

COVID-19 WEBINAR SERIES

WORKING WELL: LEADING AID ORGANISATIONS WITH CARE & COMPASSION DURING COVID-19.

with guest panellists Christine Sow, Reza Chowdhury, Jill de Bourg, and Ian Ridley





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Working well: Leading aid organisations with care and compassion during COVID-19.

PANELISTS

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MODERATOR

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WEBINAR OVERVIEW

The Alliance's work on people management and recent analysis of <u>aid worker well-</u> <u>being</u> has elevated concern for colleagues in the humanitarian/development sector who were already – before the appearance of COVID-19 - experiencing high rates of stress, burnout, anxiety, depression, PTSD and negative coping mechanisms.

As we all navigate this period of heightened uncertainty due to the pandemic and the many measures now being taken around the world in response to it, it is more important than ever to take care of (and show compassion to) colleagues and ourselves. Leaders, in particular, play a crucial role in setting the tone while steering their organisations through uncertain times.

This online discussion aimed to raise awareness about some current resources, good practices and opportunities to come together in solidarity, starting with leaders.





CONTEXT

Four executive leaders of aid organisations discussed an overlooked aspect of the Corona virus pandemic: the strains being placed on staff mental health, people management and organisational culture, sharing their views on the following questions:

- 1. What are you doing now to be compassionate and caring towards staff? And as a leader, towards yourself?
- 2. What are the potential impacts of COVID-19 we should already be anticipating in terms of making more permanent shifts in how we work in the aid sector? What opportunities for positive change should we be seizing?

KEY TAKEAWAYS

Practical takeaway # 1: Establish/review your operating model and ensure regular connection points.

Working in the presence of others often creates a sense of belonging and energy. A shift to remote work can lead to a feeling of isolation, uncertainty, anxiety and loss of motivation. Communicating and listening are critical leadership activities at the moment for ensuring positive mental health, reducing stress levels and upholding engagement. Regardless of what your team's work hours might be, establishing organisational rhythms, connection points throughout the week, and a sense of consistency are essential for developing a remote work culture and resiliency.



"To be a resilient organisation, one needs to bring their staff with them, and that involves being a leader, being compassionate and strengthening teamsthrough times of crisis rather than letting them fall apart." ~ Christine Sow

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Humentum has been working remotely for years – however they now have looked at their operating model and made some changes to ensure that they really check-in regularly with staff and strengthen the ways they work together. An agreement is established on three core common daily hours across each time zone; staff is given the latitude to get their work done on their own schedule and encouraged to take leave if needed.

Communicating and listening are two of Humentum's guiding principles. Communication happens multiple times and via multiple communication channels (emails, chats, meetings, manager-employee conversations). Employees are encouraged to listen and are provided with space to address their anxieties and frustrations, as well as ask questions. To that effect, an open, internal and anonymous survey was created for staff to who can choose provide comments and suggestions 24/7. Humentum hopes to use this feedback to better understand and respond to its staff needs.

"Coping with COVID-19 is an area of behavioural change; we have to continue to learn from the situation." ~ Reza Chowdhury. A recent review of COAST Trust's Code of Conduct took place in March, based on COVID-19 prevention advice and training. Despite the lockdown, activities continue to keep serving the affected population. Every staff member is provided with safety instructions and protective equipment, especially for work in camps. Trinidad and Tobago Red Cross (TTRC) teams are out in the field with the Ministry of Health, with key people working in rotations, all equipped with documents to prove they are essential staff.

"If you think you've already over communicated, do it again." ~ Christine Sow

Practical takeaway # 2: Safeguard your staff, ensure their immediate health and safety and economic well-being.

COAST Trust has trained its leaders in COVID-19 prevention by WHO, produced health guidance leaflets for staff and affected community, along with messages in national newsletters to spread knowledge, hope, unity and care for vulnerable people, like refugees and those living in slums.

With the pandemic's spread, xenophobic sentiments started to develop against aid workers and foreigners in Bangladesh, as its government strives to protect its own people – not refugees. To counter these developments, the team of COAST Trust is leveraging various communication vectors, attending press conferences and actively lobbying for 4G network to allow people to stay informed.

