NATIONAL GUIDELINES ON WORKPLACE MENTAL WELLNESS

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ABBREVIATIONS

CDC	Centres for Disease Control and Prevention
HR	Human Resource
GDP	Gross Domestic Product
MOH	Ministry of Health
M/E	Monitoring and Evaluation
WHO	World Health Organization
WMWP	Workplace Mental Wellness Program
SOP	Standard Operating Procedure
SUD	Substance Use Disorder
ILO	International Labor Organization
IDADA	International Day Against Drug Abuse (IDADA) and Illicit Trafficking
PHQ-9	Patient Health Questionnaire
PTSD	Posttraumatic Stress Disorder
GAD	Generalized Anxiety Disorder
LEC	Life Events Checklist
DAST	Drug Abuse Screening Test
K10	Kessler Psychological Distress Scale

FOREWORD

Workplace mental wellness has been a priority issue in the last few years, particularly with the emergence of the COVID-19 pandemic, which led to significant disruptions in traditional work models. The shift to remote work has adversely impacted lifestyle changes, including reduced physical activity, unhealthy diets and sleep disturbances. Additionally, there was a loss in interpersonal interactions with co-workers and customers. These changes significantly impacted the well-being and mental wellness of employees across the globe. Evidence shows the direct influence of employee mental health status on job performance, morale and capacity to work. Moreover, there is a direct economic impact of employee mental health problems on employers and businesses through increased absenteeism, a negative impact on productivity and profits as well as an increase in mitigation costs.

Globally, it is estimated that 15% of the working population has at least one mental health condition. In Kenya, this implies an estimated 3.7 million of the 24.9 million workforce might be living with a mental health condition.

The Public service in Kenya is not exempt from experiencing mental health problems. The psychological counselling and wellness unit at the State Department of Public Service found mental health challenges among public servants greatly affect their performance and productivity. Furthermore, in 2021, mental health conditions cost the Kenya economy KES 62.2 billion (US$571.8 million), an equivalent loss of 0.6% of the GDP in 2020. Majority of these costs was attributed to absenteeism (49%) and presenteeism (30%). While total healthcare expenditure represented only 9% of all mental health-related costs. This evidence clearly highlights the multidimensional impact of a mentally unhealthy workforce on the economy.

It is against this background that The Ministry of Health set out to develop National Guidelines on Workplace Mental Wellness to ensure advances toward improving employees' mental health.

This aligns with the Government's commitment to building a highly skilled, agile and responsive public service workforce that can meet the population's unique needs. Additionally, these guidelines are key in implementation of the Kenya Mental Health Policy (2015-2030), Kenya Mental Health Action Plan (2021-2025), Kenya Universal Health Coverage Policy (2020-2030) and the Government's Bottom-Up Economic Transformation Agenda (BETA).

These guidelines will help organisations assess their mental health risks, and lower healthcare costs. It will also guide organisations and programs to successfully promote mental wellness, prevent mental health conditions and support those affected by mental health conditions.

Therefore, I call upon all organisations, in the formal or informal sector, to invest in strategies and approaches to safeguard the mental wellness of their employees.

Nakhumicha S. Wafula | Cabinet Secretary, Ministry of Health

ACKNOWLEDGEMENTS

The Guidelines on Workplace Mental Wellness were developed through a consultative process involving diverse public and private sector stakeholders whose input was critical to finalizing these guidelines.

Foremost, we acknowledge the leadership of the Cabinet Secretary for Health, whose support ensured the efficient development of these guidelines. We extend our appreciation to the technical team at the Division of Mental Health headed by the Director of Mental Health under the leadership of the Director General for Health and support from all Heads of Directorates in the Ministry of Health.

We want to thank the Council of Governors, whose support enabled counties' participation in developing and validating these guidelines. Additionally, we appreciate the inputs from other Ministries, State Departments and Agencies ushering the multidimensional approach necessary in successful workplace mental wellness programs.

Special mention to the United States Centers for Disease Control and Prevention (CDC) for technical and financial support towards these guidelines.

We recognize and appreciate the private sector, Non-Governmental Organizations, Mental Health Professional Associations, and all others whose efforts, contributions and support made these guidelines a reality.

We take this opportunity to urge all organizations to work towards implementing these guidelines for a mentally healthy Kenyan workforce. Your commitment and investment in this regard are paramount to national prosperity.

Harry Kimtai, CBS | Principal Secretary, State Department of Medical Services

EXECUTIVE SUMMARY

An average adult spends a significant amount of their lifetime at the workplace. Workplaces with a good supportive environment can be a source of satisfaction and growth, as well as a place that fosters mental wellness. On the other hand, a work environment that is highly stressful with minimal support systems can contribute to the onset of new mental health condition as well as result in relapses of existing mental health condition.

These Workplace Mental Wellness Guidelines were developed to provide all organizations in Kenya a guideline for promoting mental wellness, preventing mental health conditions and providing mechanisms for screening, linkage, care, and recovery for those already affected.

In these guidelines, the Ministry of Health recommends three strategic interventions at workplaces in the country: promotion, prevention, care and support. There is a role for all members of the organization in the success of workplace mental wellness programs. At the individual level, employees are required to prioritise mental wellness through self-care, developing coping skills, having a social support system and seeking mental health care when needed. The managers and supervisors have the role of supporting the employees by creating a supportive working environment that recognizes abilities and matches tasks with abilities, identifying those who are at risk as indicated by challenges with productivity and linking them with the necessary support, allowing employees time to seek help and organizing work schedules that allow rest and rejuvenation. The organization's leadership has the duty to provide a conducive work environment, approve the setting up of wellness programs and provide all resources that support mental wellness programs.

In addition, the guidelines describe the process that would support setting up a successful mental wellness program. The steps described here are:

Step 1: Obtain leadership support and commitment

Step 2: Appoint a workplace mental wellness committee

Step 3; Develop a workplace mental wellness policy

Step 4. Develop a costed work plan and mobilize resources

Step 5. Operationalize the workplace mental wellness program

Step 6. Undertake continuous monitoring, evaluation and improvement

The Ministry of Health recommends that all organizations embrace these guidelines to safeguard employees' mental wellness. In implementing these guidelines, organizations should consider their unique setting, organizational structures and resources working with other entities to complement their interventions. A clear monitoring and evaluation process is needed to support these programs to enable continuous improvement. In addition, there is a need to identify mental health champions and wellness officers who will act as the driving force for sustainability.

Dr. Patrick Amoth, EBS | Ag. Director General for Health

INTRODUCTION

1.1 Background

Mental health is more than the absence of mental health conditions, instead it is a state of well-being in which an individual realizes his or her own abilities, can cope with everyday normal stresses of life, can work productively and fruitfully, and is able to contribute to his or her community (1).

