CEB/HLCM Task Force on the Duty of Care

TRAINING PROGRAMME FOR MANAGERS IN HIGH-RISK ENVIRONMENTS

Programme Outline

12 March 2018

Contents

PROGRAMME OBJECTIVES

Table of Contents

As outlined in the Standards of Conduct for the International Civil Servants, it is the "*responsibility of organizations to ensure that the health, well-being, security and lives of their staff, without any discrimination whatsoever, will not be subject to undue risk. The organizations should take measures to protect the safety of their staff and that of their family members. At the same time, it is incumbent on international civil servants to comply with all instructions designed to protect their safety.*"

Focus on the "duty of care" is particularly essential in the context of the "how to stay" approach to UN operations, whereby an appropriate balance has to be ensured between the ability of the organization to carry out its essential work in diverse, including increasingly challenging, environments and making sure that all reasonable efforts are made to address risks.

While service in a high-risk environment is complex and demanding for any employee, managers are facing particular challenges stemming from their role as leaders and their accountabilities related to both managing operations and ensuring "duty of care" for personnel.

The training programme for managers in high-risk environments is a multidimensional learning programme that **aims to equip managers with knowledge and skills that would help them ensure success of their UN entity operations, while also making sure that managers themselves and personnel they lead demonstrate high levels of performance, stay safe and secure, and maintain their personal health and well-being.** In addition to getting practical knowledge and skills, programme participants will gain invaluable insights into their personal values, strengths and leadership style, interact with other UN leaders, and master some of the building blocks of being an effective and inspiring leader in a complex high-risk environment.

The programme, which is aligned with the new UN Leadership Framework[1], is designed based on the latest research in leadership development, motivation and engagement and responds to needs identified by mangers in the field. It is based on experiences and lessons learnt by UN entities and other organizations with significant field presences, expert advice of security and HR managers, stress counsellors, medical professionals, policy and other specialists.

PROGRAMME STRUCTURE

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[1] The new UN Leadership Framework Addresses Accountability as a defining characteristics of UN leadership which includes being responsible for the safety and wellbeing of staff, especially those who serve in volatile crisis contexts.

The training programme for managers in high-risk environments would consist of several modules covering a broad range of issues related to security management and emergency response, regulatory frameworks, policies and procedures governing operations of UN entities in hardship duty stations, support to personnel, and maintaining personal health and well-being. Depending on the content of existing, organizational specific, trainings for managers certain components of the training programme may be shortened to make the delivery more agile.

The key modules of the Programme would include the following:

Module 1.   Security Management: organizational and personal
Module 2.   Operating in a high-risk environment: UN entity operational frameworks, policies and procedures
Module 3.   Leadership in a high-risk crisis environment
Module 4.   Maximizing performance and resilience of personnel
Module 5.   Personal resilience and well-being

Figure 1. Structure of the Training Programme for Managers in High-Risk Environments
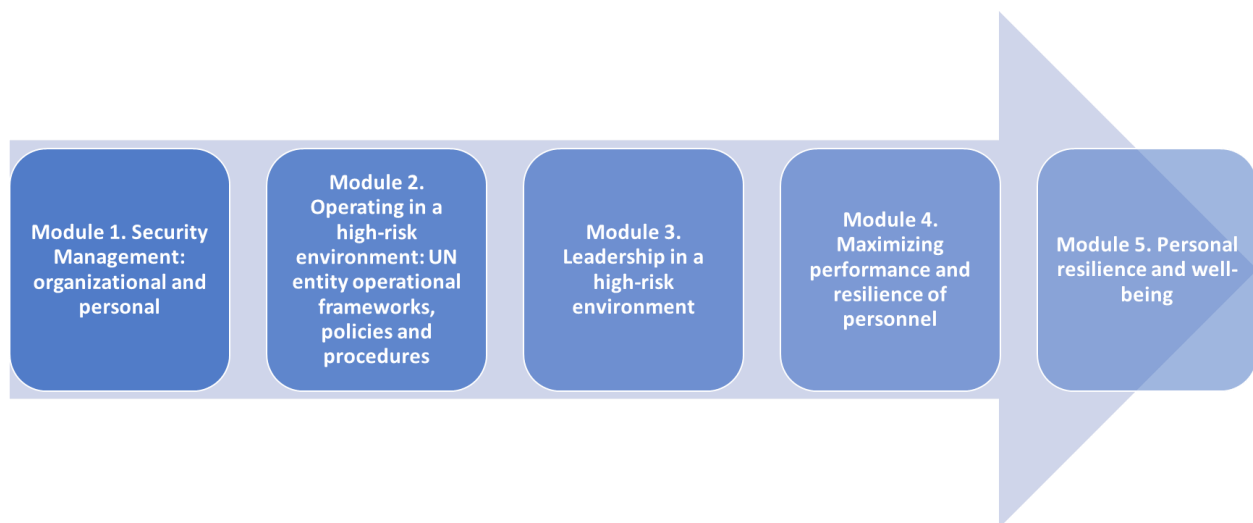
PROPOSED PROGRAMME CONTENT

Module 1. Security Management: organizational and personal

Learning Objectives:
Upon successful completion of the module, participating managers will be equipped with skills and knowledge to lead/contribute to the implementation of provisions of the UN Security Management System, identify threats to personal safety and security, and mitigate risks.

Module Components:
This module will be based on the Safe and Secure Approaches in Field Environments (SSAFE) standard content, and will cover:

- UN Security Management System: key provisions, policies, requirements
- UN Accountability Framework for Safety and Security
- Personal Security
- Radio Communications
- Weapon Awareness
- Travel, Convoy and Vehicle Security
- Hostage Survival
- Incident Management (basic life-saving)

It will be expected that all managers will have completed a Basic and Advanced Security in the Field courses, hence content from these courses will not be covered.

Partners: UN DSS, IASMN, UN System Staff College

Sources of Content:

- UNDSS course on Safe and Secure Approaches in Field Environments (SSAFE)
- UN SSC course on SSAFE for Surge Deployment
- Duty of Care Guidance for Managers in High-Risk Environments by Task Force on Duty of Care, section on security management (Annex 1)
- Internal security management policies, guidelines and instructions

Proposed content (*to be complemented and finalized, as required*):

- Existing SSAFE content, with any updates by UN DSS and IASMN
- Existing content from UN entities internal security trainings, courses, learning sessions, guidelines, instructions (if any)

Module 2. Operating in a high-risk environment: UN entity operational frameworks, policies and procedures

Learning Objectives:

Upon successful completion of the module, participating managers will be aware of, understand and be able to oversee implementation of the special policies and procedures of their respective UN entities that govern programming and operations management in crisis and protracted crises environments, and emergency response.

Module components:

- Overview of challenges faced by UN entity personnel when operating in high-risk environments and information on entity specific risk appetites (i.e. information on what "exposing staff to undue risks" mean)
- Polices/procedures governing policy/programmatic/project work
- Policies/procedures governing management of operations
- Policies/procedures related to emergency response (with linkages to the IASC)
- UN standards for living and working conditions (guidance developed for UN system use)
- Support mechanisms, including SURGE and HR Rapid Response Teams
- Programme Criticality Training
- Civil-Military Coordination
- Engagement with Non-Estate Entities

Partners: policy/programme, HR, procurement, finance, IT and other relevant divisions of individual agencies

Sources of Content:

- Internal policies and procedures of UN entities related to programming, partnership building, and management of operations in crisis, protracted crises, and emergencies
- Relevant inter-agency agreements
- Human Resources Policies and procedures, related to flexible working arrangements, working from home, compensatory time off etc.

Proposed content:

It is expected that each entity/agency develop this module based on internal operational frameworks.

Module 3. Leadership in a high-risk environment

Learning Objectives:

Upon successful completion of the module, participating managers will be aware of key leadership competencies and behaviors that are most critical for effective leadership in complex emergencies and otherwise high-risk environments, understand when they, as managers, operate effectively, and make changes in behaviours and attitudes accordingly. They will be aware of and will know how to apply key instruments and tips for managers to create a positive, respectful and inclusive working environment free from harassment and abuse. Managers will also be aware of/practice a set of critical soft skills required for crisis responders.

Module Components:

- Leadership Accountability
- Leadership Style
- Authentic Leadership traits
- Making Effective Decisions and Judgements in Crisis Situations
- Creating Calm in Times of Chaos
- Coping with Stressful Situations as a Leader
- Soft Skills for Emergency Responders
- Self-Awareness

Partners: UN EPST/HRM, UN Staff Counsellors Office, UNSSCG

Sources of Content:

- UN Toolkit for United Nations Leadership in Content
- UN Secretariat training course on Soft Skills in Crisis Management for Responders
- UN Staff Counsellors Office courses on mission preparedness and psychosocial health
- UNHCR training course on the Duty of Care
- Existing courses on inclusive and respectful working environments, sexual harassment and abuse (SEA) towards local populations and on harassment, sexual harassment and abuse of authority in the workplace

Sample content (*to be complemented and finalized, as required*):

Leadership Accountability

For managers operating in complex emergencies, being aware of the very clear core values established by the Organization is critical. These values differ from organization to organization and may include values such as Accountability; Transparency; Integrity; Respect for Diversity etc. These values should be used as a baseline in managers' conduct and duty to the Organization. In particular, it is important that managers pay attention to the following basic elements of accountability which are not limited to:

- Awareness of the responsibility placed on all staff to maintain the integrity and reputation of the Organization;
- Achieving objectives and high-quality results in a timely and cost-effective manner;
- Fully implementing and delivering on the mandates of the office and in compliance with all regulations, rules, and ethical standards;
- Truthful, objective, accurate, and timely reporting; and
- Responsible stewardship of funds and resources.

