Report on the Staff Care Working Group

REPORT ON THE STAFF CARE WORKING GROUP



Date: August 2018

General Information

The issue of staff care has continuously been raised in the framework of the Attica Mental Health and Psychosocial Support Working Group since the beginning of its creation in September 2016. Overwhelming workloads, lack of training and experience, chronic lack of material and human resources, precarious working conditions, and dealing with difficult situations are some of the challenges that professionals have had to cope with on a daily basis. We often discussed the impact these challenges have had on the quality of the provided services.

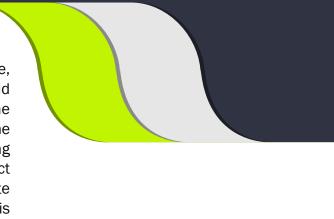
Therefore, a specialised **Staff Care Working Group** was established for humanitarian organisations working in Greece back in November 2016.

This WG was part of the MHPSS sub-WG and had the following goals:

- Raise awareness about the importance and objectives of staff care throughout the different organizations
- o Define key points for staff care strategies
- Be updated on what each organisation is doing
- Share current challenges and provide a space for peer support and peer supervision
- o Share materials (documents, written policies, articles etc.) regarding staff care policies
- Organise specialised staff care full day workshops with national and international experts on an annual basis

The WG was open to new members and its meetings were scheduled on a **monthly basis**. A shared dropbox file was used to gather all the **useful material** that its members agreed to exchange, such as the minutes of the meetings, guidelines and articles focused on staff care etc. Moreover, an updated list with the contact details of all members was shared periodically, facilitating good communication among the members.

Regarding the **venue** in which the meetings took place, the initial idea was that a different organization would be responsible of hosting the meeting each time. The rationale was to give the opportunity to the professionals to gain insights on the different working environments, to establish a more personal contact with each organization, as well as to fairly distribute responsibility among the organizations. Although this plan worked out for the first few meetings, it was finally put aside as it was deemed time consuming and complicated.



Throughout its operation from **November 2016 to June 2018**, **fourteen national and international NGOs** participated in the WG, six of which comprised the permanent members of the WG. It was agreed since the beginning of the WG that it was of high importance that each organization pointed out a **focal person** who would participate in the meetings, ensuring an efficacious operation. However, in reality this proved to be quite ambitious since there were frequent personnel changes.

Workshop on Staff Care

One of the most significant moments of the WG was the organisation of a workshop focused on staff care in the humanitarian sector, which took place on 1st November 2017. The purpose of this workshop was to raise awareness among participants about the importance of staff care, a crucial topic in the challenging working conditions under which humanitarian organizations are operating in Greece. It also gave the participants the opportunity to discuss and exchange views and experiences on the issue of staff care, thus contributing to the development of a common language among organizations. Twenty six professionals from twenty four different organisations participated in the workshop.

During the workshop, the professionals underlined that they face the following **key issues** regarding staff care:

- To support staff, most organizations implement **partial and fragmentary activities** such as: supervision, educational trainings/ workshops (internal and external), stress management etc.; meanwhile, only few are following a specific and comprehensive staff-care policy applied to all implemented projects
- according to the classification of the needs of the participants, it seems that the most imperative needs are
 the existence of specific SOPs and clear roles within the organization and the provision of professional
 supervision not only for staff working in the field, but also for the administrative positions. Logistics,
 ensuring time for adequate communication with colleagues and trainings are also very high in the hierarchy
 of the professionals' needs.

Report on the Staff Care Working Group

By the end of the workshop, a report outlining the issues raised in the workshop was to be shared among all the organizations that participated and with the leaders of the Health WG and CP sub-WG for further dissemination.

Challenges faced by the WG

During the approximately two years of its operation, certain challenges came up that were discussed during the meetings. The **main challenges** are the following:

- The frequent **change of personnel** in many organizations created a feeling of discontinuity in many meetings since certain already discussed issues needed to be repeated.
- The heavy workload of all the professionals participating in the WG, combined with the low priority given to the
 WG often rendered it impossible to carry out some tasks within the agreed timeline or at all.
- A certain confusion was noticed with regards to the goals of the WG; in many cases professionals came to
 the WG with the purpose of essentially getting supervision themselves. These professionals were willing to
 address the issue of staff care in their organizations but they didn't have the power or the responsibility to do
 so.
- The **goals of the WG** were **not easy to define** since the issue of staff care is approached quite differently in each organization. Therefore, there was much discussion on what each organization perceives as staff care, aiming for the eventual creation of a common language among the participating organizations.
- There was an **instability in the organizations involved** manifested both in the significant number of them that phased out as well as the gradual decrease in the number of their personnel.