In 2022, about 55.8% of the global population was working (2). Existing evidence indicates that an estimated 15% of this working population is living with at least one mental health condition (3). In Kenya, about 24.9 million people are working, translating to approximately 3.7 million Kenyans living with mental health conditions (4). The most common mental health conditions in Kenya are anxiety, depression, substance use disorder, schizophrenia, and bipolar mood disorder (5).

There is a complex interplay between mental health and work. Work is a social determinant of mental health. Meaningful work is protective of mental health, contributing to a sense of accomplishment, financial independence, confidence, recovery, and inclusion of persons living with mental health conditions. However, a harmful or negative work environment can significantly contribute to physical and mental health problems, harmful use of alcohol and substances and exacerbate existing mental health conditions (6). People already at risk due to genetic factors and other vulnerabilities can either get protection or have their risk increasing, hence the need to consider and prioritize mental health at the workplace.

Evidence from different countries shows that mental health problems cause people to drop out of work. In the Netherlands, around 58% of the work-related disabilities are related to mental health (7). In the UK, around 30–40% of the sickness absence is attributable to some form of mental health condition (7).

In Kenya, public servants were found to have mental health challenges which impact their performance and productivity (8). Additionally, the taskforce on mental health found Kenyans have high levels of stress at the workplace, with those living with mental health conditions facing stigma and discrimination at the workplace (5).

Mental health at the workplace is not only a health issue but also an economic issue. Common mental health conditions are estimated to cost the global economy US$ 1 trillion each year, with the cost largely being driven by lost productivity (9). In Kenya, mental health conditions cost the economy KES 62.2 billion (US$571.8 million), an equivalent loss of 0.6% of the GDP

in 2020. Total healthcare expenditure represented only 9% of all mental health-related costs, while lost productivity due to absenteeism represented 49%, presenteeism represented 30%, and premature mortality represented 12% of all mental health-related costs (10). This evidence demonstrates the multidimensional impact of a mentally unhealthy workforce on the economy.

The average person spends a significant proportion of their time working; in fact, one spends about 90,000 hours at work over a lifetime (11). Work can have a huge impact on one's quality of life. As enshrined in Article 23 of the United Nations Declaration of Human Rights everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment (12). Therefore, workplaces present an opportunity to promote mental wellness, prevent mental health conditions and support people affected by mental health conditions.

It is against this backdrop that the Kenya Mental Health Action Plan (13) and the Taskforce on Mental Health report recommend the establishment of Workplace Mental Wellness Programmes in the public and private sector to increase productivity and reduce stressors that lead to poor mental health.

1.2 Factors that affect mental health in the workplace

Mental health problems cause changes in emotions, thoughts, or behavior that lead to significant distress or impairment of personal functioning, which affect a person's performance, morale and capacity to work. They also impact employers and businesses through increased absenteeism, negative impact on productivity and profits, as well as an increase in costs to mitigate this.

At the Workplace, there are a number of risks for poor mental health. Most of these risks relate to interactions between:

- *The type of work*
- *The organizational and managerial environment*
- *The skills and competencies of employees*
- *and the support available for employees to carry out their work*

Additionally, we need to consider emerging risks with the changes in overtime work including teleworking, flexible working and automation (14).

Table 1: Risk for Mental Health at the Workplace (6)

Category	Examples of risks
Work content	Lack of variety or short work cycles, fragmented or meaningless work, under-use of skills or being under-skilled for work; high uncertainty
Workload and work pace	Work overload or under-load, machine pacing, high levels of time pressure, continual subjection to deadlines
Work schedule	Shift-working, inflexible work schedules, unpredictable hours, long or unsociable hours
Control	Low participation in decision-making, lack of control over workload, pacing, limited support from colleagues or authoritarian supervision, violence, harassment or bullying
Environment and equipment	Inadequate equipment availability, suitability, or maintenance; poor environmental conditions, hardship and high-risk areas such as lack of space, poor lighting, excessive noise, unsafe or poor physical working conditions
Role in organization	Role ambiguity, role conflict, and responsibility for other people; the organizational culture that enables negative behaviors or; Long, unsocial, or inflexible hours; lack of control over job design or workload; unsafe or poor physical working conditions
Career development	Career stagnation and uncertainty, under-promotion or over-promotion, poor pay, job insecurity, low social value of work, discrimination and exclusion, poor investment in career development
Homework interface	Conflicting demands of work and home, including for persons with caregiving responsibilities, low support at home, dual career problems , living at the same site where the work is done, living away from family during work assignments, and conflicting home/work demands

1.3 Guideline Objectives

The objective of these guidelines is to provide recommendations for interventions to safeguard the mental well-being of employees, managers/supervisors and organisations by:

- *Promoting mental wellness at work*
- *Preventing work-related mental health conditions*
- *Supporting workers with mental health conditions to access quality care*

1.4. Methodology

These guidelines on workplace mental wellness were developed through a consultative process by a team of mental health professionals and various stakeholders. These guidelines were developed through a consultative multisectoral process that included drafting workshops, stakeholder engagement and internal and external validation.

1.5 Scope of the Guidelines

These guidelines apply to all employers and employees in Kenya's formal and informal sectors. The implementation of these guidelines may be adapted to fit the specific needs of various work settings and employee categories.

1.6 Guiding Principles

The implementation of these guidelines should be in line with the following principles:

1. ***Supportive Leadership:*** *Management support for employees' health, safety and mental well-being is critical for creating a healthy working environment. Investment and allocation of adequate resources should be made to embody this value, which helps employees feel secure and valued.*

2. ***Supportive culture and value:*** *A healthy and productive work environment requires a supportive and inclusive culture that values employees and is trust-based.*

3. ***Evidence-based:*** *Interventions should be based on scientific evidence and best practices, taking into consideration the cultural context and should be routinely evaluated and assessed for effectiveness.*

4. ***Rights-based Approach:*** *The rights of workers, including mental wellness should be respected as enshrined in various relevant national and international laws, policies, and conventions.*

5. ***Active involvement:*** *Participation by employees in relevant phases of program planning and implementation is critical for ownership and success. Hence a team approach should be embraced with the inclusion of representatives from employees, management, health and safety, and human resources in the processes.*

6. ***Linkage to the organization's goals:*** *Mental wellness should be integrated into the organization's business planning process so that all decisions take employee well-being into account.*

7. ***Communication****: Communication is a key factor to organizational success and should be multi-channelled to include regular reminders of available resources and corporate commitments to employee health, safety and overall mental well-being.*

STRATEGIC APPROACHES TO A HEALTHY WORK ENVIRONMENT

2.1 Introduction

The World Health Organization's (WHO) Workplace Model provides the framework for Health at Work for All. WHO defines a healthy workplace as one in which workers and managers collaborate to use a continual improvement process to protect and promote all workers' health, safety, and well-being.

