

Building Emotional Resistance & Resiliency

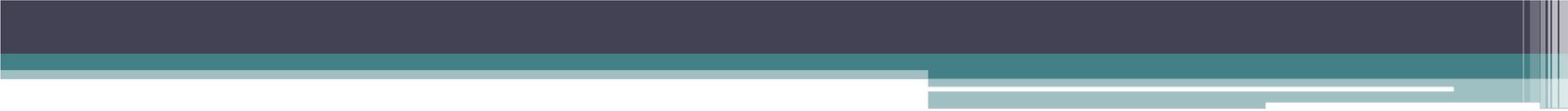
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Statistics on Workplace Stress & Violence

- Recent US Dept of Labor: >50% reported at least 1 incident of workplace violence during preceding 12mths. OSHA~2m workers are victims of workplace violence annually.
- 2011 EU Report: over last 10yrs, increased work-related stress in 9 EU countries except Sweden; 50-60% lost work days related to stress.
- 2011 Australia: 54% increase in mental stress claims, 22% of all serious claims.
- 2008 Taiwan IOSH analysis of worker deaths: 757 committed suicide, av 2 per day making suicide 4th largest cause of death among workers.

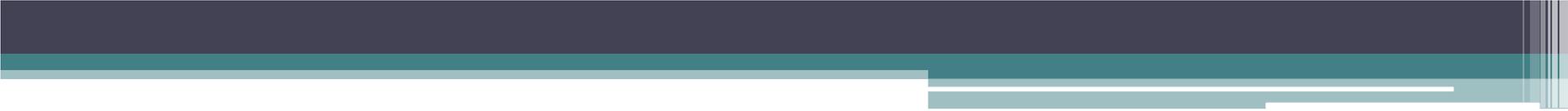
Statistics on Workplace Violence in Singapore

- Survey of 902 participants attending training course from both healthcare & non healthcare industries:
 - ~ 70% experienced workplace violence: aggressive customers or relatives
 - Personal crises: marital conflicts (40%) and personal conflicts with significant others (50%)



Workplace Stress & Violence

- Work environments are becoming increasingly a source of stress, injury and violence.
- Work stress is recognized world-wide as a major challenge to workers' health & the healthiness of their organizations.
- Hence many countries are looking at workplace stress & violence prevention programs to mitigate these health issues.



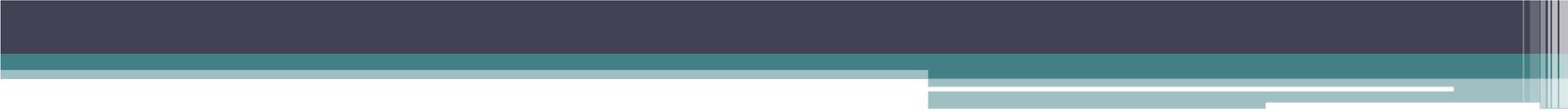
Workplace Stress Management Programs

- Workplace stress prevention programs teaches the individual to deal with stress, rather than addressing the problem at the source; approach may therefore be described as being more *reactive* than *proactive*, since it is designed to cure the symptoms of exposure to stress, rather than to prevent stress from occurring.
- Stress management programmes focus on the individual, may be effective in the short term but do not often have a lasting effect.

Effective Stress Management & Prevention (International Labour Org 2001)

Action at three different levels:

- primary level: identify & address stressors at the level of the company or organization with a view to preventing stress at work
- secondary level: through interventions to help individual employees or groups of employees, coping strategies & higher resistance to stress can be developed through education & training
- tertiary level: assistance provided to stressed employees to help cure the symptoms of stress



Thus in the human stress response, there are three potential intervention epochs:

1. protective resistance to stress or immunity,
2. resilience in the wake of acute psychological or behavioural perturbations and the ability to rebound, and
3. therapeutic recovery and rehabilitation

(Everly, Welzant, Jacobson, 2008; Nucifora et al, 2007).



The Johns Hopkins' RESISTANCE, RESILIENCE, RECOVERY An outcome-driven continuum of care



Create Resistance

- Immunity through
Training & Support
Systems

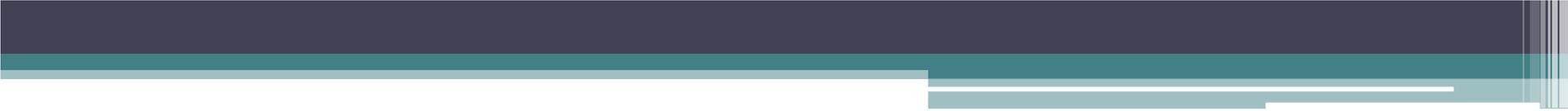
Enhance Resiliency

- Crisis Intervention
- Psychological First
Aid

Speed Recovery

- Treatment
- Rehab

Kaminsky et al (2005) RESISTANCE, RESILIENCY, RECOVERY. In Everly & Parker, Mental Health Aspects of Disaster: Public Health Preparedness and Response. Balto: Johns Hopkins Centre for Public Health Preparedness.