The above mentioned challenges played a significant role throughout the **continuation** of the WG and the **creation of a common culture** among the organizations involved.

Staff care needs and suggestions discussed in the WG

During the meetings of the WG the following and suggestions were discussed:

- Although many organisations offer fragmentary and partial staff care services, a systemic and integrated approach to staff care is required at all phases of employment -before, during and after completing the mission- and at all levels of the organisation -including all departments. The creation of a staff care mentality in all the organizations operating on the field is of crucial importance.
- The **need for supervision of all professionals**, not only for people with related jobs, became central many times during the WG. Professionals need to be provided with **space and time** so that they can reflect on their job performance, on individual as well as on a team level.

Report on the Staff Care Working Group

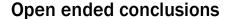
- Continuous specialized trainings and psychoeducation need to be provided to the staff before and during their recruitment.
- The need to enhance the peer support spaces and the working groups among the professionals was often emphasized.
- A common issue among many organizations was the lack of proper working conditions for the staff. A characteristic example that was mentioned in the WG was the lack of toilettes for the staff that was working in an open hosting site in Attica region.
- In many cases concerns about how to better communicate with upper structures (ex: line managers, HQ) were raised as an issue of distress for teams. Therefore, field managers and coordinators need to be trained properly to be more effective in their role. Moreover, all employees need to be informed about the communication procedures their organisation utilizes.
- The need of keeping boundaries and contextualising NGOs' roles with beneficiaries was discussed frequently, so that the IASC principle of "do no harm" can be respected. Many cases were referred during the meetings in which professionals went beyond their duties which resulted in confusion and misunderstanding.

The staff care specialist's role

Two of the issues that were widely addressed in the WG was the **role of the staff care specialist** and the **challenges that it involves**. Five staff care specialists participated actively in the WG throughout the two years of its operation. All of them worked in international NGOs' and had variable, and in many cases not clear, job descriptions. The **confusion** associated with their duties was often attributed to the fact that it is **a newly established** job position, still not well defined.

The following are the **challenges** that were referred by the staff care specialists:

- Usually the job position is placed under the HR department, leading to mistrust and suspicion from the side of the employees. Therefore, it was proposed that staff care specialists should be independent from the HR department.
- Dealing with confidentiality issues when reported that the main sources of stress are coming from
 inappropriate managerial skills is another huge challenge for staff care specialists. In these cases, it
 was agreed that the Staff Care Advisor has the responsibility of keeping the confidentiality of the person
 of concern but at the same time to report the general need for specific trainings (e.g. management
 skills, leadership skills for managers/coordinators in the Organization).
- In many cases staff care is **perceived as frightening** by the employees since they tend to think that something is going wrong with them and that they are not "strong" enough to handle the situations all alone.



After almost two years of operation and at a moment that we all agreed the staff of the NGOs, still operating in the field, were quite exhausted, the participation in the WG gradually decreased. Therefore, the remaining organizations agreed to stop the meetings until new interest for the WG might surface.

However, the following points were discussed throughout its operation relevant to the general idea of staff care in the organizations operating in the Greek context:

- Staff care is usually **limited to the provision of supervision**. However, the staff care component needs to be integrated in its organization as part of its overarching mentality and not as a partial intervention that is usually added and advocated when employees are already experiencing emotional or psychological distress. Many cases were referred in which employees refused to participate in supervision as they perceived it more as an imposed way of discussing crucial organizational issues rather than a medium through which they are actually tackled.
- There is a tendency in organizations and individuals to **neglect and minimise the importance of staff care**, especially during emergencies. A characteristic illustration of this is the fact that the first expenses that were cut down were the ones for the supervision or the staff care specialist position.
- In some organizations the Staff Care Specialist is perceived as the person who is supposed to 'fix' all the organizational issues and deal with the staff's complaints. However, his/her role is to provide the tools to groups or individuals in order to get the support they need and not to 'solve' every problem on behalf of everybody. The idealization of this job position usually brings the opposite results and leads to mistrust and quick disappointment among the staff and towards the upper management of the organization as well.

Taking into consideration the international bibliography as well as the experience in the field in the Greek context, all the actors who participated in the WG agreed that there is a need to focus on the creation of a staff care mentality in the humanitarian organizations. Its intervention should be effective from the very start to its end and at all levels. Otherwise, organizations risk providing low quality services to the Persons of Concern or in certain cases even doing harm to them.

Author: Maria Ntetsika, Attica MHPSS Working Group