Working in a negative environment can be mentally and physically draining. It is of utmost importance that the leadership and workers unite to create and maintain a good work culture and environment where workers will thrive, feel happy and be motivated to do well. Leaders, managers, and supervisors must ensure the availability of evidence-based strategic measures that ensure employees work in a healthy environment that supports their mental well-being.

2.2. Strategic Approaches

The evidence-based strategies to maintain a healthy working environment and create an integrated approach to mental health and well-being at the workplace should focus on the following approaches:

- *Promotion of mental wellness*
- *Prevention of mental health conditions*
- *Support and Care for those affected by mental health conditions*

These strategies tend to overlap and complement one another, as depicted in Figure 1 below, and are best implemented simultaneously. The interventions to achieve these strategies should be undertaken in a participatory approach by the individual employees, managers/ supervisors and the organization leadership.

Figure 1 Strategic approaches to a healthy work environment

2.2.1 Promotion of mental wellness

This approach aims to enable workers to improve their mental health and overall well-being.

Table 2: Interventions for Promotion of Mental Wellness

Level of Intervention	Interventions
Individual	• *Practice selfcare by adopting a healthy lifestyle through regular exercise, eating healthy, getting adequate sleep, and avoiding addictive behaviours and substances* • *Take a break to relax and engage in hobbies* • *Set boundaries between work and social life to maintain a work-life balance* • *Set realistic goals* • *Engage with the community meaningfully* • *Champion mental wellness at work and the community* • *Take the time to reflect on positive experiences and express happiness and gratitude*

Managers/ Supervisors	• *Give employees opportunities to participate in decisions about issues that affect job design and their health.*
	• *Offer opportunities that promote work-life balance, such as flexible schedules and working-from-home.*
	• *Provide resources and information on mental health services available in the organization and the community*
	• *Employee engagement through activities that promote social connections, team building and stress reduction*
Organization	• *Developing workplace guidelines for health and safety*
	• *Use data to track progress and measure the effects.*
	• *Provide conducive and supportive physical working environment*
	• *Provide employees, supervisors and managers with mental health training, and education*
	• *Offer incentives to reinforce healthy behaviours*
	• *Create and maintain dedicated, quiet spaces for relaxation activities*
	• *Provide resources needed to support all these activities*

2.2.2 Prevention of mental health conditions

This approach aims to reduce the occurrence or worsening of mental health problems and associated risk factors.

Table 3: Interventions for Prevention of Mental Health Problems

Level of Intervention	Interventions
Individual	• *Develop/ Build coping strategies for difficulty circumstances e.g. problem-solving skills, conflict resolution, anger management* • *Establish a social support system* • *Acknowledge when ones feel stretched and seek help* • *Adopt stress management techniques such as meditation, yoga, mindfulness* • *Participate in employer-sponsored wellness programs* • *Build and nurture real-life, face-to-face social connections* • *Ask for help from others*
Managers/ Supervisors	• *Enhance effective communication* • *Identify those at risk of mental health conditions and link them to support and care* • *Define clear and achievable goals and expectations for both teams and individuals* • *Conduct regular audit of job descriptions and ensure workload is well distributed* • *Make realistic and flexible internal deadlines for projects where possible* • *Regular one on one check-ins with employees to review their wellbeing, workload, and challenges* • *Provide constructive feedback on performance with recognition of employees efforts and achievements* • *Offer opportunities for managing emotional crisis after an incident such as Psychological first Aid, Debriefing and Critical incident management*

Organization	• *Provide resources for training staff on coping skills*
	• *Hire adequate staff to minimize burn out*
	• *Approve flexible working hours*
	• *Facilitate screening for mental health risk factors of employees.*
	• *Facilitate assessment of work environment risk factors for mental health problems and provide solutions*
	• *Provide free or subsidized lifestyle coaching, counselling, or self-management programs*
	• *Provide stress management interventions*
	• *Avail information materials, such as brochures, fliers, and videos, to all employees about the signs and symptoms of poor mental health and opportunities for treatment*

2.2.3 Support and care for those affected by mental health conditions

This approach aims to support affected workers to receive treatment or management for recovery from mental health problems and integration back to work.

Table 4: Interventions for Support and Care for those affected by mental health conditions

Level of Intervention	Interventions
Individual	• *Utilize employee assistance programs*
	• *Share personal experiences with others to help reduce stigma, when appropriate*
	• *Be open-minded about the experiences and feelings of colleagues*
	• *Seek help when in need*
	• *Communicate with managers and supervisors when needed to be off duty to attend appointments*
	• *Respond with empathy, offer peer support, and encourage others to seek help*
	• *Not participating in stigmatizing activities*

Managers/ Supervisors	• *Provide time off for employees to attend therapy and medical appointment*
	• *Support employees on their return and integrate to work after treatment*
	• *Support employees to have reasonable work accommodation*
	• *Promote inclusion for those with psychosocial disabilities and eliminate any form of stigmatizing and discriminatory practices*
	• *Facilitate support groups that allow employees to gather and discuss mental health*
	• *Listen and show empathy to employees*
	• *Identify and support mental health champions at the workplace*
Organization	• *Establish an employee mental wellness program.*
	• *Provide an all-inclusive, non-discriminative working environment*
	• *Offer health insurance for mental health services.*
	• *Ensure that mental healthcare is accessible at the workplace or through referral*
	• *Facilitate clinical screenings for mental health problems from qualified professionals*
	• *Provide mental wellness spaces at the workplace.*
	• *Provide payment and compensation for sick leave due to mental health problems*
	• *Support employment of people with mental health conditions by enforcing existing disability mainstreaming laws/policies*

SETTING UP WORKPLACE MENTAL WELLNESS PROGRAMS

3.0 Introduction

A mentally healthy workforce enhances organizational performance, leading to the employer's and employees' satisfaction. The Workplace Mental Wellness Programs (WMWPs) aims to provide a structured platform to promote mental wellness, prevent mental health conditions, conduct screening, provide linkage to care and offer support to those affected.

WMWPs assist employees to identify and address psychological, environmental, and social issues that affect their mental wellness. This will be achieved by availing comprehensive services that include mental health literacy, individual mental health assessments, counselling, psychosocial support, referral to treatment, follow-up services and re-integration and recovery for employees. Depending on the nature of the organization, some of the services may be provided internally, while some may be outsourced or provided through linkage to other service providers.