Resistance

- The ability of an individual, group, organization or community to resist distress, impairment or dysfunction following traumatic stress
- Psychological immunization to the effects of traumatic stress

Resistance

- Stress management training / practice
- Physical fitness
- Realistic training
- Perception of credible leadership
- Anticipatory guidance
- Set appropriate expectations
- Identification with a common purpose, goal, or higher ideal
- Group identification
- Family considerations for high risk groups

Resilience

- The ability of an individual, group, organization or community to rapidly and effectively rebound from psychological / behavioural effects of traumatic stress

Resilience Enhancement

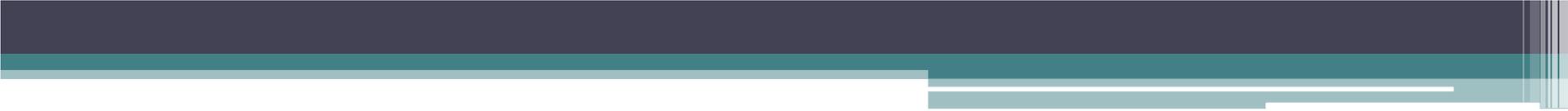
- Needs assessment following trauma/crisis
- Psychological first aid / crisis intervention (individual, group, community levels)
- Psychological triage and referral
- Stress management
- Clear Leadership
- Accurate information about the traumatic event
- Task orientation in initial phases of traumatic event
- Buddy support
- Social support
- Spiritual care as appropriate

Recovery

- The ability of an individual, group, organization or community to recover the ability to function adaptively when impaired by traumatic stress

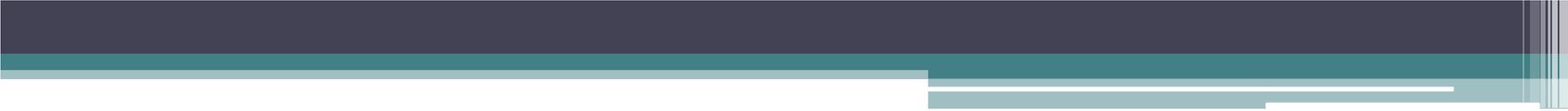
Recovery Interventions

- Individual counseling/treatment
- Group counseling
- Family counseling
- Organizational consultation
- Organizational re-entry programs
- Formal / informal rituals of closure
- Leadership training

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- Crisis intervention approaches, which is *reactive* focus on primary prevention post-crisis through early intervention to avoid maladaptive problem-solving and to restore the person to an adaptive level of pre-crisis, independent functioning
 - No research has been done on the impact of crisis intervention training programs on improving protective factors to stress *prior* to a critical incident i.e. psychological resistance or immunity.

Conceptualizing Resiliency

- Self-efficacy (Bandura): belief in one's ability to organize and execute the course or courses of action required to achieve the necessary and desired goals
- Hardiness (Kobasa et al):
 - belief in oneself and ability to control life events;
 - view stressful life events as a challenge, allowing oneself to overcome the challenge and potentially grow from the resolution of the stressful event
 - see important activities not just as tasks to be performed but as commitments that have meaning in and of themselves.

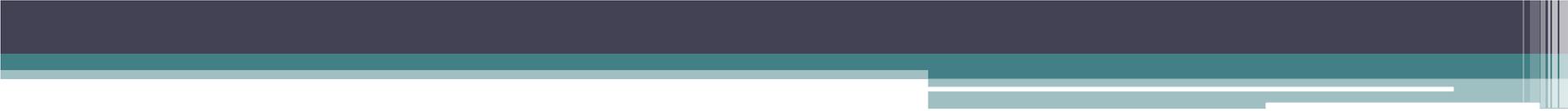


Conceptualizing Resistance & Resiliency

- *Resistance*: self-confidence in their ability to cope efficiently with unexpected events, use of positive cognitions and willingness to seek help during times of adversity
- *Resilience*: ability to cope with situations that may not be within their control, adapt to change and ability to bounce back.