In practical terms, managers are responsible for the following:

Responsibility	Actions
Supporting and motivating staff	Promote self-care and encourage staff to prepare themselves and families for emergency events.
Sustaining productivity as far as possible within the given situation.	Be aware of the stressors and the impact of one's own emotional intelligence on others; remain calm and composed and adapt the leadership style to fit the situation.
Maintaining an open and transparent work environment.	Encourage staff to speak openly about issues that affect them and support to their families, and about their work.

Compliance with the rules and regulations.	Be aware of delegated authority and ensure proper documented activities outside of the normal procedures.
Instilling a sense of accountability among staff to follow the rules and procedures.	Make sure that they 'do the right thing' as far as their obligations to the Organization. Do not turn a blind eye if they are exhibiting procedures and behaviours that are putting them and/or the Organization at risk.

While managers must always strive to meet these responsibilities, a disaster or crisis is likely to alter and intensify the demands placed on managers. As a result, managers may need to alter their usual way of leading their staff, and it may fall on them to restore calm among staff so they can function throughout the response.

Leadership Style

Working under a great leader is a privilege that can be far too rare, but even more rare is a definition of what makes a great leader. Therefore, it's simpler to look at the types of managers out there, and consider how they differ, and what their strengths and weaknesses are. Below is a list of five most common leadership styles in the workplace, including their pros and cons.

Visionary

The defining traits of a visionary leader are that this person will constantly look to the future in every facet of the job, and engage workers by sharing their own optimistic views of where the company is headed. These leaders promote innovation, learning, creativity and relationships, all in the effort to share and attain a common goal.

In short, a visionary helps others see the goal and stay focused on it.

Strengths: When times are tough, it's easy for employees to lose sight of the company's goals. A visionary leader can help gather the troops and remind everyone of why they are there, what their role in the future of the company is, and how great it will feel once they have attained the goal as a team.

Weaknesses: Vision is one thing, but action is another. If a leader is too focused on what's happening in the future, they may not have the same level of drive to enforce actions to make it happen. There is also a chance they will not devote as much time or energy on pressing problems of the present.

Coaching

A coaching leader is one who puts the most time and effort into building up their team members' skills, experience, confidence, and knowledge. They will be the type to say "give this a try", and would much prefer to spend 30 minutes teaching an employee how to answer a question, rather than take a few minutes to answer it themselves.

Strengths: Many people love working with a coaching leader, as it is a surefire way to build up their own assets. This can inspire fierce loyalty, as well as driven and satisfied employees. Long-term, it can mean a staff of highly competent individuals who are capable of multiple roles.

Weaknesses: The coaching technique tends to fall down in one of two ways. Either the employees – the students – will be unwilling or incapable of learning, or the leader will not quite have the best skills in teaching, making it frustrating and difficult for those trying to learn.

Democratic

A democratic leader is one who solves problems or makes changes by asking team members for their feedback, suggestions and ideas. This leader will be uncomfortable with making all the decisions themselves.

Strengths: When employees are involved in the decision-making process, they may be more inclined to feel obligated to ensure it works. Therefore many of those who work under a democratic leader may be less likely to disapprove of changes. It can also be a good style for bringing out the best in a team, with the best ideas on the plate in all situations, rather than just the best idea from a single person.

Weaknesses: The democratic leader may struggle in difficult times when decisions need to be made quickly, or when employees are unavailable for comment. The system also has weak points when team members have differing opinions on the best way forward.

Affiliative

The affiliative leader is one who cares, first and foremost, about the wellbeing of the employee. There will be very little conflict on a team run by an affiliative leader, staff will feel valued and appreciated, and there will be an overall sense of harmony within the workplace.

Strengths: Studies show that 1) many workers felt undervalued in their role and 2) that the number one reason for workers to remain in their jobs was that they liked the people they worked with. With an affiliative leader, the first scenario is unlikely to happen, and the second is likely to be true. Employees feel welcome, valued and happy about coming to work, which is also particularly useful when a workplace needs to recover from a stressful or difficult time of change or upset.

Weaknesses: An affiliative leader may have a tough time dealing with inevitable conflicts when they do arise, and will be less likely to meet these scenarios head on. It can also result in poor performance from workers who become complacent under the stream of positive feedback, as they run out of direction to strive to be better.

Coercive

A coercive leader is one who simply tells others what to do, when to do it, and how to do it. They expect compliance immediately and without question, and can be very tough when demands are not met. While many people may feel their manager is coercive, this is not a terribly common leadership style.

Strengths: The ability to get the job done quickly is almost unparalleled for the coercive leader. With no 'if's, 'but's, or excuses, employees will move through tasks with impressive efficiency, which can be especially useful in times of crisis. This style can also be a good way to deal with an underperforming employee when other avenues have been exhausted.

Weaknesses: A coercive leader will never be a popular one. More like a drill sergeant than a manager, this leader will quickly stifle creativity, innovation or ideas that may come from team members, and can leave them feeling overworked and undervalued. This can promote staff turnover and effectively cost the company more money, despite an increase in production. (Daniel Goleman, 2002)

Be aware of Authentic Leadership traits

The following describes a set of traits and abilities that are commonly mentioned when describing effective leaders.

- Effective leaders lead by example.
- Effective leaders listen, observe and are showing interest in their staff issues and well-being.
- They tend to be confident, hopeful, optimistic, resilient, transparent, moral, ethical, and

future-oriented.
- They are aware of the circumstances and contexts of the situation.
- They give priority to developing staff to become leaders themselves.
- They are self-confident, genuine, reliable, and trustworthy, and they have a primary focus on building followers' strengths, broadening their thinking, and creating a positive and engaging work environment.
- Because people trust them, they are able to motivate others to high levels of performance.
- Rather than letting the expectations of other people guide them, they are prepared to act based on their own core beliefs.
- They engender trust and develop genuine connections with others and they are more concerned about serving others than they are about their own success or recognition.

Which combination of these traits will be most helpful for leading a team during a crisis will depend on the specific demands of the situation, so the ideal would be to strengthen all of them in order to draw on them as needed. While it is unlikely for a manager to master all of these traits, it is important to consider how one can work to develop them under normal conditions in order to be best prepared to lead well during a crisis.

Creating Calm in Times of Chaos

Emotions play a significant role in the workplace, but never more so than in high stress work environments and in times of emergency/crisis. Emotions are catching. When leaders are optimistic or resilient in the face of challenges, staff will be motivated. When leaders are distraught or worried, staff will experience similar feelings. Staff will take cues from their manager's facial expression (not only facial expressions but from their "non-verbal expressions/body language"). When leaders smile, staff will follow suit. This has been referred to as 'emotional contagion.' Leaders who convey that somehow they will get through difficult or crisis situations and remain hopeful during the most distressing events can transmit this attitude to their staff, thereby fostering staff resilience. Bear in mind, however, that overconfidence and bravado are not helpful. In fact, leaders who display humility have a positive impact on staff.

Effective leaders are self-aware and have the ability to recognize, express, understand, and evaluate their own emotions and the emotions of their staff. In order to accomplish this, leaders need to regulate their own emotions. Regulating emotions can involve displaying positive facial expressions (e.g., smiling) and masking negative ones (e.g., hiding disgust anger, contempt, fear), calming yourself down, or refraining from argumentative behavior. It can also involve relieving stress by healthy coping (discussed in other tipsheets). If you can regulate your own emotions you are likely to have the capacity to demonstrate positive emotions and control negative ones such as disappointment, uncertainty, and annoyance. This creates a supportive and positive organizational climate. Effective leaders instill optimism, confidence, and faith in their staff by suggesting that they work together for a better future, although they may face challenges ahead.

There is one caveat here: Faking positive emotions by feigning enthusiasm, interest, and calm is not helpful.

One aspect of emotional intelligence which should not be underestimated is empathy. In order to understand and respond effectively to the emotions of staff, leaders must know what they are thinking and feeling. Leaders can practice and work at being more empathic by attending to staff members' reactions, thoughts, and emotions. Studies have shown that leaders who can empathize and read emotional expressions of their staff are rated as more effective, and followers are more satisfied with such managers.

