PHOLOCIAL Lanuary 2024

Suicide at work: what to do next?

'The golden hours after a suicide at work is a time to pause before following a postvention plan' Page 8



Contents

FEATURES REGULARS



Conversations: What is stopping employers from reimagining what a career life cycle looks like?

Exploring the cycles of life experienced by women when it comes to their career and life choices, Jane Moffett suggests it's time that employers looked through a different lens

From the editor

Nicola Bannina Important conversations

News from BACP Workplace





The interview: My workplace

Last year, Juliette Moxham wrote an article for BACP Workplace about why she left her role as headteacher of a primary school in Gloucestershire to retrain as a counsellor. Now a newly qualified counsellor, she talks to Nicola Banning about life after training

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Editor

Nicola Banning workplaceeditor@bacp.co.uk

Contributions

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COLUMNS

18 **Race matters**

Letesia Gibson At a time of trauma

and crisis, how should ethical leaders respond?

25 Cyberwork

Sarah Worley-James Creating team health in tough times

'There are certainly glimmers that organisations are starting to take this seriously and recognise that they have some major issues around gendered ageism that need to be tackled' **Page 27**

26 Books

In Revolting Women: why midlife women are walking out and what to do about it, author and leadership coach Dr Lucy Ryan talks to Nicola Bannina about why there is a mass exodus of talent, experience and wisdom from corporate life as women over the age of 50 leave in their droves

O&A

Sarah Prince

responds to a member's question about assessing clients at risk



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Important conversations

t the Cheltenham Literature Festival in October last year, I met Sue Christy, a trauma consultant and critical incident responder, to learn about her work in the aftermath of a traumatic event in the workplace. Sue specialises in working with employers, large and small, helping them to respond when the worst thing happens. Shock, panic and fear can all make a bad situation even worse and fast - hence the need for Sue's role someone to dampen the flames before they take hold.

Over coffee, Sue told me that, 'a death by suicide has the longest tail of all', with potentially far-reaching consequences for employees. the employers and the wider community. The time immediately after a suicide at work are 'the golden hours' – a time to pause before following a postvention plan – and it's well understood that a clear plan followed, will help everyone - and prevent unnecessary trauma and retraumatisation in the workforce. Sue's article, 'The silence of a suicide at work', shines a light on both good and bad practice. I hope it encourages more workplaces to get their postvention plans in place.

I'm happy to admit that one of the joys of my job is having conversations with people about their work. This issue, in 'My workplace', I talk to Juliette Moxham, a former headteacher, who shares her experience of life after counselling training. Since we last heard from Juliette, she has established herself as a newly qualified counsellor, is working as an affiliate with the public sector workforce, and bringing her considerable organisational experience to the client work. It's important to me that BACP Workplace represents the voices of therapists at different points in our professional journeys – and reflecting on her training, Juliette reminds us on page 14 of just how hard we have to work to get here.

What is stopping employers from reimagining what a career life cycle looks like? That's the question that Jane Moffett asks in her latest article as she explores the cycles of life experienced by women when it comes to their career and life choices. Quite a lot it seems.

It's the topic of a new book written by author and leadership coach, Dr Lucy Ryan, called Revolting Women: why midlife women are walking out and what to do about it. I heard Lucy speak at the Cheltenham Literature Festival to a packed room, as she explained why there is a mass exodus of women over the age of 50 who are leaving corporate life in their droves to do many other important things. It's a corrosive story of ageism and sexism told with wit, outrage and hope.

I hope you enjoy this issue.

Nicola Banning
Editor, BACP Workplace
workplaceeditor@bacp.co.uk

Your BACP Workplace New Sylvanian



Notes from the Chair

The old and the new



'Another way of connecting with practitioners is by joining BACP's Communities of Practice, an ethical online community for sharing knowledge among diverse practitioners, from beginners to experts, which every member has access to'

Vianna Boring Renaud

s I welcome in another new year with a sense of hope, I'm enjoying taking some time out to pause and reflect upon the 'old', while daydreaming about the 'new'. Both personally and professionally, I found 2023 to be a particularly challenging year, but from talking to my workplace colleagues and friends, I know that I'm not alone. It seems that globally there are so many issues to concern us, from wars to the climate crisis, and we see how often these worries emerge in our practice on a daily basis as our clients bring these anxieties on top of the day job. Therefore, while we support our clients in increasing awareness of their emotional and physical wellbeing, we must also remember to tend to our own self-care and growth, especially in dark times and over the winter months.

Planning ahead

In November, we held our annual two-day meeting of the Workplace Executive Committee online, which was a wonderful opportunity to hear from all those working in different ways on behalf of the Workplace division. Expanding our scope as practitioners is something that is always present in the work of the Workplace division, and it has fuelled the planning of an upcoming event by Executive Committee members Claire McCluskey, Jack Jackson and Andrew Woods, who have all worked so hard to make it happen. We are delighted to be bringing you a fantastic programme of speakers at our 'Working with the changing face of mental health and cognition within the workplace setting' event, which is taking place on Tuesday 23 January. There will be a range of guest speakers on neurodiversity, using real case studies from the workplace. I'm sure this event will enrich our practice with the aim

of creating more inclusive workplaces, and I look forward to hosting this online event and welcoming members. To find out more visit www.bacp.co.uk/events/ww230124-working-with-workplace

Engaging with members

I'm grateful to Andrew Price, Executive Committee member, for continuing to host and plan a great schedule of online Workplace network meetings. These informal meetings are a perfect opportunity to take a break, make yourself a cuppa, and join other workplace practitioners to talk about the issues you are facing in your work. The next meeting will be held on Thursday 14 March between 4pm and 6pm, and you can find out more about how to join on page 6.

Another way of connecting with practitioners is by joining BACP's Communities of Practice, an ethical online community for sharing knowledge among diverse practitioners, from beginners to experts, which every member has access to. At the Executive Committee meeting, Sue Christy explained how members can join in online discussions about workplace counselling, post questions or contribute answers with a focus on the workplace setting. If you haven't yet checked out the Communities of Practice discussion forums. I'd like to encourage you to do so where you can engage with other members for support, CPD and networking.

How we communicate with members, engage and meet your needs is always high on our list of priorities and so, I'm pleased that Julie Hughes, Deputy Chair, is updating our news and information on the Workplace division's pages on BACP's website. We are also looking at how we further develop our

BACP Workplace LinkedIn group, and we are aiming to create more discussion and comments, so please do have a look, see what's happening and join in.

Once again, the Workplace division will be at the annual Health and Wellbeing at Work Conference at the NEC Birmingham in March. I am enormously grateful to both Nicola Neath, Executive Committee member, and Kris Ambler, BACP's Workforce Lead, for all their hard work representing BACP again, and speaking at this high-profile national event. You can read more about this on page 6.

And finally, one of my highlights of last year was being able to welcome our new Executive Committee members, Jack Jackson, Jonny Ward and Andrew Wood, to join us to work on behalf of the division. They are all dedicated practitioners, committed to the development of our sector, and I've been so impressed by their enthusiasm to get stuck in, each bringing their own particular areas of specialism. At the same time, another chapter is ending, as we say farewell to Josephine Bey who has been a member of the Executive Committee for several years, and has contributed greatly to the division during her time with us. She will be greatly missed by us all. We wish Josephine all the very best for her next exciting chapter as she leaves us to join BACP's Board of Governors, where I'm sure she will put her considerable knowledge and expertise to good use.

As I draw to a close, I hope that you have all enjoyed time spent with friends and family, and benefitted from some rest and relaxation over the festivities. As we face the year ahead, I wish you all the best for 2024 and look forward to sharing developments with you as the year unfolds.



BACP partners with The Royal Foundation's **Network of Emergency Services Therapists (NEST)**

ACP is pleased to announce the launch of a new directory of therapists with the skills, qualifications and experience to work with emergency responders.

Funded by The Royal Foundation, the Network of Emergency Services Therapists (NEST) will be the first directory to support the mental health of those working on the UK's emergency services' front line.

Alongside key stakeholder organisations, we've helped to develop the role profiles for emergency responder therapists who will be listed on the directory.

Phase one

At this initial trial phase, NEST is looking for accredited therapists* who have at least three years' experience working with members of the emergency services to join the directory.

Police Care UK will establish the network and use it to match police service employees to suitable therapists. Once established, other charities and relevant organisations will also have the opportunity to access the network to find therapists.