Method

- Participants attending the localized version of ICISF Individual Crisis Intervention & Peer Support courses participated in the pre-course and post course quiz
- To measure resistance and resiliency, a 5-point Likert questionnaire reflecting resistance and resiliency constructs were used and these were repeated in both the pre and post course quizzes.



Results

- Overall resistance and resiliency scores improved at the end of the localized 2-Day Individual Crisis Intervention & Peer Support course.
- Odds of improving one's perception of resistance and resiliency was between 8 to 11 times by attending this course.

Results

- Participants :
 - felt more confident of being able to deal efficiently with unexpected events ($p < 0.001$. OR=10.2 CI 7.3-14.3)
 - would try to look for something good in a negative situation ($p < 0.001$. OR=9.1 CI 6.3-13.2)
 - felt that they would be able to not dwell on things that they could not do anything about ($p < 0.001$. OR=11.4 CI 8.1-16.0).

Results

- Even those who had prior mental health training improved on their resistance and resiliency scores at the end of Day 2 (resistance $p < 0.001$, OR=8.5 CI 4.5-15.8, resiliency $p < 0.001$, OR=11 CI 5.6-16.4)
- Higher improvement in scores for those who did not have any mental health training (resistance $p < 0.001$, OR=11 CI 6.9-17.3, resiliency $p < 0.001$, OR=11.3 CI 7.0-18.0).

Discussion

- Overall scores improved from 50% to 81% for resistance and 46% to 78% for resiliency respectively at the end of the localized 2-Day Individual Crisis Intervention & Peer Support course.
- Odds of improving one's perception of resistance was 10 times and resiliency was 11.2 times by attending this course.
- This course has managed to build up the protective factors or immunity as defined as resistance by Kaminsky (2007).

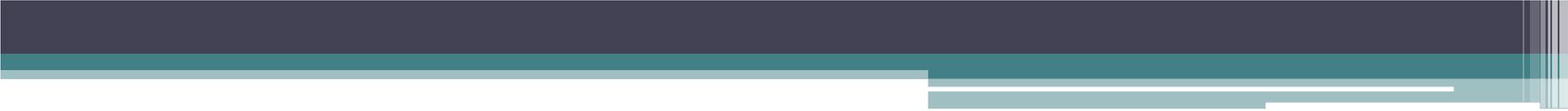


ICISF Individual Crisis Intervention: Singapore Version

- highly experiential format of the course
- personalization of the scenarios for crisis intervention role-plays
- normalization of initial crisis reactions, simple stress management techniques & self-care are taught perception
- knowledge of available local resources for coping

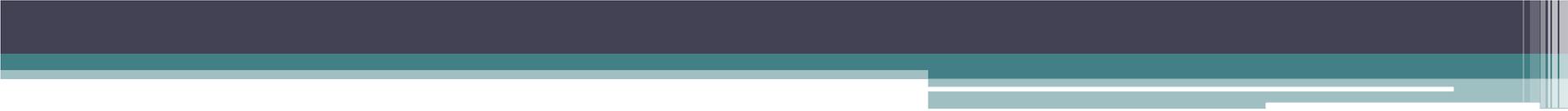
Limitations

- majority of the participants were women (74%); helpful to see if there are possibly gender differences in the outcomes for resistance & resiliency as well
- reliability of the resistance & resistance questions used; need to validate these questions further in a larger sample size or reassess the usefulness of this course in terms of building resistance & resiliency with a more reliable questionnaire in the future



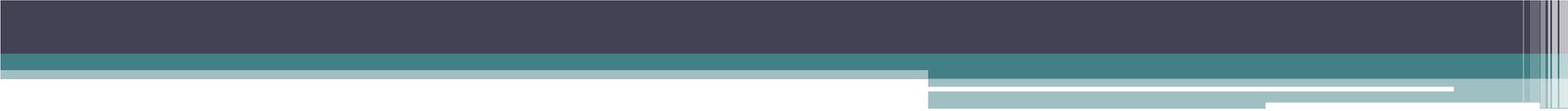
Factors for successful outcomes:

- Small group format: identification with each other's struggles and successes, sharing of personal experiences with workplace & personal crises
- Scenarios for role-plays are tailored to the organization's common workplace crises.



Factors for successful outcomes:

- Format of the course involves many experiential exercises which help them recognize sources of stress & their own assumptions about their worldviews
- Segment on self-care at the end of Day 2 teaches participants to understand the emotional impact of helping others and simple relaxation techniques which help with stress management.



Thank You

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