TTRC team's first priority was to provide all staff with accurate sources of news on COVID-19 to counter the flooding of myths and fake news circulating on internet. All volunteers and staff were trained on the facts around the disease and how to protect themselves, while being informed of TTRC's response to the crisis.

TTRC has been offering psycho-social support to staff and volunteers, opening a hotline to discuss fears and worries about COVID. A public survey has helped to better understand the needs of positively tested population, including migrants.

TTRC teams are on the front line supporting affected communities, but this time their safety and protection is more critical than ever to 'do no harm' – getting them to take responsibility for their protection and their families is non-negotiable. "Every day is evolving, one thing we have to cultivate is hope. We need to keep people optimistic and motivated." ~ Reza Chowdhury



"I do lots of active listening, not just being stretched by fears, but making sure I am able to pull out information I can address usefully." ~ Jill De Bourg





- Organisational Culture
- People Management

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Practical takeaway # 3: Make most of remote working, it should be flexible and can be fun.

Many organisations switched to teleworking to reduce potential workplace related exposure to COVID-19. This reality has significant implications for the foreseeable future around how people connect and collaborate on deliverables.

In order to balance work and caring responsibilities and avoid the risk of long working hours at home, staff members at Humentum are encouraged to take leave if needed. Monthly staff meetings have become bi-weekly and were made more fun – karaoke style. A facilitated meditation group occurs every 2 weeks and 5 minutes are dedicated to meditation in every big staff meeting as a way to give everyone a moment to stop, regroup and breath.

COAST Trust has switched to remote working by supporting its staff with stable internet connection and has shortened working hours to help staff members with work-life balance. Their leader, Reza, strongly believes in physical exercise for overall well-being and has been encouraging his colleagues to do the same. Running up and down the stairs three times could easily do the trick.

"We are tyrants setting boundaries around our work", says Ian. Those who live together on the OCHA compound are having a virtual drink at the end of the week to make sure to have a work-life separation.

"All of us need to turn to resources available to managing dispersed teams, I wonder if we'll easily make the transition back to physical teams". ~Ian Ridley

Practical takeaway # 4: Remain authentic and remember to 'put your oxygen mask first'.

As Humentum's leader, Christine tries to be her authentic self at all times, even more so now. For example, she shares more of her personal self with colleagues as she walks the talk of self-care.

As president of TTRC, Jill makes sure to be visible, to be present, accessible, listening to and hearing concerns, addressing them as best as possible. Being a humanitarian leader, she is used to put others first – staff, volunteers, beneficiaries. But self-reward, self-compassion and selfrepair are equally crucial.

For the Head of OCHA in Afghanistan, Ian, being vulnerable is part of being authentic. It shows the common humanity of the leader to his colleagues and strengthen bonds within the team.

Practical takeaway # 5: Use this opportunity to reinvent yourself.

With extensive experience in face-to-face and online activities, Humentum is now looking at their online platform as foundation for reaching even more people. Options on the table are various, including a reviewed customer segmentation, better time-zone coverage, serving a larger audience.

COAST Trust upholds ambitions for the future and will pursue efforts to create social energy, show solidarity and positive engagement to build unity from the current experience.

For TTRC, this crisis has brought to the forefront the need to innovate and develop new approaches to fulfil their mandate.



"I've been openly emotional in front of people; I nap every afternoon and I tell everyone about that." ~ Christine Sow

"This is a great opportunity for inclusion and learning". ~ Christine Sow



Exploring how to be more relevant as a national society, engaging further with communities, reviewing and ensuring organisation's continuity and resilience are all part of the analysed opportunities currently at TTRC.

"I hope something so big will create a big shake up". **~lan Ridley** The team of OCHA in Afghanistan seizes this opportunity to slow down and re-prioritize essential in their work, anchoring people firmly at the centre of they do.

CLOSING REMARKS

COVID-19 is affecting us all – aid workers and communities served. Keeping a people-centred approach is more essential than ever; neither leaders, nor their teams are superhuman faced with a pandemic.

Acknowledging and being humble as to how it affects us as human beings is one way to remain authentic and showcase resilience.