BACP's Workforce Lead. Kris Ambler says: 'We recognise the immense pressures under which emergency

responders work, often exposing them to trauma that can place considerable strain on their mental health and wellbeing.

'It was a privilege to support The Royal Foundation in this process, and I know that our membership of highly qualified counsellors and psychotherapists are uniquely placed to assist emergency responders.'

NEST is being delivered by Police Care UK in partnership with The Fire Fighter's Charity, The Ambulance Staff Charity (TASC), and The National Police Wellbeing Service (NPWS) under the College of Policing.

*We recognise that many registered/ non-accredited BACP members will also have the skills, experience, and knowledge to support this important initiative. We're committed to working with the organisations involved to make this opportunity available to all BACP registered members after the initial trial period, and will be sharing regular updates on how you can apply.

If you are interested, please visit the NEST website (https://nest.policecare. org.uk) where you will find all the details about the application process and criteria to be listed on the directory.





Dates for the diary

Online

Working with the changing face of mental health and cognition within the workplace setting

Date: 23 January 2024

We explore the journey from traditional 'neurotypical' perspectives to embracing neurodiversity, exploring the full spectrum of neurological differences.

In the context of workplace therapy, we'll examine real-world applications and case studies, offering valuable insights and connections. Our team of experts will share practical tools and engage in storytelling, all aimed at creating a more inclusive workspace.

This is an opportunity to navigate the intricacies of mental health and cognition within the workplace, fostering inclusivity and supporting diverse cognitive experiences. Speakers include Frances Coleman-Williams, a former NHS doctor with a background in mental health who now works with a charity in Winchester, and runs her own private practice in Basingstoke. As a late diagnosed autistic female, Frances is passionate that other neurodivergent individuals do not face the discrimination and stigma she's experienced. As well as writing



a couple of personal blogs, Frances has published articles in *The Metro* and spoken on local radio, Channel 5's The Wright Stuff and BBC's The Big Questions to raise awareness about various mental health issues.

Dr Beth Edwards has personal lived experience of navigating the barriers in different educational settings and workplaces. Her PhD explored the needs and positioning of autistic teenage girls and the resulting co-production of a one-page profile. Beth has a 'day job' working to embed enterprise into the curriculum at Bangor University, she is always keen to contribute to events and activities where lived experience contributions are welcomed.

Nick Wood is a counsellor, trainer and consultant based with a detailed knowledge of neurodiversity issues based on his own client work and experiences within his own family. Nick previously managed an in-house counselling service for a large local authority and he has a wealth of experience of employment and disability law and how it relates to the field of occupational medicine.

Nick currently specialises in providing supervision and training to practitioners who recognise themselves as being neurodivergent as well as those working in the field.

The online event will be aimed at Workplace divisional members, but may cross over into other divisions such as Private Practice, Healthcare and University and College Counselling.

The event is a half-day online and takes place between 9:30am and 1:30pm. It will cost £35 for BACP members and £30 for BACP Workplace members.

The on-demand service will be available for three months after the event for you to view any content you'd like to catch-up on from the day.

You can book your place by visiting BACP Events online: www.bacp.co.uk/events/ww230124-working-with-workplace

Online

BACP Workplace network meeting

Date: Thursday 14 March 2024

Are you looking for a supportive space to network with other workplace practitioners? If so, you are welcome to join the BACP Workplace network meeting, which is held bi-monthly online.

It is an informal opportunity for BACP members to come together and share experiences, challenges, success stories, business ideas, discuss our work and gain support.

We always hold the meeting towards the end of the working day, so it's up to you how long you choose to stay. If you have been wondering if these meetings are for you, please pop the date in your diary, make yourself a cuppa, and come and join us. It's a great way of meeting colleagues and we hope to see you at our next meeting.

The next meeting will be held on Thursday 14 March, between 4pm and 6pm. If you're interested in joining, please contact: communities@bacp.co.uk

Andy Price, a member of the BACP Workplace Executive Committee, reports on the network meetings

It's always good to connect with members at the Workplace network meetings and to find out what is having an impact on your work. Over the course of the last year, we've explored a range of topics, including the role of counselling service managers, measuring outcomes in workplace counselling, the changing nature of EAP work, and what happens when there is a suicide at work.

The meetings are free to join and hosted by myself or another member of the Workplace Executive Committee. We aim for the event to be a friendly and informal opportunity to meet other workplace practitioners, and we would like to encourage more members to join us.

As we plan the programme of events for the year ahead, we want to make the network meetings as useful as possible for Workplace members, and so we are inviting you to share your thoughts and ideas with us. If you have topics that you would like to be discussed at the Workplace network meeting or if you have an idea for a short talk or presentation, then we would like to hear from you.

Please email: communities@bacp.co.uk



Conference time

Health and Wellbeing at **Work Conference**

Date: 12 to 13 March 2024

The Health and Wellbeing at Work Conference returns to the NEC Birmingham for the UK's largest event dedicated to improving the health, wellbeing, safety, behaviour and culture of today's workforce.

Once again, members of the **BACP Workplace Executive** Committee will be present. Nicola Neath will be speaking on 'The art and science of saying "no" and setting limits in a workplace setting'. Kris Ambler, BACP's Workforce Lead will speak on 'The impact of worldwide social determinants - understanding and supporting your workforce'.

You can start planning your visit ahead of time and choose which speakers, sessions and exhibitors are most relevant to you and your job function, to make the most of the event.

Nou can find out more about the conference at: www.healthwell beingwork.co.uk



We welcome readers' letters and comments. If you've read something in BACP Workplace you would like to comment on, please do get in touch: workplaceeditor@bacp.co.uk



Government's poor mental health response is a slap in the face to rural workers

ACP is deeply disappointed with the Government's response to the Environment, Food and Rural Affairs (EFRA) Committee's Rural Mental Health Report¹ which called for more targeted mental health provisions for rural workers and communities.

Faced with a complex set of challenges on a daily basis, farmers and those working in rural communities deal with a unique set of stresses that are often outside of their control. From unpredictable weather and animal health crises to labour shortages. isolation, the cost of living crisis, and changes in government policies - which all impact on their mental health and income.

The report was compiled by the EFRA Committee and included contributions from BACP. It aimed to shine a light on the struggles faced by rural communities, how these impact on mental health, and provide a series of suggested improvements to the Government's current support package.

Failing farmers

The Government's response to this report stated that the specific mental health needs of rural communities do not require targeted action, citing that the existing provisions are sufficient to safeguard rural mental health.

Martin Bell, Head of Policy and Public Affairs at BACP, said: 'The Government's response to the EFRA Committee report feels like an insult to rural workers and communities, and we believe they are seriously failing our farmers. Faced with a unique set of challenges, every week three people in the UK farming and agricultural

industry die by suicide. Male farm workers are also three times more likely to take their own lives than the male national average². The Government's current support package for rural communities is simply not enough - so much more is needed, particularly with regards to making psychological therapies more accessible.'

Rejection and complacency

Chair of the EFRA Committee. Sir Robert Goodwill, said: 'Our committee was hopeful that the Government would recognise the distinct needs and circumstances of the rural population and would follow our carefully considered recommendations to support and protect them. While we recognise that the Government has taken measures to support the mental health of the general population, we are disappointed by its rejection of measures to support the specific and identifiable mental health needs of those who live in rural areas.

'This was an opportunity to make significant changes which could greatly impact our rural communities. With this response, the Government demonstrates a worrying degree of complacency on the issue and so will fail to confront the significant problem of improving rural mental health.'

- 1 House of Commons. Environment, Food and Rural Affairs Committee. Rural mental health. Fourth Report of Session 2022-23. [Online.] https://committees.parliament.uk/ publications/39991/documents/195139/default/
- Zero Suicide Alliance. Sowing the seeds of care. 2021; 9 November. [Online.] www.zerosuicidealliance.com/stories/ news/sowing-seeds-care (accessed 22 November 2023).



The silence
of a suicide
at work

The suicide of an employee can have far-reaching consequences for colleagues, managers, the employer and the community. **Sue Christy** makes the case for better suicide postvention and explains why taking the right steps in the golden hours after a suicide can help to reduce further traumatisation and supports healing and recovery in the workforce



Sue Christy is a group crisis intervention specialist (CISM) and a member of BACP's Workplace Executive Committee. She offers CPD endorsed training to therapists, managers and employers in how to prepare for and manage psychological trauma in the workplace. Sue's USP is that her training comes from the inside-out, and is based on real experience, not assumed knowledge. www.suechristy.co.uk

mma, a school nurse, was driving between schools when her boss rang her. Immediately, she knew something was wrong as her boss sounded different, 'kind of urgent' and 'stressed'. Emma's boss told her to pull over and then told Emma that a colleague and friend had taken her own life.

