netflix and thrill: TV industry braced for



This thing called.....

Duty of Care

..... it's in there somewhere....right?

Department for International Development



throughout the 76 pages of the HERR document, and within the 62 pages of the DEPP business case,

there is not a single mention of staff well-being made.

Indeed, the word 'wellbeing', or any similar attributes to staff welfare do not appear at all in either of these two documents Humanitarian Emergency Response Review

28 March 2011 Chaired by Lord (Paddy) Ashdown

Business Case Intervention Summary: Disasters and Emergencies Preparedness Programme

Intervention Summary

What support will the UK provide?

The Disasters and Emergencies Preparedness Programme (DEPP) is a three year programme worth £40m which will significantly improve the quality and speed of humanitarian response in countries at risk of natural disaster or conflict related humanitarian emergencies. It will do this by increasing and strengthening the capacity of the humanitarian system at all levels, although support will be weighted towards training and development for local humanitarian workers at national level. National preparedness systems will also be strengthened.

The Consortium of British Humanitarian Agencies (CBHA) and the Communicating with Disasteraffected Communities (CDAC) Network have been pre-selected to deliver the majority of the programme. A quarter of the funding will be made available to other NGOs and private sector organisations to deliver more innovative, potentially higher risk initiatives in priority areas. DEPP will be managed by DFID's Conflict, Humanitarian and Security Department.

Why is UK support required?

The types of event that lead to humanitarian disasters are increasing in number and complexity every year and this trend is expected to continue. Those countries prepared for the worst can reduce the impact of such disasters substantially. Current global investment in emergency preparedness is however extremely low. Less than 5% of all humanitarian funding in 2009, constituting less than 1% of Official Development Assistance (ODA), was spent on projects working to prepare countries for potential disasters. This means there is currently a shortage of people and systems with sufficient capacity to assist countries in preparing for and responding to disasters, particularly at the national level.

The UK Government Response to the Humanitarian Emergency Response Review (HERR) identified

Micro Level (Individual Level)



Standards & Competencies



Commitment's key actions states that staff will need to work, 'to agreed objectives and performance standards','that staff develop the necessary personal, technical and management competencies to fulfil their role and understand how the organisation can support them to do this' 'quality criterion for Commitment 8' states that staff should, 'be supported to do their job effectively'

< Duty of Care >

Treatment

Prevention









< Duty of Care >

Prevention ----- Treatment

Traditional psychosocial support is effective, but often **treatment** based

There is also need for a simple *preventative* approach



Prevent

VS.

Treatment

One that supports aid workers to effectively manage their own stress, anxiety and mental health, and ultimately their own well-being.

Shifting the Emphasis

< Duty of Care >

Prevention ------ Treatment



Prevention ----- Treatment

Shifting the Emphasis



< Duty of Care >

Prevention ---



Treatment

Shifting the Emphasis & Organisational Change to Wellbeing





Prevention ----- Treatment



Shifting the Emphasis – Something Needs to be Done!

- Live Mare Love Better Wary Less Smile Mare Learn Better Listen Better Facus More Sleep Better
- < Duty of Care >





Prevention ------ Treatment

79% Affected by Stress & 94% Say its Work Related



Mindfulness & Health Benefits

GUEST EDITORIAL

Nearly 40 years of scientific research globally has demonstrated that Mindfulness-Based Stress Reduction (MBSR) can positively, effectively, and often profoundly, reduce psychological distress.





