

Managing Traumatic Events within the Workplace



An Operational Handbook (2023 Edition)

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Introduction

Almost all people are poorly equipped, and never “ready”, to have to deal with the traumatic events discussed in this Handbook; workplace fatalities, serious injuries, suicides of colleagues, murders, assaults, threats, etc. Unfortunately, these events can and, far too regularly, do occur in our workplaces. They are events for which we know that some degree of preparation helps, and this Operational Handbook shall provide you with guidance regarding how to prepare, and if necessary, go out there and do what you might be called upon to do in your role within the work space.

In addition to using this Operational Handbook for preparation purposes, it is an invaluable guide to follow should a traumatic event occur at your Workplace. It is a good idea to keep it handy just in case. I suggest you take it out and read the contents a couple of times a year. Workplace traumas are unpredictable and they will occur in your workplace when you least expect them. This Operational Handbook will give you practical ideas on what to say to your people and strategies you may implement to facilitate recovery.

The handbook was prepared by David G Broadbent, of Strategic Management Systems’ Workplace Health & Safety Division (Transformational Safety). Mr Broadbent is an organisational psychologist with many years’ experience assisting individuals and workplaces survive the awful experience of workplace trauma. He has received Advanced Training personally from Dr’s George Everly and Jeffrey Mitchell in the field of Critical Incident Stress Management. Dr’s Everly and Mitchell are the founders of the Critical Incident Stress (CIS) paradigm. Mr Broadbent also holds memberships in the International Critical Incident Stress Association, the Critical Incident Stress Management Foundation of Australia, and the Australasian Critical Incident Stress Association.

The information in this Operational Handbook reflects Mr Broadbent’s extensive experience in assisting organisations, and their managers, cope with traumatic situations.

In 2020 the Operational Handbook was amended to incorporate valuable insights on how best to manage the circumstances brought about by the COVID-19 global pandemic.

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When Tragedy Strikes at the workplace

You are a Manager and you are going about your everyday work and fulfilling the many and varied responsibilities that come with the job. At times you might even think this is all a bit mundane and repetitive. Well things are about to change! You are about to be thrown into one of the nightmares of almost all workplaces. Guess what? You're probably in "neck deep".

So there you are sitting at your desk, or you might be wandering around the Office or Plant when tragedy strikes your workplace:-

- ✔ An employee is heard screaming and someone tells you one of your staff has been run over and killed!
- ✔ The fire alarm goes off; you manage to get out, and you find that three of your people are trapped inside. They are all burnt, with one fatally!
- ✔ An LPG gas bottle explodes and you have people lying injured all around it!
- ✔ You have just found out one of your longest serving employees has committed suicide; left a note and in it said he was finding work too difficult!
- ✔ A disgruntled employee storms into your workplace, shoots one of your people, and runs off!
- ✔ One of your people is involved in a horrific motor vehicle accident, they are "OK" but the other people are all dead!
- ✔ A stunned employee walks into the work area and says they were assaulted whilst coming to work!
- ✔ You have just found out that one of your employees' have had a child suicide – and the "reasons" are all over Facebook.

In the first instance, your responses to such tragic situations will more than likely be automatic. You will notify the appropriate emergency services providers (Ambulance, Fire, Police) and take whatever actions are deemed necessary to preserve life and safety.

At the same time workers compensation legislation may require you to contact the occupational health & safety authority in your jurisdiction. Concurrently you may be required to contact your Insurer and advise them what has happened. In addition you may be expected to contact appropriate legal representation, whilst also contacting Senior Management. Already you can see that as the Manager, a number of time sensitive expectations have landed upon you. Failure to perform these functions may be costly to you. A Critical Incident Emergency Phone Log shall be very useful.

Once the emergency services and investigators leave, the hard questions begin for you as a Manager:-

- ✔ How do you ensure that the “right messages” are conveyed to your employees and their families regarding what has happened and what may be continuing to occur; without contributing to rumour, innuendo, and panic?
- ✔ How do you help your employees recover from this event, so their personal well-being and professional effectiveness will not suffer long term effects as a result of trauma?
- ✔ How do you get your staff moving again after employees have suffered from injury, bereavement, or psychological trauma?
- ✔ How do you make sure that after focussing so hard on your people that you don't ignore your own situation; after all although you are a manager you are also just another member of this workplace?

As I'm sure you are thinking about now, there are no easy answers, and each unique set of circumstances confronts you with a unique collection of hurdles. However, there are some general guidelines to help you jump these successfully, in most situations:

Stay firmly in charge.

Make sure all your people know that you are concerned and doing all you are able to help them. You are the lead representative of the workplace to your people, and your caring presence can mean a great deal in helping them feel supported. You don't have to say anything profound; just be there, do your best to manage, and let your people know you are concerned about them; whilst still maintaining control.

Be visible to your subordinates.

Take the time to ask them how they are doing. At this point don't be too concerned if they make no sense, they will know you were there. If they are walking around in a daze ask someone who appears more “in control” to stay with them. The last thing you want is another incident due to inattention. Try to keep investigations and other official business from pulling you out of your work area for long periods of time. In other words be careful you don't allow yourself to “run around” doing all the paperwork and allow your people to think “that's more important”. They won't come out and say it; I can guarantee many will think it. Where you can, delegate appropriately; so your presence remains very focused upon the people as well as the business. Of course for this strategy to be effective you need to have had a good working relationship with the persons to whom you wish to delegate prior to the trauma; now is not the time to try and start. It is critically

important that you are seen. The Manager is often the hub of the wheel; take the hub away and everyone's in trouble.

Ask for support from higher management.

Relief from deadlines, and practical help such as a temporary employee to lighten your burden of administrative work can make it easier for you to focus on helping your employees and your organisation return to normal functioning. Dependent upon the nature of your business this might need to be an immediate strategy. Apart from this issue we know that the majority of people are not firing on all cylinders after involvement in a traumatic incident; as such the quality of your decision making is likely to be affected, and not in a good way. Be sure that if there are time critical decisions to be made you consult with an appropriate colleague not directly involved in the trauma. This might be, in the first instance, one of the trained Emergency Contact Personnel (ECP's)

Don't "keep a stiff upper lip" or advise anybody else to do so.

Let people know, in whatever way is natural for you, that you are feeling fear, grief, shock, anger, or whatever your natural reaction to the situation may be. This shows your employees you care about them. Since you also can function rationally in spite of your strong feelings, they know that they can do likewise. Nonetheless, now is not the time to go and "sit in a corner" and contemplate what might have been. That time will come later.

Share information with your employees as soon as you have it available.

Don't be afraid to say, "I don't know." Particularly in the first few hours after a tragedy, information will be scarce and much in demand. If you can be an advocate in obtaining it, you will show your employees you care and help lessen anxiety. NEVER say something if you don't know it to be true. NEVER "sugar coat" the pill; you might think you're helping someone yet it will come back and bite you. Above all, NEVER make something up because you think it might be best for everyone concerned. When something like that is unearthed, and it will be, you will never regain the credibility that you might have had.

Ask for professional support from your Critical Incident Stress (CIS) Provider.

The CIS provider is available for on-scene management and to offer professional counselling to those who wish it, and to provide other aspects of Critical Incident Stress management to groups affected by trauma. Encourage your employees to take

advantage of the CIS provider as a way of preserving their own health and well-being, not as a sign of sickness.

Encourage employees to talk about their painful experiences.

This is hard to do, but assists the healing process as people express their painful thoughts and feelings in a safe environment, and come to realise that their reactions are normal and shared by others. This would be a good time to have a mental health professional come in to facilitate a special meeting for this purpose; your CIS provider is best suited to assist at this time. Don't be afraid to participate, and to set a positive example by discussing your own feelings openly. Your example says more than your words.

Build on the strengths of your workplace.

Encourage employees to take care of one another through such simple measures as listening to those in distress, offering practical help, visiting the hospitalised, or going with an employee on the first visit to a feared site. The more you have done in the past to build a cohesive work group, and to foster self confidence in your employees, the better your staff can help one another in a crisis. If your workplace has never really seen the value of building strong work groups then you will want to involve a professional experienced in assisting with Workplace Trauma very early. Don't put it off; you will regret it sooner rather than later.

Build on your work group's prior planning.

If you have talked together about how you, as a group, would handle a hypothetical crisis, it will help prepare all employees, mentally and practically, to deal with a real one. Knowing employees' strengths and experience, having an established plan for communication in emergencies, and being familiar with critical incident procedures can help you "hit the ground running" when a crisis actually strikes. Within the field of Critical Incident Stress this is known as the "pre-crisis preparation" phase and is an important precursor to achieving minimal impact from a crisis upon the people involved. If your workplace is one which has hazards which might be seen to precipitate some form of crisis, then this pre-crisis preparation becomes more important.

Be aware of the healing value of work.

Getting back to the daily routine can be a comforting experience, and most people can work productively while still dealing with grief and trauma. However, the process of getting staff back to work is one, which must be approached with great care and sensitivity. In particular, if anyone has died or been seriously

injured, the process must be handled in a way that shows appropriate respect for them. At this time you might want to involve a specialist injury management provider. Do not rely on your Insurer at this time. Do not rely on your normal injury management provider, unless they have demonstrated expertise in assisting staff after workplace trauma; and have been successful, at it.

The preceding information gives you some general ideas on what to do, and some things not to do, should you find yourself having to manage a critical incident in and around your workplace. It is a very specialised area of workplace health & safety and you should not delay bringing in professional organisational support at the earliest opportunity. Now we shall take a closer look inside your “nightmare”.

What to do in that Crisis/Disaster Situation

Stress reactions can result from a variety of shocking events. Before, during, or in the aftermath of a crisis situation, your people may have experienced additional traumas such as life-threatening accidents, sexual or physical abuse or assault, living or serving in a war zone, kidnapping or torture, or the witnessing of terrible things happening to other people. When it comes to your work colleagues you know a *“lot about a few and little about a lot”*; in other words there is so much you don't know. It is very important that you don't assume that a crisis situation involves the same type and intensity of experience for all involved, and that we all bring a similar personal history of trauma into the crisis. The fact is that we do not, and as such there may be as many different responses to the crisis as there are people involved.

In addition to involving terrifying close encounters with death and severe physical harm, critical incidents often lead to significant collateral losses that may vary greatly from person to person (e.g., loss of loved ones, friends, and/or property). Persons who were physically in the same place throughout much of the crisis may have been exposed to different specific traumatic events during and after the crisis. The "same" crisis may involve multiple elements ranging from accidental trauma (e.g., motor vehicle accidents, fires, explosions), to natural environmental disaster (e.g., fires, floods, cyclones, earthquakes etc), to deliberately caused devastation (e.g., violence, vandalism). It needs to be stated again; your people are likely to experience significant stress reactions, and the type and intensity of these reactions shall differ remarkably within the same apparent events.

People directly exposed to danger and life threat are at risk of the greatest impact. The literature examining the role of traumatic exposure is definitive. Regardless of the traumatic stressor, be it, physical abuse, sexual assault, or workplace accident, dose-response is a strong predictor of who will likely be most affected. The greater the perceived life threat, and the greater the sensory exposure, that is, the more one sees distressing sights, smells distressing odours, hears distressing sounds, or is physically injured, the more likely some form of post-traumatic stress will manifest itself. The primary victims of the crisis are not the only ones at risk. Colleagues, emergency service staff etc, may also experience either direct or indirect traumatising. Family members of victims, too, are at risk for what has been referred to as vicarious traumatising - relationships with traumatised individuals can create much distress for others. Similarly, small communities may be seriously affected by a crisis; particularly if the community has a close relationship to the source; e.g. an environmental or workplace accident emanating from the major employer in the town. You need to pay close attention to such situations.

Don't just focus your attention on your people; cast a wider net and look at families and communities as well.

Listed below are factors associated with critical incident stress that may be useful to take into consideration when having to make informal rapid assessments of those around you.