In her car alone, Emma remembers feeling sick. But there was no time to discuss it any further because her boss, 'seemed in a hurry to end the call' and asked Emma if she could pass on the news to another colleague at the school she was about to visit. She couldn't bring herself to do so. She can't remember how she got home.

The next morning, Emma described work as: 'Business as usual. Like nothing had happened. No-one said anything at work. It was just brushed under the carpet. The saddest thing is, it wasn't like she'd died, it was like she'd just evaporated. Gone, nothing. Just gone and forgotten.'

Setting the scene

Regrettably, this is a real case study and it's typical of what I encounter in my work as a critical incident responder and trauma consultant. It's how I now spend much of my working life, working with every size of business across every kind of sector, training them in how to plan for and respond to a critical incident, and how to support their people when the worst thing happens.

10 BACP Workplace | January 2024

Every year, around 6,000 people in the UK end their own lives – well over three times the number of people who die on our roads. 2 Suicide is now the leading cause of death among young people aged from 20 to 34, with men nearly three times as likely as women to die because of suicide, although the female suicide rate in England is at its highest since 20053 - and they are predominantly of working age. The impact of a suicide on the wider community is not to be underestimated, and is relevant to employers and all practitioners with a vested interest in supporting employee mental health and wellbeing. Interestingly, a study in the US, led by clinical psychologist Julie Cerel, showed that 135 people will know and be impacted by each person who dies by suicide.4

Statistics like this only serve to demonstrate that however many preventative suicide awareness trainings and talks that employers may offer, it's simply impossible to eliminate the risk of suicide from our personal and professional lives. Shockingly, however, there is no standard protocol for employers to manage the psychological impact when a member of staff takes their own life (or indeed any other sudden death or other critical incident occurs). Instead, workplaces and our wider society, directs its focus towards suicide prevention measures, training in awareness raising and spotting the signs of suicide, which is failing to do anything to stop the numbers of people taking their own lives.

In this article, I argue that instead of focusing solely on suicide prevention, employers need to get much better at postvention – by this, I am referring to the actions taken by the employer in the minutes, hours, days, weeks, months and years after the suicide of an employee. A good place to start is by being proactive - acknowledging that suicide doesn't just happen to other people, putting in place clear protocols, as well as welcoming safe discussion about the potential causal factors of the suicide, even if that means that the workplace culture may come under scrutiny. Unless we can speak more openly about these psychosocial challenges, I believe that we risk ignoring our moral duty of care to employees, potentially creating further human distress and suffering in the process.

The golden hours

After a suicide, there is an optimal period of time, which I call 'the golden hours', in which certain things need to happen, at speed, to both manage and contain the incident. Ideally, this is when I will receive a call – it could be a construction site, manufacturing plant, a retailer, school or university – it's just your average workplace where people turn up to work each day – except on that day, someone doesn't.

'The suicide of a colleague has been described as having impact that is "akin to a social bomb exploding, with the extent of the devastation impossible to predict"'5

An employer's response tends to be inconsistent, arbitrary, and reliant on the individual discretion of the person who receives the news, rather than following a specific protocol or set of guidelines. And, even the most proficient and confident of leaders can feel completely out of their depth, lost and overwhelmed at how to respond to a suicide.

Once an employer is notified that a member of staff has taken their own life, shock and panic usually sets in. Unsure what to do next, the person who takes the call phones his manager, who phones her manager and news spreads. Next, HR managers get involved who may decide to call the Chief Exec; there is a ripple effect and a colleague puts something on social media about the suicide, raising questions about how and why it happened.

In some cases, the police and press arrive at the gates and members of the community turn up to lay bunches of flowers as rumours grow about the deceased, perhaps questioning workplace pressures, money worries or relationship issues. Accusations are made that the deceased's managers were all aware that the employee was struggling. Colleagues are feeling devastated that they didn't know or didn't do something to stop it from happening. And so, it continues.

The suicide of a colleague has been described as having impact that is 'akin to a social bomb exploding, with the extent of the devastation impossible to predict.'5 This is why I call the first few hours after a suicide or a critical incident 'the golden hours' – it's a small window of opportunity to follow a plan, led by someone who is trained, skilled and resourced to help the organisation to navigate the unexpected. Having protocols in place will help the employer to prevent rumours, blame, disinformation and contain the contagion after the suicide of an employee (and other critical incidents). This is well-known to have far-reaching consequences for how people cope in the immediate aftermath through to how they recover. It can also have huge implications for how people will be left feeling towards their employer in the future.

Responding to a suicide at work

The focus of my attention is not on the person who has died but on those who are left behind. At work, this might include colleagues, friends, co-workers, managers, external suppliers and the community, among others. Given how much work takes place virtually, colleagues working elsewhere in the world also need to be considered. It is proactive, deeply practical work and my primary role is to contain the crisis, give people factual information and help them to have the best chance of retaining a sense of safety and control after the shock and trauma.

While people will want and need to speak about the deceased ('venting'), what they did and how they died, my focus is on providing a place of safety and support, of stabilising and grounding them in the here and now – 'How are you doing?' and, 'What do you need now?' There can be a great deal of comfort in knowing you are having a normal response to an abnormal event.

Assessing risk

A risk assessment needs to be made about the support in place for those most affected. For example, I've known managers who (with the best of intentions) have sent everyone home after a suicide, without checking whether there is anyone at home when they get there. This might be quite the wrong decision for an employee who had been suicidal in the past, and was currently suffering with low mood and troubling thoughts – so one size doesn't fit all.

We know that people in a state of shock are biologically unable (because of the human trauma response) to function well – so it's good advice to make sure that employees don't drive and alternative travel arrangements made, such as booking taxis. Machinery at work should not be operated, and I'll provide factual handouts about what to expect which offers advice to friends and family, and suggest that they give the info to their loved ones or leave it in a central place at home.

Emotional fallout

The most common emotions following the suicide of a colleague are psychological shock and anger. Anger may lead to further feelings such as 'confusion, anxiety and shame' that arise from the belief that anger is an inappropriate response (it is not – it is common to be angry at the person for taking their life). Additionally, there will be behavioural responses, including altered eating and sleeping habits, and a need to repeatedly talk about the event. Some behaviours may be visible and impactful within the workplace, such as absenteeism, presenteeism, or problem drinking. This could be because they are already going through stressful situations in their lives, their support system is dysfunctional, they have ongoing emotional or behavioural health vulnerabilities, or they have some history of family suicide, or a previous bereavement by suicide. Managers must be helped to understand that staff are not only experiencing the loss of a colleague by suicide but are also working through these multiple elements of that experience and, will require space, support and empathy. Workers express the intensity of their experience as being unlike other unexpected

6,000

Every year, around 6,000 people in the UK end their own lives – well over three times the number of people who die on our roads²



Suicide is now the leading cause of death among young people aged from 20 to 34, with men nearly three times as likely as women to die because of suicide³



The female suicide rate in England is at its highest since 2005³ – and they are predominantly of working age

losses, since workplace suicide has the added burden of stigma, fear and secrecy.

Why does someone take their own life?

It's human nature to want to find answers and when there aren't any, people try to make sense of it as best they can – but this doesn't mean that the truth is always arrived at. Suicide is not caused by a single factor. Instead, it is the end product of a complex set of biological, psychological, clinical, social and cultural determinants that come together in a perfect storm. For most, suicide is not about wanting to end one's life but about wanting unbearable mental pain to end.

As shocking as a suicide often is, Professor Rory O'Conner who leads the Suicidal Behaviour Research Laboratory at Glasgow University describes what he calls, 'the everydayness' of suicide. By this, he means that, 'what leads someone to become suicidal is very often about what happens every day: everyday failures, everyday crises and everyday losses. Too often people think that suicide is about the out-of-theordinary, a response to things that happen to other people and not to them, when it is not. For some, suicide is about bullying, divorce or the loss of a job. For others, it is about bereavement, bankruptcy, shame, discrimination, loss of benefits or illness. It is about how we respond to stressful events and circumstances, as well as the cards that we are dealt at birth.'5

Is a suicide work-related?