This chapter provides the steps that will support the successful implementation of a workplace mental wellness program, the components of the WMWP and guidance for monitoring and evaluating the progress.

3.1 Key Steps to Establishing a Workplace Mental Wellness Program

To effectively prepare and implement a successful WMWP, the organization will adhere to the following steps:

- *Step 1: Obtain leadership support and commitment*
- *Step 2: Appoint a workplace mental wellness committee*
- *Step 3: Develop a workplace mental wellness policy*
- *Step 4: Develop a costed work plan and mobilize resources*
- *Step 5: Operationalize the workplace mental wellness program*
- *Step 6: Undertake continuous monitoring, evaluation, and improvement*

3.1.1 <u>Step 1</u>: Obtain leadership support and commitment

Support and commitment from the highest level of leadership are key before setting up a mental wellness program as it requires various resources such as time, money, human resource, physical infrastructure, and fostering partnerships and collaborations for its sustenance. The commitment is demonstrated by incorporation of the wellness program in institutional structures, work plans, budgets and key activities such as performance contracts with clear targets, indicators, and a Monitoring & Evaluation (M&E) plan. . In addition, the leadership will be expected to provide a conducive environment for implementation of the WMWP, including ensuring non-discrimination of affected employees and supporting fair disciplinary practices.

The specific roles of the leadership will be to:

i. *Allocate resources, including monetary and human resources, for mental wellness activities*

ii. *Train human resource to support the program*

iii. *Allocate Physical locations/intervention sites e.g. wellness centers and comfort rooms*

iv. *Approve Education information materials such as job aids, brochures and website materials*

v. *Appoint a mental wellness committee*

vi. *Approve the wellness policy*

vii. *Approve the costed work plans and allocate funds*

viii. *Review and approve quarterly reports*

ix. *Serve as champions for mental wellness activities*

x. *Recognize and reward staff who have contributed significantly to the wellness programs*

3.1.2 <u>Step 2</u>: Appoint the mental wellness committee

The organisation's leadership will appoint a committee from within the organization responsible for implementing and evaluating the workplace mental wellness program guided by the Kenya Mental Health Policy 2015-2030 and all existing mental health policies and laws and occupational health & safety.

Members shall include representatives from:

- *Mental Health Professionals*
- *Human Resource Management*
- *Trade Union Representatives*
- *Occupational Health and Safety*
- *Finance and Administration*
- *Persons with lived experience*
- *Mid-level and Senior Management*
- *and any other officers as may be deemed necessary by the appointing authority*

Membership will have a minimum of five and a maximum of nine members. The members will serve for a term of at least three years, with the possibility of renewal for one term.

The Roles and responsibilities of the committee shall be to:

i. *Develop the organization's Mental Wellness policy and program for approval by management*

ii. *Develop an annual work plan for management approval*

iii. *Plan the promotion and prevention activities*

iv. *Determine a care and referral pathway*

v. *Plan training for staff and managers on mental health, substance use and psychosocial issues*

vi. *Identify prevention priorities, interests, and needs of staff*

vii. *Disseminate relevant information, education, and communication (IEC) materials*

viii. *Advise management on effective approaches to support mental wellness*

ix. *Undertake periodic reviews of the wellness policy*

x. *Conduct regular surveys on mental health at the workplace*

3.1.3 <u>Step 3:</u> Develop a workplace mental wellness policy

The development of a workplace mental wellness policy will need to be guided by a situational analysis that describes the baseline mental health status of the organization. Subsequently, an effective communication strategy must be employed to ensure staff are aware of this policy. This will be followed by the appointment of wellness champions who will interact with affected staff and the management to ensure the program is accepted and embraced.

Situational Analysis:

The situational analysis will include the following:

- *A baseline survey to assess the organisational resources including human, infrastructure, financial that will support the program using the 'Organisation workplace mental wellness assessment template' referenced in Annex* **1**

- *A baseline survey to evaluate the workers' risk factors, burden, and mental health needs using the template titled' Employees' workplace mental wellness assessment template ' referenced in Annex 2*

- *A qualitative process to gather suggestions from staff to determine which types of mental wellness programs are applicable and acceptable in the specific workplace*

Policy Development

The mental wellness committee shall utilize the situational analysis results in drafting the policy. They shall also be guided by their unique Standard Operating Procedures (SOPs) for developing organizational policies. Committee members will require to undergo basic training on the national guidelines on workplace mental wellness and other relevant laws and policies that will be used to guide policy development.

The policy development shall entail a consultative process with input from employees, managers and supervisors, and organizational leadership. This shall be followed by internal validation and approval by the highest authority within the organization. The policy shall be reviewed every three years, guided by ongoing monitoring and evaluation

Communication of the existence of the policy

Through the committee, the organization's leadership shall create awareness and educate all employees on the workplace mental wellness policy to optimize participation and implementation of the policy. This also fosters a social culture where being mentally healthy is valued.

The approved policy will be communicated to all employees using the existing communication pathways such as staff emails, departmental meetings, seminars or workshops and organizational websites. The communication will include but not be limited to the following:

- *The existence of an approved policy*
- *Key components of the policy*
- *The organization's intent is to have a mental wellness program*
- *The level of involvement of staff*
- *Any adjustments made to support the program*

Communication should be ongoing to keep staff well informed on new developments in the program to ensure utilization and continuous engagement in the wellness program.

Appointment of mental wellness Champions

These employees will be dedicated to promoting and encouraging positive mental health in the organization and its workers. They will work to create a culture where co-workers feel comfortable talking about mental health at the workplace and seek help when in need.

Their roles will include:

- *Education and awareness creation on mental health*
- *Promote positive mental health practices*
- *Stigma reduction*
- *Provide support to those struggling with mental health problems*

Champions will work alongside the human resource team and the mental health wellness committee to create a positive work environment. They may be recruited voluntarily or through a formal process, based on an organizations policy. However, they should be equipped with the necessary skills and knowledge through training to ensure they offer services based on evidence, not opinion. It is essential that they possess good interpersonal skills, are respected by both workers and management and have devotion to the cause.

3.1.4: Step 4: Develop a costed work plan and mobilize resources

The committee will draft a costed work plan, and an accompanying itemized budget for approval by the leadership. The work plan will include the following:

- *Clear tasks to be performed*
- *Expected milestones*
- *Deliverables*
- *Budgetary requirements*
- *Timeline*

With approval from the leadership, the committee led by the finance expert will explore the budgetary resources available from the organization. Where the internal resources are deficient, the committee will explore other sources of funds, such as applying for grants and partnering with organisations.

