Stress Mitigation: Management and leadership roles in promoting organizational resilience

Siddharth Ashvin Shah
Good Stress and Bad Stress

Eustress

Concentrates your attention
Improves your physical strength
Enables you to hear better
Makes you more social

Distress
Traumatic Stress

Responses to acute or protracted events that disrupt normal emotional, psychological, or behavioral functioning.
Self Care
Social Support
Professional Care

Stress Awareness

Stress Responsiveness
How do we “do” Resiliency?

- Awareness
- Regulation
- Leadership
Traits, Tools....and Competencies

By Raj Tatavarthy -CC0

By microgen
Shared Responsibility

Individual

Team

Organization
Individual Resiliency in Action

- **Situational Awareness**: Ability to notice the right data and understand the significance of that data.
- **Self-Regulation**: Ability to keep stress reactions within a healthy range.
- **Self-Leadership**: Ability to take bold steps in demanding situations in ways that support resiliency.
Organizational Resiliency Breakdowns

- Lack of definitive actions to remedy cycles of distress
- Lack of clarity on what frontline staff and managers are dealing with
- Manipulating staff to perform when faced with stressful situations
- Poor Messaging
- Ad Hoc
- Avoidance
# Case Study
## Table Top Exercise

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<th>Awareness</th>
<th>Regulation</th>
<th>Leadership</th>
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Case 1

You are an administrator in a school district that is rolling out an enhanced active shooter protocol. Staff simulations are now more realistic and drills are more kinetic. A well–liked teacher comes to you saying, “I’ve heard about the training we are about to do. When I was a child, someone with a gun broke in and we had to hide. I’d be lying if I didn’t say this protocol is freaking me out.”
Case 2

You are the director of mental health services at a not-for-profit that provides residential facilities for kids with intellectual and developmental disabilities. About 11 months ago, a family member brought firearms to a facility and opened fire. This mass casualty event resulted in two staff killed, a security guard critically wounded, 3 adolescents injured with gunshot wounds, and dozens injured in the panic. Staff appear to be getting uneasy as the one year mark of the event approaches.
Case 3

You oversee a sizable workforce of emergency response personnel and support staff. Some were present and on duty in Manhattan during the 9/11 attacks, and some were young children then. After a recent credible terrorist threat subsided, your FBI and Homeland Security counterparts provided respectful but concerned feedback that numerous members of your staff seemed “out of it” or agitated during operations.
**READY**
- Good to go
- Adapting/flexible
- Excelling at job

*I am at the top of my game and adapting well to all pressures.*

**REACTING**
- Mild distress
- Temporary symptoms
- Still getting the job done

*Stress is affecting me but I can still get the job done.*

**INJURED**
- Noticeable symptoms
- Personality change
- Erratic functioning

*I have changed to the point that I am not in total control of my behavior or reactions.*

**ILL**
- Severe impairment
- Extremely overwhelmed
- Possible danger to self/others

*This worsening condition requires full attention before getting back to work.*

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**Self Interventions**

**Social Support**

**Professional Care**

**Rest Strongly Recommended**

Adapted with permission from U.S. Navy’s COSC Doctrine

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Shared Responsibility

Individual

Team
Practice Case

Abe works in a tightly knit workgroup. Two weeks earlier, one of his co-workers, Carlos, was assaulted by someone bigger and out of control. Abe saw how in 12 seconds Carlos was throttled, bear-hugged and started to be choked. It took four others to pull off the assailant and hand him over to security. Carlos was taken to the occ med unit and later got checked out at the nearby medical center.

Six months later, Abe has nearly daily flashbacks about the assault, particularly the look on Carlos’ face. He hates that he didn’t act swiftly to help Carlos. Abe has bouts of hyperventilation that are uncomfortable. His friends can tell he is doing everything he can to hold things together. Ever since the incident, Abe drinks more than double his usual amount.

• If you were in this person’s shoes, what zone (green, yellow, orange, red) would you be in?
• What intervention(s) could be appropriate?
Practice Case

Abe qualifies is INJURED - Orange

- Six months ago, Abe had a freeze reaction – not his fault

- Abe has Extensive Traumatic Stress Reactions
  - Direct exposure to someone in life--threatening situation
  - Psychosomatic manifestations of Hyper--arousal
  - Re--experiencing, flashbacks

- Professional care is indicated. he might be using alcohol maladaptively.
Practice Case

Within a city’s department for emergency response, a recent investigation in sexual misconduct has disrupted operations in two teams. Patrice, the manager of one team, has had many of her staff come vent their feelings of confusion over the HR investigation.

For the last 3 weeks, Patrice has been staying back an extra hour every day to get her documentation done because she cannot do them regularly during the day. She is angry at some of her superiors for insensitive remarks, and she vents in the evenings with her spouse and friends. Her neck and shoulders have been acting up in pain, as is usual for her when she’s burdened emotionally.

• If you were in this person’s shoes, what zone (green, yellow, orange, red) would you would be in?
• What intervention(s) could be appropriate?
Practice Case

Patrice qualifies as READY to REACTING – Green to Yellow

- Anger at others, while stressful, is not automatically a problematic stress reaction.

- Patrice is working optimally, promoting team cohesion to the extent that she can.

- Self interventions and social support are indicated. Speaking to EAP or a private practice psychotherapist would elevate the support she gets.
Taking Responsibility for Stress Mitigation
Protective Organizational Culture

Explicit policies and practices to establish and promote a **Stress Aware** and **Stress Responsive** culture throughout all levels of the organization.
Commitment to Training & Education

Ongoing programs for all staff on understanding their work-related stress risks, recognizing the signs of stress in self and others, and developing healthy coping mechanisms.
Ubiquitous Responsibility & Engagement

Holding the organization responsible for upholding policies and procedures that reduce stress as well as ensuring staff members understand and adopt them. Management and employees are evaluated for stress management skills and capabilities.
Proactive Leadership and Management Participation

Training and development of skills in effective leadership and handling traumatic incidents as well as mentoring and peer support.
Ongoing Monitoring & Assessments

Multi-tiered monitoring of stress at the individual and team levels. Regular assessments of organizational wellbeing as well as integration with policies and processes. Supervisor accountability for stress-responsive management practices.
# Case Study

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Forum for Discussion
Thank You