But what if we believe the workplace to have contributed to the death in some way? How should we make sense of what has taken place? How are we left feeling about our employer? How can we continue to work for the same employer? How does the family of the person who took their own life respond to the employer? And, as workplace practitioners, how can we best support those colleagues left behind who may be seeking justice or accountability from their employer?

The public's attention has been drawn to the issue of a work-related suicide following a series of recent high-profile cases attracting media attention. You may recall the horrific case of Jaysley Beck, a Royal Artillery Gunner, who at just 19 years of age took her own life, having received more than 1,000 messages and voicemails from her boss in October 2021. In November, the number of messages increased to more than 3,500 and was described as 'a sustained campaign' of controlling sexual harassment. In an internal armed forces inquiry, it was found that the intense period of unwelcome behaviour

from her boss was almost certainly a causal factor in her death'.⁷

In another high-profile case, Ruth Perry, a 53-year-old Headteacher at Caversham Primary School in Reading for 13 years, took her own life after she was informed that the school would be given the lowest possible Ofsted rating, downgraded from 'Outstanding' to 'Inadequate'. Last December, Heidi Connor, the Senior Coroner for Berkshire, found that Perry's suicide was 'contributed to by an Ofsted inspection carried out in November 2022' at the school that she led.^{8,9,10}

Cases such as these have contributed to a groundswell of those now calling for all work-related suicides to be investigated by the Health and Safety Executive (HSE), and have created arguably long overdue wider public discussions about this emotive topic (there is scant discussion of why work or working conditions might drive some employees to suicide). Unsurprisingly, this is something that bereaved family members and colleagues have been seeking for a very long time.

I find it inexplicable that if an employee is killed at work by a machinery accident, there will be an investigation carried out by the HSE, but not if, for example, an employee dies by suicide having hanged himself in the warehouse at work. It has the effect of silencing everyone – there is quite literally nowhere to take a suicide at work – no investigation – no questions asked – no answers provided – just a deafening silence which adds to the trauma of the suicide because it can feel as if nothing of any importance has happened.

Landscape beyond the UK

I was curious to see how other culture and nationalities deal with this difficult issue. Interestingly, the Japanese have terms both for death from overwork ('karoshi') and work-related suicide ('karojisatsu'), each of which is defined in law, largely in relation to excessive hours of overtime work.¹¹

In the US, suicide is considered a fatal occupational injury if certain criteria are met, which includes the suicide occurring both at and away from the workplace.¹² And, in France, since 2000, a suicide has been *presumed* to be workrelated and subject to further investigation where several criteria are true, including circumstantial evidence and if the person is wearing their work clothes.¹³

However, in the UK there is no official recognition of a 'workplace suicide' and in guidance offered by the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR 2013), it states that suicides are 'not reportable', although

'I find it inexplicable that if an employee is killed at work by a machinery accident, there will be an investigation carried out by the HSE, but not if, for example, an employee dies by suicide having hanged himself in the warehouse at work'



the same regulations require the reporting of any death which arises as a 'result of a work-related accident'.14

Often when I arrive at a workplace, I am quickly viewed as a trusted confidant for people who want to discuss their theories about the tragedy. There are recurring themes that seem to go beyond rumour and speculation, and which fit with much of the research into work-related suicides which has featured in *Hazards Magazine* in recent years. In a Special Report published in 2017, it found that the top factors responsible for workers being driven to suicide seem to be bad jobs with too much work, too little control, or poor or punitive management, unfairness at work, emotional labour, trauma, work-related harm, and hazardous substances that affect mental health and access to means.¹⁵

It's important to state that it's not all bad practice – I've met some courageous people in organisations who have managed the situation to the absolute best of their ability, with humanity and empathy, improvising even when the death has occurred within the Christmas holidays, or when they themselves have been away from work. The suicide of a team member is an incredibly difficult situation, and can be particularly hard for line managers who feel the impact as profoundly as any of their colleagues, but also have to carry out the task of keeping the business going.

What is suicide postvention?

It's why I advocate for suicide postvention. The term *suicide postvention* refers to the actions taken to support people affected by a suicide death in the workplace when an employee has taken their own life, regardless of where the suicide took place. A well thought out suicide postvention plan will be one of the most powerful suicide prevention activities of them all. Regardless of any workplace culpability, postvention maintains its focus on how we can support survivors, prevent contagion, address root causes, reduce stigma, build resilience and improve education and awareness, leading to policy and system change where they are needed.

Ideally, organisations will already have a psychological trauma support policy, and a suicide postvention plan can simply sit within this. It requires identifying individuals in the business who will act as the postvention committee. These individuals will be crucial to developing guidelines specific to their workplace and are responsible for implementing postvention plans in the event of a suicide – they will be widely known within the organisation as the first, and only point of contact whenever a suicide or suspected suicide death occurs. It can be helpful if

someone on the committee has had personal experience of suicide or the organisation might consider involving someone externally, such as a critical incident stress management (CISM) workplace specialist.

Committee members will then undergo training in aspects related to a suicide at work, including: how to respond, protocols and procedures, how best to use any support resources eg occupational health, EAPs etc and identify any gaps or areas needing further attention. The committee will also nominate a member who will be responsible for all communications made with the family/next of kin of the deceased.

To summarise, suicide postvention is a crucial aspect of a comprehensive suicide prevention strategy. It not only provides support to those affected by a suicide but also helps address the root causes and risk factors, ultimately contributing to the prevention of future suicides.

In the absence of any postvention plan, my immediate advice is to throw out the playbook and simply be human. A suicide death is not a normal 'death in service', nor should it be treated as one. While we know that people's needs may be high, we simply can't know what we need during such times. Placing the onus on individuals to seek support assumes that those experiencing trauma symptoms can appropriately identify and articulate what those needs are. We know this is not true – and that's why suicide postvention is so vital for business, regardless of what business it may be.

Closing thoughts

A workplace suicide has the longest tail of all – by this I mean, it has the potential to come back and touch us when we least expect it. While there has been so much messaging about the prevention of suicide, I think employers are missing an opportunity to learn the lessons that could help us to respond better when a suicide does take place. If we can lean in to the discomfort and help our organisations talk about what happens after a suicide, we may find that we can learn more about some of the common threads that can lead some people to take their own lives. In doing so, we could learn much that would help those who are left behind.

If you have an idea for a possible article for *BACP Workplace*, the editor would like to hear from you. Please write to: editor@bacpworkplace.co.uk

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Jane Moffett (MSc Coaching and Behavioural Change) is an executive coach and facilitator. She focuses on career transitions and runs parental returner coaching programmes within organisations, to ease the transition back to work after parental leave. jane@kangaroocoaching.net

Jane Moffett explores the cycles of life experienced by women when it comes to the career and life choices they make. Looking at career life cycles through a different lens, she suggests it's time that employers did too

ecently, in conversation with a colleague who'd spent her career in the corporate world of HR, she used the term 'career life cycle' while we were discussing the stages of a woman's career. This term made me think. And so, I went off to research the 'career life cycle' online. I found that there are five stages in the 'standard' definition of a career life cycle, including: 1. Exploration; 2. Establishment; 3. Mid-Career; 4. Late-Career, and 5. Decline. However, having

devoted much of the last few years to coaching and researching women in mid-life, this five-stage model bears little resemblance to the careers of the women who I encounter in my work.

Time to rethink?

In July last year, an article in the *Financial Times* reported that three out of four mothers now work, and that the number of working mothers now outnumbers women who don't have dependent children.2 If organisations are basing their learning and development, and career progression programmes around these five stages of a career cycle (and if they are not necessarily applicable to women - particularly their female employees who are mothers), isn't it time for employers to start thinking differently?

A look at women's career theory makes interesting reading. The common thread that runs through a variety of different career theories is that women's decisions are relational - in other words, when making decisions, career and larger life contexts are closely linked.3 How these different decisions play out will affect that woman's career life cycle. Women's developmental psychology also highlights the importance of relationships to growth and development, and acknowledges that careers are often pursued with renewed vigour once less time and energy is needing to be invested in family concerns.

Boundaryless careers

Instead of the five stages, women's careers are seen as being in three stages - early, mid and late - which are categorised by challenge, balance and authenticity (respectively). This is questioned, however, by researchers, Lisa Mainiero and Sherry Sullivan, with what they call 'Kaleidoscope Theory'. They maintain that there are the same priorities of relationism, authenticity, balance and challenge, but think that these are movable and shift at different times – a bit like looking through a kaleidoscope and seeing the different shapes arranged in different formats each time. Women's careers thus become 'boundaryless', which means that they are not linear, steady and 'upward', and are motivated by self-fulfilment, and getting the right balance between work life and non-work life.