3.1.5 Step 5: Operationalize the workplace mental wellness program

This step aims to guide implementing a contextually relevant and sustainable workplace mental wellness program in line with the International Labour Organization (ILO). The ILO requires that wellness programs are designed to improve the health and wellbeing of workers. An effectively implemented wellness program offers employers a chance for early identification and appropriate intervention and support for affected employees. The workplace mental wellness program will provide a broad spectrum of services as outlined below;

Education and awareness

The key objectives of this service will be to;

- *Increase knowledge on mental wellness and help staff embrace mental health as an essential component of their well-being.*
- *Enable employees to understand mental health conditions in terms of risk factors, common symptoms and available support.*

- *Contribute to attitude change towards mental health conditions and embrace mental health conditions as an illness like any other*

- *Reduce stigma towards mental health conditions at all levels within the organization, which will improve health-seeking behaviour*

The organization will hold scheduled awareness sessions quarterly or biannually. In addition, the materials will be continuously shared on various platforms to reach a varied audience, regardless of age and cultural orientation. The following are some of the requirements:

- *Resource materials for use in creating awareness*

- *Space for conducting awareness sessions*

- *Provision for open and advocacy days such as World Mental Health Awareness Month (May) International Day Against Drug Abuse-IDADA (26th June), World Suicide Prevention Day (10th September) and World Mental Health Days (10th October).*

- *Identify and train Champions (Staff) and wellness officers (HR officers) to lead the wellness sessions*

Screening and Brief Intervention

Screening, early detection and brief intervention increase the chances of better outcomes. The organization will put in place mechanisms to screen and provide brief interventions for common mental health conditions such as depression, anxiety, alcohol and substance use, trauma and stress-related conditions. The screening tools for some mental health conditions referenced in Annex 3 are:

1. *PHQ-9: Depression*

2. *GAD-7: Generalised anxiety*

3. *PC PTSD-5: Post Traumatic stress disorder*

4. *DAST-10: Alcohol and Substance Use.*

5. *K-10: Psychological Distress*

6. *LEC-5 Standard: Exposure to traumatic life events.*

7. *Maslach Burnout Inventory: Burnout*

The aim of screening and brief intervention services will be to:

- *Identify those at risk and provide them with useful information to prevent mental health conditions*
- *Identify those with mental health problems*
- *Provide mental health interventions where appropriate*
- *Linkage to appropriate care and support*

Staff shall be encouraged to go for screening voluntarily. Managers and supervisors shall also support staff working under them to attend the screening sessions. The screening shall be conducted at least twice a year or, when necessary, by a trained mental health professional, preferably during periods associated with the observance of international mental health days (May during Mental Health Awareness Month and October during World Mental Health Day). The screening shall be done in a designated space either within the institution or in a clearly defined external space or clinic to allow for privacy and confidentiality.

Referral and Linkage

This service aims to ensure seamless access to quality care and support. The Workplace Mental Wellness Program (WMWP) committee shall identify internal or external services that meet the various needs of the employees for appropriate referral and linkage.

After screening the employee, they will be linked to a specific champion or mental wellness officer who will support the staff to access the required service.

The champion or wellness officer will keep track of the linked clients and do monthly checks to support adherence and help the staff address emerging issues.

Care, Support and Follow-up

The organization will facilitate access to care by putting in place mechanisms for financial support, developing SOPs on off time and sick periods, among others.

Care

Once an employee is linked to care, it will be upon the professional to determine the best individualized comprehensive treatment plan. However, an employee might require a range of services which might be available within or outside the organisation. Some of these services include:

- *Mental health Services -* A diagnosis for a mental health condition can only be done by a qualified mental health professional. Management of people with mental health conditions requires a multidisciplinary approach where the person might require medication and psychotherapeutic interventions. Follow-up for mental health conditions is likely lifelong unless remission. However, remission should be carefully considered, given the high rates of relapse.

- *Alcohol use, Substance and other addiction management -* This will follow existing guidelines on managing alcohol and substance use. It is important to note that intense treatment may be needed initially whether as an inpatient or as an outpatient, with a longer follow-up to support recovery.

- *General psychosocial challenges/ family conflicts -* This will apply to all staff who have psychological distress but do not have symptoms to warrant intense therapeutic interventions. Such challenges can include marital and family conflicts, grief and loss, navigating a career change, establishing a plan for professional development, managing workplace stress and responsibilities, making travel plans, or managing relationships with co-workers. The therapy provided can include cognitive interventions such as problem-solving therapy, interpersonal therapy, and cognitive behavioral therapy among others. These interventions will be delivered as individual therapy, group therapy, or any other form of therapy as may be deemed necessary. . The psychologists, counselor or therapist will determine the number of sessions required based on the needs of the employee. However, one might require two to six sessions to adequately address the issue.

- *Legal services:* If the issues causing distress are legal in nature, the champion or wellness officer will link the employee to the available legal services. Such issues may include but are not limited to property-related conflicts, divorce and child custody disagreements.

- *Finance Services:* These services will help workers undergoing distress due to financial challenges to improve financial wellness through interventions such as education on budgeting, achieving healthy spending habits, loan consolidation, debt repayment, setting up an emergency fund, among others.

- Other complementary services: Since mental health challenges do not occur in isolation, it is key that the program has plans for linkages that are beyond the scope of these guidelines. These services include nutritional counselling, establishing a self-care plan (Annex 4), or management of chronic diseases such as diabetes, heart disease, or hypertension and other physical health concerns.

Support and Follow-up

This is key for better outcomes. The organization will put in mechanisms to allow staff to get off days to attend regular follow up. In addition, the mental wellness champion and wellness officer will continuously check on the progress of treatment, adherence to care, and any other emerging or additional issues.

Reintegration and Recovery

Some mental health conditions are chronic and recurring, requiring continuous care and follow-up. Reintegration and recovery aim to put in place mechanisms to support those struggling with mental health problems to enable them to continue working.

To support this, the organization will:

- *Anticipate and proactively address stigmatizing attitudes towards employees returning to work after treatment which will be done through various awareness efforts*
- *Design a return-to-work plan*
- *Put in place a performance management plan to support recovering employees*

This will include;

- *Ongoing communication between the supervisor and the employee on the expectations based on the job description*
- *Review the targets of the employee*
- *Structured performance improvement plans with clear targets*
- *Adjusting work design, duties and tasks to allow employees to work efficiently*
- *Pairing the affected staff with a support partner at the workplace*
- *Reward and motivation for efforts put in place*

Any other efforts that will be deemed appropriate for the institution.