- ✔ Personal injury
- ✔ Injury or fatality of loved ones, friends, work colleagues
- ✔ Property loss/relocation
- ✔ Pre-existing stress
- ✔ Level of personal and professional preparedness
- ✔ Stress reactions of significant others
- ✔ Previous traumatisation
- ✔ Self-expectations
- ✔ Prior disaster experience
- ✔ Perception/interpretation of causal factors
- ✔ Level of social support

If you're having to start thinking about these things you should also have a Critical Incident Stress (CIS) professional "on the way".

If you find yourself in a position of having to consider the allocation and distribution of critical incident resources, the table below may be useful to consider the different types of victims. In other words you might have several dozen potential people who may require some degree of attention. At the same time you might have only one Critical Incident Psychologist "on scene". Generally, the order of attention might be to follow this structure. Of course this Model is a guide only and you should not "pigeon hole" people too firmly.

Role Delineation Model	
Primary victims	People directly exposed to the elements of the disaster
Secondary victims	People with close family and personal ties to primary victims
Tertiary victims	People whose occupations require them to respond to the disaster
Quaternary victims	Concerned and caring members of communities beyond the impact area

In the aftermath of many crises, your people may experience other long-term stressors such as marital and family discord, medical illness, or chronic health problems. Seeking and receiving help for these various issues can, in and of themselves, result in additional stress for them. They continue to require your ongoing support!

Some of the Stages of Trauma Involvement/Recovery

The United States National Centre for PTSD (Post Traumatic Stress Disorder) describes a number of stages that have been anecdotally observed within workplaces and communities following major crises. Whilst there are no hard and fast rules as to timeframes etc transitions through these phases have been noted to be quite consistent. Once again when thinking about the recovery of your people don't "pigeon hole"; this information is more to assist you better understand the "place" that they might be in. It is well worth remembering that the experience of trauma is an all absorbing one. It impacts all of us at many different levels. For example our Biology is acutely impacted, particularly our endocrinological functions, our psychology is often assaulted quite dramatically, and our social functioning is often diminished. We can refer to this as our Biopsychosocial Response Pattern and it will be valuable to see how the Biopsychosocial Response Pattern relates to the following phases.

Heroic

This phase is characterised by individuals and the community directing inordinate levels of energy into the activities of rescuing, helping, sheltering, emergency repair, and cleaning up. This increased physiological arousal and behavioural activity lasts from a few hours to a few days. It is within the Heroic stage that a CIS provider might implement the Diffusing stage of the CIS Model – you might think of this as a form of psychological first-aid.

Honeymoon

Despite the recent losses incurred during the crisis, this phase is characterised generally by optimism. People witness the influx of resources, the "big bosses" start turning up for support, and investigations will be conducted, etc. People may begin to "believe" that life as they knew it will be restored quickly and without complication; this may well still occur even when a person has been badly injured. Such a reaction **is not** an indication of lack of concern for person injured; it is a psychological survival mechanism.

If you see people operating in this way allow them too, it is a normal aspect of the process and happens at different times and at different pace for different people.

It won't be all that long and resources shall begin to diminish, media coverage lessens, "bosses" are no longer visiting, and the complexity of "how far we have to go" to get back to "where we were" becomes increasingly apparent. At this same time, the increased energy that your people may have initially experienced begins to diminish and fatigue sets in, setting the stage for the next phase.

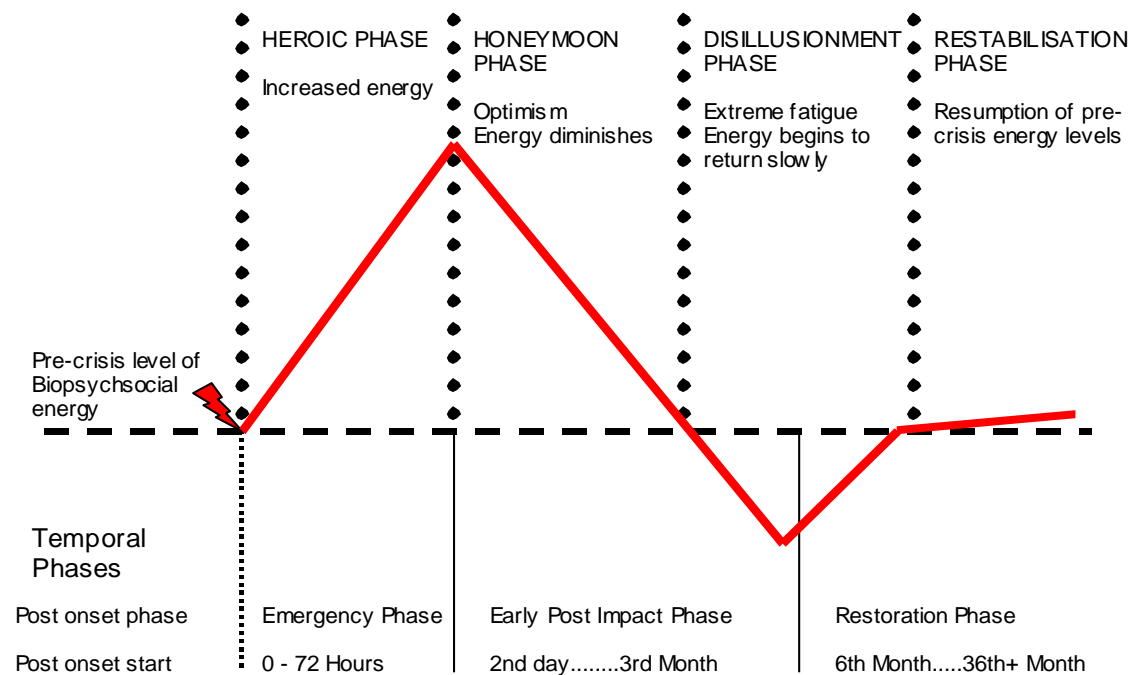
Disillusionment

Fatigue, irritating experiences, and the knowledge of all that is required to restore their lives may well combine to produce disillusionment. People discover that they or their colleagues may now be reliant upon external income support via insurers. In the case of injury, a colleague may not be well enough to work again. In the case of fatalities the long-term impact on a colleague's family begins to become more "understood". There may be perceptions that the workplace is trying to limit the spread of causative information.

Restabilisation

If the trauma recovery process has been well managed then all the hard work (and it is exhausting emotionally for managers particularly) during the previous months begins to produce observable changes. The majority of people shall regain their pre-crisis level of functioning. Again, significant individual differences occur within this phase. For many people, the first year anniversary of the crisis may lead to a degree of "reliving" the crisis. Such periods should be dealt with sensitively with some form of acknowledgement of the crisis and a statement regarding the progress which has been made (assuming there has been some; don't lie) and some goals for the future. Do not ever ignore an anniversary as the message commonly heard is "they couldn't care, they're just concerned about production and money". All the good work you, as a manager may have done in the preceding twelve months, you will lose right here.

Biopsychosocial Response Patterns



Notifying Families of the Death of a Family Member

Well if you thought the crisis itself was “your worst nightmare”; about now you realise you were mistaken. This one is probably IT!!!

There is no easy way to “break the news” and it will be very difficult for you. You might be thinking, “should I be doing this”. I’m afraid if a person was killed whilst working at your worksite then a senior manager should be the person to deliver this news to the family. If this is a task that has to be done then it should be given the highest priority. The person who performs this function should be known to the bereaved; sometimes only by reputation. For example. “You’re Derek, the Site Manager, aren’t you.

Here is a procedure that has been developed to assist with this most difficult, and most frightening, of work tasks.

1. **Notify in person.** Don't call. Do not take any possessions of the victim to the notification. If there is absolutely no alternative to a phone call, arrange for a professional, neighbour, or a friend to be with the next of kin when the call comes.
2. **Take someone with you** (For example, a friend of the deceased who was at the scene¹, a trauma recovery expert or a trauma trained Salvation Army Officer, and someone who is experienced in dealing with shock and/or trained in CPR e.g. First Aid Officer). Next of kin have been known to suffer heart attacks when notified. If a large group is to be notified, have a large team of support people available.
3. Talk about your reactions to the death with your own management team member(s) before the notification to enable you to better focus on the family when you arrive; and not on yourself.
4. If you are not known introduce yourself and ask to come in.
5. If you are asked at this point “what’s this all about”; do not answer just indicate “Please may I come in and we can talk inside”. Most people will agree².
6. Sit down, ask them to sit down, and be sure you have the nearest next of kin (do not notify siblings before notifying parents or spouse). **Never** notify a child. **Never** use a child as a translator. If you feel that language might be an issue always take an adult to translate.

¹ When using a friend of the deceased this person should always self-select.

² If they continue to “resist” you are going to be left with no alternative but to notify at the front door. Be prepared to step straight through and support the next of kin once the reality of what you have said hits home. You may then need to guide them to a chair.

7. If you need to clarify identity; i.e. you do not know the next of kin. Always use the person's name. "Are you the husband/wife/partner/parent of [**Jack**]?"
8. Inform simply and directly with warmth and compassion.
9. Do not use expressions like "expired," "passed away," or "we've lost [**Jack**]."
10. Sample script:

"I'm afraid I have some very bad news for you."

Pause a moment to allow them to "prepare."

"[Jack**] has been involved in an accident and he has died."**

Pause again.

"I am so very sorry."

Adding your condolence is very important because it expresses feelings rather than facts, and invites them to express their own.
11. Continue to use the words "dead" or "died" through on-going conversation. Continue to use the person's name, **never use** "body" or "the deceased."
12. **Never** blame the victim in any way for what happened, even though he/she may have been fully or partially at fault.
13. **Do not** discount feelings, theirs or yours. Intense reactions are normal. Expect fight, flight, freezing, or other forms of regression. If someone goes into shock have them lie down, elevate their feet, keep them warm, monitor breathing and pulse, and call for medical assistance.
14. Join the next of kin in their grief without being overwhelmed by it. **Do not** use clichés. Helpful remarks are simple, direct, validate, normalise, assure, empower, express concern. *Examples: "I am so sorry." "It's harder than people think." "I am sure most people who have gone through this react similarly to what you are experiencing."*
15. Answer all questions honestly (requires knowing the facts before you go). **Do not** give more detail than is asked for, but be honest in your answers.
16. Offer to make calls, arrange for childcare, call clergy, relatives, etc. Provide them with a list of the calls you make, as they may well have difficulty remembering what you have told them.
17. Should you find yourself notifying a parent and only one parent is at home, notify that parent, then offer to take them to notify the other parent.
18. **Do not** speak to the media without the family's permission.

19. If identification of the body is necessary, transport next of kin to and from the morgue and help prepare them by giving a physical description of the morgue, and telling them that [**Jack**] will look pale because blood settles to the point of lowest gravity.
20. **Do not** leave next of kin alone. Arrange for someone to come and wait until they arrive before leaving.
21. When leaving let them know you will check back the next day to see how they are doing and if there is anything else you can do for them. **Always** ensure that you do!
22. Call and visit again the next day. If the family does not want you to come, spend some time on the phone and re-express willingness to answer any questions. They will probably have more questions than when they were first notified.
23. Ask the family if they are ready to receive [**Jack's**] clothing, jewellery, etc. Honour their wishes. Possessions should be presented neatly in a box and **not** in a bag. Clothing should be cleaned/dried thoroughly to eliminate any bad odours etc. When the family receives the items, explain what the box contains and the condition of the items so they will know what to expect when they decide to open it.
24. If there is anything positive to say about the last moments, share them now. Give assurances such as "What happened was so quick that I doubt [**Jack**] even realised what was happening." **Do not** say, "[**Jack**] did not know what hit him".
25. Let the bereaved family know you care. Attend the funeral if possible. This will generally mean a great deal to the family and will reinforce that [**Jack**] was a valued member of the workplace family.
26. Know exactly how to access immediate medical or mental health care should family members experience a crisis reaction that is beyond your response capability.
27. Consider debriefing your own personal reactions with a qualified trauma recovery expert. This may be an important step in ensuring that the stress you naturally experience in empathising with the bereavement does not build into a major problem for you.