Making Effective Decisions and Judgements in Crisis Situations

A complex emergency is defined in part by its ambiguity and urgency. In such circumstances it can be very difficult for managers to assess information and make decisions effectively. In addition, because leaders in crisis situations are under severe time pressure, they often have less time to acquire and process information. Self-efficacy, meaning an individual's beliefs about his or her abilities to accomplish a specific task in a specific context, is one good predictor of competent leadership in a crisis. What may be most helpful in these circumstances is for managers to have the confident belief that they have the knowledge, skill, and ability to lead others effectively. Here are a few things to think about when preparing to address the needs of the situation and staff:

- Try to be more open-minded, exploratory, and adaptive when responding to difficult decisions.
- Think about successful previous experiences in challenging circumstances. This can create a greater level of confidence.
- Recognize what can and cannot be controlled, and try not to become frustrated or angry about conditions or problems that are beyond your control.
- Ability to think divergently – the ability to generate multiple alternative solutions to problems – can help you become more creative in dealing with ambiguous and challenging crisis situations and decisions.
- If possible, try to get the formal authority you require to lead others in the crisis situation. Clarifying your role as an authority can increase confidence in your efficacy to lead. However, you must also recognize the limits of your authority and abide by the rules and procedures of the Department of Safety and Security and other UN policies.
- Get as much experience as you can both in leadership and in dealing with crisis situations. Leaders with experience feel more confident.
- If you lack the experience or even if you have considerable experience, it is extremely helpful to practice crisis scenarios. The degree to which you have practiced and rehearsed crisis response protocols such as table top or actual live drills can increase your sense of self-efficacy. Self-efficacy can be changed through practice and training. Consider the following set of statements that can allow you to consider and prepare for a complex

emergency. If you feel prepared you are more likely to be confident, and to assess information and make decisions effectively as you deal with both the situation and your staff.

- ○ I know who to call if I receive a report of an occurring or impending crisis.
- ○ I am sure what my role and responsibilities would be in a crisis.
- ○ I frequently review the crisis response plans that my unit has in place.
- ○ I have adequately practiced my unit's crisis response plan.
- ○ I keep others at work up to date on the best way to reach me in a crisis.
- ○ I believe my unit's response plan is the best it can possibly be.
- ○ I have a system in place that can rapidly and accurately account for the staff in my team/unit that fall under my scope of responsibility.
- ○ I have established effective liaison relationships and mechanisms in advance.
- ○ I am aware of any special needs my staff may require in case of emergencies.
- ○ I have built a cross-functional team to deliver any services or continuity of work required in an emergency situation.

Research also shows that there are three main sources of potential stressors leaders and managers will encounter during emergencies. They are: **environmental** (e.g., time pressure, level of risk); **organizational** (e.g., bureaucracy, appropriateness of information, decision support and management systems); and **operational** (e.g., inter-agency liaison, decision making and media management) (Paton & Flin, 1999). Taking time to assess and reflect on these potential stressors and whether they can be managed may result in better personal and professional preparedness.

Coping with stressful situations as a leader

Paying attention to your own emotions and the emotions of your staff, regulating your emotions, and empathizing with your staff does not only have an impact on emotional outcomes such as distress and burnout; it also leads to better task performance in an emergency situation. To maximize your ability to protect your staff members and help them recover after difficult events, remember the following keys to leadership in times of emergency.

- **During a Crisis:** When disaster strikes, speak to your staff, ask for their support, and let them know your plans and intentions; Get as much information and advice as you can from as many sources as you can; Be open to viewing your staff and the crisis situation with new perspectives and flexibility; Lead by example. If you participate in menial tasks, staff members are more likely to take on whatever needs to be done.
- **After a Crisis:** Be sure there is someone working for you who you trust enough to lead if you need a break following the crisis.
- **At All Times:** Think about your responsibility to and compassion for your staff; Create a positive and supportive work climate; Keep your staff informed and be sure they know that your door is open and that you are available for them; Be fair and impartial to your

staff; Give every staff member something challenging and important to do. Everyone wants and needs to feel both valuable and appreciated for their contribution; Hold regular meetings to build teamwork and contribute to a positive atmosphere; Set reasonable expectations and be tolerant even and perhaps especially in crisis situations; Do not point out weaknesses in staff members in front of others; Empower and show confidence in those you give responsibility to; Do not be afraid to change course or change your mind if your approach to staff members is not working or your expected office response is not effective; Never forget to congratulate your staff for a job well done.

Module 4. Maximizing performance and resilience of personnel

Learning Objectives:

Upon successful completion of the module, participating managers will be aware of how working in complex emergencies and otherwise high-risk environments affect personnel and will know how to support personnel in building their resilience, maximizing their engagement and performance, and maintaining safety, health and well-being in such environments.

Module Components:

- Keeping staff positive and engaged
- Occupational hazards in stressful situations, risk factors and warning signs
- Attitudes to risk and different sort of risks – ensuring these attitudes are aligned with the organizational risk appetite
- Psychological First Aid and staff reactions during crisis/critical events
- Recognizing when staff require professional assistance
- Strategies to maximize resilience and lessons the impact of existing hazards on staff

Partners: UN EPST/HRM, UN Staff Counsellors Office, UNSSCG

Sources of Content:

- UN Toolkit for United Nations Leadership in Content
- UN Staff Counsellors Office courses on mission preparedness and psychosocial health
- Duty of Care Guidance for Managers in High-Risk Environments by Task Force on Duty of Care, section on security management (Annex 1)
- UN Secretariat course on family focal points and call center volunteers
- Duty of Care section of the UNHCR on-line Management Learning Programme (MLP)
- UNHCR Critical Incident Management Training (CIMT)
- DFS/DPKO Civilian Pre-deployment Training
- WFP on-line courses for managers operating in high risk environments:
  - o Becoming a Manager (includes some best practices in functioning in an emergency)
  - o Getting ready for an emergency (provides basic training for operating in high risk environments)

Sample content (*to be complemented and finalized, as required*):

Keeping staff positive and engaged

While working and helping in emergency/crisis situations may be stressful and in some cases potentially harmful, people have often cited the following rewards that come with working in such situations:

- Personal satisfaction and enjoyment of the work variety
- Relief from routine work
- Feelings of empowerment during times of crisis and chaos
- Emotional connection with survivors, colleagues, and the community
- Sense of competence and mastery in overcoming unique challenges
- Sense of privilege and honor to serve during times of need
- Increased self-knowledge and self-awareness
- Promoting healing in unique and moving circumstances
- Personal growth
- Being part of a meaningful effort larger than oneself

As a manager, you can emphasize the sense of purpose and the above-mentioned positives that can serve to sustain motivation during the times of increased stress and work demands.

Understanding Occupational Hazards in Stressful Situations, Risk Factors and Warning Signs

Managers should be aware of potential risks to persons working in highly stressful environments, such as experiencing acute stress, chronic stress, traumatic stress, or all three. This stress, if not managed, can result in a variety of conditions that are similar and not mutually exclusive. There are various terms that refer to the occupational hazards that can occur when providing supportive services to highly stressed or traumatized individuals, including **burnout, compassion fatigue, vicarious traumatization, secondary traumatic stress**.

Perhaps the most serious occupational hazard is **burnout**. In its fullest manifestation, it involves a complete emotional and physical collapse, often accompanied by depression, suicidal thoughts, and the need to temporarily or permanently discontinue work in the field. Burnout develops gradually, sometimes over years, and can be prevented through early detection. One way to recognize advancing burnout is simply by noticing that a person is neglecting his/her own needs. Other warning signs include:

- Emotional exhaustion (feeling drained from one's work)
- Depersonalization (worry that the job is hardening one emotionally)
- Diminished personal accomplishment (feeling one is not positively influencing other people's lives in one's work)

Compassion fatigue is the general term used to describe the emotional exhaustion that comes from overextending yourself to aid others. It is a result of the stress caused by attempting to help others with their distress. Warning signs include:

- Sleep disruption (sleeping too much or too little)
- Social withdrawal (isolating oneself from others in order avoid interpersonal demands)
- Negative coping (eating or drinking too much, missing work)

Vicarious traumatization or secondary traumatic stress can occur if someone is exposed to intense or repeated stories of traumatic experiences and they begin to impact the person as if he or she suffered the traumatic event personally. This can take a serious emotional toll, changing one's beliefs about fairness, justice, or good and evil in the world. Warning signs include:

- Rumination (inability to put distressing stories out of one's mind)
- Hyperarousal (being on edge, watching for threats)
- Loss of trust or faith in others

All these occupational hazards can not only cause misery but also limit people's ability to be effective managers or helpers. However, they can be prevented by practicing effective coping methods and good self-care.

Anyone who is committed to helping survivors may be vulnerable to these occupational hazards. That includes you yourself as well as staff members who are working directly or indirectly to respond to a stressful situation. However, people are more at risk if:

- They are exposed to multiple trauma and grief experiences
- The event causes injuries, death, or grotesque images or sounds
- The event impacts children
- There are many chronic (ongoing) or acute stressors or demands in your life
- They have their own unresolved trauma or grief reactions from current or past losses
- They feel helpless to assist others or to save lives.