- *Support adherence to care. This includes allowing employees time off to attend clinics.*

- *Put in place mechanisms for assessing disability and mechanisms to allow inclusion in the various activities.*

- *Have a mechanism to assess fitness to work for those with severe mental health challenges as per the Organization's Human Resource policy.*

Example of Fit to work procedure (15): The staff should not be dismissed without the approval of an independent medical board that will objectively consider fitness to work. The criteria used to evaluate fitness for work will include determining the worker's capacity and risk concerning his or her workplace, together with all other ethical, economic, and legal considerations. The recommendation of the medical board can take any of the three forms:

- *Fit to work, which allows an employee to work as usual*

- *Fit to work with restrictions/ modifications which will require workplace modifications to accommodate the complications of the illness, redeployment to less strenuous sections and adjusting working conditions schedule*

- *Not fit to work, indicating the need to retire on medical grounds. Those not fit to work will be supported to identify alternative ways of earning a living. In the event of disability, the organisation should support the individual to be registered as a person living with a disability and support access to social protection services. Exit from work should be done through a planned process upholding dignity and respect of the individual*

3.1.6: Step 6 Monitoring and Evaluation

Monitoring is a periodically recurring task that allows results, processes, and experiences to be documented and used to steer decision-making and learning processes. Monitoring is checking progress against plans and the data acquired is used for evaluation.

Evaluation is assessing the program as systematically and objectively as possible to gain information that informs strategic decisions, thus improving the project or program in the future.

Monitoring and evaluation shall focus on the following indicators, among others:

- *Number of educational sensitizations done*
- *Number of screening sessions done*
- *Number of employees screened*
- *Number of employees who have received brief interventions*
- *Type of services employees are linked to*
- *Number of staff linked to care*
- *Type of care employees are accessing*
- *Number of staff reintegrated after care*
- *Types of adjustments made at the workplace*
- *Number of staff assessed for disability*
- *Number of staff retired on medical ground*

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ANNEXES

ANNEX 1: Organization workplace mental wellness assessment template

Name of Organization:

Date:

Role in Organization:

This tool is meant to collect baseline data on an organizations existing baseline resources to support mental wellness of its employees. The assessment is meant to guide development or improvement of appropriate policy measures and programs to support mental wellness at the workplace. Kindly fill it as honestly as possible

1. *Does your organization have workplace mental wellness policy?   Yes   No*

2. *Does your organization have a mental wellness committee?   Yes   No*

3. *Does your organization provide education or training to managers/supervisors on mental health promotion, mental illness prevention and support?   Yes   No*

4. *How often does your organization offer training/educational programs on mental health?* Check all that apply.

» *At on-boarding*

» *1-2 times/year*

» *Quarterly Monthly*

» *When necessitated by a crisis*

» *We do not currently offer any training/education programs on mental health*

5. *Does your organization dedicate any of the following resources to workplace mental health?* Check all that apply.

» *Staff time to coordinate mental health initiatives (i.e. benefits, resources, education, services)*

» *Paid time for staff to participate in mental health education and training*

» *Budget for mental health programs, education, and resources*

» *Community resources for mental health services (i.e. community mental health services, crisis hotlines, online screening tools)*

» *Awareness campaign (i.e. World Mental Health Awareness Day on Oct. 10, Mental Health Awareness Month in May)*

» *None of the above*

6. *Does your organization medical plans (health insurance) cover any of the following groups?* Check all that apply. *Employee Employee + Spouse/Partner Family*

Our organization does not pay to offer any medical plan benefits

7. *Does your organization's medical plan include benefits for both physical and mental health? Yes No*

8. *Does your organization provide access to an employee assistance program (EAP)? Yes No*

9. *Do employees at your organization have access to the following mental health resources through your medical plan and/or community providers?*

Check all that apply.

» *Free screening tools for depression, anxiety, substance use/abuse, PTSD, or other mental health concerns*

» *Initial assessments of a mental health issue/concern*

» *Short term counseling or therapy*

» *Referrals to appropriate mental health services/treatment*

» *Post-mental health treatment monitoring*

» *Low cost (or free) mental health service/treatment options without referral requirements*

» *Digital mental health tools (i.e. online programs, mobile phone apps, wearables, etc.)*

» *Return-to-work assistance*

» *None of the above*

10. *Does your organization offer any of the following types of paid time off?* Check all that apply.

» *Paid Vacation*

» *Time Paid Sick Leave (that can be used for mental health)*

» *Paid Parental Leave (maternity, paternity leave)*

» *Paid Family Leave (caregiver leave)*

» *Paid Bereavement Leave (funeral leave)*

» *None of the above*

11. *Does your organization offer flexible work arrangements based on the nature of the job?   Yes   No*

12. *Does your organization conduct surveys at least once per year to assess employee mental health and overall well-being of employees?   Yes   No*

Please indicate to what extent you agree or disagree with the following statements:

STATEMENT	AGREE	DISAGREE	NEUTRAL
Our organization promotes fairness and equity in the delivery of mental health awareness, education, and access to resources (i.e. all employees can access mental health resources).			
Our organization supports an environment where employees feel comfortable talking about their own mental health without judgement.			
Our organization makes a real and on-going effort to inform and encourage employees to utilize all available resources for managing their mental health.			
Employees with mental health problems are treated without any stigma or discrimination			
Employees with mental health problems or intellectual disabilities are assigned duties with due consideration of their mental health needs			
Employees are encouraged to speak up to managers or supervisors when they feel stressed or overwhelmed by their workload.			
Employees can access mental health services, including treatment, without negative impact on their career advancement.			
Leaders at our organization support employee mental health in various ways (i.e. they talk openly about mental health, they share mental health resources, they listen to employee mental health issues)			
Leaders at our organization model a healthy balance between work and personal life.			
Leaders at our organization encourage employees to practice a healthy balance between work and personal lives.			

ANNEX 2: Employees' workplace mental wellness assessment template

Name of Organization:

Date:

Employee Designation:

This interview is completely confidential and will only be used to provide a baseline understanding of mental wellness available in your organization to guide improvement on the same. Fill section a to e by ticking only one response. For section f, list as many responses that you feel apply.