The academic partner of UMass Memorial Health Care



PRIFYSCOL



The Role of Mindfulness in Healthcare Reform: A Policy Paper

Kelley McCabe Ruff, MBA and Elizabeth B. Mackenzie, PhD



1. Introduction

Copyright # 200.5 SolBox

Achieving He also truly shape for hold reading and tensies requires a prot deal of intentance in traganing. inicks, schwinks and memor advertising component As a result, three exists on increasingly larger character torwear the average ferrals and mala body size and that of the tion identical from partitional in the antida. Polyreital consequences of this discription; between actual and dated weight and stress include hidy doman factors. Fill anno brokewik Sex anose-New with really syntaged Therefore, it is supermaning identify permuted positionagand factors this increase the net tier as indeeded to impage to each directive behaviors to consider their desired we obtain The oreplasis in todaty and the media on approximity such as that this lively ideal campial with a regarive preserven of secils physical approximes has been identified on an important factor contributing to pulsambility in-(of vocated galaxy for analysis of the Discribed using tehaviors are he defend as meet datasettar styles of oness hereitar testerinari oncontribut and entational [7]. Rentational issuing tweaters matricated of food inside or dicting. Dicting has food found in play a task' in the development of sering discrimen [10] and

presentes embedding cyclics of weight loss and gala [4], Simplemented method scale to driver by appearance taken environments measures and regulations and as judges on of the self is turner () alongs and weight (10).

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2014) percented a definition that emphasized the regulation

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Street Street

Before meditation...

Frontal lobe

Parietal lobe

Occipital lobe

After meditation...

Frontal lobe

Parietal lobe

Occipital lobe



Researchers theorize that mindfulness meditation promotes

Metacognitive awareness

- o Decreases rumination
- o Enhances attentional
- o Improves working memory
- o Improves effective emotion-regulation strategies.





Reduced Rumination

Chambers et al. (2008)



Research:

20 novice meditators participated in a 10-day intensive mindfulness meditation retreat.

Findings post-retreat:

They had significantly higher self-reported mindfulness and a decreased negative affect (compared with a control group)

They experienced fewer depressive symptoms and less rumination.

They had significantly better working memory capacity (better able to sustain attention during a performance task compared with the control group)

Stress Reduction

Farb et al., (2010).

Participants randomly assigned to an eight-week mindfulness-based stress reduction group were compared with controls on self-reported measures of depression, anxiety and psychopathology, and on neural reactivity as measured by fMRI after watching sad films.

The researchers found that the participants who experienced mindfulness-based stress reduction had significantly less anxiety, depression and somatic distress compared with the control group



Focus

focus (



Research:

Another study examined how mindfulness meditation affected participants' ability to focus attention and suppress distracting information.

The researchers compared a group of experienced mindfulness meditators with a control group that had no meditation experience.

Findings:

They found that the meditation group had significantly better performance on all measures of attention and had higher self-reported mindfulness. Mindfulness meditation practice and self-reported mindfulness were correlated directly with cognitive flexibility and attentional functioning

Less Emotional Reactivity

Ortner et al., (2007)

Research & Findings:

In a study of people who had anywhere from one month to 29 years of mindfulness meditation practice, researchers found that mindfulness meditation practice helped people disengage from emotionally upsetting pictures and enabled them to focus better on a cognitive task as compared with people who saw the pictures but did not meditate.



Other Benefits...

- Working Memory
- Cognitive Flexibility
- Relationship Satisfaction
- Self-insight
- Morality
- Intuition and fear modulation









Health Benefits



Increased immune functioning

(Davidson et al., 2003; see Grossman, Niemann, Schmidt, & Walach, 2004 for a review of physical health benefits)

Improvement to well-being

(Carmody & Baer, 2008)

Reduction in psychological distress

(Coffey & Hartman, 2008; Ostafin et al., 2006)

Increased information processing speed

(Moore & Malinowski, 2009)



So what exactly is Mindfulness



Mindfulness is defined by Jon Kabat-Zinn, who developed a secular stress-reduction course based on meditation techniques in the late 1970s, as



University of Massachusetts UMASS. Medical School The academic partner of UMass Memorial Health Care

66 Mindfulness means paying attention in a particular way; On purpose, in the present moment, and non-judgmentally."

Jon Kabat-Zinn

Mindfulness can allow us to become aware of what is going on in our own mind and body.

Learning to be aware of our thoughts, feelings and bodily sensations without self-criticism allows us to accept our experiences as they are, rather than how we want them to be.

This includes painful emotions, so that over time we respond skillfully to them, instead of reacting through the autopilot of our habits and conditioning.