Additionally, especially in the event of large-scale disasters, staff often need to tolerate a great deal of ambiguity and uncertainty. In many cases you, as a manager, may not know the outcome of contact with those you are trying to help, which can add significantly to your stress level.

Risk factors can also be summarized according to personal characteristics as well as the characteristics of the disaster. All staff will be more at risk if the disaster is large in scope, high in intensity, and long in duration, and most staff members will need support if there are deaths and injuries. However, some individuals need little help even in dire circumstances, while some personnel need support with a small-scale event, especially if they are inexperienced or

struggling with other life stressors. While all staff are at risk for occupational hazards, there are specific factors to consider in assessing the level of support and assistance different individuals may need to prevent advancing stress reactions:

General factors	Situation-specific factors
• Personal history • Defensive coping style • Current life context • Training/career history and status • Lack of resources or social support (e.g., supervision) • Nature of clients served • Nature of work and workplace	• Size and scope of the disaster/event Personal and direct connection to disaster/event • Mass casualty event or events caused by intentional violence • Disasters with many injuries • Grotesque images and sound • Witnessing impact of events upon children

When you and your staff are under extreme stress, sometimes the warning signs emerge slowly and sometimes they can hit suddenly. It is important to remember that if staff are feeling really bad, having unexplained physical symptoms, are quick to conflict, or are showing up late to work, they could be experiencing symptoms of extreme stress. Stress reactions and warning signs of occupational hazards are individual. One person may over-eat, while another may under-eat. It is recommended that managers and staff become familiar with and have plans for monitoring and responding to one another's individual warning signs.

Warning Signs of Stress in Personnel	
Emotional Anxiety Powerlessness Sadness Helplessness Depression Mood swings	*Workplace* Avoidance Tardiness Absenteeism
Health Headaches Gastrointestinal distress Fatigue or exhaustion Increased susceptibility to illness	*Relationships* Withdrawal/Isolation Decreased intimacy Mistrust Misplaced anger Over-protectiveness *Thoughts* Disorientation Perfectionism

Muscular aches and pains	Problems concentrating
	Thoughts of harm
Behaviours	Rigidity
Sleep changes	
Irritability	**Spirituality**
Hypervigilance	Loss of purpose
Appetite changes	Anger with one's God
Substance use	Loss of faith
	Questioning meaning/purpose of life and beliefs

What managers can do:

- To effectively manage your staff, you need to acknowledge the inevitability of work-related stress and prepare for emergencies by supporting self-care as a means of preventing the occupational hazards. Monitor and address the early warning signs by supporting your staff and reminding them of the importance of self-care
- Model good habits for your staff.
- Train staff in the cause and warning signs of these reactions, and create an environment for acknowledging the impact of high stress so this is accepted as an occupational hazard and is not viewed as a sign of weakness or lack of professionalism.
- During a particularly prolonged or intense crisis response, consider creating a 'buddy system' within your team/unit to help with monitoring each other for warning signs of burnout, compassion fatigue, or vicarious traumatization.
- Arrange for awareness sessions for your unit/team to be conducted by the Staff Counsellor or available resources in your location.

Psychological First Aid and Staff Reactions During Crisis/Critical Events

Psychological First Aid

Helping UN staff during or after a complex emergency is challenging even for the most experienced managers. Survivors can display shock and extreme emotionality. The assistance that survivors might require could last for a few minutes or many months. Most of your staff will recover on their own, but your ability to help promote a positive recovery environment will be

crucial to this recovery. In fact, your ability to supply effective psychosocial support to your staff may be among your most important responsibilities and can contribute greatly to their long-term well-being. This section present the principles and practices of Psychological First Aid. If you keep these principles and practices in mind during or after a crisis, you can provide effective assistance even if you are not a trained counsellor.

Principles of Early Intervention: The actions used to establish a positive recovery environment stem from principles that have received broad empirical support from research on stress, coping, and adapting after disasters and mass casualty events. There are five essential elements that should be included in any comprehensive psychosocial response to disaster or mass trauma. Put into action, these principles can improve the lives of survivors.

1. **Promote Safety:** After a disaster, in order to reduce the physiological responses to fear and anxiety, you should do all you can to promote safety by removing actual or perceived threats by following the guidelines outlined by the UN Department of Safety and Security (DSS). If the threat is ongoing you should comply with DSS's efforts to reduce the danger and encourage safety.

2. **Promote Calming:** Anxiety and distress are typical and understandable responses to disasters, but once the immediate danger has passed, heightened anxiety or arousal can become dysfunctional. You should promote calm by serving as a role model, and reassuring survivors that it is safe for them to relax or lower their arousal levels. Even if the danger is protracted, when there is relative peace, remind staff to relax.

3. **Promote Efficacy:** Complex emergencies can cause survivors to feel helpless and powerless. Promoting self-efficacy can begin with restoring a survivor's ability to regulate negative emotions and solve practical problems. Efficacy is promoted by encouraging those impacted to take as much control as possible over their own actions and decision-making.

4. **Promote Connectedness:** Your regular contact with your staff supplies one important connection. However, it is most important that you foster connections between survivors and their natural support system such as family members and neighbours. Remind your staff to talk with and stay connected to family and friends.

5. **Promote Hope**: Hope could be the belief that one's actions can bring about a positive outcome. For some, hope involves a belief that luck or the government will address needs. For many, hope arises through a belief in God or a higher power. Your realistic hopefulness that the situation can improve or that recovery is possible provides an effective role model.

How can these principles be applied to assist survivors of disaster or catastrophe? In fact, they provide the theoretical basis of the most recommended early intervention, Psychological First **Aid (PFA).**

According to the Inter-Agency Standing Committee Guidelines on Mental Health and Psychosocial Support in Emergency Settings (2007), 'PFA is a description of a humane, supportive response to a fellow human being who is suffering and who may need support. PFA is very different from psychological debriefing in that it does not necessarily involve a discussion of the event that caused the distress.' Instead, PFA interventions are meant to address the interrelated practical, physical, and psychological needs of survivors, making it consistent with the principles described above.

PFA's premise is that attending to basic needs (i.e., providing food and water; restoring a sense of calm, safety, and hope; connecting survivors with a source of social support; providing information and psychoeducation) as quickly as possible after someone experiences a stressful event will help to lower their arousal level and prevent them from developing long-term negative emotional reactions, just as receiving prompt medical treatment for a wound can prevent it from becoming infected.

PFA is not a process, but a toolkit of components to be used as needed, in any order appropriate. In fact, there are many different versions of PFA, though all share the same basic elements and goals. The World Health Organization, War Trauma Foundation, and World Vision International have a detailed guide to PFA for field workers that you can download here.

Reading and sharing that guide with your staff as well as attending the PFA training (conducted by the Staff Counsellor's Office) is highly recommended, but as a brief introduction to the intervention, core components of PFA include:

- **Be Calm:** One core aim of PFA is to reduce the physical and emotional arousal level that is increased by the disaster. Because emotions are contagious you can reduce the arousal level by maintaining a calm presence. It is important to maintain calm without being emotionally distant and to remain steady in order to help survivors master or regulate their experiences. Remember to breathe.
- **Provide Warmth:** Disasters can shake survivors' trust in humanity. You can help to restore that trust by being thoughtful, patient, and kind. Compassion and kindness are expressed in attentiveness, open posture, soothing tone of voice, and acceptance of anything the survivor says. Accepting and understanding survivors' feelings does not mean you should support inappropriate or unhelpful actions.
- **Provide Acknowledgement and Recognition:** While you want your staff to remain calm, you should not minimize the gravity of the situation. Survivors require acknowledgement and validation that they are in a very difficult situation or that they have experienced something terrible and their stress reactions are understandable and to be expected. If the significance of the experience is downplayed, survivors may not take the necessary time to rest and recover

- **Express Empathy:** If survivors want to describe what happened to them, be prepared to listen. Concentrate and attend to all aspects of the survivor's communication at both the emotional and cognitive levels. Respond by restating or reflecting on what the survivor said with statements such as "I hear you saying…" or "So you think that…." Such 'active listening' allows your staff to feel known and understood which can help them to cope with current stressors or to heal from one that passed.

- **Show Genuineness**: It is not easy to be warm and empathic if you are exhausted or impatient. A fake smile is not helpful. Only genuine empathy and warmth are helpful for survivors. Genuineness does not mean being blunt or indiscreet. To be sincere in your caring for your staff requires attention to the occupational hazards discussed in earlier tipsheets and caring for yourself. Know your limits so you can stay genuinely empathically and warmly engaged.