Recovering from the Death of a Co-worker

The death of a co-worker is a painful experience under any circumstances, and all the more difficult if it is unexpected; particularly so if the death occurs as part of their normal working life.

Recovery of individuals and of your workplace itself depends to a great extent on the effectiveness of the grief leadership provided by you, the workplace manager. Effective grief leadership guides members of the work group as they mourn, grieve, help their families, and return to effective performance of their duties. The following guidelines have proved helpful:

Provide a private area where co-workers can grieve without public scrutiny.

Initially, close friends and associates will feel shock and intense grief. If the loss is to be resolved, it is essential for all affected employees to spend time talking about the deceased person, sharing memories, and discussing the loss; the degree to which people will do this at the workplace will vary greatly. Remember don't push someone to grieve. You might think they need to "let it all out"; telling them so rarely helps. This "grief work," which is essential for recovery, is intensely painful when done alone, but much less so when it can be shared with friends. Providing a private area where co-workers can talk together and shed tears without public scrutiny will ease this process.

Share information.

Employees will feel a particularly strong need for information at this time. Managers can show their concern by making a concerted effort to get that information, and share it in a timely manner. *Until you get the information, simply admitting honestly that you don't know is more comforting to employees than not being told anything.* In other words keep providing feedback, even if that means no new information. People have a knack of "making things fit" even if that is not correct.

Contact employees who are temporarily away from the office.

Ordinarily, people in a small work group are aware of friendship patterns, and will take steps to ensure that those in particular need of comfort are given support. However, problems may occur if co-workers are on leave or travel. The manager and group members may need to reach out to those temporarily away from the office to make sure they don't get left out of the grieving process.

Serve as a role model.

Managers need to serve as role models for appropriate grieving. If you show that you are actively grieving, but still able to function effectively, other employees will realise that they can also be sad without losing their ability to perform their duties rationally. You should avoid hiding your own feelings, as this often leads employees to misperceive you as not caring.

Arrange a 1:1 Critical Incident Stress debriefing.

Occasionally, a cohesive work group can go through the grief process without help. However, if members do not know each other well, or for whatever reason have difficulty talking, a professional person may need to come in and facilitate a 1:1 "debrief". It is important to ensure that any professional you allow to access your people at this time is **skilled** in the area of trauma intervention and recovery. Don't be afraid to ask for references – you are protecting your people at a very vulnerable time.

Consider holding a memorial service.

Particularly important if co-workers cannot attend the funeral. A memorial service can be very helpful and is often a turning point in restoring a work group to normal productivity. This is not to imply that the deceased is forgotten; rather people find after a point that they can continue to work while grieving. Consider the following points in planning a memorial service:

- ✔ Any memorial service should honour the deceased and provide an opportunity to say goodbye. Unlike a funeral, a memorial is not a religious service, and should be suitable for employees of all faiths. Friends may speak about the qualities they admired in the deceased, the person's contributions to the work and the morale of the group. Poetry or music reminiscent of the deceased might be shared.
- ✔ The most common mistake in planning memorials is to plan them at too high a level. Senior officials may want to take charge, to show that they care, and to assure a polished product. This approach usually "backfires," for example, *"The managers don't care about Sam; they just want to put on a show for the executives."*
- ✔ Memorial services are most effective when the closest associates of the deceased are given key roles in planning and carrying them out. Including the "right" people, i.e., the best friends of the deceased, makes the service more comforting for everyone.
- ✔ Reach out to family members. Reaching out to the family of the deceased can be comforting for both employees and family members. If a memorial service is being arranged for the workplace the family should always be invited. Arranging transport both to and from the workplace for the family should not be overlooked.
- ✔ Attending the funeral service, sending cards, visiting the bereaved family and offering various forms of help are all positive healing

activities. Attendance at the funeral or memorial service of a colleague should always be with full pay.

- ✔ Support informal rituals. Informal rituals in the office can ease healing. A group of friends might join together to clean out the deceased person's desk, or organise a campaign for contributions to an appropriate charity. Sometimes employees may want to leave a particular workstation or piece of equipment unused for a short time in memory of the deceased. If possible, this wish should be honoured.

Get back to the work routine in a way that shows respect for the deceased.

Returning to the work routine can facilitate healing if the workplace makes an effort to uphold values held by the deceased and strive toward goals that he/she particularly valued, for example, *"I want to show the customers I care, because Sam was such a caring person."*

Don't treat a new employee like a "replacement" for the employee who died.

It is important that new employees not be made to feel like "replacements" for employees who have died. Reorganising responsibilities and moving furniture can help spare the new employee and others the painful experience of having somebody new at "Sam's desk" doing "Sam's job." You might consider offering Sam's desk or work area to one of his close friends.

Remind employees about the services of the CIS provider.

Employees should be reminded that normal grieving can produce upsetting responses such as sleeplessness, diminished appetite, and intrusive thoughts of the deceased. Ordinarily, these will subside with time, particularly if the individual receives strong group support. However, some individuals may find these reactions especially troubling or long lasting, and may need to turn to the CIS provider for professional help in getting over the experience. If you have involved your CIS provider from the very start this will be a lot easier for your people.

Managing During and After a Global Pandemic



Pandemics – are they new?

Global pandemics are not new to the World – despite what the common narrative might suggest.

In 430 BC a pandemic happened during the Peloponnesian War. After the disease passed through Libya, Ethiopia and Egypt, it crossed the Athenian walls as the Spartans laid siege. As much as two-thirds of the population of Athens died.

The symptoms included fever, thirst, bloody throat and tongue, red skin and lesions. The disease, suspected to have been typhoid fever, weakened the Athenians significantly and was a significant factor in their defeat by the Spartans.

In 165 AD the Antonine plague was likely an early appearance of Smallpox that began with the Huns. The Huns then infected the Germans, who passed it to the Romans and then returning troops spread it throughout the Roman empire.

Symptoms included fever, sore throat, diarrhea and, if the patient lived long enough, pus-filled sores. This plague continued until about 180 A.D., claiming Emperor Marcus Aurelius as one of its victims – not Commodus (as you might have thought if you'd seen the film *Gladiator*).

Then in 250 AD arrives another pandemic named after the first known victim, the Christian bishop of Carthage, the Cyprian plague entailed diarrhea, vomiting, throat ulcers, fever and gangrenous hands and feet.

City dwellers fled to the country to escape infection but instead spread the disease further. Possibly starting in Ethiopia, it passed through Northern Africa, into Rome, then onto Egypt and northward.

There were recurring outbreaks over the next three centuries. In 444 A.D., it arrived without warning in Britain and obstructed defence efforts against the Picts and the Scots, causing the British to seek help from the Saxons, who would soon control the island. So, we see that pandemics have the “power”, and often do, end up having a significant influence on global power balances.

There were many more pandemics through the centuries that could easily be defined as global pandemics

Many have heard of the “Black Death”. It was responsible for the death of one-third (33%) of the global population, this second large outbreak of the bubonic plague possibly started in Asia and moved west in caravans. Entering through Sicily in 1347 A.D. when plague sufferers arrived in the port of Messina, it spread throughout Europe rapidly. Dead bodies became so prevalent that many remained rotting on the ground and created a constant stench in cities. BTW the first entry of bubonic plague to the world stage was the Justinian Plague of 541 AD. Almost eight hundred (800) years between first recorded presentation and the second – gives new meaning to the word “hibernation”.



England and France were so incapacitated by the Black Death that the countries called a truce to their war. The British feudal system was seriously threatened when the pandemic changed economic circumstances and demographics. Destroying entire populations in Scandinavia, Vikings lost the strength to wage battle, and their exploration of North America just ended.

Another more commonly known pandemic was the “Spanish Flu” of 1918. This avian-borne flu resulted in fifty million deaths worldwide. This pandemic was first observed in Europe, the United States and parts of Asia before swiftly spreading around the world. At the time, there were no effective drugs or vaccines to treat this pathogen. Wire service reports of a flu outbreak in Madrid in the spring of 1918 led to the pandemic being called the “Spanish Flu”. This is unfortunate as the true source of this pandemic is currently believe to have been amongst army training camps within the United States during early 2018.



More recently we have also seen HIV/AIDS. Initially identified in 1981, HIV/AIDS destroys a person’s immune system, resulting in eventual death by all manner of diseases that the body would normally be able to relatively comfortably survive. Those infected by the HIV/AIDS virus encounter fever, headache, and enlarged lymph nodes upon infection. When symptoms subside, carriers become highly infectious through blood and genital fluid, and the disease then goes on to destroy t-cells.

HIV/AIDS was first observed in American gay communities but is believed to have developed from a chimpanzee virus from West Africa in the 1920’s. The disease, which spreads through certain body fluids, moved to Haiti in the 1960s, and then New York and San Francisco in the 1970s.

HIV/AIDS is now throughout every country of the World and there has been developed no cure to date. There are treatments that may impede its progress. Over thirty million people have died from HIV/AIS thus far - and that number continues to grow.

COVID-19

On March 11, 2020, the World Health Organisation announced that the COVID-19 virus was officially a pandemic after flooding through over one hundred (100+) countries in three (3) months and infecting over 118,000 people. COVID19 hit all the “markers” for a pandemic many weeks prior to the WHO making their statement.

COVID-19 is caused by a novel coronavirus – in other words a new coronavirus strain that has not been previously found in people. Symptoms include respiratory problems, fever and cough, and can lead to pneumonia and death. It is spread through droplets.

The first reported case of COVID-19 appeared in China on November 17th, 2019, in the Hubei Province (Wuhan). Eight more cases appeared in December with Chinese researchers pointing to an unknown virus.

The World learned about COVID-19 when ophthalmologist Dr. Li Wenliang defied government orders and released safety information to other doctors. The following day, China informed the WHO and charged Li with a crime. Li died from COVID-19 just over a month later. The late Dr. Li Wenliang should be recognised globally for his commitment to the health of the World – he was willing to knowingly risk the wrath of the State in order to ensure that we all had a chance. There is little doubt that without the courage of Lee, the outcome of the COVID-19 global pandemic would be even worse than it is even now.



Without a vaccine available, the virus spread beyond Chinese borders to nearly every country in the world. By December 2020, it had infected more than 75 million people and led to more than 1.6 million deaths worldwide. The number of new cases was growing faster than ever, with more than 500,000 reported each day on average.

As of this Edition of “Managing Traumatic Events in the Workplace” COVID-19 continues to ravage the world.

COVID-19 and the Workplace

COVID-19 has changed the way many organisations consider the construct of work and that change may well become the “new normal” for many.

In response to the accelerating COVID19 pandemic, a significant number of countries have banned (or very strongly recommended) all nonessential activities and asked residents to stay home. Across large parts of the World, universities and business have gone entirely online (or some virtual hybrid). Schools and restaurants are closed. Aged care facilities are barring visitors. The number of people visiting private homes varies between a few, to a few more. Funerals have been limited to sometimes half a dozen people. Weddings

have been cancelled. The list of the real-world implications of these measures just keeps expanding.

So, we see entire countries being taken into “lockdown”. For many this geo-management strategy has become a revolving door. Italy has experienced multiple lockdowns as has the United Kingdom. One country which has done all that they can to avoid implementing the lockdown strategy has been the United States. They currently lead the world in fatalities, with over five hundred and thirty thousand (530,000+) Americans having lost their lives.