For boundaryless careers to be successful, the competencies of 'knowing-how, knowing-whom and knowing-why' are needed.5 The 'knowing-why'

Practice

element can easily be served by women's tendency to re-assess, and work out what is important to them at different times. However, the 'knowing-whom' and 'knowing-how' elements are often negatively impacted by career interruption because the opportunities to network and to retain existing skills, gain new ones, and be challenged, are not readily available.

Reflecting on the research I've engaged in over the last decade into women's working lives, I found the description by Mainiero and Sullivan outlined above to be familiar and feel it warrants further exploration here.

The first 'career interruption': becoming a working mother (a time of 'balance')

When women become mothers, they undergo a deep psychological shift which can result in a change in self-identity, values and priorities both outside the workplace and within it.6 As the sociologist, Lynn Millward writes, 'there is nothing so private yet also, so public, as motherhood in Western society'.7 While many organisations have enhanced maternity pay and updated family leave policies - meaning that some women can often afford to take longer maternity leave than previously - the impact of this extended length of time out of the workplace, and the psychological transition that the woman has gone through, is often not adequately recognised. Although women strive to re-establish their 'viable employee identity', they may be doing this in the context of a lack of understanding of their needs, which could include needing to re-integrate into the workplace, to upskill, to re-build confidence, and come to terms with leaving their baby in the care of someone else.7

When I interviewed women who received coaching around the time they took maternity leave, and after they returned from it, a key theme was the lack of acknowledgement from managers and colleagues that their lives had 'fundamentally changed'. Some of the women felt that it would have been beneficial if their managers had received coaching or training to increase their understanding about the impact that this life transition can have on women. In a piece of research into what helps and hinders new parent employees to return to work, flexibility and friendliness of colleagues was highlighted as being key to rebuilding confidence, and aiding with re-integrating back into work as a new parent employee.8 This aspect of rebuilding confidence was seen to be key, with women suggesting that an onboarding programme, where people returning to work follow a process to help them become integrated back into the organisation, becomes standard. It helps staff to get up to speed with system, company and workforce changes, and refresh their existing skills.

Being able to find a sense of balance while navigating a return to the workplace after maternity

'This phase of 'post-menopausal zest' is contrasted with the late career of men's, which is categorised by 'stability, maintenance and decline'

leave was felt to be crucial. Women talked about having to decide what compromise was right for them, in order to achieve the balance that they wanted. This fits with the research on work/life conflict, which recognises that this occurs when work and family roles are important to someone's self-concept, and balance is difficult to achieve. With the conflict between work and family relationships being greater for women than men, many working mothers make the decision to leave the workforce for a time, feeling that 'something has to give', and making the decision to stay at home because it is the 'best thing' for everyone. 10

The second 'career interruption': taking a career break

Research on the topic of women who have had a career break shows that the length of the break has an influence on the employment needs and choices of those women returning to the workforce. The 'knowing-how' and 'knowing-whom' are significantly negatively impacted at this time, as women don't have the opportunity to network with fellow professionals in their field, and are in an environment (the home) that is not conducive to keeping their professional skills up to date. When I interviewed several women who looked back on this time, they felt very keenly a lack of confidence in their abilities – even basic ones, such as their ability to have a conversation.

However, this time of not being in the workplace can also offer women an opportunity to view things from different perspectives, to change their mindsets, re-assess their values, and try out different things (often in a voluntary capacity). In many ways, they were experimenting with what being 'authentic' meant to them, and realising what they needed to have in their lives when they did return to work.

The third 'career interruption': changing direction

For those women who don't leave the workplace, but still suffer from work/life conflict, or decide to re-assess their situation, the decision to work part time, or to change direction, is often the choice that they make. This might be when the children are young, or when they are in their teens (and have different demands). Some of the women who I've spoken to choose to leave their high-level, highpressured roles to become contractors, or to run their own businesses, thus having greater flexibility, and/or the opportunity to follow their passions. This fits with the third phase of women's career development as being that of 'reinventive contribution'.3 This phase of 'post-menopausal zest' is contrasted with the late career of men's, which is categorised by 'stability, maintenance and decline'.

Dr Lucy Ryan, author of Revolting Women – Why midlife women are walking out and what you can do about it (see page 28) highlights three key reasons why women in their 50s are leaving the workplace in unprecedented numbers.¹²

Firstly, ageism – and especially gendered ageism – is often at play. Organisations tend to focus on training and development of their younger employees – to the detriment of women in their 50s who are still interested in progressing their careers (and could be bored). While older male employees are often considered to be wiser, women tend to be 'quietly written off'.

Secondly, this midlife phase is a time for women when several factors can have an impact on how they are at work. For example, the menopause with its potentially myriad of physical and psychological symptoms (including low confidence, anxiety, forgetfulness and brain 'fog') supporting older children with mental health challenges and caring for ageing parents. Several of the women I interviewed for my research cited the latter as a reason for shifting from full time to part time, or for stopping work entirely. Understanding that this life phase is a temporary one is important, as once this time has passed, confidence has returned, and caring needs have decreased, women are often re-energised and wanting to expand their horizons - either within their organisations, or by doing something new.

This was borne out in a study conducted by researcher, Kathleen Soriano for the Arts and Humanities Research Council (AHRC) on the number of women who left senior positions in organisations in the arts.13 Contributing to their decisions to leave and set up their own business, women expressed that it felt like the right time to 'carve out another path', and to reconnect with their original passions. They were thus combining their knowledge, experience and skills with strong personal motivators, and forging a new career direction for themselves.

So, what happens now?

Returning to my earlier question about whether it's now time for employers to start thinking differently, it probably won't surprise you to read that I think the answer is yes, definitely. It's time for organisations to wake up to the

realities facing their workforce, to think about career life cycles, and to make sure that they are not based on the model of a man's career. Organisations need to take time to think, plan and promote a variety of programmes and opportunities to tap into the changing potential of women in the workplace.

What can employers do?

Regardless of the size of the organisation that you work in or for, here are some things that you can consider and bring to the discussion table:

- offer coaching or mentoring programmes for women going on maternity leave, plus training for their line managers
- truly commit to work/life programmes that acknowledge that women make 'work-lifestyle' choices, rather than just having 'family friendly' policies¹⁴
- value and use the added skills and perspectives that women returning from a career break will bring
- encourage alumni networks so that women who are not working have the opportunity to meet with fellow professionals
- design training to help experienced women to re-enter the workplace
- provide the opportunity for work that is challenging at every stage of a woman's career – and focus on career development, even in midlife
- harness the wisdom, energy and commitment of post-menopausal women
- notice and eradicate ageism, and particularly gendered ageism.

If we can all think in a way that includes the 'kaleidoscope' view, and that the personal configuration of balance, challenge and authenticity – against the backdrop of relational decisions – is forever changing, then we are increasing opportunities for women – and for organisations.

If you have an idea for a possible article for *BACP Workplace*, the editor would like to hear from you. Please write to: editor@bacpworkplace.co.uk

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Letesia Gibson is founder of New Ways, a consultancy supporting organisations that seek to embed cultural change. It was set up with a vision to support both businesses and charities to step into new and better ways of working that are fit for purpose for a progressive, diverse Britain.

www.timefornewways.com



Letesia Gibson asks: at a time of trauma and crisis, how should ethical leaders respond?

he world seemed a dark place as 2023 drew to a close. In the UK, the struggles are felt in everyday ways as the cost of living crisis worsens. We feel the lingering impacts of the pandemic on our wellbeing and that of our children's mental health. Our public services are limping along, barely in survival mode. Division is on the rise, and blame, and even hate, create a hostile environment for the most vulnerable and disadvantaged.

And then, an event happening somewhere else in the world, requires that we stop whatever it is that we are doing and turn our attention urgently, to work out what we can do in our own small way to help. I'm talking, of course, about the ongoing horrifying events in Israel and Gaza which have posed some critical questions for leaders in all kinds of different organisations.