- **Empower the Survivor:** Here is another juggling act. At the same time that you acknowledge the fragility and vulnerability of staff members under stress or experiencing fear or loss, it is also important to support their resilience. Acknowledging and supporting a survivor's strength, competence, courage, and power – his or her resilience – can begin to restore a sense of control. Allow survivors to determine the kind of assistance they receive, the pace of any kind of self-disclosure, as much as possible. Ask 'How have you gotten through tough times before?' or 'What skills do you have that will allow you to get through this?' It may be helpful for staff to continue normal work routines so they feel useful even in difficult circumstances.

- **Attend to Safety Needs**: Survivors will recover much more quickly if they feel safe. They also need to feel that their loved ones are safe and out of danger. You should do all that you can to ensure that survivors and their loved ones are as safe as they can be during or after a crisis or disaster. Protect survivors from any threat or danger from the ongoing disaster, especially those who may be so disoriented that they are not able to care for themselves. There are situations where it is impossible to provide this kind of safety, but it is reassuring to your staff to know that this is your highest priority.

- **Attend to Physiological Needs:** If you hear or observe that staff or their family members are injured or ill you should do what you can to get them medical attention. You might provide assistance in problem solving as you help survivors to find basic necessities such as food, water, or shelter. If the crisis is a medical emergency such as a pandemic, while it is important to be empathetic and calm, it is more important to do all you can to ensure the physical health of survivors. This may involve finding out where to get vaccines or antiviral or antibiotic medication.

- **Provide Information and Orientation to Services:** Accurate information is an important antidote for the uncertainty and anxiety that survivors experience during or following a complex emergency. One category of information has more urgency than any other:

when survivors have missing loved ones. Family members in this category will want frequent updates about what happened and what is being done to search for the missing or abducted person. Even when there is little hope that a loved one will be found alive, relatives still may want details about the recovery process. Remember that whether the information you are providing is about a missing loved one or a more routine matter, it is important that all communication be framed in simple language. The stress of disaster can impair cognitive ability, so you need to be certain that the information you provide is received. You may need to summarize or review what is being said, or provide it in writing as well as verbally. Every effort should be made to communicate in the survivor's native language, especially since language skills are often impaired by stress.

- **Help Survivors Access Social Support:** Social support can be expressed in different ways, but all can help a survivor to cope with the stress of disaster and tragedy. Instrumental support can be practical in nature, taking the form of money or help with tasks and chores. Survivors might need instrumental help repairing their homes, arranging travel, or doing needed paperwork. Emotional support provides a survivor with warmth, caring, understanding or acceptance, and a sense that survivors are valued and important. Informational support can include advice or guidance that is intended to help survivors cope with difficult circumstances. While you may be able to provide all three forms of support directly, you should also encourage survivors to seek it from neighbours, friends, and family members. These personal connections can be valuable resources in providing accurate information on local conditions (such as where to obtain medical care, which roads are closed, where to obtain fuel or other supplies, if business hours have changed, and so on), as well as sources of comfort and solidarity. One caveat: Don't make the mistake of urging survivors to contact family and friends without being sure that these contacts will be trustworthy and helpful. Remember that not all relationships are supportive – in fact, some family members are significant sources of stress and misery.

- **Assist Survivors with Grief**: For some managers, being with a staff member who has just lost a loved one is the most challenging experience they ever face. Often there are practical problems. You might help your staff with tasks such as identifying remains, making funeral arrangements, repatriation, and legal, financial, and benefit issues. EPST members receive specific training on how to provide this kind of assistance elsewhere (see the Death in Service Handbook). Although this assistance is logistical it is also psychosocial, in that accurate information and practical resources are consoling. Psychosocial support for those who are grieving often involves little problem solving. You might say 'I am so sorry for your loss,' 'Is there anything I can do for you now?', 'Is there someone you would like me to call?', or 'Do you need me to notify anyone?' As a supportive presence you can offer much comfort. You might be called upon to provide assistance at memorials, which could be held soon or sometime after the disaster. The

bereaved are often very thankful if you simply provide a visible but unobtrusive compassionate presence.

Staff Reactions During Crisis/Critical Event

Disasters and emergencies unfold over time, and understanding common patterns will help you plan how to address staff needs in upcoming stages. Note that these phases generally refer to those who were directly impacted by an event, but they also apply to staff who are involved in addressing the resulting needs. While you will most likely be managing affected staff during the post-impact stage, it is important to understand their experience in the pre-impact and impact stages as these will help shape their reactions.

- *Before Impact:* Was a warning received in advance? Warnings help to activate coping mechanisms, allowing people to prepare cognitively and emotionally. If there was little or no warning, there may be more initial shock, disbelief, and fear as people to struggle to grasp what has occurred. If a warning was received but ignored, people often experience shame or self-blame.
- *During Impact:* As the disaster unfolds, the fight, flight, or freeze response is triggered, leading to magnified arousal levels while the focus is on survival. Contrary to stereotype, panic is not a common response; purposeful and productive actions are more the norm. However, especially if the event was sudden and unexpected, people may be in shock, unable to function well until they absorb what has occurred. How competent or helpless people feel and act at this time can play a key role in how they will process the disaster experience later. They may experience guilt or shame over their actions (or lack thereof), and they often express unrealistic beliefs about what they could or should have done to help others, when in reality those fantasized actions would only have increased personal risk.
- *Beyond Impact:* The recovery period following a crisis can be divided into several phases, each associated with a shift in staff emotions. The length of each stage varies depending on the scope, intensity, and duration of the catastrophe as well as the resources available for recovery. Not every person affected passes through all stages, and the progression may not be strictly linear as setbacks occur, anniversaries reawaken painful memories, and milestones are experienced in a new setting or without a lost loved one. Still, this model is useful to consider as it suggests what staff members may feel at the different points in the process of recovery, and allows you to anticipate what they are likely to need next.

> **What managers can do:**
>
> - Establish that families and loved ones are safe.
> - Be able to recognize and make allowances to support personnel through the difficult disillusionment stage.

- Regularly check in and keep all staff informed about: 1) the emergency situation and work arrangements, 2) what actions are being taken by the UN in response to the crisis and 3) decisions affecting their entitlements and benefits (if any)
- Understand and know your staff vulnerabilities.
- Ensure that staff understand the obligation of the Organization to them and their families, and their own obligations and responsibilities.
- If possible, organize ceremonies where personnel can come together – first to acknowledge and mourn shared losses, and then to mark positive developments as the recovery continues. Even if progress is slow after a large-scale event, celebrating small milestones can help keep staff members focused on recovery rather than dwelling on what was lost.
- Some anger may be directed at the UN by staff and their loved ones. As a manager you can try to diffuse that anger by communicating what the organization is doing to support the recovery effort, and by informing your supervisor about valid needs that might be addressed. Be patient and do not take the anger personally.

Recognizing When Staff Require Professional Assistance

While for most people post-disaster stress symptoms improve over time, this natural recovery process does not occur for some individuals who will go on to develop serious conditions that can severely impair their functioning. Extreme reactions you may see in disaster survivors include posttraumatic stress disorder, complicated grief, and substance abuse.

These conditions will impair a staff member's natural recovery and often require professional assistance, so you should become familiar with indications that a staff member is in need of treatment. While it is not your role as a manager to diagnose these conditions, the purpose of this tipsheet is to familiarize you with them so you can try to connect at-risk staff with the appropriate professional care as quickly as possible, before the symptoms become more difficult to treat.

Posttraumatic Stress Disorder (PTSD): PTSD is one of the more serious clinical diagnoses after exposure to a disaster, but the label is often misapplied in popular use. At its most basic, PTSD is an inability to integrate an event of unusual intensity and meaning into one's memory. That means that rather than recognizing that an event is over and can cause no further harm, people with PTSD continue to feel threatened by the trauma and are unable to feel safe enough to begin to move on. Certain groups (including children, elderly people, people living in poverty, and those with serious mental illness, physical disabilities, or substance dependence) are recognized as

more vulnerable, but anyone can potentially develop PTSD if their experience is sufficiently traumatic. On average around 5% of people who experience a natural disaster develop the disorder, but rates of PTSD tend to be much higher after human-caused events, especially for people who experience intentional violence like terrorist attacks, sexual violence, or torture.

PTSD can only be diagnosed after symptoms have been present for 30 days, and in some cases symptoms do not occur until some time has passed after the traumatic experience. The PTSD diagnosis requires all of these criteria:

1. Exposure to a traumatic stressor, with a reaction of intense fear, helplessness, or horror.
2. The presence of a specific number of symptoms in each of three groups:
    o **Reexperiencing:** Someone with PTSD does not simply remember the traumatic event as something in the past, but they feel like it is happening again, with the same physiological fight-or-flight reaction and a return of the initial fear, helplessness, or horror. This can occur as nightmares, flashbacks, or rumination (an inability to think of anything else).
    o **Avoidance:** In order to prevent the painful reexperiencing symptoms, the person stays away from any reminders of the traumatic experience – including places, conversations, media exposure, and anything else that may 'trigger' memories. This avoidance tends to become generalized beyond direct reminders, leading the person to limit participation in relationships, work, and other key aspects of life.
    o **Hyperarousal:** A person with PTSD is constantly on guard, 'threat monitoring' for any signs of danger. It is as if their fight-or-flight response never turns off, leaving them agitated and prone to over-reacting to any perceived threat. Sleep is usually disrupted.

3. Clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Many people with PTSD also experience symptoms of serious depression and anxiety. Given the nature of the core symptoms, PTSD tends to become self-reinforcing and increasingly difficult to treat. Over time, individuals progressively narrow their lives to avoid exposure to triggers of the traumatic memory, resulting in a withdrawal from normal activities and relationships and a constant state of anxious arousal that many sufferers attempt to blunt with alcohol or drugs. It also can have a serious impact on personal relationships. To avoid this escalation of symptoms and the resulting impaired functioning, identifying and treating the condition as early as possible is essential before symptoms become entrenched and more difficult to reverse. The good news is that there are effective treatments that can fully cure PTSD when delivered by a trained professional.

Complicated Grief

Grief is not a mental disorder, but a painful and expectable process in response to the death of a

loved one or other significant loss. Usually grief is followed by a gradual return of the capacity for engaging in new interests, activities, and relationships, but if this process does not evolve over time, complicated grief may be indicated.

Complicated grief is marked by the presence of intrusive memories or fantasies related to the lost loved one and the relationship, with strong emotions characterized by intense longing, loneliness, and emptiness. Complicated grief can look like PTSD, but anxiety and heightened arousal are absent. Instead, the avoidance of activities in complicated grief is not fear-based but rather related to a wish to avoid people, activities, or places that evoke painful memories or reminders that the loved one is gone (for example, a widow may avoid social activities that remind her of her changed role). Loss of interest in activities and disrupted sleep are common, as are intense sadness and yearning for the loved one.

Complicated grief is not an official diagnosis so timing guidelines regarding how soon after a loss it should be considered are not established; a range between 6 and 14 months has been suggested by various researchers. That is not to suggest that survivors should be 'over' the loss entirely by that point, but that the intensity of their mourning should be lifting. If they are not progressing in their adjustment process, treatment for complicated grief should be considered.

Substance Abuse: Sometimes people who have been through a traumatic experience turn to alcohol or drugs (either buying illegal drugs or misusing prescription medications) to help cope with their distress. New cases of substance abuse and dependence after disaster exposure appear to be rare, but those who had problems with alcohol or drugs before a disaster are at risk of having those problems recur or get worse afterwards. Therefore, it may be helpful to obtain a sense of substance use patterns among personnel and family members post-disaster and provide information on positive coping that steers those at risk away from overindulgence.

Indications Immediate Referral to a Professional is Needed:

While most extreme reactions that merit professional assistance take some time to develop, there may be individuals who are experiencing such strong acute stress reactions shortly after an event that they should be connected with mental health services immediately. Be on the lookout for behaviours that indicate problematic psychological responses, including people who are:

- threatening harm to self or others
- expressing irrational thoughts or beliefs
- experiencing significant cognitive impairment (e.g. making mistakes, getting involved in accidents etc.)
- enacting ritualistic behaviors (for example, rocking back and forth incessantly, or speaking or writing something over and over)
- hysterical or panicking
- dissociating (seeming unaware of their surroundings, feeling numb or disconnected from reality)

- withdrawing or no show(s) at the work place

Staff members who are displaying these behaviours should be referred to a UN Counsellor or other qualified professional as they are at high risk of serious negative reactions.

What managers can do:

- Know your staff and their potential vulnerabilities, and plan in advance for how you would handle personnel with extreme reactions:
- Know how to call, what help is available and where, and how to refer personnel to a UN Counsellor
- Ask for a list of professional helpers and ensure they are readily available (normally this is provided by HR and Medical Services)
- Be aware that anyone who experiences extreme or ongoing trauma can develop PTSD or other serious reactions, but people often feel weak or ashamed if they do not 'bounce back' on their own. Providing psychoeducation about these reactions and emphasizing that they are not an indication of weakness may help to reduce stigma about seeking assistance.
- Many distressed people prefer to talk to a spiritual leader or family/tribal elder rather than a mental health professional. These local leaders can be very effective at helping people with less extreme reactions, but treating PTSD in particular may require training in specialized interventions, so encourage staff in need to seek assistance from a UN counselling professional.

Strategies to maximize resilience and lessen the impact of existing hazards on staff

The essential nature of the work performed by the United Nations means that some staff members are often exposed to great suffering in others, and they may be personally exposed to dangerous or demanding work conditions on a regular basis. Other personnel may work in physically safe conditions, but feel ongoing concern for the security of colleagues. Then, if a crisis occurs, staff may feel overwhelmed by the need to respond professionally to a disaster or emergency that has also impacted their family directly; they may feel the strain of being separated from loved ones during a trying time; or they may experience stress from trying to maintain operations during periods of organizational disruption. In addition to taking a toll personally, these acute and cumulative stressors can make staff less effective in their work, just as their efforts are most needed to respond to a crisis. This section is intended to help you understand the preparation and mitigation strategies that can be used before, during, and after crises to maximize resilience among

staff members – and in yourself so you can continue to lead effectively.

Defining Resilience

There is no universal definition of resilience, but a 2009 World Health Organization report describes it as 'the capacity to cope with adversity and to avoid breakdown when confronted with stressors.' Note that this is different than an ability to recover quickly from post-disaster reactions: Resilient people are able to keep functioning throughout a crisis, so they not only experience less distress personally, but they also can continue to help others who are having trouble coping. In other words, **in times of crisis a resilient staff is an effective staff**, so doing what you can as a manager to foster resilience is not a luxury but a valuable investment of resources which will equip your staff to serve its mission more productively.

How can you accomplish that in advance of a crisis? The first step is to identify the personal and professional risk factors that can compromise staff resilience and to address them to the degree feasible. Consider the different groups within your staff: national and international, professional and general service, on-staff versus consultant or individual contractor. Each group will face specific role-related stressors in addition to the situational challenges shared by all, and personal traits or experiences also may impact resilience.

National staff vs. international staff: Natives of the region may be direct survivors of the humanitarian crisis the UN is there to address, giving them a history of disturbing experiences. They may feel they are treated (and paid) differently than international staff, and they may face hostility or violence in the community as a result of being associated with the Organization. Then when a specific disaster or emergency occurs, they may suffer the death or injury of family members, and loss or damage to home and community.

International staff whose families are not posted with them are likely to have fewer personal losses and concerns resulting from a disaster, but they are also separated from sources of emotional and social support, and may feel isolated in an unfamiliar culture. Of course they may also have a personal history of disturbing experiences that can be reawakened by the event even if it does not impact their own community or loved ones. Or they may be with their family when a crisis happen, as was the case for many international staff during the Nepal earthquake and West Africa Ebola outbreak.

Professional vs. general service staff: Managers may be stressed by their responsibilities during and after a crisis, including the need to adapt their leadership style to the extraordinary circumstances (see Tipsheet No. 5 on Leadership in Crisis for more). Middle managers in particular may feel stretched thin as they try to aid their subordinates while answering to their superiors, often with few peers who can identify with their challenges. However, managers may feel some sense of control and validation from their ability to guide the recovery.

General service personnel may have even more professional responsibilities during the response

to a crisis as they are most familiar with the local culture and available resources, yet they may have less financial resources to assist in coping with personal losses. They also may feel little power or control over their work, and little appreciation for their efforts. As a result, they may need extra support during the recovery period.

Staff vs. consultants/individual contractors: Consultants and individual contractors do not benefit from regular staff entitlements such as sick leave, special leave, medical insurance, pension, and other compensations that the Organization would provide to staff in the case of an emergency. This may make their recovery more difficult, and has the potential to cause resentment against staff members who do receive this support.

Personal Risk Factors: Regardless of their professional role, staff members' individual characteristics and experiences also influence their psychosocial reactions to crises. Resilience may be compromised by:

- Previous history of critical stress or conflict
- Direct exposure to the disaster
- Ongoing exposure to victims, or to gruesome sights and sounds
- Personal exposure to danger from recurring or ongoing events
- Fear of long-term health effects

Depending on the situation, individuals also may be at heightened risk due to their sex, race or ethnicity, nationality, religion, marital status, sexual orientation, or other trait. You may be limited in your ability to address these issues, but you should be aware of them as stressors.

> **What managers can do before crisis:**
> Two important goals you can pursue as a manager pre-disaster are to instill a sense of unity and teamwork among staff members, and to train personnel to cope with stress.
>
> - **Create a culture of teamwork**. Your staff will be able to act most effectively if they function as a team, supporting each other as well as the response mission. Building this sense of unity requires positive interpersonal relationships among all members. Each person must have a chance to contribute, and to learn from and work with others. Members should feel they are acting together toward a common goal.
> - **Training:** One of the most effective ways to build resilience is to provide training in coping with stress so personnel have learned and practiced the necessary skills in advance of needing them. Making time for psychosocial trainings can be difficult among daily operational demands, but it is a worthy investment of resources

that will pay off if a crisis occurs.