Workplaces themselves were also forced into lockdown – as their employees were unable to physically attend. Also, many workplaces were not able to comply with government mandates with regard to keeping people distant from each other. Historically, workplaces would often try and squeeze as many employees into a space that both function and practicality would allow. This was no longer acceptable at so many levels. Almost overnight, an infinite number of workplaces had to explore how they might still perform their functions – the result was that “working from home” became the standard – rather than the exception. That was the case for those who were still fortunate enough to have employment.



Social Distancing has become a phrase that until 2020 was unspoken and unknown by most of the world population. It is actually now new though. The Christian Bible contains one of the earliest known references to the practice in the Book of Leviticus (13:46): "And the leper in whom the plague is... he shall dwell alone; outside the camp shall his habitation be". Since then there have been many examples where communities socially distanced their members -whom had been identified as “sick”. COVID-19 has become the pandemic to give Social Distancing new meaning. In the days of COVID-19 social distancing is no longer limited to separating the unwell – we are now on a position where we are required to socially distance everyone.



So, what does “social distancing” really mean?

As citizens of our global community these sorts of restrictions have a significant impact upon many of us. As employees (if we are fortunate enough to still have a job) these restrictions have a further impact upon us – and our families. Think of someone standing at the stove top dialling up the temperature. Now, what is increasing the temperature of a pressure cooker going to do? Explode?

Dr. Joshua Morganstein is the Chair of the American Psychiatric Association’s Committee on the Psychiatric Dimensions of Disaster. He has suggested “.... a lack of social connectedness feels as impactful as not eating.” That’s a big call – and for many it rings true.

Human beings are essentially “social” in nature. We are often a product of our social connections over time.

History, as far back as we can go shows we, as a species, have travelled, hunted and thrived in social groups.

This has been a vital part of our survival. The prominent humanistic theorist, Abraham Maslow stressed social connection is one of our fundamental human needs. I happen to agree with him.

These social connections provide us with an important part of our identity, learning and developing new skills that help us live our lives. Social connection and groups provide a variety of positive benefits: -

- Research shows social connection improves physical and psychological wellbeing.
- People who feel connected to others have lower rates of anxiety and depression.
- Connected people have a higher self-esteem, are more empathic to others, more trusting and cooperative and, as a consequence, are more open to trusting and cooperating with them.

Feeling socially connected, in an increasingly isolated world, is important.

So, whilst social distancing has a very direct impact on the voracity of potential pandemic infections, it also delivers with it some very significant costs for many.

This places a significant onus upon employers to provide real-world opportunities with regard to maintaining social connectedness – especially since many employers are physically distancing operations from their employees.

There is a quickly growing body of literature suggesting that “working from home” is not the relaxed vacation that many thought it might be.

Strategies to assist employees navigate the pandemic

The very first priority always has to be protecting employees, and their families, from the likelihood of infection. As a responsible employer working from home and social distancing are the two (2) most common strategies that have been adopted to try and attain that goal. Unfortunately, that is a two-edged sword. It keeps people away from the workplace; thus, minimising nay spread from within the work environment – it does nothing to protect employees whilst they are home.

Strategy 1: Provide employees with whatever PPE they (and their families) might require. This could take the form of appropriate protective masks, hand sanitiser etc.

Strategy 2: Ensure that any employees working from home have access to suitable equipment to maintain an adequate work station. Just because the employee is “at home” does not, in any way, limit the employer’s responsibility to provide a healthy and safe workplace.

- Strategy 3: Provide opportunities for employees to interact with each other on issues that are not entirely outcome focussed – seek every opportunity to develop “social connectedness”. This might involve: -
- Regular phone contact (not video) amongst colleagues. These are Touch Base (TB) contacts and might even be determined via a revolving contact list. Content of TB Contacts could be: -
 - What have you been doing?
 - Any ideas how we can all get through this better?
 -
- The purpose of the TB Contact is to just have a conversation. There is no required outcome.
- Ensure you increase the number of “team meetings” and monitor for those employees who might be hidden amongst the “noise” of the meeting. If you identify employees of concern implement an action plan to check on their welfare.
- Strategy 4: Provide opportunities for employee self-development If you feel there is a course, book, webinar or resource that would improve your employee’s skillset then make it available. It’s in your best interests to keep your employees as happy, engaged, and interested as possible.
- Strategy 5: Implement an Advanced Communication Development program for all employees effected by “working from home”. It is understood that much of the way humans communicate is non - verbal. Working from home has significantly impacted communication patterns – so taking a direct acknowledgement of that shall assist the organisation at all levels. It is important to recognise that “video” is not a replacement for being “in the room”.
- Strategy 6: Provide educational opportunities to employees (and their families) on the value of exercise as a strategy to reduce the impact of social isolation.
- Strategy 7: Encourage employees to write letters (on paper) to family and friends and post them. This strategy is effective because it is “old school” (analog). The thought processes that are involved in putting thoughts “on paper” is very different than typing an email. Encourage your employee to request an “on paper” reply. It may still take a while for it to be delivered – that’s not the point.

Mental Health Strategies to assist during the Pandemic

The COVID-19 pandemic has brought with it an unprecedented amount of mental health challenges on a scale that has never experienced for so many. There are a number of strategies that, if implemented, minimise the negative mental health impacts of the pandemic – no guarantees though, so we should always be vigilant.

Many people are likely to worry about becoming ill with COVID19 (what will that mean?), how long will the pandemic last, whether they may lose their job, how will they make ends meet, and what the future will look like (nobody truly knows).

Information overload, rumours and misinformation can make people feel out of control and make future thinking very uncertain.

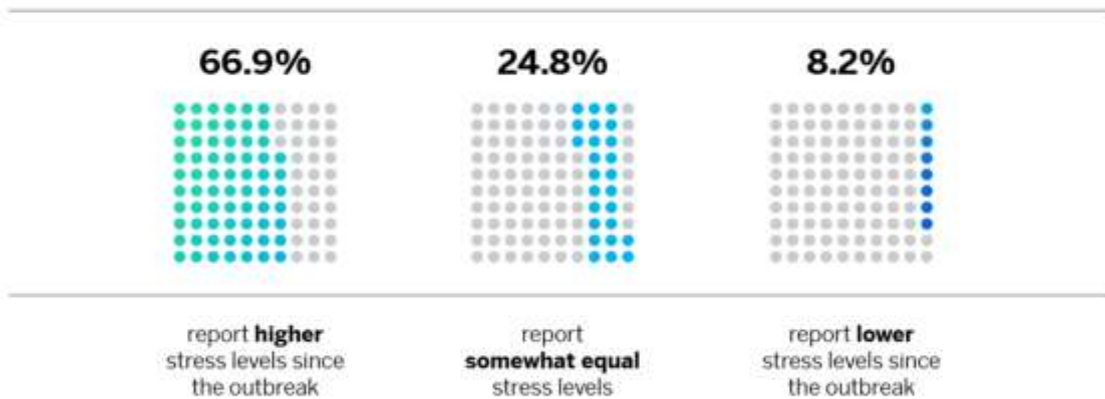
During the pandemic many, if not all, people shall experience: -

- stress,
- anxiety, fear,
- sadness and
- loneliness
-

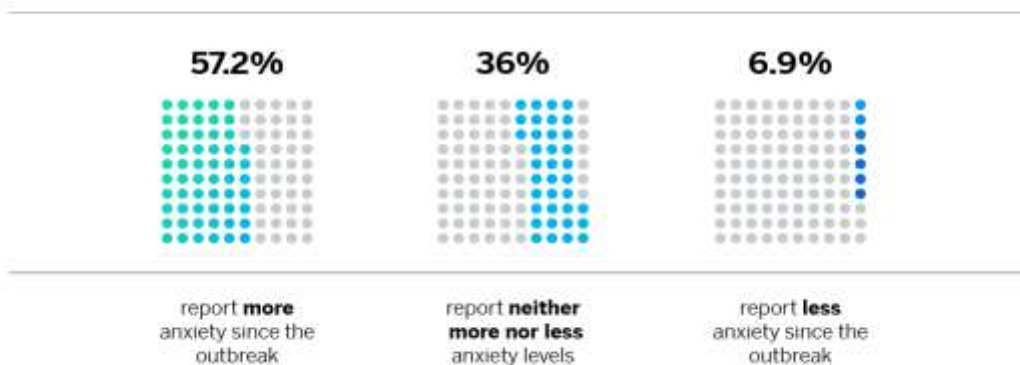
Along with the above, sometimes we find that the above can develop into clinical diagnoses of Depression and other mental health conditions. Those people who were experiencing poor mental health prior to the pandemic are far more likely to experience significantly worsening of their conditions.

Surveys have shown significant increases in a lot of mental health concerns and conditions since the beginning of the COVID-19 pandemic.

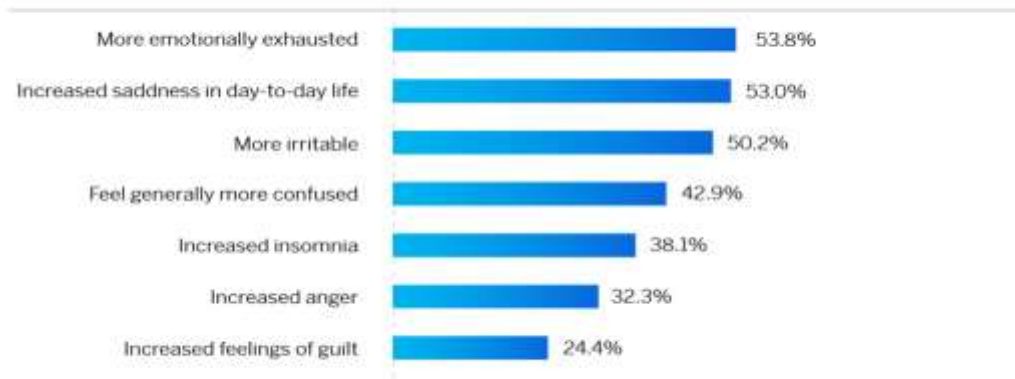
Level of **stress** since the coronavirus outbreak



Level of **anxiety** since the coronavirus outbreak



Mental health symptoms since COVID-19 outbreak



Take care of your body

1. Get enough sleep. Go to bed and get up at the same times each day. Stay as close to your “normal” routine as possible, even if you’re staying at home. Always get up and get dressed.
2. Participate in regular physical activity. Regular physical activity and exercise reduces anxiety and improves mood. Find an activity that includes movement. There are now plenty of resources on the internet. Where possible exercise outside in an area that makes it easy to maintain distance from people. This is preferable to “indoors”.
3. Eat healthy. Choose a well-balanced diet. If you don’t know what that is make use of online resources – it is important. Avoid filling up on junk food and refined sugar. Food high in carbohydrates should also be off-limits. Limit caffeine as it can aggravate stress and anxiety. Remember Coke and Pepsi are full of sugar and caffeine. Keep away from energy drinks.
4. Avoid tobacco, alcohol and drugs. If you smoke tobacco or if you vape, you’re already at higher risk of lung disease. Given that we know COVID-19 targets the lungs, your risk increases even more. Using alcohol to try to cope can make matters worse and reduce your coping skills. Avoid taking drugs to cope, unless your doctor prescribed medications for you – and then only use them as prescribed.
5. Limit screen time. Turn off electronic devices for some time each day, including at least thirty (30) minutes before bedtime. Make a conscious effort to spend less time in front of a screen — television, tablet, computer and phone.
6. Relax and recharge. Set aside time for yourself. Even a few minutes of quiet time can be refreshing and help to quiet your mind and reduce anxiety. Many people benefit from practices such as deep breathing, tai chi, yoga or meditation. Listen to music, or read or listen to a book — whatever helps you relax. Select a technique that works for you and practice it regularly.