Mindfulness-Based Stress Reduction (MBSR)

Based on what is known as the 8-week MBSR course



It's Very Much Experiential!



So that's why they call it 'Practice'

Science leads to Mindfulness in the Mainstream

Major organisations and corporations

- Google
- General Mills
- Harvard Business School
- Schools,
- Hospitals,
- Prisons
- ...even the military

Experiencing the benefits of using mindfulness, and are now using Mindfulness based approaches for their employee wellbeing

Google













Wellbeing: Individual and Organisational

Individual Level:

- Greater Resilience to Stress
- Less stress related illness
- Reduced Anxiety
- Decrease in Negative Thinking & Depression

Organisational Level:

- Greater Resilience to Stress
- Staff retention
- Reduced sickness and abseteeism
- Increased productivity



Johnson Johnson

'a comprehensive, strategically designed investment in employees' social, mental, and physical health pays off. J&J's leaders estimate that wellness programs have cumulatively saved the company \$250 million on health care costs over the past decade; from 2002 to 2008, the return was \$2.71 for every dollar spent'.

https://hbr.org/2010/12/whats-the-hard-return-on-employee-wellness-programs

The Heart Foundation in Australia implemented a health and wellbeing program in 2009

'33 per cent decline in absenteeism and a five per cent decline in voluntary turnover. Additionally, 42 per cent of workers reported being more physically active and 79 per cent reported some type of improvement in their health following the program'

http://www.comcare.gov.au/ data/assets/pdf file/0016/111139/Quantifying the return on investment -Organisational examples PDF, 63.5 KB.pdf





ORGANISATIONAL EXAMPLES

This publication provides information about the return on investment achieved by different types of health and welthering programs that have been implemented in a vanety of organisations

THE HEART FOUNDATION

The Heart Econdition in Australia implemented a reality and vielitiesing program in 2009, which offered a range of activities focused on both physical and mental wellbeing. Evaluation of the program revealed a 30 per cent decline in obserteetant and a five per cent depine in voluniory turnever. Additionally, 47 per cent of workers reported being more physically active and 79 per centreported some type of improvement in their health following the program. For more datalad information on this health and wellbring program, relia to Chemoloning Hourts in NSW-Statt Wellness Program 2009 IPCE 1024KB. enforce stations and an Attentiality of the Content of the Child Multiple of Attention of the other of the state


Positive ROL The positive return on investment (RCI) for 'effective' Workplace Health & Wellbeing Programs is established. <u>ASK YES</u> for background research (PwC studies/Compare/EAPa). Here is the return for each \$1 spent.

- . \$2.3 to \$10 1 for Health & Wellbeing Programs
- S2 3 for Mental HealtH promotion and programs
- · \$5-10 for Employee Assistance Programs (EAP)

Positive Outcomes. The Business Case (drivers) Healthy workers are more productive workers

Reducing Costs

- · Absenteeism and presenteeism
- Last productivity
- . Tuntover
- · Physical nury clams
- · Raychological mjury claumi

Imploying Performance

= Improved health & wellbeing of employees

Here is the return for each \$1 spent:

- •\$2.3 to \$10.1 for Health & Wellbeing Programs
- •\$2.3 for Mental Health promotion and programs
- •\$5-10 for Employee Assistance Programs (EAP)

Positive Outcomes. The Business Case (drivers). Healthy workers are more productive workers.

Reducing Costs Absenteeism and presenteeism

- •Lost productivity
- •Turnover
- •Physical injury claims
- •Psychological injury claims



Encouraging data for return on investment via a proactive and preventative approach can also be seen in a similar study cited in the European Agency for Safety & Health report, which estimated that for,

'every €1 of expenditure in promotion and prevention programmes generates net economic benefits over a one-year period of up to €13.62', as a result of investing in, 'mental health promotion and mental disorder prevention in the workplace, including improvements in the work environment, stress management and psychological treatment'



In People in Aid's 'Surge Capacity in the humanitarian relief and development sector' report 2007, another example of how improved wellbeing practices are positive in an organizational sense,

'Dan Kelly of World Vision identifies the support of staff wellness as one of his agency's key lessons. The organisation has invested heavily in providing staff support through contracting an external team. Though this is 'very expensive', a recent staff-care survey showed that staff satisfaction levels were some of the highest in the agency and wellness support has led to increased retention ' Questions?