Maintaining Resilience During an Emergency: Even the most resilient person can reach a breaking point if pushed too far, so managers should remain attentive to the demands personnel face as they respond to a crisis. The following are goals to strive for, though of course during the most intense stages of rescue and recovery these goals may not be achievable:

What managers can do during an emergency:

- Match the individual's skills and strengths to the tasks assigned in order to maximize competency and confidence.
- Rotate personnel through the most demanding assignments to avoid burnout or excessive stress from exposure to others who are suffering.
- Monitor staff stress levels and encourage breaks if possible.
- Model self-care by taking breaks, eating well, and not overworking yourself.
- Provide opportunities to talk to a peer, spiritual care provider, or mental health professional if an individual wants to talk about their experience, but do not mandate that as it can reawaken distressing memories and impair functioning.

Maintaining Resilience Post-Crisis

While the definition of resilience implies that people with this quality will not experience significant distress after a disturbing event, they still should be monitored over time for any stress reactions that merit attention. In some cases people are able to function well during the heat of a crisis, but once the intense demands recede, posttraumatic stress symptoms begin to emerge. Therefore, be sure not to assume that personnel who demonstrate resilience throughout the response are immune to later psychosocial issues.

Module 5. Personal resilience and well-being

Learning Objectives:

Upon successful completion of the module, participating managers will be aware of positive copying strategies to build/strengthen their own resilience, manage stress, and maintain health

and well-being. They will also know about available personal support services, mechanisms and tools available to them in their entities and inter-agency.

Module Components:

- Factors that put managers at risk
- Coping strategies

Partners: UN EPST/HRM, UN Staff Counsellors Office, UNSSCG

Sources of Content:

- UN Toolkit for United Nations Leadership in Content
- UN Staff Counsellors Office courses on mission preparedness and psychosocial health
- Duty of Care Guidance for Managers in High-Risk Environments by Task Force on Duty of Care, section on security management (Annex 1)
- WFP on-line course on managing stress for all personnel
- Duty of Care section of the UNHCR on-line Management Learning Programme (MLP)
- DFS/DPKO Civilian Pre-Deployment Training
- Internal courses, guidelines and information on available psychosocial and other support services from individual UN entities
- UN Secretariat/DPKO's mandatory pre-deployment Civilian Personnel Training

Sample content (*to be complemented and finalized, as required*):

Factors that put managers at risk

As a manager, you face certain additional demands and responsibilities in responding to crises beyond those that challenge your staff members. The following are common misbeliefs that may increase your risk of Burnout or Compassion Fatigue during a response:

- In crisis, protracted crisis, and emergency there are no petty bureaucratic obstacles.

Yes, there are. Even in the most critical situations there may be forms that need to be filled out, equipment that is not functioning, or phone connections that don't work. In normal circumstances, these frustrations can be bearable but in an emergency, they can be much more frustrating.

What managers can do:

> - Prepare as much as you can to have materials and personnel ready and know that you cannot predict everything and will have to cope with small or perhaps significant bureaucratic problems.
> - Know of any special policies and procedures that govern our entities operations in special situations.

- All tasks are essential.

They are not. If all tasks are viewed as 'essential' you and your staff will work through breaks and days off. If everything is considered essential, then nothing is.

> **What managers can do:**
>
> - Divide work into essential vs non-essential tasks – and then put staff self-care at the top of the essential list. Be sure that you and your staff are taking breaks, getting adequate sleep, and taking scheduled days off.

- You are irreplaceable.

You are not. Yes, in an emergency, you may need to work long hours, but if you are not careful exhaustion and burnout will severely limit your capacity.

> **What managers can do:**
>
> - As part of your planning, you may need to plan for long and even 24-hour shifts. Select alternate persons who can stand in for you and other functions, and train them in the essential tasks they will need to know.

Coping Strategies

When disaster strikes, especially if there is significant property damage or if lives are lost or threatened, it is understandable that managers put their own needs on hold while they attend to the crisis. However, no matter how dire the situation, the most dedicated managers cannot work 24-hour days, seven days a week, without compromising their health, wellbeing, and effectiveness. Self-care has personal benefits but it is also essential for maintaining professional competence. This is sometimes referred to as the self-care imperative. Competence is an ethical matter of protecting not only yourself, but your family members and assisting personnel under your supervision. Self-care is not selfish. It is an integral aspect of maintaining competence.

Self-Care Before Disaster Strikes: Stress management should be a part of your daily activities, not something that is practiced only once in a while, or postponed until you really need it. This means that good self-care strategies include activities that you will do every day, not unrealistic goals you cannot meet. It is nearly impossible to begin using new coping methods during the hubbub of a disaster, so developing good coping habits in advance will help you be more prepared for the challenges you will face in complex emergencies. This will allow you to adapt quickly to challenges and recover from their potentially negative effects.

What managers can do:

Your first step should be to examine your current coping mechanisms and determine which are effective, which are not, and what you might do to increase the helpful ones. The following are some strategies that are often recommended, but it is most important to develop practices that you will actually use.

- Get sufficient sleep
- Take regular breaks
- Exercise
- Eat a balanced diet
- Connect with others
- Have some time alone
- Limit TV and internet exposure
- Pray or follow your other usual spiritual practices
- Take the time off that you are given
- Balance giving and receiving support
- Write about your experience in a journal
- Draw upon your personal self-care plan
- Pay attention to the early warning signs of stress
- Utilize a self-care 'buddy' system
- Balance work, play, and rest

Some of the strategies listed may not be realistic at certain times in an emergency, but could be used later. Other strategies might be used from the start. For example, in the early stages of a disaster, you should not go home after working and watch television covering the event. You need a break!

Many strategies can and must be adapted in order to utilize them in emergency settings. You may not be able to follow your usual exercise regimen, but perhaps you can do a few minutes of stretching or take a short walk.

It can also be helpful to discuss your plan with family, friends, and colleagues so they can support you, and to have a logistical plan for the practical issues that may arise during an event. For example, if you are called on to work long hours after a disaster, who will care for your children or attend to other needs? How will you modify established self-care practices that you enjoy so they can be maintained during periods of increased stress? Having a plan in place in advance will reduce your personal stress when something does happen, allowing you to function better professionally.

Stress Inoculation: It is important to remember that the goal of effectively dealing with extreme stress is not to get rid of it, but rather to manage it. Stress Inoculation can help you to identify potential stressors and coping strategies. This process can serve a protective role when you are exposed to extreme stress. The goal of Stress Inoculation is to allow you to continue to work during the event and, ideally, to avoid occupational hazards like Burnout and Vicarious Traumatization so you remain able to respond during later crises and emergencies.

Identifying potential stressors can allow you to prepare for and have realistic expectations of your own response. Thinking about potential stressors allows for a sort of rehearsal and gives you a chance to predict what may happen and how you could most effectively respond. Stressors can be broken down into four categories, each of which can impact you differently. Consider a specific crisis that might occur while you are on the job. Then consider the following types of stressors you are likely to experience:

- **Environmental stressors** vary depending on the nature of the event and your level of exposure. Witnessing or hearing about extensive death or injuries during or after the event can be extremely difficult to handle, especially for someone who has never dealt with death or severe injuries before.
- **Organizational stressors** will also vary depending on the event; these factors will strain the entire operation. This can be especially true early in the emergency when staff is in short supply and the organizational structure is in formation. These stressors include working long hours, having more work than can be completed, and living in situations that are cramped and uncomfortable. Workers may have to deliver in the absence of normal support systems and outside of normal procedures: Operations may have to be done manually, there may be less staff available, processes must be shortened, etc. A chaotic and ineffective chain of command may add to difficulties especially in the early stages.
- **Personal stressors** depend on individual factors and can greatly impact each person's ability to manage stress. The sights, sounds, and smells of disaster may trigger past stress reactions which can interfere with effective functioning. Cultural differences between the

responder and those impacted by the event can increase the stress level. There may be personal boundary and space violations that can greatly increase stress levels if not anticipated and managed.

- **Political stressors** can also be difficult to manage. Various stakeholders, ranging from different countries to different agencies, can have difficulty working together. Having to negotiate these working relationships can put a strain on all responders, regardless of position within the organizational structure. You may also be working in an area of the country that has a different culture and different traditions from your home area.

Before you respond to a particular event, consider how each of these types of challenges will impact you. By anticipating the stressors and your reactions you can then think about your coping strategies.

Coping strategies can be problem-focused if action is helpful and emotion-focused if nothing much can be done to impact the situation.

- **Problem-focused coping:** When some aspect of the event or response can be changed, a coping strategy that focuses on making those changes is an effective method to employ. During these situations, taking large problems and breaking them down into manageable parts will allow for a sense of control and effectiveness. Problem-solving and brainstorming skills become important in generating multiple alternatives to consider.
- **Emotion-focused coping** is most appropriate when changes are not possible and there are aspects of the event or response that are out of your control (e.g., a staff member is injured and has been hospitalized). Emotion-focused coping strategies like relaxation techniques and emotional regulation (e.g., meditation, prayer or exercise) will allow for stress reduction in the face of unchangeably stressful circumstances. Anger management and distraction skills can also help people tolerate difficult situations.