Take care of your mind

1. Keep your regular routine. Maintaining a regular schedule is important to your mental health. In addition to sticking to a regular bedtime routine, keep consistent times for meals, bathing and getting dressed, work or study schedules, and exercise. Also set aside time for activities you enjoy. This predictability can make you feel more in control.
2. Limit exposure to media. Constant news about COVID-19 from all types of media can heighten fears about the disease. Limit social media that may expose you to rumours and false information. Also limit reading, hearing or watching other news, but keep up to date on national and local recommendations. Look for reliable sources, such as the U.S. Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO) or the peak body within your country. Treat all “news” from politicians as suspect until corroborated from a trusted source.
3. Avoid social networking sites such as Facebook, WhatsApp, etc. It has been shown that the single largest source of misinformation (lies) about all things COVID-19 come from “posts” on social media. The single biggest thing you might consider doing during the pandemic is banning yourself from these platforms.
4. Stay busy. A distraction can get you away from the cycle of negative thoughts that feed anxiety and depression. Identify and enjoy hobbies that you can do at home. Actually, doing something positive is a proactive and healthy coping strategy.
5. Focus on positive thoughts. Choose to focus on the positive things in your life, instead of dwelling on how bad you feel. Consider starting each day by naming three (3) things you are thankful for. Not always easy – always valuable.
6. Set personal priorities. Don't become overwhelmed by creating a life-changing list of things to achieve during the pandemic. Set reasonable goals each day and outline steps you can take to reach those goals. Give yourself credit for every step in the right direction, no matter how small. And recognize that some days will be better than others. This is NOT the time for those “stretch” goals, where you deliberately set goals just at your reach – that is a recipe for disaster.
7. Do what you can to support those around you. One of the most satisfying accomplishments that many people report is being able to “help” their fellow human beings. If you have not seen a neighbour outside for a day or so – reach out across the fence (socially distanced of course). Give family and friends a call on the phone.

When is it time to ask for help?

When it comes to our mental health there are various ways we can ask for help. However, for many people this can be quite terrifying. Fortunately, there are a number of ways you can better prepare yourself to do the seemingly impossible. In almost all cases, when someone shares the burden of a mental health challenge, they nearly always say it was well worth doing. Even if there are no actions that come from that disclosure they almost always say “I feel lighter”; or something similar.

There are a number of different reasons that may coax us into talking about our mental health: -

- When your persistent thoughts, emotions or behaviours are affecting your relationships, work or sense of mental health and wellbeing;
- If you are finding it hard to deal with day to day life and are feeling down, sad, or anxious and these feelings are not going away after a few weeks;
- If you have noticed you have low energy and lack motivation to do the things you normally do;
- When the use of alcohol or other drugs interferes with your health, emotions, relationships, finances, job or your ability to fulfil your daily responsibilities;
- Family and friends say they have noticed a change in your behaviour;
- If you are feeling ashamed or embarrassed to speak to someone close to you about how you are really feeling;
- If you believe it is too late to get help because it seems things have gone too far;
- When you are having suicidal thoughts or if you are worried you might hurt yourself or someone else.
 - If this is ever happening you must treat it as urgent and reach out to your GP or Emergency Room (hospital). If your country has a Suicide Help Line then make that call – never put it off.

Managing During and After a Community Disaster

A disaster such as a fire, earthquake, severe storm, floods, or major environmental catastrophe may create unusual challenges for management. You and your staff may yourselves be suffering from its effects. Emotional stress, physical injury, bereavement, loss of property, and disruption of normal routines may limit the availability and energy at your workplace. In the case of major environmental issues you may find yourself feeling a large degree of “responsibility” even though you may have had limited control over the events and in reality had little “responsibility”. Nevertheless if you find yourself representing the position of the Company, and people are directing their highly charged emotions toward the Company, you often find yourself absorbing some of that emotion by osmosis.

With all this going on, at the same time, the workplace may face new responsibilities, caring for its own members, and facilitating recovery. Besides meeting customers' special needs for assistance following a disaster, some personnel are often called on to support other agencies in providing a wide range of community services e.g. Rural Fire Services, State Emergency Services, and Disaster Management Teams etc.

Plan ahead. You and your workplace should be familiar with any disaster plans that may affect you, and should have your own plans, however informal, for how you might function in a disaster. Involving employees in planning helps give them a sense of empowerment, and can improve the quality of your plan by ensuring that everyone's experience and skills are brought into play.

Despite the magnitude of the challenges, Government agencies have a solid history of responding effectively to disasters. The following suggestions are general principles that can help you structure your disaster response (they are no substitute for a comprehensive disaster plan):

Take care of your own people first.

You need to locate your staff and assure that they and their families have necessary medical care, housing, food, and other necessities before they can be effective in serving the public.

Consider setting up a relief centre.

Particularly if traditional disaster relief agencies are slow to mobilise, you may need to set up a relief centre for your own employees, and provide food and other essential items to those in need. If necessary, assign a group of employees, preferably volunteers, to internal disaster relief, and relieve them temporarily of other duties. Their tasks might include staffing the relief centre, taking inventory of unmet needs of affected employees, and locating resources to fit the needs.

Consider compiling resource information.

Those most affected by the disaster are least likely to have functioning telephones, and may not be able to call around to locate a new apartment, a child care provider, a rental truck, a place to board the dog, or any of the many goods and services they need to begin normalising their lives. Compiling information in a booklet or card file can be very helpful, and can result in a document that is helpful to the public as well as employees.

Modify office rules and procedures that are counterproductive after a disaster.

Dress codes, rules about children in the office, and restrictions on using telephones for personal business, for example, may need to be temporarily adjusted in the post-disaster period. As an employer you have the authority to grant leave to employees who need time off to normalise their home and family situations.

Work co-operatively with employee unions.

Disaster situations encourage union-management co-operation, regardless of what the industrial relations climate has been in the past. Unions and management share a very deep concern for employees' well-being and recovery; working together in an informal way can lead to more effective, flexible responses to employee needs.

Take steps to prevent accidents and illness.

Much of the human suffering associated with a disaster happens after the event itself, and can be prevented through good management. It is particularly important to prevent the overwork and exhaustion that tend to occur as people throw themselves into disaster recovery operations. Post-disaster environments are often less safe and sanitary than normal ones, so that people living and working in them need to exercise special care. Exhaustion can lower resistance to disease, decrease alertness, impair judgment, and make people less careful about health precautions and more vulnerable to accidents. There are several strategies for ensuring that people do not exhaust themselves:

- ✔ After an initial crisis period, during which overwork may be necessary, develop procedures to ensure that employees do not work too many hours without rest.
- ✔ Be sure to provide adequate staffing for all new responsibilities created after the disaster, such as internal relief operations.
- ✔ Set limits on work hours, if necessary, and train managers to monitor their subordinates and check for signs of exhaustion.
- ✔ Since leaders are especially prone to overwork, monitor each other and set a positive example for subordinates.

- ✔ Take care to ensure that no employee has an essential task that no one else knows how to do, or that person will surely be overworked.

Communicate clear priorities for work.

Since some normal operations may be suspended and new ones undertaken, this must be done carefully and consistently. Understanding priorities will not only help prevent overwork, but will also empower employees to make decisions about how to use their time most appropriately.

Provide opportunities for employees to talk about their stressful experiences.

To recover from severe stress, people need to talk about what they have gone through, and to compare their reactions with those of others. Consider the following suggestions:-

- ✔ Provide a group meeting organised by a Critical Incident Stress Management (CISM) professional.
- ✔ Remind employees of procedures for scheduling individual CISM appointments, since some employees may need more personal assistance in resolving problems arising from the disaster.
- ✔ Offer opportunities for employees to share their experiences informally, for example, by providing a break area with coffee or other refreshments.

Special considerations when employees find themselves working in other agencies:

It is important that employees who may have been “called out” are still able to remain in contact with their own workplace. Strategies might be: -

- ✔ Arranging to visit at home at a convenient time.
- ✔ Having them “call in” at the workplace on their way to emergency duties; just to say hello.
- ✔ Regular telephone calls to let them know how everyone at work is doing.

Supervising an Employee with Suicidal Concerns

Suicide is a significant cause of death. Though there are differences in suicide rates based on such factors as age, gender, and ethnicity, a person from any background can commit suicide, or go through a period of seriously contemplating it.

People considering suicide often have been "worn down" by many stresses and problems. Actual or expected loss, especially a love relationship, is often a contributing factor. The suicidal person is frequently lonely and without a solid support system. Sometimes this is a long term characteristic of the person; in other cases a geographic move, death, or a divorce may deprive an individual of personal ties that were formerly supportive.

Listen carefully to what your employees say. People thinking about suicide often give hints about their intentions. Talking about not being present in the future, giving away prized possessions, and making funeral plans are examples of possible hints of suicidal intent. If you hear such talk, question it, kindly but firmly. Express your genuine concern for the person; you won't make the situation worse by clarifying it, and an open conversation with you may be the person's first step toward getting well.

Be alert to changes in behaviour. A deterioration in job performance, personal appearance, punctuality, or other habits can be a sign of many problems, including suicidal concerns.

If an employee admits thinking about suicide:

You'll want to arrange professional help for your employee, and the way you do this is very important. The way you approach the issue can have an impact on the employee's willingness to receive professional help. Your genuine respect and concern for the employee can contribute to the healing process.

First offer your own personal concern and support. Let the person know you care; the employee is both a unique human being and a valued member of your team.

Show understanding of the employee's pain and despair, but offer hope that, with appropriate help, solutions can be found for the problems that are leading the person to feel so desperate. REMEMBER: Keep away from the "I know just how you feel" statements.

Ask whether any of the employee's problems are work related, and, if so, take initiative in attacking those problems. For example, the employee may feel improperly trained for key responsibilities, or may be having difficulties with leave or

some similar issue without having made you aware of it. If you can act as an advocate in remedying some of these problems, you will help in three ways:-

- i. Removing one source of pain,
- ii. Showing concretely that someone cares, and
- iii. Offering hope that other problems can also be solved.

Do not question the employee about personal problems, as the individual may wish to keep them out of the workplace, but listen with empathy if the employee chooses to share them.

Do not offer advice, but acknowledge that the problems are real and painful.

Protect the employee's privacy with regard to other employees. This will require thought and planning, as questions are sure to arise. When dealing with higher management, you need to think clearly about what they actually need to know, e.g., that the employee is temporarily working a reduced schedule on medical advice as opposed to what they don't need to know, e.g., intimate personal information that the employee may have confided in you as the immediate supervisor.

Without hovering over the employee, show your continued support and interest. Make it clear that the individual is an important part of the team, and plays a key role in the ongoing life of the workplace.

Get Help

As a general rule, anyone feeling enough pain to be considering suicide should be referred to a mental health professional, at least for evaluation. Make it clear that you want the employee to get the best possible help, and that some types of assistance are outside your own area of competence.

Usually, the Employee Assistance Program (EAP) is the referral source for mental health assistance; if your organisation has one. If not then the employee's General Practitioner. If the employee consents, call the GP yourself, emphasising that the situation is serious and needs timely attention. Arrange an appointment and *firmly* offer to drive the employee to the appointment.

If for some reason the EAP or GP is not immediately available, turn to your community's Crisis Intervention or Suicide Prevention resource. These are normally listed with other emergency numbers in the telephone book, and available on a 24 hour basis.

Follow Up

Once your employee is involved in a treatment program, try to stay in touch with the program. This does not mean that you should involve yourself with specific personal problems that the employee is discussing with a therapist.

What you do need to know, however, is how you can work with the treatment program and not at cross-purposes to it.

- ✔ Does the employee need to adjust work hours to participate?
- ✔ Has the employee been prescribed medications whose side effects could affect job performance?
- ✔ Should you challenge the employee as you normally do, or temporarily reassign the person to less demanding duties?

This kind of communication will occur only if the employee permits it, since mental health professionals will not, for ethical reasons, release information without the employee's consent. If you make it clear to the employee and treatment team what your goals are:- to support them, not to delve into the employee's private concerns, you will probably have no difficulty getting co-operation. A meeting involving you, the employee, and the counsellor can be particularly helpful in clarifying relevant issues and ensuring that your supervisory approach is consistent with the employee's treatment.