Rol or Minimum Standards?

Philosophical or Economic?

Integrity of Indicators and numbers or of a humanitarian approach?





FOREWORDS BY JON KABAT-2INN AND DAMEL GOLEMAN

Search Inside Yourself

THE UNEXPECTED PATH TO ACHIEVING BUCCESS, HAPPINESS (AND WORLD FEACE)



CHADE-MENG TAN

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MINDFUL REVOLUTION

Fleeing Syria Protection / Peyton Power/Steve McQueen

The science of finding focus in a stressed-out, multitasking culture

Very Fashionable.....?













Panacea.....?

Mindfulness is not a cure for all ills......

Proceed with Caution, Integrity and Respect.....

But it may be a robust and scientific preventative approach to wellbeing.....





Maria Eaton – HR Director ACF-UK



'From an HR perspective, these early forays into the use of mindfulness in helping staff to deal with the stress of their everyday workloads were compelling. Anecdotally at least, staff seemed to welcome the approach with an open mind, with many responding positively to the training. In part, the training is perceived to be very down to earth and rooted in a scientific and credible context.

Indeed, the 'tools' available in the training can be very simply and effectively applied, even whilst being busy in the various activities during the working day, whatever they may be. This simplicity and effectiveness makes it a very attractive proposition in supporting staff wellbeing'.

Where are we in the Journey

Philippines MBSR Pilot 2015

Four 6-Day Trainings in Manila & Tacloban





Approx 60 Participants National Staff from Christian Aid Save The Children Action Aid Muslim Aid Oxfam ACF IMC Plan International



2 Trainings in Manila



Body Scan



Mindful Movement

Two Trainings in Tacloban







Mindfulness in Everyday Life

Lyziel

'I did not think I was stressed, but all the people around me told me that I was. I was getting sick and was confined in the hospital, but I did not think that it was related to my work. Though I was still recovering, I needed to work because there were activities, which only I could do. That was what I thought, so it stressed me out. Having to work despite being unwell. The course was very helpful. First, I was able to realize and put more emphasis on the fact that emotions, which are results of situations, have a direct impact on body processes and sensations. I learned that the reason why I said I was not stressed was because I have raised my tolerance level to the high demands of personal life and work'.

Tacloban

August 2015

Athena

'The stillness afforded by the practices helped me see a much deeper insight into myself. I experienced some sort of freedom from a repressed emotion related to my tragic experience with Typhoon Yolanda. It seems that when you get to master the discomfort, the person becomes stronger, braver, and more resilient'.

Tacloban







Ongoing & Next Steps

Further Mindfulness & Wellbeing Pilots

OXFAM Bangkok – July

TSC Platform training, Bangkok - August

Ateneo de Manila, Philippines training – August

IMC – Turkey (Syria crisis) training – August

TSC Platform training Manila – October

TSC Platform training Pakistan – Quarter 4

Vietnam, Laos, Nepal & Bangladesh - 2016-17









Partnership with Ateneo de Manila University

Training Psychology Students in MBSR

Exploring Integrity, Credibility and Sustainability in training humanitarian workers

Linking with Longitudinal Research

Publishing Papers on Research



INITIATIVE FOR Conflict-Related Trauma

The policy, research and consultancy organisation for conflict-selated trauma and transformation

Home Main Research Key Papers What we do About Contact

ICRT is a not-for-profit organisation based in Northern Ireland. Our mission is to improve the lives of people affected by conflict-related trauma and strengthen the social sustainability of their communities.

About



Why conflict-related trauma matters.



studies

WordOnTheGround Main Research



Selected research Social innovation in action

Better understanding of emergency affected communities Are you interested in how data can change our understanding of the needs of emergency affected communities? For news of a new needs assessment and service delivery platform for hard-to-reach communities have a look at http://wordontheground.com (dick on image to the left). Also, follow @WordOnTheGround for updates on developments of the platform.