To what extent do you agree or disagree with the following statements:

QUESTIONS	AGREE	DISAGREE	NEUTRAL
a. AWARENESS ON MENTAL WELLNESS SERVICES			
1. I am aware of the organizations policy on mental health at the workplace.			
2. I have a clear understanding of the mental health resources and services available to me at my workplace.			
3. I have received some form of training through my employer on mental wellness			
4. I know where to direct questions regarding our mental health resources and services at the workplace.			
5. The mental health resources and services offered by my employer meet my needs and those of my my family.			
6. I know where to get support if my mental wellbeing is being impacted.			
b. WORK ENVIRONEMENT			
1. My job gives me flexibility to maintain work-life balance			
2. During the last 12 months, I have felt unwell because of work-related stress			
3. I feel that my workload is manageable and reasonable			

4. Colleagues with mental health conditions are respected and treated with dignity at the workplace			
c. PERSONAL WELLNESS			
1. During the last 12 months, I have been absent from work due to mental health problems			
2. During the last 12 months, I have received some form of treatment for a mental health problem			
3. I have a regular routine for my physical wellness that includes regular exercise, healthy diet habits, avoiding alcohol and drugs			
4. I have a consistent and healthy work-life balance			
d. ORGANIZATION SUPPORT			
1. Our organization's policies (such as paid time off, hours worked, flexible hours, etc.) support mental health.			
2. I feel comfortable talking about my mental health with others inside our organization.			
3. Senior leaders in our organization prioritize mental health at work.			
4. Our organization's benefits around mental health are competitive with other organizations.			
5. Steps taken by the organization to support mental health have improved my mental health.			
e. MANAGER SUPPORT			
1. My immediate manager creates an environment where mental health can be discussed.			
2. My immediate manager prioritizes the mental health of our team.			
3. I can openly discuss mental health challenges and concerns with my immediate manager.			
4. My manager has or would make changes to my workload or work environment in order to improve my mental health.			

f.   ADDITIONAL INFORMATION
1.   What can the organization START doing to better support your mental health?
2.   What can the organization STOP doing to better support your mental health?
3.   What can you START doing to better support your mental health?

ANNEX 3: Screening tools

1.Patient Health Questionnaire (PHQ-9)-Depression

ID No.   Date:

Over the last two weeks, how often have you been bothered by any of the following problems,
Use a tick to answer

	Not at all	Several Days	More the half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depress or helplessness	0	1	2	3
3. Trouble falling asleep, staying asleep or not sleeping at all	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself or that you are a failure or have let yourself down or your family down	0	1	2	3
7. Trouble concentrating on things such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite being so fidgety or restless that you are moving a lot more than usual	0	1	2	3
9. Thoughts that you would be better dead or of hurting yourself	0	1	2	3

Column totals   +   +   +   =   (Total)

(Healthcare Profesional: For interpretation of Total: Please refer to accompanying scorecard)

*10. If you checked any problems, how difficult have they made it for you to do your work, take
care of things at home, or get along with other people?*

Not difficult at all   Somewhat difficult   Very difficult   Extremely difficult

PHQ-9 Patient Depression Questionnaire

For initial diagnosis:

1. *Patient completes PHQ-9 Quick Depression Assessment.*
2. *If there are at least 4 s in the shaded section (including Questions #1 and #2), consider a depressive disorder. Add score to determine severity.*

Consider Major Depressive Disorder

- *if there are at least 5 s in the shaded section (one of which corresponds to Question #1 or #2)*

Consider Other Depressive Disorder

- *if there are 2-4 s in the shaded section (one of which corresponds to Question #1 or #2)*

Note: Since the questionnaire relies on patient self-report, all responses should be verified by the clinician, and a definitive diagnosis is made on clinical grounds taking into account how well the patient understood the questionnaire, as well as other relevant information from the patient.

Diagnoses of Major Depressive Disorder or Other Depressive Disorder also require impairment of social, occupational, or other important areas of functioning (Question #10) and ruling out normal bereavement, a history of a Manic Episode (Bipolar Disorder), and a physical disorder, medication, or other drug as the biological cause of the depressive symptoms.

To monitor severity over time for newly diagnosed patients or patients in current treatment for depression:

1. *Patients may complete questionnaires at baseline and at regular intervals (eg, every 2 weeks) at home and bring them in at their next appointment for scoring or they may complete the questionnaire during each scheduled appointment.*

2. *Add ups by column. For every: Several days = 1 More than half the days = 2 Nearly every day = 3*

3. *Add together column scores to get a TOTAL score.*

4. *Refer to the accompanying PHQ-9 Scoring Box to interpret the TOTAL score.*

5. *Results may be included in patient files to assist you in setting up a treatment goal, determining degree of response, as well as guiding treatment intervention.*

Scoring: add up all checked boxes on PHQ-9

For every Not at all = 0; Several days = 1; More than half the days = 2; Nearly every day = 3

Interpretation of Total Score

Total Score	Depression Severity
1-4	Minimal depression
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately severe depression
20-27	Severe depression

2. GAD-7: Generalised anxiety

Over the last two weeks, how often have you been bothered by the following problems?	NOT AT ALL	SEVERAL DAYS	MORE THAN HALF THE DAYS	NEARLY EVERY DAY
1. Feeling nervous, anxious, or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid, as if something awful might happen	0	1	2	3
Column totals	+	+	+	=
Total score				

If you checked any problems, how difficult have they made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all   Somewhat difficult   Very difficult   Extremely difficult

Scoring GAD-7 Anxiety Severity

This is calculated by assigning scores of 0, 1, 2, and 3 to the response categories, respectively, of "not at all," "several days," "more than half the days," and "nearly every day."

GAD-7 total score for the seven items ranges from 0 to 21.

- *0–4: minimal anxiety*
- *5–9: mild anxiety*
- *10–14: moderate anxiety*
- *15–21: severe anxiety*

3. PC PTSD-5: Post Traumatic stress disorder

Sometimes things happen to people that are unusually or especially frightening, horrible, or traumatic. For example:

- *a serious accident or fire*
- *a physical or sexual assault or abuse*
- *an earthquake or flood*
- *a war*
- *seeing someone be killed or seriously injured*
- *having a loved one die through homicide or suicide.*
- *Have you ever experienced this kind of event?*　　Yes　　　No

If no, screen total = 0. Please stop here. If yes, please answer the questions below.

In the past month, have you…

1. *had nightmares about the event(s) or thought about the event(s) when you did not want to?*　　Yes　　　No

2. *tried hard not to think about the event(s) or went out of your way to avoid situations that reminded you of the event(s)?*　　Yes　　　No

3. *been constantly on guard, watchful, or easily startled?*　　Yes　　No

4. *felt numb or detached from people, activities, or your surroundings?*　Yes　　No

5. *felt guilty or unable to stop blaming yourself or others for the event(s) or any problems the event(s) may have caused?*　　Yes　　No

4. DAST-10: Alcohol and Substance Use

I'm going to read you a list of questions concerning information about your potential involvement with drugs, excluding alcohol and tobacco, during the past 12 months.

When the words "drug abuse" are used, they mean the use of prescribed or over-the-counter medications/drugs in excess of the directions and any non-medical use of drugs. The various classes of drugs may include: cannabis (e.g., marijuana, hash), solvents, tranquilizers (e.g., Valium), barbiturates, cocaine, stimulants (e.g., speed), hallucinogens (e.g., LSD) or narcotics (e.g., heroin). Remember that the questions do not include alcohol or tobacco.