Take Care of Yourself.

Working with a suicidal person is highly stressful, and you should take positive steps to preserve your own mental health while you help your employee. You should not hesitate to get support for yourself, either from your own supervisor or from a professional counsellor.

Helping an Employee Recover from an Assault

Being assaulted on the job can lead not only to physical injury, but also to psychological distress. Recovery with return to job effectiveness requires not only the assistance of professional experts such as medical practitioners and psychologists, but also the enlightened support of supervisors and co-workers.

The role of the immediate supervisor is especially important, because that person most powerfully represents the organisation to the employee. The supervisor needs to convey personal concern for the employee as well as the concern of the organisation, and a sense of the employee's unique importance to the work group and its mission.

The following guidelines have been shown to prove helpful in these situations:-

If the employee is hospitalised, visit, send cards, and convey other expressions of concern.

It is important that the employee not feel abandoned. The nursing staff can advise you of the length and type of interaction most appropriate. If the person is quite ill, a very brief visit and a few words of concern may be enough. As recovery continues, sharing news from the office will help the person continue to feel a part of the organisation.

Encourage co-workers to show support.

At some point the employee will need to tell the story of the assault, probably more than once, and may find it easier to discuss this with co-workers who are familiar with the work setting and may have had similar experiences. Co-workers can help significantly by listening in a caring way, showing support and avoiding any second guessing of the situation. Being assaulted is not only physically painful; it can make the world feel like a cold, frightening place. Simple expressions of kindness from friends and co-workers (a visit, a card game, a funny book, a favourite magazine) can help the person regain a sense of safety.

Help the employee's family.

If the employee has a family, they may need support as well. If the situation has received media attention, the family may need assistance in screening phone calls and mail. Other kinds of help, such as caring for children while a spouse visits the hospital, can go a long way in showing that the work group cares for its members.

Plan the employee's return to work.

The supervisor, employee, and health care providers need to work together to plan the employee's return to work. Here are some important points to consider:

- ✔ There is some truth in the old saying about "getting back on the horse that just threw you," and it can be helpful to get back to the crucial place or activity in a timely manner. The sooner the employee can return, the easier it will be to re-join the group, and the employee will have missed out on less of the current information needed for effective job performance. However, it is important not to expose the employee to too much stress at once. A flexible approach, for example, part-time work, a different assignment at first, or assignment of a co-worker for support, can often help the employee overcome anxiety and recover self-confidence and may allow the employee to return to work sooner than would otherwise be possible.
- ✔ The employee's physical needs must be clarified with health care providers, e.g., the supervisor and employee should understand precisely what is meant by phrases such as "appropriate duty." If the employee looks different, from wearing a cast or having visible scars, it is helpful to prepare other employees for this in advance.
- ✔ Advance thought needs to be given to any new environmental needs the employee may have, such as wheelchair access or a place to lie down during the day.

Working out a flexible plan for a recovering employee may take time and energy in the short run, but that effort will be repaid in the long run by retaining an experienced employee as an integral part of the work group.

Offer counselling.

Counselling services should be offered either through the workplace Employee Assistance Program (EAP), or through an independent Psychologist; and with the attitude that it is perfectly natural to use such professional resources in the aftermath of a traumatic experience. Supervisors and Psychologists should work together to make the experience as convenient and non-bureaucratic as possible. However, individual preferences and differences should be respected. Some employees find that they can recover from the effects of the experience with the help of their friends, family, and co-workers. Others may not feel the need for counselling until weeks have passed and they realise that they are not recovering as well as they would like. If an employee actually asks for Counselling support always ensure it is provided. The fact they have asked is a significant issue in itself. If your Insurer is a bit reluctant make it very clear that this is a demand from a Customer (you) not a request!

Make career counselling available if the employee decides to change jobs.

Even with excellent support, employees who have been assaulted sometimes feel, "It just isn't worth it" and decide to transfer to a safer occupation. The employee should be encouraged not to make such an important decision in haste, but career counselling and other forms of assistance should be made available. Again a specialist injury management provider might be of assistance here. Supervisors and co-workers who have tried to help the employee may need reassurance that their efforts contributed to the individual's recovery, and that the decision is not a rejection of them.

When Domestic Violence Comes to Work

There's also another kind of violence that demands our concern; violence in an employee's personal life that follows the employee into the workplace. Sometimes it literally turns up on the doorstep of the building, with an irate spouse shouting threats, or a stalker lurking around the parking lot. Sometimes it's more insidious, infecting the workplace with stress without anybody quite being able to pinpoint what's wrong.

This Section covers scenarios that a manager might encounter:-

A note on gender: This section refers to the abused person as "she" because that's the pattern in the majority of abuse situations.

Remember that men can be abused, and if they are, they also need the support of their managers and friends.

- ✔ A spouse, lover, or other personal associate might threaten, harass, or assault an employee in the workplace.
- ✔ An employee might confide in a supervisor about being victimised.
- ✔ A manager may suspect that an employee or co-worker is being victimised, but
- ✔ The person hasn't spoken out about it.

Regardless of whether you observe the assaultive behaviour or are told about it, the first thing to do is to define the situation correctly.

If somebody is threatening, harassing, or injuring an employee or another person, it is most likely a criminal act. Forget all the polite rules about ignoring lovers' quarrels, because this is another kind of situation altogether.

Never underestimate the possible dangers of someone who batters, stalks, or otherwise mistreats another person, whatever his or her relationship may be. The danger may extend beyond the one-targeted employee to others in the workplace. Obviously, all situations aren't equally dangerous, but there's enough risk that you should not try to evaluate dangerousness unless you're well trained in threat assessment; and most managers are not.

If there appears to be an immediate threat, notify the Police as they can most readily provide security in the situation. Should a call have to be made make it very clear that you are seriously concerned for the safety of your employees and you require their immediate presence. Make certain you get the name and time of any people you speak to, and log the times of all calls.

If it's not an immediate threat, you need to think about the appropriate place to turn for support.

Jurisdiction is a complicated issue, but it's important to try and understand it. Otherwise, misunderstandings between law enforcement and other

professionals can make things far more painful for everybody. It is valuable to also include any OH&S consultants or Workplace Psychologists you may have at your disposal.

With regard to understanding jurisdictional issues, these pointers may help you start out in the right direction:-

- ✔ If the threats, abuse, stalking, or other harassment are happening at or around the employee's home, the law enforcement agency responsible for the employee's place of residence has jurisdiction.
- ✔ If threats or violence occur within the workplace, or in direct connection with employee's duties, there may be a role for differing law enforcement officers. Whilst the police in some states are reluctant to become involved in industrial settings they nonetheless maintain a responsibility to intervene in unlawful behaviour. You may need to insist on their involvement.
- ✔ Even if the situation doesn't seem to be an emergency, you shouldn't delay reporting it to the appropriate law enforcement agencies and getting at least their initial assessment of the situation. Assessing threats is part of their profession, and they may see signs of danger that aren't obvious to an untrained person.

If there seems to be danger in the workplace, the law enforcement agency responsible for your office security can help you in assessing the threat and adjusting security measures. Alternatively you might consider utilising the services of a private security specialist. Maybe you should change the locks, or any security patrol should be advised to be particularly aware of various individuals. Maybe the threatened person should be assigned to a different office.

In addition to law enforcement, your employee is likely to need a number of other professional services, ranging from psychological counselling to legal advice to a safe shelter to live in for a while. Many communities now have comprehensive victim assistance programs with a wide array of co-ordinated services. The employee may appreciate it if you make the initial phone call to locate the resources. If you don't know where to call, the local Community Health Centre often may assist with guidance.

As a conscientious manager, you know to leave the counselling to professional counsellors. Although you should remember that there's a lot you can do to help the employee without abandoning your own role. The normal things good managers do to make the workplace productive and harmonious for everyone can be especially meaningful to those employees whose personal lives are in turmoil. Having a chance to be productive and feel part of a team can do wonders for the battered self-esteem and sense of isolation that often go along with being a victim.

If you suspect, but do not know for certain, that an employee is being victimised.

You may find yourself with a more complicated scenario. What if the situation isn't clear? The employee seems tense and upset. Maybe her work is suffering, or other employees are beginning to find her tension getting in the way of teamwork. Maybe the employee hasn't talked about abuse, but behaves in ways that lead you to worry about it. She might come in on Monday mornings with fresh bruises, or seem frightened whenever her husband/boyfriend phones her at work. Co-workers may be coming to you with concerns that she is being victimised, but nobody wants to bring up the subject with the employee.

As a manager struggling to do the right thing, you may be asking yourself, "Should I get involved at all? Is this a personal problem or a workplace problem? What will happen if I don't do anything?"

This is a complex situation, and the way you handle it will depend on your own judgment and your working relationship with your employees. Here are some suggestions that might be helpful:-

Don't assume it couldn't happen to your employee.

Even when an employee's behaviour causes concern, it's common to think something like, "It must be my imagination because Jane is a mature professional person who wouldn't be involved with anything like that." The fact is that anyone can become a victim. But those who don't fit the stereotype, older women, highly educated women, or men from any walk of life, may find it especially difficult to let anyone know what is going on.

Don't ignore the situation.

Work may be the only resource an employee has left, particularly if the abuser has succeeded in cutting off other sources of support. The earlier you learn about the situation, the quicker you can bring in professional resources. Then you will have a better chance of aiding the individual employee and preventing an incident of violence that could devastate the entire workplace.

Put aside your thoughts about what may be happening at home.

Focus on the employee's behaviour at work. It's always appropriate for a supervisor to show concern for an employee who seems seriously distressed, and to support the employee in getting professional help. As you probably know, you shouldn't try to diagnose the employee's problem, and should make it clear that the employee can choose whether or not to confide in you.

"Jane, I have to tell you that I'm concerned about you. You're doing the same good work you always have, but you seem tense all the time, and this is the second time this week I've seen you crying at your desk. You don't need to tell me what's going on in your life, but if there's anything our employee assistance counsellor could help with, I wish you would go talk with them. We can adjust the schedule to fit your meeting times, and nobody else in the office needs to

know where you are. And if I can be of help with anything, I hope you'll let me know."

Or if there is no EAP Counsellor

"Jane, I have to tell you that I'm concerned about you. You're doing the same good work you always have, but you seem tense all the time, and this is the second time this week I've seen you crying at your desk. You don't need to tell me what's going on in your life, but if there's anything we could help with we'd certainly try. You're too valuable to the business and me for you to have to put up with this alone. Even if you don't want to say anything now, know that you can knock on my door any time you like and we'll see what we can do to help.

If the employee's performance or conduct is deteriorating, then document the deficiency and discuss the matter with your personnel officer. Whether or not formal action is appropriate at this time, it is essential to counsel the employee about the deficiency. It may seem cruel to confront a person who is obviously suffering, but sometimes this is the only way to help. If you become aware of what is going on at this time, and you probably will, place the emphasis on strategies to help (as cited above) and make a time to re-address the performance issues after a reasonable time period. Reminding the employee how essential she is to the organisation may actually help boost her self-esteem.

If you suspect a co-worker is being victimised.

If the person is your friend or co-worker rather than your subordinate employee, you have more latitude about how to approach the situation. If you decide to confront the problem, you may want to ask whether the person "*feels safe at home,*" rather than asking directly about "abuse". This wording, based on first-hand experience, can make it easier for the person to open up about the problem.

If your friend denies that there is a problem, or gets angry with you for suggesting that there is one, don't give up or take it as a personal rejection. Your friend may be so beaten down emotionally that she isn't ready to face the reality of what's going on in her life. She may be telling herself that she deserves what she's getting, or that her husband will change if she only does things better. She may be terrified that any action, even admitting the problem, may lead to greater danger for herself or her children. Even if she seems to reject your concern, you can still be a friend, let her know you are there for her, and remind her that you believe she deserves to be safe and happy.