In the process, it brings a fresh focus on what ethical leadership in action actually looks like and it's raised many questions. At New Ways, the consultancy that I lead, we've been working closely with leaders to help them navigate this even more complicated new world. We've explored questions including: What is the role of the organisation in supporting trauma and wellbeing in a connected world where all kinds of different traumatic events and crises are affecting our workforce? What does it mean to support wellbeing at work when people are already stretched to the limit and working at capacity? In this new climate, how can we build cultures of belonging at work that really include

everyone and create a safe environment for every identity?

A new workplace context

Looking at the bigger picture, it seems that we are in a transitionary time - in our relationship to work and to the expectations that we have of our employers and leaders, and this will have important implications for ethical leadership in 2024. Interestingly, trust in workplaces, relative to governments and media, is at an all-time high1 but this comes with new expectations of how our leaders behave and what they speak up about. There is a desire to see leaders who are more socially aware, responsive to the different needs of groups, who genuinely care about the societal issues that are affecting a challenged and not-so-Great Britain. People are asking their leaders to speak out about things that matter, and to work with employees in partnership to create change within the workplace when issues arise. This is about ethical leadership in action.

Moreover, some might say we are in a wellbeing crisis. The impact of adjusting to remote and hybrid work, and what this means for workload and work interactions, the legacy of trauma from the pandemic, and the everyday reality of living through rather depressing times is being seen in everyday ways in workplaces. People are stretched and overwhelmed. Recent wellbeing

research by Deloitte² shared some stark data highlighting the extent to which employees were finding work more stressful, exhausting, and even contributing to loneliness, compared to earlier years. People's capacity to cope is even more concerning, with 36% believing that their managers don't care about their wellbeing, with others finding rigid structures and policies, unsupportive cultures and inadequate training, blocks to better health.

What's on leaders' minds?

At New Ways, we hosted a series of conversations with leaders to explore what the Israel-Gaza conflict meant for their workforce. We looked at how they could support their people. how to talk about the conflict, and discussed the issues that were emerging in their workplaces around their employees' experience of belonging and inclusion. We also shared our wider learnings about what staff support should look like during times of high stress and high need, when enabling safe environments and genuine belonging for all is all the more complex.

Collective trauma

Leaders shared the collective trauma they were observing in their teams and also experiencing themselves. There's a whole array of emotions that don't really have a place within the workplace – anger, despair, rage, hopelessness, grief, sadness – and many of us are feeling them, yet these are emotions that have no place to go. This needs to be understood in the context of how it can trigger generational and historical trauma from the Holocaust for Jewish colleagues – and there will also be echoes for other team members who have been affected by war. The desire and need for collective moments of healing were palpable but it was hard to see how this could be facilitated in a safe way, because there was so much fear of sharing different views and beliefs which could harm or upset others.

And while some are feeling re-traumatised with constant exposure to news feeds of violence and video clips of stories of Gaza and Israel, others are in news avoidance mode in order to support self-care. This means that while some people are full of pain, their colleagues may be disconnected from how events are unfolding, and what impact this is having on their teams.

The taboo of religion

While ethical leaders will focus on different aspects of equity, diversity and inclusion, religion hasn't always been central, perhaps apart from the provision of spaces for prayer and awareness of religious dates. The well-known phrase, 'avoid politics and religion' denotes the underlying risk that can be associated with it. This has meant that not everyone is clear about who needs support and how to offer it.

The problem with silence

In our conversations with leaders, we noticed that there was a lot of fear stopping people from talking openly or freely. There was a sense of overwhelm and sometimes shame at not feeling more equipped as leaders, a longing for a deeper understanding of the history and its modern-day consequences in our globally connected, decolonising world. There was also anxiety about being seen to take sides, which sometimes highlighted personal conflicts.

Where there is division, we need people with the skills to bridge differences in order to build firm foundations to create cultures of belonging

This has created uncertainty about psychological safety and belonging, especially for those with personal connections to the conflict. People reported feeling alone, unsure of what their colleagues felt or where they stood, questioning whether they would understand each other's experiences or see them as valid, unable to share or express feelings and lacking solid ground on the shared values that once existed.

Multiple truths

Of course, if we want to create environments of true belonging, we must get better at acknowledging and respecting multiple truths at work. This means moving away from binaries and embracing the grey and messy. This conflict has many complexities - violence and war, historical trauma, national guilt, decolonisation, racism and antisemitism. There are various narratives informing beliefs. This isn't to say that leaders cannot have a point of view, but supporting the growth of our ability to work with multiple truths at work is vital. This will need investment in developing new interpersonal skills to give people the tools to do this.

Collective wellbeing

The shared experience is the traumatic impact and the need for healing. While this may not be the realm of organisational responsibility, questions do need to be asked about to what extent do workplaces want to support their teams when crisis is increasingly becoming the norm? Burying our heads in a myth that separation of personal and professional is possible, will only lead to more silence and separation. There is also an ethical question facing us all about our need to up our game when it comes to supporting wellbeing, and shifting the narrative from personal responsibility to collective growth. In the process, we might be encouraged to explore different ways of giving this support, such as embracing somatic practices and perhaps healing modalities which are not typically used in the workplace context.

Finding new depths of belonging

Where there is division, we need people with the skills to bridge differences in order to build firm foundations to create cultures of belonging. We need to be developing leaders and managers to be bridge builders, with new skills to help people overcome the ways in which we bring bias to those who are like us and resistance to those who are different. Shared values are important in any organisation, and we need to find ways to foster these in a more fundamental way because it helps to bring people together around a shared purpose and way of behaving at work.

A way to lead

Ethical leadership is about so much more than being a good person or a strong role model with good morals. In 2024, it demands that we explore how our sense of morality, responsibility and ethics are shaped by our lived experience, our bias and our workplace culture which is based on an outdated notion of work. We need a healthy questioning of how centuries of putting 'the West' at the centre impacts all our ideas and beliefs of what is right and good. These are big questions for anyone leading, as well as for those choosing where to work. But they are essential guestions for anyone who is involved in creating a sense of belonging in our workplaces, which after all, is really a collective project for us all.

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Just over a year ago, **Juliette Moxham** wrote an article for *BACP Workplace* about why she stepped back from being a headteacher of a primary school in Gloucestershire to retrain as a counsellor. Now a newly qualified counsellor, she is working with the public sector workforce and establishing her private practice. She talks to **Nicola Banning** about finishing her training and starting out in the profession

Juliette Moxham is an affiliate counsellor with Gloucestershire County Council and has her own private practice based in Cheltenham. Prior to training as a counsellor, she worked in education for 28 years as a primary teacher, school advisor, SENCO and latterly, as a headteacher. www.juliettemoxhamcompassionatecounselling.co.uk

NB: Welcome back to *BACP Workplace*. How have you found the final year of your counselling training since we were last in touch in October 2022?

JM: My second year of counselling training, muchlike the first year, continued to be an amazing experience. The workload was intense, and at times overwhelming. I never felt that I wanted to give up, but I often felt exhausted and emotionally drained. Juggling the workload, including the weekly

workshop every Thursday from 4pm to 9.30pm, monthly Sunday workshops, weekly personal therapy, counselling at two different placements, which involved two lots of supervisions on a fortnightly basis, plus writing the weekly learning journals and completing the assignments, I often felt I was on my knees crawling through treacle. I pondered to myself when the tutors talked about the importance of self-care, and found myself thinking; how and when? This was particularly concerning because of my previous health scare, and my consultant's recommendation following my all clear from cancer that I needed to manage my work/life balance.



22 BACP Workplace | January 2024

However, I knew that juggling a heavy workload and the pressure of assignment deadlines wasn't going to last forever. Crucially, although I found the counselling training tough, overwhelming and intense, I loved it and there was nothing else I wanted to do. During the second year, I recognised the need to release myself from the jaws of perfectionism. This is something that has plagued me throughout my working life, particularly in my headship role, forcing me to often to stay up too late writing and rewriting reports, school improvement plans, and research projects. During the second year of the counselling diploma, I knew I couldn't complete all of the work required to the standard I wanted to — there just weren't enough hours in the day.

Through my own counselling sessions, I grew to understand myself and learnt to accept myself as someone perfectly imperfect and good enough. Sometimes I handed in weekly learning reviews that were rushed (shock horror!), and I didn't read as much as I would have liked to have done for the assignments (double shock horror!). However, I was content in the knowledge that as long as I did my best, that was all I could ask of myself.

NB: What have been the highs and lows for you as a trainee and adjusting to life after being a headteacher?

JM: The most fulfilling moments have been receiving feedback that clients have found the counselling sessions to be life changing. At first, I struggled to believe that the six-session model could have such a profound impact on people's lives. But it can. When I first started as a trainee counsellor, I believed that clients would need many more sessions. And in some cases, this was true.