If you have difficulty with a statement, then choose the response that is mostly right. You may choose to answer or not answer any of the questions in this section.

These questions refer to the past 12 months.	No	Yes
1. Have you used drugs other than those required for medical reasons?	0	1
2. Do you abuse more than one drug at a time?	0	1
3. Are you always able to stop using drugs when you want to? (If never use drugs, answer "Yes."	1	0
4. Have you had "blackouts" or "flashbacks" as a result of drug use?	0	1
5. Do you ever feel bad or guilty about your drug use? If never use drugs, choose "No."	0	1
6. Does your spouse (or parents) ever complain about your involvement with drugs?	0	1
7. Have you neglected your family because of your use of drugs?	0	1
8. Have you engaged in illegal activities in order to obtain drugs?	0	1
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?	0	1
10. Have you had medical problems as a result of your drug use (e.g., memory loss, hepatitis, convulsions, bleeding, etc.)?	0	1

5. K-10: Psychological Distress

Please tick the answer that is correct for you:	All of the time (score 5)	Most of the time (score 4)	Some of the time (score 3)	A little of the time (score 2)	None of the time (score 1)
1. In the past 4 weeks, about how often did you feel tired out for no good reason?					
2. In the past 4 weeks, about how often did you feel nervous?					
3. In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down?					
4. In the past 4 weeks, about how often did you feel hopeless?					
5. In the past 4 weeks, about how often did you feel restless or fidgety?					
6. In the past 4 weeks, about how often did you feel so restless you could not sit still?					
7. In the past 4 weeks, about how often did you feel depressed?					
8. In the past 4 weeks, about how often did you feel that everything was an effort?					

9. In the past 4 weeks, about how often did you feel so sad that nothing could cheer you up?					
10. In the past 4 weeks, about how often did you feel worthless?					

6. LEC-5 Standard: Exposure to traumatic life events

Instructions: Listed below are a number of difficult or stressful things that sometimes happen to people. For each event check one or more of the boxes to the right to indicate that: (a) it happened to you personally; (b) you witnessed it happen to someone else; (c) you learned about it happening to a close family member or close friend; (d) you were exposed to it as part of your job (for example, paramedic, police, military, or other first responder); (e) you're not sure if it fits; or (f) it doesn't apply to you.

Be sure to consider your entire life (growing up as well as adulthood) as you go through the list of events.

Event	Happened to me	Witnessed it	Learned about it	Part of my job	Not sure	Doesn't apply
1. Natural disaster (for example, flood, hurricane, tornado, earthquake)						
2. Fire or explosion						
3. Transportation accident (for example, car accident, boat accident, train wreck, plane crash)						
4. Serious accident at work, home, or during recreational activity						
5. Exposure to toxic substance (for example, dangerous chemicals, radiation)						
6. Physical assault (for example, being attacked, hit, slapped, kicked, beaten up)						
7. Assault with a weapon (for example, being shot, stabbed, threatened with a knife, gun, bomb)						

8. Sexual assault (rape, attempted rape, made to perform any type of sexual act through force or threat of harm)					
9. Other unwanted or uncomfortable sexual experience					
10. Combat or exposure to a war-zone (in the military or as a civilian)					
11. Captivity (for example, being kidnapped, abducted, held hostage, prisoner of war)					
12. Life-threatening illness or injury					
13. Severe human suffering					
14. Sudden violent death (for example, homicide, suicide)					
15. Sudden accidental death					
16. Serious injury, harm, or death you caused to someone else					
17. Any other very stressful event or experience					

7. Maslach Burnout Inventory: Burnout

0	1	2	3	4	5	6
Never	A few times a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Everyday

QUESTIONS	0	1	2	3	4	5	6
1. I feel emotionally drained from my work							
2. I feel used up at the end of the workday							
3. I feel fatigued when I get up in the morning and have to face another day on the job							
4. I can easily understand how many recipients feel about things							
5. I feel I treat some recipients as if they were impersonal objects							
6. Working with people all day is really a strain for me							
7. I deal very effectively with the problems of my recipients							
8. I feel burned out from my work							
9. I feel I'm positively influencing other people's lives through my work							
10. I've become more callous towards people since I took job							
11. I worry that this job is hardening me emotionally							
12. I feel energetic							
13. I feel frustrated by my job							

14. I feel I'm working too hard on my job							
15. I don't really care what happens to some recipients							
16. Working with people directly puts too much stress on me							
17. I can easily create a relaxed atmosphere with my recipients							
18. I feel exhilarated after working closely with my recipients							
19. I have accomplished many worthwhile things in this job							
20. I feel like I'm at the end of my rope							
21. In my work, I deal with emotional problems very calmly							
22. I feel recipients blame me for some of their problems							

ANNEX 4: Self Care Plan

Self-care refers to practices and activities one deliberately engages in to enhance ealth and well-being. There are eight dimensions to self-care: physical, psychological, emotional, social, professional, spiritual, and financial.

1) Physical self-care

- *Consistent exercise - 45 minutes of exercise 3x in a week*
- *Proper Personal hygiene and grooming*
- *Adequate sleep (6-8 hours per night)*
- *Eating a healthy diet*

2) Psychological self-care

- *Practicing mindfulness*
- *Reading a book*
- *Learning a new skill*
- *Doing a digital detox*
- *Journaling*

3) Emotional self-care

- *Assertiveness*
- *Observing boundaries*
- *Making time for reflection on feelings*
- *Practicing self-compassion*
- *Being aware of your emotional boundaries*

4) Social self-care

- *Honouring your commitments to other people*
- *Asking for help when you need it*
- *Meeting new people*
- *Spending time with family and friends*
- *Managing time*

5) Professional self-care

- *Sharing your strengths and gifts*
- *Negotiating your needs at work*
- *Having clear professional boundaries*
- *Attending professional development opportunities*

6) Environmental self-care

- *Decluttering your home or work environment*
- *Responsible use of technology*
- *Maintaining a clean and safe living and working environment*

7) Spiritual self-care:

- *Meditating*
- *Going on a retreat*
- *Walking in nature*

8) Financial self-care

- *Investing in financial literacy*
- *Identifying one's source of income*
- *Identifying your expenses and planning in time*
- *Completing your tax responsibilities on time*
- *Spending and saving money wisely*
- *Investing in financial literacy*

To achieve the above 8 dimensions of self-care, one needs to be deliberate and plan how to do it. Each self-care plan is unique to an individual. There is no one size fits all.