It can always be helpful to get confidential professional advice before you try to intervene.

You might want to talk with a Counsellor yourself, or contact a community organisation specialising in domestic violence.

Workplace Violence: Stopping It Before It Starts

Violence in the workplace is one of the more painful problems of modern life. If you're like most people, you don't even want to think about it. What is at issue here is not danger from the general public, but rather the more painful possibility that our co-workers or people close to them could be a threat to others.

Workplace violence is rare, and it would be a mistake to become overly fearful. But everyone needs to know something about it, and to keep that knowledge at the back of their minds, "just in case." What follows in this Section is a summary of what it may be valuable for you to know.

This problem needs to be approached at three levels: prevention, early identification of threats, and appropriate response to threats. This is not as complicated as it sounds. What you need to do requires basic management skills plus a willingness to turn to professional resources in a timely manner.

Prevention

When you look at what the experts have to say about preventing violence, their message boils down to what could be called simply "good leadership." The same approaches that create a healthy, productive workplace can also help to prevent crisis situations. There can't be too much attention to leadership basics, like keeping in touch with employees, making sure they have the skills and tools they need, helping them with obstacles, and showing concern and fairness to each one.

Careful observance of personnel practices is a part of good leadership. If you set clear standards, note employee problems promptly, and use the probationary period, performance counselling, discipline, and other management tools conscientiously, your intervention can keep difficult situations from turning into major problems.

Programs to foster effective communication in the workplace are recommended and help employees resolve stressful issues at work or at home. With so many changes going on now, there's a tendency to think, "We don't have time for that." But if you bring in an expert facilitator to resolve tensions in the work group, or encourage an employee to seek counselling for personal stress, you will probably find that the investment pays off in productivity.

Early Identification of Threats

No matter how good a job is done, it may not be possible to prevent all potentially violent situations. An employee can be driven to the point of violence by factors outside the organisation's control. Alternatively an employee's family members, romantic partners, or other associates may bring their own violent impulses into the employee's workplace. So managers also need to be prepared for a second level of involvement: early recognition of possible threats.

Managers don't need to be experts on violent behaviour. What is needed is a common-sense recognition that, "Something seems wrong here," plus a willingness to seek advice from those who are knowledgeable about different parts of the problem.

Your employees need to know that intimidation is totally unacceptable in the workplace, and that they should tell you if they feel threatened for any reason. You *must* give them reason to believe that you will respond in a mature, constructive way if they do share their concerns.

What are the warning signs to look out for?

- ✔ First, anybody who says or hints that they might harm someone. Like suicidal individuals, people contemplating violence often tell others, directly or indirectly, about their plans.
- ✔ Second, anybody who expresses fear of somebody else. An employee may report being stalked by an ex-spouse. Employees may be afraid of someone who talks repeatedly about weapons in a way that seems strange to them.
- ✔ You, as the supervisor, may find yourself shrinking from the task of counselling an employee because you feel afraid of the person.

All of these should make the alarm bells go off in your mind. At this stage it's appropriate to listen to "gut level" reactions. You're not making any decisions yet; you're just identifying a situation that needs to be explored.

Appropriate Responses to Threats

If you discover that someone does seem to have threatened violence or to have a genuine fear of it, you need to move on to the third level of involvement, an appropriate response.

The key to an effective response is to get all the help you need. This is not the time to be self-reliant. You need the objectivity of an outside point of view, and the expertise of professionals from several fields.

One crucial point is sometimes overlooked. If at any time there seems to be immediate danger, drop whatever else you are doing, notify the authorities, and take whatever steps are necessary to protect safety. Usually, however, these situations develop more slowly, and there is time to respond before emergency measures are needed.

An appropriate response is one that protects the safety of all concerned, while respecting everyone's legitimate rights. This can be a delicate balance, and situations are so varied that it is difficult to draw up a set of procedures that will work for all of them.

What does work is a strategy rather than a procedure. Call in the experts, get them working as a team, and their combined expertise will help you come up with a solution.

This strategy has worked in a variety of situations. They weren't all handled the same way, but they were handled in ways that made sense.

As you assemble your team, you will probably turn first to your own management chain, your personnel department, and a mental health professional. Other specialists, such as union officials, can be important contributors, depending on the specific situation.

Once you get your team together, you will have three major tasks:-

- i. Evaluate the problem more extensively,
- ii. Develop and execute a plan for responding to it, and
- iii. Address security concerns at every step of the way.

Sometimes, objective evaluation may show that there really isn't a serious problem. If this is the case, it's important that nobody be criticised for "over-reacting." If evaluation shows that a response is necessary, your planning will probably have short-term and long-term components. In the short term, you will be concerned with guarding against a possible immediate threat while a long-term solution can be developed. The long-term solution should address the root causes of the problem and prevent a recurrence of the threatening situation.

Communication should be given special attention. It is essential that all team members share a common understanding of the plan and of one another's roles in it. Stress can interfere with listening and memory, so it is important to express yourself clearly and check to make sure you have been understood.

Support for those affected, whether as potential victims or as problem solvers, is an important concern. Fear is a real source of stress, and responsibility for the safety of others is a heavy burden. You can help by establishing an atmosphere of acceptance and open communication. It is valuable to have an Organisational Psychologist at your disposal who can help by offering seminars, debriefings, or other group activities, and by welcoming individual employees to take advantage of their services.

How to Listen to Someone Who Is Hurting

Whenever people face bereavement, injury, or other kinds of workplace trauma, they will at some point need to talk about it in order to heal. To do this, the person will need willing listeners. Yet the sad reality is that this is not always available. Many of us will do all that we can to avoid listening to people in pain. We may feel like we are going through a tough enough time ourselves, or we might be afraid of making the whole thing worse by saying the wrong thing.

Sometimes we excuse ourselves by assuming that listening to people who are hurting is strictly a matter for professionals such as psychologists or members of the clergy. It is true that psychologists and other professional people can assist in special ways, and provide the suffering individual with insights that most of us aren't able to offer. However, their assistance, although extremely valuable, is no substitute for the caring interest of supervisors, co-workers, friends, and others from the person's normal daily life.

It is natural to feel reluctant or even afraid of facing another person's painful feelings. But it is important not to let this fear prevent us from doing what we can to help someone who is suffering. If we take just a moment to consider the role of a Manager we find that this degree of support certainly falls within the Job Description. Of course if you are doing it too tough as well you might need to make greater use of the professional support available.

Though each situation is particularly unique, some basic strategies may help you make the journey a little easier to navigate:

- ✔ The most important thing to do is simply to be there and listen and show you care.
- ✔ Find a private setting where you won't be overheard or interrupted. Arrange things so that there are no large objects, such as a desk, between you and the person.
- ✔ Keep your comments brief and simple so that you don't get the person off track.
- ✔ Ask questions which show your interest and encourage the person to keep talking, for example:
 - ① *"What happened next?"*
 - ① *"What was that like?"*
- ✔ Give verbal and non-verbal messages of caring and support. Facial expressions and body posture go a long way toward showing your interest.
- ✔ Don't hesitate to interject your own feelings as appropriate, for example: example:
 - ① *"How terrible."*
 - ① *"I'm so sorry."*

- ✔ Let people know that it's OK to cry. Some people are embarrassed if they cry in front of others. Handing over a box of tissues in a matter of fact way can help show that tears are normal and appropriate. It's also OK if you get a bit teary yourself. Make sure there are tissues in the room if you are using a room. Don't carry the box in with you!
- ✔ Don't be distressed by differences in the way people respond. One person may react very calmly, while another expresses strong feelings. One person may have an immediate emotional response; another may be "numb" at first and respond emotionally later. Emotions are rarely simple; people who are suffering loss often feel anger along with grief. Unless you see signs of actual danger, simply accept the feelings as that person's natural response at the moment. If a person is usually rational and sensible, those qualities will return once their painful feelings are expressed.
- ✔ Don't offer unsolicited advice. People usually will ask for advice later if they need it; initially it just gets in the way of talking things out.
- ✔ Don't turn the conversation into a forum for your own experiences. If you have had a similar experience, you may want to mention that briefly when the moment seems right. But do not say, "I know exactly how you feel," or something similar; it's a communication killer and is extremely arrogant. You don't know because everybody is different.

It's quite natural for someone to worry about saying the "wrong thing." The following is a brief but helpful list of three other things not to say to someone who is suffering:

DO NOT SAY:

Anything critical of the person.

*"You shouldn't take it so hard."
"You're overreacting."*

Anything which tries to minimise the person's pain.

*"It could be a lot worse."
"You're young; you'll get over it."*

Anything which asks the person to disguise or reject his/her feelings.

*"You have to pull yourself together."
"You need to be strong for your children's sake."*

These are helpful guidelines, but the most important thing is to be there and listen in a caring way. People will understand if you say something awkward in a difficult situation.

Once you have finished talking, it may be appropriate to offer simple forms of help.

- ✔ Check about basic things like eating and sleeping.
- ✔ Sharing a meal may help the person find an appetite.
- ✔ Giving a ride to someone too upset to drive may mean a lot.
- ✔ Ask what else you can do to be of assistance.

After you have talked to someone who is hurting, you may feel as if you have absorbed some of that person's pain. Take care of yourself by talking to a friend, taking a walk, or doing whatever helps restore your own spirits. Congratulate yourself on having had the courage to help someone in need when it wasn't easy.

What is Stress?

Stress is a response of the body to a variety of internal and external stimuli. External triggers may include an injury, death or injury of co-worker, job change, a move to a new city, marriage, death of a loved one, or an illness in your family. (Happy as well as sad events can create stress.) Internal stimuli may include physical or mental discomfort. Personality traits, such as a need to strive for perfection or to please others, may also cause stress. Stress can produce either negative or positive reactions. For instance, you may strive for perfection because you feel inadequate, and the constant pressure you put on yourself may ultimately work against you. On the other hand, you may experience pressure positively and become highly motivated and productive, thus achieving more than you would under normal circumstances.

Why is stress harmful?

Be it positive or negative, stress does produce physical reactions. The body releases hormones and chemicals that accelerate the function of the heart, lungs, muscles, and other organs. This response may be protective, enabling you to escape from a careening car, for instance. When you feel safe again, these bodily reactions usually disappear. However, if you are stressed for long periods of time, these hormones will continue to be released and to stimulate your body - eventually, this mind-body communication produces wear and tear.

What life events increase stress?

For many years people have understood that different events can have different impacts upon us. Various questionnaires have been developed which try and find out what might have happened to us and the impacts that these things have had on each of us. Below you will find the most stressful events (for most of the people tested):-

- ☑ Death of a close family member or friend
- ☑ Unfaithful spouse
- ☑ Major financial difficulties
- ☑ Loss of employment
- ☑ Marital separation or divorce
- ☑ Pregnancy
- ☑ Lawsuit
- ☑ Serious illness in the family
- ☑ Major personal illness
- ☑ Important exam
- ☑ Change in work conditions
- ☑ Move to another city

How does my body tell me if I am overstressed?

When your body is overstimulated for an extended period of time, it may warn you with some of the following signals of distress:-

- ✔ Tension
- ✔ Racing heart
- ✔ Irritability
- ✔ Insomnia
- ✔ Neck or low back pain
- ✔ Fatigue
- ✔ Headaches
- ✔ Stomach upset
- ✔ Constipation/diarrhoea
- ✔ Appetite increase/decrease
- ✔ Increased substance use (such as cigarettes, alcohol, caffeine, drugs)

These signs indicate that you need to examine your lifestyle and pressing concerns. Prolonged stress may interfere with your enjoyment of life and lead to physical or emotional illness. Illnesses related to (but not necessarily caused by) stress include ulcers, irritable bowel syndrome, high blood pressure, migraine headaches, and low back or neck pain.