Self-Care Strategies When the Danger has Passed: Although the mind and body do need to relax after an intensely stressful period, this does not mean that you should stop the self-care practices that have kept mind and body going throughout the response. Now, more than ever, you need the routine of regular self-care practices. Returning to normal work responsibilities, devoid of the intense pressures but also perhaps of the intense purposefulness that characterized working in a crisis, can present unexpected challenges. Some people have reported feeling disoriented, and having difficulty focusing on what is important and adjusting to relationships that have changed at home and at work.

> **What managers can do:**
>
> Your first step should be to examine your current coping mechanisms and determine which are effective, which are not, and what you might do to

increase the helpful ones. The following are some strategies that are often recommended, but it is most important to develop practices that you will actually use.

- If possible, take some time off
- Engage in activities that are both enjoyable and feel restorative
- Use positive coping mechanisms
- Consider when to use problem-solving or emotion-focused coping
- Write about your experiences
  If you find that you are struggling, you do not have to be alone:
- Reach out to friends, family, colleagues, faith-based resources
- Use the Peer Support Network
- Professional help is available through the Staff Counsellor's Office
- Do not underestimate the impact of your experience

Overcoming Barriers to Self-Care: There are many barriers to self-care, and many managers are susceptible to neglecting their own needs while supporting others. In emergency situations, there may be a lack of resources, time, or adequate supervision. The needs of personnel can seem so great that your needs pale by comparison, and if others are suffering, you might feel guilty if you attend to your own needs. It is essential that you accept your own limits and do not see yourself as indispensable to the crisis response or relief operation as that can quickly lead to Burnout.

And remember: Caring for yourself while helping others does not make you selfish or needy. The care that managers provide others can only be as good as the care they provide themselves.

What managers can do:

- Educate staff members about the need to practice self-care as an ethical imperative, and foster an organizational climate that supports effective coping.
- Model good coping practices for your staff, both during normal work periods and throughout crisis response.
- Do what you can to protect your staff from organizational and political stressors, while recognizing that you may be limited in your power to do so.

PROGRAMME DELIVERY OPTIONS

Recognizing that most agencies are under pressure when it comes to staff development funds, and that the programme competes with a range of other leadership development priorities, there are four options that could be considered for the implementation of the training programme for managers:

Option #	Delivery Option	Pros	Cons
1	A face-to-face interagency (or individual agency) workshop	Direct access to educators, experts and resource persons; interaction with peers; space for exercises to practice skills	Time commitment; costs related to travel and logistics of the workshops; cost of resource persons and facilitators; complexity in integrating agency-specific content; need for additional capacity to manage and deliver workshops
2	Self-paced on-line course(s), complemented with reference materials on-line or printed	Easy to roll-out; no staff capacity needed to run the course(s)	Difficulties in ensuring compliance and understanding; limited opportunity for practicing skills; limited or no interaction with peers; cost of producing (and subsequently updating) an on-line course
3	A blended programme with face-to-face and virtual components[2]	In line with best practice and latest research in adult learning. All pros of Option 1 for relevant components; ability to use existing courses	Cost of the face-to-face component(s) and capacity needed for their management and delivery
4	A series of learning sessions run by existing experts (virtual and/or face-to-face)	Cost-effectiveness; ability to easily update and tailor content; ability to immediately use existing mechanisms (e.g. webinars and other learning sessions already run by relevant offices)	Overload of existing teams who will be delivering content without extra resources/capacity

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[2] For virtual components, it will be important to consider that connectivity may be an issue in certain high risk locations.

ANNEX 1. DUTY OF CARE GUIDANCE FOR MANAGERS IN HIGH-RISK ENVIRONMENTS

A. GENERAL ADMINISTRATIVE AND HR CHECKLIST

This section addresses initiatives that can be taken through staff management and support:

1. Review of legal obligations related to Duty of Care in the country.

2. Regular briefings to all staff, including locally recruited staff, to support staff understanding and awareness of the risk they face.

3. Adherence to security training requirements including renewals. Consider making SSAFE training mandatory for all staff, including locally recruited staff and establish a mechanism for full participation of personnel in the duty stations. Ensure 100% compliance with BSITF and ASITF.

4. Prior training before/immediately upon deployment and providing a security briefing or guide for all new staff members in high risk environments

5. Reducing stress exposure in high risk areas through available options, including temporary assignment, R&R, sick leaves and flexible rotations.

6. Debriefing of departing staff for feedback and information.

B. SECURITY CHECKLIST

This section addresses initiatives that can be taken through security management and planning. Regular communication with security professionals is essential to ensure that the elements below are established:

1. Continuous monitoring and revision of risk assessments when the risk profile changes. Also monitoring and improving security management measures in order to reduce assessed residual risks.

2. Being informed and keeping staff informed – relevant, timely and accurate security information is a critical element of informed decision-making and a prerequisite for responsible Duty of Care. Production of regular security analysis and dissemination of security reports and providing feedback on deficiencies and requests for improvements if necessary.

3. Review of programme criticality by the UNCT, to ensure such evaluation balances the programme deliverables and the evolving security risks.

4. Regular review and testing of contingency plans and preparedness for different security scenarios and emergency situations. Also, conducting regular emergency response exercises.

5. Regular review of existing security-related equipment, and other capacities such as protective equipment, as well as testing knowledge of when and how to use it.

6. Adequate provision and timely distribution of equipment, and regular reviewing, testing and updating of existing communication means.

7. Having, and properly implementing, a system for tracking all employees in high risk environments including all those on mission, and a staff emergency response system that will give them assistance where required

8. Cooperation on security issues, coordination and sharing security information with relevant partners (e.g. host member states, operational partners, NGOs as outlined in the SLT framework and others, depending on the situation in the area).

C. MEDICAL AND PSYCHOSOCIAL CHECKLIST

This section addresses initiatives that can be taken through health and well-being management:

1. Medical, welfare and stress counselling requirements factored in at the planning stage of each mission and implemented before, during and after missions. A health risk assessment should be done at the duty station by a suitably qualified practitioner using UN medical assessment tools. This would be best suited as a responsibility of the country team, under the leadership of the Resident coordinators office.

2. Review of available medical facilities and personnel, according to conditions and needs on the ground. All UN managed clinics and dispensaries should meet at least 'Level 1' clinic standards. If not available, strict deadlines for upgrades should be set. There should be ready access to advanced care (i.e. Level 2 and 3) through external suppliers, medical evacuation or UN/TCC facilities.

3. Based on the health risk assessment and proposed mitigating measures, making sure the country health plan is updated. Ask the RC for the duty stations health support plan. This health support plan should provide plans for level 1 care, level 2 care, level 3 care and medical evacuation, and have contingency plans for access to care in the event that preferred providers cease to operate.

4. Considering mandatory medical/first aid training and psychosocial training for all staff to boost resilience and stress awareness. Making sure that staff members are informed about available medical and psychosocial resources, including information on wellbeing such as diet, exercise, rest and mindfulness.

5. Support that includes 24/7 helplines and individual counselling, if necessary. This could include Critical Incident Stress Intervention Cells (CISIC) composed of Peer Helpers and locally based counsellors or remote counselling. Follow-up counselling and support beyond emergency situations, including training on long-term effects and expected course to recovery.

6. Ensuring that regular health and wellbeing checks are being conducted for all staff in the high risk environments, including locally recruited staff.

7. Direct and regular communication with staff, including locally recruited staff, about health and wellbeing (e.g. addressing gender considerations and mental health concerns). If social activities or facilities are not provided, introduce informal, interactive events such as happy hours to aid communication.

8. Where staff members are living in closed quarters with limited after-hours activity options, consider appointing an activity coordinator who is responsible for organising social and sports activities.

9. Monitoring of recreational substance use culture in duty station (e.g. alcohol consumption, recreational drugs) and taking action to address it if necessary.

D. SELF-CARE CHECKLIST

This section addresses initiatives that can be taken through applying self-care measures.

1. Setting up systems and practices of good self-care and ensuring appropriate action is taken if performance or judgment becomes impaired.

2. Taking R&R when possible. Staff members whose leader is taking R&R and other available leave options are more likely to take-up these options themselves.

3. Building for opportunities for exercise, nutrition and sleep into the daily/weekly schedule.

4. Maintaining regular communication with someone you trust who would be able to identify any irregularities in your behaviour and advise you immediately. Early intervention is the best way to ensure the situation gets resolved promptly.

5. Investments in building a back-up system so that your staff and colleagues can manage without you.

6. Switching off work emails while on leave and providing a different means of contact to your OIC.

7. Attending specific training courses for leaders in high risk areas if available or using other available options (e.g. self-education to boost self-awareness, resilience and teamwork).