To deliver on our respective missions in the face of this global crisis, rooting-in the values that brought us to serve those in need in the first place, provides a renewed opportunity to treat everyone with care and compassion.





QUESTIONS AND ANSWERS WITH AUDIENCE

Compiled in collaboration with panellists, IASC and Duty of Care International

Q1. What kind of staff welfare measures should be put in place as standard, as part of the duty of care of organisations, for those carrying out COVID-19-related humanitarian responses or continuing normal activities (or adapting them to be COVID-19 sensitive, but not creating new projects)?

Answer to Q1:

The organisation needs to do all it reasonably can to keep their staff healthy and safe. Broad guidance would be:

- All staff have appropriate access to information about the risks they are facing in the work they do.
- All staff give informed consent for work they are requested to by their employer, which may expose them to COVID.
- All staff have access to appropriate PPE and other necessary equipment to prevent them being exposed to COVID whilst carrying out their work.
- HR policies support the physical and mental health of employees throughout the employment cycle. Staff are knowledgeable of these policies and how to utilise said policies, including requesting assistance.
- Risks should be mitigated where possible.
- New risk assessments should be conducted where humanitarian roles are impacted by COVID19.

Q2. Is there experience from previous epidemics about how to operationalise staff welfare programming in a country in a collaborative way, e.g. through consortia?

Answer to Q2:

- Organisations should share their approaches, tools, lessons learned, etc. available with other actors.
- Suggest and lead joint assessments, trainings and evaluations across organisations and other stakeholders to ensure a more coherent approach.
- Coordination of MHPSS (incl. staff care) measures should be done through the technical MHPSS working groups in the respective countries.
- Organisations must include national staff and volunteers and meet their specific needs in such a situation. This also includes job security, flexibility regarding working from home, access to credible information, etc.



QUESTIONS AND ANSWERS WITH AUDIENCE - CONTINUED Compiled in collaboration with panellists, IASC and Duty of Care International

- For front line staff working with people infected or for staff from highly affected countries, stigma might become a problem. Therefore, organisations should take care of this aspect as well when communicating within their teams and towards partners and beneficiaries. Helpful recommendations can be found <u>here</u>.
- <u>MHPSS</u> online platform provides many helpful documents produced by different organisations regarding the COVID19-response, incl. also documents on staff care and in several languages. You get access to the documents when joining the COVID-19 response group.
- There are lessons learned from the Ebola crisis, see the <u>IASC Mental Health and</u> <u>Psychosocial Support in Ebola Virus Disease Outbreaks A Guide for Public Health</u> <u>Programme Planners</u>, incl. a section on collaboration and coordination on page 11, Psychological First Aid (p. 21) and MHPSS for frontline and health care workers (p. 22). For all chapters, additional literature is listed in the bibliography.

Q3.Will there be a briefing/guidance note from CHS/IASC about how to prioritise duty of care/staff welfare both in terms of PPE and physical safety but also wellbeing & mental health during COVID-19?

Answer to Q3:

Organisations will need to adjust to the new operating environment that has resulted from the global COVID pandemic and maintain their duty of care to all their staff and volunteers.

Depending on the sector of work, the location of work and the level of potential exposure (risk) to the COVID virus, exact adjustments will vary significantly from one context to another, and from one humanitarian provider to another.

A general guidance on staff and volunteer care is still under development, but this is a separate initiative to the Interim Guidance note. <u>The IASC Interim Briefing Note</u> <u>Addressing Mental Health and Psychosocial Aspects of COVID-19 Outbreak still</u> contains a section on SUPPORTING PEOPLE WORKING IN THE COVID-19 RESPONSE (pages 11/12), incl. messages to front line workers and managers.

Please also check the <u>WHO COVID-19</u> response webpage.



QUESTIONS AND ANSWERS WITH AUDIENCE - CONTINUED Compiled in collaboration with panellists, IASC and Duty of Care International

Q4. How do we remain accountable to the affected population with COVID19? What is the difference from regular community project or humanitarian crisis?

Answer to Q4: Please consult the <u>CHS Alliance's online guide</u> with advice and useful resources on how to meet various CHS commitments in the coronavirus pandemic. Answer from COAST Trust: As COAST is an open organisation, we have a policy and system of "open and cross communication but decision in line", so any one can communicate with me and to anyone, in such an open culture, we feel we ensure accountability at some level.