However, I've worked with clients who felt that six sessions of counselling have made a profound and positive impact on their lives. I've experienced clients who have found the courage to make important decisions, such as applying for their dream job and being successful, and as a result, their lives have changed exponentially for the better. To share the joy of clients when they tell me of their successes, is a wonderful thing.

Of course, I've had some low moments too. I once forgot to check the counselling room properly before the session began. I was fixated on checking the clock was working properly, (as it had stopped during a previous session), and as a result I didn't realise that there wasn't a box of tissues in the room. When the client started crying, I didn't have any tissues to offer them. I was so angry with myself and very frustrated. In that moment, I realised that I had checked the room from my own frame of reference, rather than the client's. I took this to supervision as I felt I had let my client down badly — I had put myself first, rather than the client, and I considered this to be poor practice on my part.

My supervisor was very understanding. She said it is normal to make mistakes when we are learning

'I would say that the training to be a counsellor is not for the faint-hearted. Be prepared for a roller coaster journey, where at times you will feel you are overwhelmed, fearful, frustrated and broken'

and that it was a common one that many trainees make. Since then, we developed a room checking system, which I now implement at the start of each day, and I have found this to be really helpful. Reflecting on this occasion, it illustrated how hard I can be on myself, and this is something I continue to work with.

Overall, adjusting to life after headship has been a joy, and since qualifying as a counsellor, I have a much better work/life balance. There's time for my family, friends, trips to the theatre, cooking, holidays in term time (which are both much cheaper and guieter). I have also started running and recently, I completed a 10k run. The time for myself, my family and friends that I once sacrificed in order to ensure that the pupils at my school had the best opportunities, I can now enjoy instead. This doesn't mean that I regret working as hard as I did as a headteacher, because I can look back and know that I did the best that I could for all my pupils. But from now on, I can really focus on what is best for me.

NB: Overall, how was your workplace counselling placement?

JM: I loved my workplace counselling placement at Gloucestershire County Council (GCC). I had a wide variety of clients, supporting people through anxiety and depression, workplace challenges, bereavement, and difficulties in relationships. I found it supportive and I could go to the manager or my supervisor with any problems or concerns I had, and they always found time for me. The administrative team were also great and would help me with printing and photocopying on the occasions when my home equipment wasn't working.

NB: What are you learning from your client work?

JM: Without exception, my clients are good, kind, hardworking people who lead busy lives and have little time just to be. Having a confidential, safe space in which they can talk openly, sit quietly, reflect, and just be themselves in the moment, is helpful for them. I am also learning that there are a lot of people pleasers out there (which may

be because I work with a lot of professionals who are helpers or carers), who rarely consider their own needs. There are so many negative outcomes to people pleasing, including loss of identity, relationship problems, and overworking which often leads to further stress.

Workloads in the public sector are very high, and people will never get to the end of their to-do list. So, if you are a people pleaser, you need to have firm boundaries or your wellbeing is very likely to suffer. This resonates with me because I struggled to maintain boundaries in my professional life. As a headteacher, I worked late into the evenings, would often go to school at the weekend in order to catch up on work when it was guiet, and I would use the holidays to oversee school onsite projects, such as the installation of new playground equipment. Therefore, I can offer this insight with congruence and empathy for myself and others.

NB: What are the challenges of the workplace setting as opposed to other settings in which you work?

JM: Previously, as a trainee counsellor on a placement with GCC, and now having made the transition to work as an affiliate counsellor, I've found the organisation a fantastic place to work because of the supportive team and the interesting client work. However, as with all large organisations, established processes and systems are essential to get the work done, and this means change takes time. This isn't necessarily a bad thing, because slow change is more likely to lead to lasting change. However, it is the management that make all the big decisions, and I'm aware that as a counsellor, my capacity to facilitate change is limited. I had a second placement at Hereford Mind which is a much smaller organisation and as a result, it is easier to be heard, voice your opinion and influence change within the organisation.

NB: Is there anything that you draw on from your experience as a headteacher which supports you in your new role as a counsellor?

JM: A big part of headship was about building strong, positive relationships with pupils, staff, parents and the community. The skills of communication, active listening, empathy, self-awareness, and respect are vital in order to do that successfully - and also fundamental to the counselling work. I understand the demands on the public sector, the culture of the organisation and the vocational nature of some of the work. I think this can be a helpful insight in my client work.

NB: I know that it was ill health that led to your decision to step back from headship. so how is your health now?

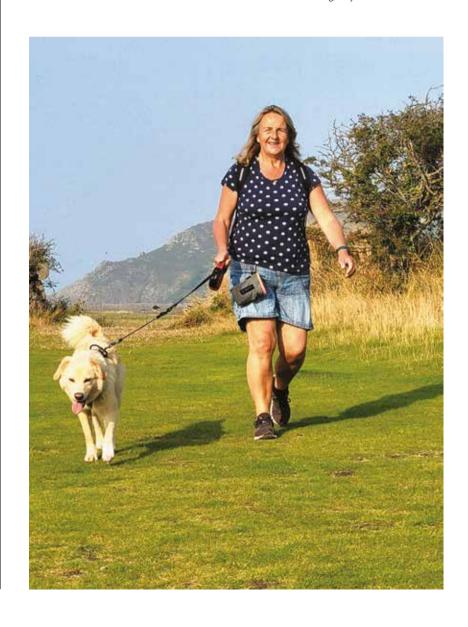
JM: My health is much better than it was towards the end of my headship career. A recent blood

'Overall, adjusting to life after headship has been a joy. and since qualifying as a counsellor. Lhave a much better work/life balance'

test showed that I continue to be completely cancer free and this is fantastic. My own health and wellbeing are a priority for me now. I understand the importance of looking after myself; using the aeroplane analogy - I make sure my own oxygen mask is snugly on and fitting comfortably before I help others put theirs on.

Also, I have Solly, my dog, who is fantastic at making sure I do two good walks each day. I have learnt that counselling involves a lot of sitting down inside, so it is important for me to get out in the fresh air regularly. Solly has her guirks as I think all rescue dogs do. In particular, she doesn't like men in hats or beanies. At first, this bothered me

Below: Juliette and her dog, Solly



because I wanted her to like everyone she met, which I now realise was the old people pleaser in me. I now understand this is not going to happen and that it's OK. Men just have to take off their headwear if they want to stroke her!

NB: As you increase your experience and counselling hours, do you have a sense of the direction you'd like to take as you establish yourself as a newly qualified counsellor?

JM: I am very much enjoy working for GCC using their six-session model approach. It has given me a wealth of experience in many different areas of counselling. However, since I qualified, and even as a trainee, I was aware that I am drawn to relationship counselling. All my learning has shown me that healthy relationships are fundamental to a person having a good life So many of my clients struggle in relationships with themselves, family or work colleagues. It is well evidenced that unhealthy relationships lead to unhappy lives and health issues.

Improving relationships has a significant positive impact on the client, and so I am delighted to have been accepted onto the Level 5 Post-Qualifying Certificate in Relational Counselling with Relate which begins in February 2024. I know it will be a lot of work, but I believe learning to counsel couples rather than individuals will be fascinating, and challenging. Honestly, I can't wait and I am itching to get started.

NB: How supported do you feel by your professional body, BACP?

JM: I find BACP's website to be a useful and supportive tool that holds such a wealth of material, and I enjoy reading the journals, particularly BACP Workplace because of my links with supporting the public sector workforce. Personally, I would find it helpful if BACP had a co-ordinator for new members and student members, whose role it was to encourage new members to engage with the organisation. It could be rather like a member of the school Parents, Teachers and Friends Association (PTFA) who helps provide support and encouragement to new parents who may feel daunted by the school processes and expectations. I would like to engage more with BACP, but it is about knowing where to start, and when life and work get in the way, I don't prioritise this.

Tell us about your workplace

If you have thoughts about any of the issues raised in this interview or would like to talk to the editor about your workplace, we would like to hear from you. Please email Nicola Banning: workplaceeditor@bacp.co.uk

'I understand the demands on the public sector, the culture of the organisation and the vocational nature of some of the work. I think this can be a helpful insight in my client work'

NB: Well, you're contributing to *BACP Workplace* about your journey to become a newly qualified counsellor and that's valuable. I wonder, is there anything you miss about your old life as a headteacher?