If these warning signs of stress-related illnesses persist, talk with your doctor. You may also find some relief by using some of the coping mechanisms listed in this publication.

How can I assess my stress level?

Many people are not aware that subtle emotional and behavioural changes are occurring as a result of stress. The following self-quiz may alert you to some of the signs of stress in your own life.

1. Do you find it hard to relax and have fun?
2. Are you easily irritated?
3. Do you find it hard to sleep at night?
4. Do you feel overburdened by responsibility?
5. Do you experience physical signs of stress (such as a nervous stomach)?
6. Have you lost interest in relationships or sex?
7. Are you unable to perform your job adequately?
8. Have you noticed an increased desire to smoke or drink?

If you answered yes to four out of the eight questions, you may want to use some of the following strategies to help you deal with excess stress.

Common coping strategies

- ✔ *Active physical exercise.* Regular exercise can help reduce muscle tension and promote a sense of well-being. The physical tension built up by worrying may also be relieved. (Massage can also produce this effect).
- ✔ *Limit-setting at work and on extracurricular activities.* Saying "no" to excessive demands by your employer and on your free time can minimise stress.
- ✔ *Family, friends, social groups.* Loving "support systems" also help when dealing with stressful events.
- ✔ *Vacations or "playtime".* It is important to plan "mini-breaks" (or longer vacations) to allow your body to rest during peak stress periods.
- ✔ *Hobbies.* Finding an interest to focus your attention and energy on will often offset the effects of stress.
- ✔ *Religion.* Meditation or prayer may have a relaxing effect on your body.
- ✔ *Counselling.* Talking with a counsellor can be helpful in identifying problems that trigger stress, and breaking patterns of negative stimulation that produce stress.
- ✔ *Relaxation techniques.* Workshops in stress management and tension relaxation teach effective methods for managing stress.

The following exercise is simple, and should provide a relaxation response. Do it twice a day, preferably before breakfast and after dinner.

A "breather" from stress.

1. Sit in a comfortable position.
2. Close your eyes.
3. Deeply relax all your muscles and keep them relaxed.
4. Breathe through your nose. Become aware of your breathing and as you breathe out, repeat a word (such as "one") silently to yourself. Keep distracting thoughts from interfering, by concentrating on repeating the word.
5. Continue for ten or twenty minutes.
6. When you are done, do not stand up immediately, but sit with your eyes open for a few minutes.

Note: Because this technique reduces stimulation, it may reduce your need for medication if you are suffering from high blood pressure. Be sure to check with your medical adviser before you begin using this technique on a regular basis.

Managing When the Stress Doesn't Go Away

Previous sections have focused mainly on traumatic events that overwhelm us with their suddenness. An employee is assaulted or killed, or a fire roars through an office. We are shocked and shaken by the enormity of the event and its unexpected nature.

Sometimes, though, long-term stress can assume traumatic proportions

Employees often may have to cope with rebuilding their homes and lives after a disaster. Disasters are not the only source of long-term stress that employees may face. Threats of violence, whether from individuals outside the workplace or from fellow employees, can lead to severe stress situations, which go on for weeks, and affect many people. Harassment campaigns directed against employees can be nerve-wracking even when there is no apparent physical danger. The prospect of losing a staff member to a slowly debilitating illness can produce a long period of stress for everyone involved. Organisational change can produce severe stress if employees feel uncertain and worried for long periods.

Getting the job done and taking care of employees under conditions of severe, long lasting stress can be one of the most difficult challenges a manager may face. It's not easy to take charge, develop innovative approaches, and be sensitive to the needs of others when you're at least as uncomfortable as your subordinates. There are, however, some management approaches that have proved helpful in these situations: -

Take concrete steps to see that everything possible is being done to lessen the sources of stress.

If danger is a problem, call the appropriate emergency services immediately, and get all the advice and concrete support you can from them. If employees are overwhelmed by competing demands in the aftermath of a large-scale emergency, set clear priorities and make sure they are consistently followed. You probably can't "fix" the entire situation, but you can improve it. Your employees will feel better if they know you are working on their behalf.

Keep open lines of communication with your employees.

This is *always* important, but even more so when everyone is under long-term stress. In most stressful situations, one source of anxiety is a sense of being out of control. Your employees will feel better if they have up-to-date information and permission to approach you with their questions. Depending on circumstances, you may want to adopt new communications strategies, such as having frequent meetings, publishing an informal newsletter, and keeping an updated notice board in a central place. As you consider your communication strategy, don't forget your employee unions. Like

you, union leaders are concerned with getting information to employees, and this may be an excellent opportunity for union-management co-operation. Consider that:-

- ✔ Employees will have a greater sense of control if you are careful to listen to them with an open mind before making decisions that affect them. Even if your decision turns out to be the one they would not have wished for, they will feel less powerless if they believe that their ideas and preferences were given serious consideration.
- ✔ Communicating with employees may be difficult for you if your own tendency, when under stress, is to withdraw from other people, or to become less flexible than you normally are. Both are common stress reactions, and can interfere with your leadership if you don't monitor yourself.

Encourage teamwork and cooperation.

Under long-term stress, there is no substitute for a supportive, caring workplace. Employees will find the situation, whatever it is, less painful if they are surrounded by co-workers who care about them, and will listen if they need to talk, or lend a hand if they need help. A workplace accustomed to teamwork rather than internal competition will usually be able to cover for members who are temporarily unable to function at 100% effectiveness.

Ideally, your workplace has always been strong and cohesive.

If not, do what you can to help it pull together under stress. Encourage and validate teamwork and co-operation. Avoid any appearance of favouritism and make it clear that there is opportunity for everyone to achieve and receive recognition.

Set clear work standards.

Doing good work is always essential, but even more so in times of high stress, since success can bolster self-esteem and group morale. Keep your standards high, but allow as much flexibility as possible in how the work gets done. If you set clear standards, but give employees some freedom in working out ways to meet them, they will probably be able to develop approaches that fit the contingencies of the stress situation. Check on how much flexibility you have with regard to such conditions as work hours, administrative leave, alternate work sites, etc. It's natural to assume that the way we have always done things is the only way, but you and your employees may have options that you haven't considered.

Make it clear that this is a difficult period, and it's OK to share feelings of anxiety, fatigue, or frustration.

If you set the example by letting people know you can do a good job even though you are not feeling your best, you can set a positive example. Define the situation in a way that emphasises the strength of the workplace while acknowledging the challenges it faces. The tone should not be, "Poor us," but rather, "This is pretty tough, but if we pull together we'll get through it."

Acknowledge the value of professional counselling.

Encourage your employees to get whatever help they need. Long-term stress can wear down the coping reserves of the strongest person, and it makes sense to get extra support in order to preserve mental and physical health. One strategy is to bring in a specialist psychologist to talk to the group about stress management. Besides learning from the presentation, your employees will develop a personal contact, which can make it easier to turn to a Psychologist if they need to.

Don't underestimate the impact of stress on you as an individual.

Attend to your own stress management, and use your resources for professional consultation and counselling. You will find it easier to take care of your workplace if you also take care of yourself.

Attachment One - Tips for managing mental health during COVID19

Take care of your body

1. **Get enough sleep.** Go to bed and get up at the same times each day. Stay as close to your “normal” routine as possible, even if you're staying at home. Always get up and get dressed.
2. **Participate in regular physical activity.** Regular physical activity and exercise reduces anxiety and improves mood. Find an activity that includes movement. There are now plenty of resources on the internet. Where possible exercise outside in an area that makes it easy to maintain distance from people. This is preferable to “indoors”.
3. **Eat healthy.** Choose a well-balanced diet. If you don't know what that is make use of online resources – it is important. Avoid filling up on junk food and refined sugar. Food high in carbohydrates should also be off-limits. Limit caffeine as it can aggravate stress and anxiety. Remember Coke and Pepsi are full of sugar and caffeine. Keep away from energy drinks.
4. **Avoid tobacco, alcohol and drugs.** If you smoke tobacco or if you vape, you're already at higher risk of lung disease. Given that we know COVID-19 targets the lungs, your risk increases even more. Using alcohol to try to cope can make matters worse and reduce your coping skills. Avoid taking drugs to cope, unless your doctor prescribed medications for you – and then only use them as prescribed.
5. **Limit screen time.** Turn off electronic devices for some time each day, including at least thirty (30) minutes before bedtime. Make a conscious effort to spend less time in front of a screen — television, tablet, computer and phone.
6. **Relax and recharge.** Set aside time for yourself. Even a few minutes of quiet time can be refreshing and help to quiet your mind and reduce anxiety. Many people benefit from practices such as deep breathing, tai chi, yoga or meditation. Listen to music, or read or listen to a book — whatever helps you relax. Select a technique that works for you and practice it regularly.

Take care of your mind

1. **Keep your regular routine.** Maintaining a regular schedule is important to your mental health. In addition to sticking to a regular bedtime routine, keep consistent times for meals, bathing and getting dressed, work or study schedules, and exercise. Also set aside time for activities you enjoy. This predictability can make you feel more in control.

2. Limit exposure to media. Constant news about COVID-19 from all types of media can heighten fears about the disease. Limit social media that may expose you to rumours and false information. Also limit reading, hearing or watching other news, but keep up to date on national and local recommendations. Look for reliable sources, such as the U.S. Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO) or the peak body within your country. Treat all “news” from politicians as suspect until corroborated from a trusted source.
3. Avoid social networking sites such as Facebook, WhatsApp, etc. It has been shown that the single largest source of misinformation (lies) about all things COVID-19 come from “posts” on social media. The single biggest thing you might consider doing during the pandemic is banning yourself from these platforms.
4. Stay busy. A distraction can get you away from the cycle of negative thoughts that feed anxiety and depression. Identify and enjoy hobbies that you can do at home. Actually, doing something positive is a proactive and healthy coping strategy.
5. Focus on positive thoughts. Choose to focus on the positive things in your life, instead of dwelling on how bad you feel. Consider starting each day by naming three (3) things you are thankful for. Not always easy – always valuable.
6. Set personal priorities. Don't become overwhelmed by creating a life-changing list of things to achieve during the pandemic. Set reasonable goals each day and outline steps you can take to reach those goals. Give yourself credit for every step in the right direction, no matter how small. And recognize that some days will be better than others. This is NOT the time for those “stretch” goals, where you deliberately set goals just at your reach – that is a recipe for disaster.
7. Do what you can to support those around you. One of the most satisfying accomplishments that many people report is being able to “help” their fellow human beings. If you have not seen a neighbour outside for a day or so – reach out across the fence (socially distanced of course). Give family and friends a call on the phone.

When is it time to ask for help?

When it comes to our mental health there are various ways we can ask for help. However, for many people this can be quite terrifying. Fortunately, there are a number of ways you can better prepare yourself to do the seemingly impossible. In almost all cases, when someone shares the burden of a mental health challenge, they nearly always say it was well worth doing. Even if there are no actions that come from that disclosure they almost always say “I feel lighter”; or something similar.

There are a number of different reasons that may coax us into talking about our mental health: -

- When your persistent thoughts, emotions or behaviours are affecting your relationships, work or sense of mental health and wellbeing;
- If you are finding it hard to deal with day to day life and are feeling down, sad, or anxious and these feelings are not going away after a few weeks;
- If you have noticed you have low energy and lack motivation to do the things you normally do;
- When the use of alcohol or other drugs interferes with your health, emotions, relationships, finances, job or your ability to fulfil your daily responsibilities;
- Family and friends say they have noticed a change in your behaviour;
- If you are feeling ashamed or embarrassed to speak to someone close to you about how you are really feeling;
- If you believe it is too late to get help because it seems things have gone too far;
- When you are having suicidal thoughts or if you are worried you might hurt yourself or someone else.
 - If this is ever happening you must treat it as urgent and reach out to your GP or Emergency Room (hospital). If your country has a Suicide Help Line then make that call – never put it off.