

Implementing a personal resilience program in a multinational company

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Workplace Mental Health in Australia

Mentally healthy workplaces are important to Australian employees.

- 91% of employees believe mental health is important; only 52% believe their workplace is mentally healthy
- Only 56% believe their most senior leader values mental health

Mentally unhealthy workplaces impact on employee behaviour

- 21% have taken time off work in the last 12 months due to feeling stressed, anxious, depressed or mental unhealthy
- This increases to 46% amongst those who consider their workplace mentally unhealthy

Many employees are not aware of, or are unable to access appropriate resources

- 81% of leaders indicate that their organisation does provide mental health support and resources
- 35% employees don't know this support exists, or how to access it

When mental health is valued by leaders, and appropriate resources are available in the workplace, there are real benefits to business

- In workplaces that employees consider to be mentally healthy, self reported absenteeism as a result of mental health almost halves (13%)

Source: TNS (2014). *Workplace Mental Health in Australia: Beyond Blue*. <https://www.headsup.org.au/docs/default-source/resources/bl1270-report---tns-the-state-of-mental-health-in-australian-workplaces-hr.pdf?sfvrsn=8>

Recommendations to Australian organisations:

- Give mental health in the workplace the same priority as they give physical health and safety at work
- Identify triggers of poor mental health in their workplace, (eg, workload, inflexible work hours), and tailor their actions to address these risks
- Resources designed to protect / support employee mental health should be promoted
- Provide mental health training for staff as an effective way of equipping employees with the skills and knowledge they require to manage their own mental health and to support others in the workplace
- Organisational leaders should demonstrate commitment to good mental health at work; contribute to the reduction of stigma around mental health, which will ultimately result in mentally healthier workplaces.

Source: TNS (2014). *Workplace Mental Health in Australia: Beyond Blue*. <https://www.headsup.org.au/docs/default-source/resources/bl1270-report---tns-the-state-of-mental-health-in-australian-workplaces-hr.pdf?sfvrsn=8>

Example of a personal resilience program

- **Global resources company - organisational feasibility considerations**
 - 62,000 employees
 - Locations in Australia, North and South America, Asia, Caribbean, UK
 - Cultural considerations – HSE and HR reference group with representation for each of the regions
 - Peer facilitators – all levels from worker to executives
 - Pull model within the organisation – departments / business units choose when and how to implement
 - Pairs of volunteer facilitators supported by coaches
 - Simple and straightforward evidence based materials which translate across cultures
 - Local cultural content options via example choices

Deployment model

Coaches trained by a psychologist

- 1.5 days with 10 coaches
- Experience the program as a participant; Reflection activities
- Deeper discussion of content; Practice facilitation and feedback

Coaches run the program for facilitators

- Demonstrate facilitation
- Experience the program as a participant

Coaches run structured coaching sessions with facilitators (pre and post)

- Each coach supporting up to four co-facilitators

Facilitators (in pairs) run the modules with their peers

- 2 x 2 hour modules
- 4 to 6 weeks apart
- 6-12 participants
- Minimum requirement of running 2 x 2 modules

Program content:

Module 1: Resilience in the moment

- Understanding and recognising our own stress response (physical, emotional, cognitive, behavioural)
- Techniques for managing our responses (physical and cognitive)
- Understanding the relationships between thoughts, feelings, and behavioural responses to stressors
- Identifying and challenging own unhelpful thinking patterns

Module 2: Sustaining resilience over time

- Builds on skills from Module 1
- Demands and Resource model
- Examining internal demands, identifying and staying true to your values
- Boosting internal resources by managing energy – physical, emotional, mental, spiritual
- Managing external demands – using resilient thinking for coping with change
- Focus on the things you can influence - Covey's circles of concern and influence

Supporting Materials

Deployment Guide and FAQ

Guidance on elements of deployment that need to be considered by the Region / Asset / Function

Content Coach Guide

Guidance material and resources for Content Coaches to guide Facilitators to lead a discussion on the topic of personal resilience, amongst their peers

Module 1 & 2 Slide Decks

Includes the two modules - Resilience In The Moment and Sustaining Resilience Over Time.



Facilitator Guide & Toolkit

Guidance material and resources for Facilitators to support leading a discussion amongst their peers

Course Workbook and Tool

Reference material for Participants to refer to during and following both of the modules

Keeping it simple – Say and Do


- 2 x 2 hour modules (4-6 weeks apart)
- **Facilitator guide:**
 - Check lists for pre and post module admin
 - Slide deck and speaker notes
 - Timings
 - Preparation Notes
 - Say
 - Do
- **Coaching sessions to ensure:**
 - Sound understanding of concepts and activities
 - Identification and development of appropriate personal stories – stories which demonstrate the learning and which are relatable for peers

Activity
Stress reactions under pressure

Read through the case study (5 minutes)
Workbook page 9 / 10

In pairs discuss: (5 minutes)

1. What happened to affect Mark's / Stella's behaviour?
2. Identify their thoughts – feelings – behaviours?
3. What could they have done differently?



Timing: 10 minutes
Preparation note: Refer to Facilitator Guide notes on page 5.

Say:

- We are now going to have a look at a case study to further demonstrate the response to stress and pressure and the links between thoughts, feelings and behaviour. We will identify the thoughts, feelings and behaviours to better understand how we can take control of our own reactions.

Do:

- Tell the group which of the two case study options you will be working with:
 - Option A – Mark's job interview (workbook page 9) OR
 - Option B – Stella's performance review (workbook page 10).
- Go through the task, outlined on the slide.
 - Individually - read the case study (5 minutes).
 - In pairs - discuss the questions on the slide and write down your answers in the workbook on page 11 (5 minutes).

Say:

- We will take 10 minutes to do this activity before we come back together for discussion as a group.

Do:

- Prepare the whiteboard/flipchart for the group discussion with the three headings: Thoughts – Feelings – Behaviour
- After 10 minutes (or earlier if they finish earlier), bring the group back together for group discussion.

The Trigger

Say:

- What happened to affect Mark's / Stella's behaviour? (the trigger)

Tailoring and Scalability

- Developed a similar program for an Australian medical specialist training college
- Removed the 'coach' requirement; trained facilitators
- Developed relatable case studies and pitched materials a little higher (eg. responses to stress)
- Mix of peer and leader led

- People are people

Strengths and Limitations



- The peer led model permits deployment across a large multinational company and increases relatability
- The organisation had conducted other programs (leadership) with a similar model - administrative structures were in place to support
- Well supported by a wellbeing committee and reference groups for trialling the materials



- Quality control of facilitation is limited to coach and participant feedback
- Facilitators only run the module 1 or 2 times so limited time to perfect the delivery - a problem?
- Research base for resilience skills training indicates that better outcomes are achieved when run by a mental health professional

Some Lessons Learned

- **Facilitators:**
 - People with pre-existing facilitation skills; interest in resilience / mental health
 - Influencers
 - Willing to be vulnerable – program hinges on demonstrating the materials with relatable personal stories
- Cultural differences in story telling / sharing of personal experiences / connecting with the personal reflection activities
- Timing (length) of modules for capacity managed personnel
- Keeping it alive
- The question of measuring success

Thanks

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