See Main Research for extensive series of primary research papers and

App-Based System

Development of App-Based System with ICRT

Pilot Trials to begin in July 2016

Designed for Longitudinal Data Study

Test During Live Emergency (Surge Deployment)

PSS, MAS & GHQ Scores as self-perceived indicators

Longitudinal Research

Participants from the Mindfulness Training (& Non-Mindfulness Control Group)

PSS, MAS & GHQ as indicators measured over a period of time (6-9 months)

Using App-Based System

1-2-1 Remote Follow-Ups via Skype





Resource Materials



Videos – Guided Practice & Instructions

Audios – Guided Practices & Narratives

Printed Materials = Guide Book & Manual





Short Documentary

Open Source

HR Best Practice Online Forum

CHS Alliance & Start Network

Transforming Surge Capacity project resource portal

http://surgeonline.chsalliance.org/

Early Days – Being Populated Currently

Open to All

Open Source Materials & Links







Wellbeing Policy Research

With TSC HR Best Practice Consultant

Conducting a review of wellbeing and EAP Policies from across 27 START Network agencies (due for completion September 2016)

Review of Best practices & How to Shift Emphasis to Prevention based approaches

Wellbeing in M&E Frameworks

'When measuring softer outcomes like changes in behaviours or relationships it is critical to keep indicators simple but relevant. Measure what matters and not what is easy to measure'.

		PROJECT SUMMARY	INDICATORS	MEANS OF VERIFICATION	RISKS / ASSUMPTIONS
	Gual	soft increase in the number of Grades 5-6 primary students continuing on to high school within 3 years.	Percenta primery on to hig	Companison of primary and high school enrolment records.	N/A
vork to	Outcome	Improversading profidency among children in Grades 3- 6 by 20% within 2 years.	Zanding by hg	Six as pendic g the notion which	Improved reading preficiency provides self confidence required to stay in school.
	001905	guo Grade 5-6 students vith los: reading proficiency complete a reading summer camp	THEN	Sammercampattendance records.	Children apply what they learned in the summer damp at school.
impact	Antivities	Run five summer reading comps, each with repacity for you-Gouden 3-6 students.	IF	AND	Parents of children with low reading professory are willing to seed them to the camp.

START Network MEAL Head

TSC MEAL Lead

Developing practical M&E framework to utilise for Project interventions

Not just the progress, output and impact indicators for the project intervention – but to monitor wellbeing of staff systematically also

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PHILIPPINE JOURNAL OF PSYCHOLOGT

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Mindfulness & Wellbeing

Partnership with

University

Ateneo de Manila

Training Psychology Students In MBSR

Exploring Integrity, Credibility and

Linking with Longitudinal Research

Publishing Papers on Research

Sustainability in training humanitarian workers

Longitudinal Research

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P55, MAS & GHCLas mulicators measured over a period of time (6-9 months)

Using App-Based System

Further Mindfulness & Wellbeing Pilots

CONFAM Banytink - july

TSC Hattormtraining, Banglok - August

Ateneo de Manita, Philippines/training-August

IMC - Turkey (Swin crisis) training - August

TSC Platform training Massia - October

TSC Platform training Pakistan - Quarter 4

Vietnam, Laux, Nepal & Bangladuch - 2016-17













.... and so organisational change begins at the individual level





there is a start of the

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66 Mindfulness means paying attention in a particular way; On purpose, in the present moment, and non-judgmentally. 23 Ion Kabat-Zinu



Wellbeing Policy Research

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'a comprehensive, strategically designed investment in employees' social, mental, and physical health pays off. J&J's leaders estimate that wellness programs have cumulatively saved the company \$250 million on health care costs over the past decade; from 2002 to 2008, the return was \$2.71 for every dollar spent?

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Self-Awareness

Understanding Our Minds by Cultivating Mindful Awareness



Walking Onwards Together....

Contact Details

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... the Journey continues