

Resilience and mental well-being



Resilience is the ability to effectively manage situations, even the unexpected, as we go about our daily lives. Unexpected events can vary from not very disruptive (like a minor change in plans) to complex problems requiring assistance (like a disaster, injury or death).

We know that how we manage a situation will affect the outcome. Managing a situation depends on the knowledge, skills, education, experiences and capacity we have when the decision is made.

We gain resilience as we gain experience when we learn what to repeat, what to avoid and how to successfully navigate tough situations.

This is great news! It means that we can improve psychological health and safety through education and training that improves resilience.

Responding to stress

[Stress](#) is the reason we need resilience.

Let's imagine that stress is like water and that our resilience (the amount of stress we can manage) is a bucket.

We can empty our buckets with healthy (work) practices and good stress management.

If stress/water fills up the bucket before it can be emptied, adding more will cause it to overflow. If the bucket overflows, we become overwhelmed. We need more time than usual. If the bucket is in bad shape because of overuse, it could break under the constant pressure. If the bucket breaks, we likely need health care at that point.

Resilience in work

Assessing the resilience of people is difficult. Every person has different levels of resilience because it is dependent on their knowledge, skills and lived experiences. There is no definitive measure for it; people are resilient until they are not.

Research tells us that workers are more resilient when:

- They are competent.
- They feel confident in their decision-making and skills.
- They feel like they contribute to a greater good.

- They perform work that aligns with their core values.
- They feel connected to their work.
- They can decide how to perform their tasks.
- They have the skills to adapt to change.

These are protective psychosocial work factors.

[Research tells us](#) that barriers to resilience are:

- Not having work-life balance
- Experiencing too many stressful events
- Not having the time and space to process our reactions to stressful events
- Being in situations that are humiliating
- Being isolated, without supports

These are psychosocial hazards.

Goal: The goal of psychologically safe workplaces is to provide workers with resilience-promoting work that avoids these barriers.

Intersectionality

Members of equity-deserving groups may have additional stressors to deal with, like violence or discrimination based on race, culture, origin, ability, gender identity or expression, or sexual orientation. Intergenerational trauma, like from colonization or racism, can cause mistrust of the health care or security systems we typically count on for help. Any action proposed must be respectful and inclusive.

Finding solutions

Workers are more resilient at work when their work is psychologically safe. Safety programs can promote psychological safety in work by:

- Reducing the number of stressors that a worker must deal with (prevention)
- Providing strategies to cope with the impacts after something stressful happens (disease mitigation)

The first approach is the prevention approach. This is done before anything happens. By reducing the number of stressful events, you reduce the amount of time the worker must spend addressing the impacts of stress. This approach means identifying, assessing and controlling the psychosocial hazards in work before workers are exposed. These approaches will reduce the amount of stress a worker will need to manage.

The second approach is a disease mitigation approach. This means that a worker is exposed to stress first. The worker feels the stress and its impacts and must address

those impacts. This approach tries to limit the impact of stress so that the worker doesn't become overwhelmed or develop a stress-related injury or illness.

Both approaches are needed. Despite all prevention efforts, workers will face stressful events.

In high-stress work, if most of the control measures are focused on harm reduction after an incident, then the program requires people to be injured first. At that point, how and when a worker will recover will depend on factors like the severity of the injury, the lived experience and health status of the worker and the appropriateness of the measures for that worker.

Goal: Ensure that there are both prevention and mitigation measures in place. Examine the number of leaves and staff turnover to see if there's a problem.

Advocating for solutions

Employers generally want to do the right thing. They also want to spend the least amount of dollars to solve a problem. That's why we need to show that targeting psychosocial hazards is the most effective way to address mental health concerns in work. Including workers has the added benefit of increasing their resilience.

The problems generally start when employers implement solutions for workers instead of with workers.

Many employers will offer programs to teach workers how to cope with stress. These types of programs promote exercise by organizing sports activities, providing gym memberships or teaching mindfulness or relaxation. These are all excellent practices. They are effective after an incident has occurred.

The problem is that they require a great deal of personal time and resources. This isn't fair – that's not always available to everyone.

There should always be two goals to any safety program:

- Identify situations where there are work-related problems and develop effective strategies to deal with them.
- Develop effective strategies to deal with the problems when things don't go according to plan.

If solutions aren't on work time, they aren't work-related. Employers can't expect workers to pay in time, suffering and money to deal with the impacts of work that's not organized safely.

Workers deserve time at work to deal with the problems of work. What can be organized can be reorganized.

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