Q5. How many organisations did request a state support for cover 80% of salary where the role cannot be done from home or for related to Corona absences?

Answer to Q5: Many governments have introduced unprecedented measures to cover a considerable percentage of wages of employees unable to work due to the coronavirus pandemic in order to stop them being laid off due to pandemic. It's however, difficult at the moment to know how many organisations have actually requested and made use of this support. You might find out more by consulting relevant government websites.

Q6. How do you send money transfers to employees that work overseas with this crisis?

Answer to Q6: Please consult <u>this website</u> with clear and helpful information and ask for recommendations to your local banks.

Q7. Covid-19 is a global crisis. Many who are sending humanitarian workers to crises overseas are now facing their own humanitarian crisis. For example, here in the UK, we have frontline health workers (doctors, nurses, midwives, etc) who have inadequate PPE. They have not signed up for this and have not trained for it. What humanitarian aid tools do we have to help people in the UK and US and other countries face this crisis as well as the lines are more blurred than ever.

Answer to Q7: Please consult Answer to Q2 above with useful resources. You can also contact the British Red Cross given its experience in responding to crises both domestically and internationally.



QUESTIONS AND ANSWERS WITH AUDIENCE - CONTINUED Compiled in collaboration with panellists, IASC and Duty of Care International

Q8. How members, panellists are dealing with respective Governments? Governments are not prepared, are all in chaos and every donor and international aid is going into Government pool, it is hardly going to the people who are worst hit.

Answer to Q8: In these globally challenging times, relief organisations are adapting their responses and outreach to donors, partners and affected population. This includes increasing understanding of how governments are recalibrating their foreign aid response, whether reassigning budget lines to their domestic use, or, on the contrary, adding resources to international efforts being done. Given the global state of uncertainty, crisis response organisations counsel and advice to relevant ministries is of heightened salience in shaping the collective response to the pandemic. Answer from COAST Trust: We are engaging with government at all levels in Bangladesh, as they have huge machinery in response. We have started our response with reserves of our disaster funds. But donors are communicating with us.

Q9. How many organisations did request a state support for cover 80% of salary where the role cannot be done from home or for related to Corona absences?

Answer to Q9: Many governments have introduced unprecedented measures to cover a considerable percentage of wages of employees unable to work due to the coronavirus pandemic in order to stop them being laid off due to pandemic. It's however, difficult at the moment to know how many organisations have actually requested and made use of this support. You might find out more by consulting relevant government websites.

Q10. What should we consider when we resume our projects? How can we balance our duty of care for staff and protection of people in communities?

Answer to Q10: The default moral compass guiding humanitarian action remains unchanged pre and post COVID-19: "first, do no harm".

Q11. How to take away stigma and discrimination among migration population on COVID-19 and community they belong to?

Answer to Q11: Please consult Answer to Q2 above with useful resources.



QUESTIONS AND ANSWERS WITH AUDIENCE - CONTINUED Compiled in collaboration with panellists, IASC and Duty of Care International

Q12. How do we solve the challenge of shortage of supplies due to restricted mobility for effective humanitarian responses, especially in interventions that require food supply and health care?

Answer to Q12: The global nature of the crisis is indeed crippling traditional response mechanisms. Aid organisations have crucial responsibility to advocate to their governments the most importance of allowing exemptions to restrictive measures for relief workers and consignments.

Q13. What kind of remote monitoring we can have while dealing with right holder in humanitarian intervention including COVID-19

Answer to Q13: Please consult the <u>CHS Alliance's online guide</u> with advice and useful resources.

Q14. Social Distancing is good but how we can reach people in need, because many governments already lockdown everything? In Pakistan government announced some funds but still people struggling for food. So how does development sector help those people who were earning daily bases bread and butter since they stopped working for the last two weeks?

Answer to Q14: These are challenging times for all as the global nature of the threat pushes the capacities of the systems to the brink and puts our own humanity to test.Please consult answer to Q8 above and the <u>CHS Alliance's online guide</u> with advice and useful resources.