JM: The build up to Christmas is a wonderful time at primary school. There is a real buzz around the school as children rehearse, and then perform productions and concerts. Decorations are strewn everywhere, it is such a joyful time, and that is what I miss most as my build up to Christmas is much quieter now.

NB: How are you approaching the next phase of your professional life?

JM: Whatever I do professionally, I need to make sure that I have a work/life balance, and that I don't develop old habits of always putting work first at the expense of my wellbeing. I know that, as a counsellor, it is essential that we look after ourselves, because we serve our clients best when we are feeling our best. So, since qualifying, I do take time each week to reflect on how the week has gone, my workload, areas of challenge and whether tweaks need to be made. I'm also continuing with my own private counselling as part of my self-care, and I find this really helpful.

NB: Do you have any advice for other professionals who might be thinking about retraining as a counsellor?

JM: I would say that the training to be a counsellor is not for the fainthearted. Be prepared for a roller coaster journey, where at times you will feel you are overwhelmed, fearful, frustrated and broken. However, this will be coupled with feelings of joy, elation, pride and success. It is a tough road to take, training to be a counsellor, but so worth it.

Cyberwork

Creating team health in tough times

Sarah Worley-James

Worley-james@cardiff.ac.uk

o often a new year brings fresh challenges – and, in all the excitement (and even with everything I know about the importance of endings), I find it too easy to forget to create a proper ending. I say this, as I've recently been appointed as the manager of the Counselling Service at Cardiff University – and, I'm trying to create more conscious endings while I adapt to my new role, responsibilities and workload.

Which is my way of letting you know, that after eight years of writing 'Cyberwork' when online counselling was still a long way from being 'the norm', I've decided it's time to hand over this column to another online therapist. But before I do so, and as a way of consciously ending, I'm going to pop on my manager's hat and write my final three columns.

One of my priorities as a manager is the wellbeing of my team, particularly as they are all working to a hybrid model, spending time working in the office and at home. They are almost all part time, and the opportunities to physically connect with each other are limited - meaning the potential for isolation is increased. Wellbeing can be exacerbated by the nature of online counselling, and the demands of organisations to work to a brief therapy model - focusing the goal of counselling on getting an employee back to work, or to a place of more effective working again, can be additional strains.

There's a recognition that complexity in clients' presenting issues; including suicidal thoughts and attempts, multiple mental health diagnoses, and increased awareness and understanding of neurodiversity, has become the norm. It's a complex picture which can add potential

layers of stress for counsellors who are finely balancing competent and ethical practice, within the confines of limited sessions and increased demand. It's likely to impact the health and wellbeing of a counselling team, and their need for support from their managers.

It's my role to respond and to support the counselling team to provide effective, ethical therapy to clients with complex issues within a brief therapy model, while also balancing the expectations and pressure from senior management (who will rarely have a counselling background). While ensuring that the service needs are met, I must also continue to support the career development of the team, staying with the team's CPD needs, all from a core position of robust self-care and wellbeing.

I find it helpful to borrow from my approach in counselling, and I ask myself – What do I have control and influence over to ensure that my team feel valued and supported? Simply put, I check that they are given space for admin, training, screen breaks and self-care, and that these are prioritised, instead of squeezing in an extra couple of clients in a week. As managers, it's so easy to fall into the trap of focusing on the numbers on a waiting list, and to pass this pressure and anxiety onto the team we manage.

And, when managing a team who are working remotely, we can overlook the impact of this on the individual counsellor, missing vital clues that they may be struggling to cope with increasing amounts of admin created by complex client needs, or by the introduction of new case management systems.



This can be exacerbated if the counselling team rarely get to see each other; opportunities to make strong collegial relationships, to share challenges, offload and support each other will be missed. My team have taught me that creating space to connect and share ideas and good practice, in a variety of ways, is of immense value to them. It has a knock-on effect on how they feel about their work, and the client satisfaction that results. It's a win-win, that focuses on the quality of the counselling, not the quantity of clients seen.

While I use the phrase 'win-win', I recognise that as manager, I cannot always meet the desired needs of all the team, all of the time. Instead, I draw on the principles, values and personal moral qualities outlined in BACP's Ethical Framework for the Counselling Professions to support me in how I approach my role as a manager. I relate to the team in the same way as I do with clients, demonstrating an openness to hear, striving to understand their viewpoint, value their strengths and individual qualities, being transparent and congruent in explaining my rationale, and having the courage to recognise, and acknowledge, when I have got it wrong.

In challenging times, it doesn't always feel enough – and yet I find, as a manager, it does help the team to feel more valued and when they do, they are able to create room for more self-care.

Sarah Worley-James *is the Counselling Service Manager at Cardiff University and author of* Online Counselling – an essential guide.

Title: Revolting Women: why midlife women are walking out and what to do about it

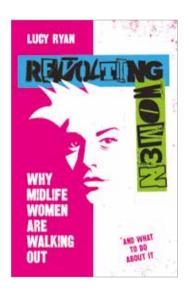
Author: Lucy Ryan

Published by: Practical Inspiration Publishing

Dr Lucy Ryan is a leadership coach, consultant, author and passionate advocate for women's professional development. Her doctoral research project explored the phenomenon of midlife for professional women, a long-standing data gap, and she published the bestselling book, Revolting Women in 2023. Lucy works with companies internationally to unlock the potential of this key talent pool.



Books



In Revolting Women: why midlife women are walking out and what to do about it, author and leadership coach Dr Lucy Ryan exposes the mass exodus of talent, experience and wisdom from corporate life as women over the age of 50 leave in their droves. She talks to Nicola Banning about her research, how she came to write her book, and identifies the steps that employers can take to reverse this costly trend

NB: Your book Revolting Women is about a demographic of women who are leaving the workforce because of the demands of managing midlife collision, including menopause, work and caring responsibilities for ageing parents/partners or children.

Can you give readers a sense of how big a problem it is? And, who is it a problem for?

LR: It is hard to precisely measure the extent of the problem, but some data give us a good idea. For example, the McKinsey & Company, in partnership with Leanln.org, Women in the Workplace 2022 report¹, says that for every female director promoted, two are leaving. In the

UK, we might have reached the 'holy grail' of 40% female non-executive directors on our UK Boards, but there has been a plateauing of employed female executives at between 11%—14%. These statistics haven't shifted for a decade, so we know that women — who are at the age and stage they could step up — are leaving, or being sidelined, or stepping back. And they are leaving not just because of the 'midlife collision', but also because the corrosive combination of ageism and sexism means that it is hard for many

women to make that influential step up to a senior leadership role.

The problem is for everyone! In my research, the women who left mainly did so because they had to, rather than they wanted to. Once middle-aged women leave your organisation, talent, knowledge and wisdom drains from the organisation; younger women lose their role models, and men lose the opportunity to problem solve and work in a gender equal collaborative environment.

NB: Why are so many employers seemingly willing to turn a blind eye to ageism towards female employees in midlife?

LR: It baffles me why there isn't an outrage about this so-called 'second brain drain'. If I had a positive hat on (often my preferred route!), I'd suggest that organisations just haven't looked at their data and recognised the extent of the problem. Perhaps it has crept up on them? With a different hat on, I'd posit that the status quo suits many organisations. To really address this issue, many businesses would have to look seriously at their strategic intent for inclusion and gender diversity at the top of their company. For many years, the interest in older women just has not been there - that's why it was so hard for me to find a supervisor for my PhD, a subject considered 'uninteresting' or 'unpublishable'!

NB: You interviewed many women in your research who were wanting to 'step up' at this time of life but were deemed 'too old' or lacking in some way by their employer. What are these women choosing or being forced to do instead? LR: You're right, 70% of the women I interviewed wanted to step up in current roles, or step back into an organisation at a senior level, and

couldn't get back in. Age was one reason, but a lack of flexibility was also another reason. We still have an unhelpful 'state of play' in the UK that a senior role demands full-time commitment. And plenty of companies don't budge on this - even to four days. Usually, women were choosing to set up their own company or build a portfolio career. That's why last year, 67% of new business accounts were opened by women over 55 (despite only 1% of venture capital funding going to women). Few were choosing to retire - far too much energy and interest to walk away from work!

NB: I've been a therapist for over 20 years and I'm now a funeral celebrant, and so, of course, I found your chapter on facing mortality particularly interesting. Why do you think an awareness/ anxiety of death is often more prevalent for women than it might be for men in midlife? And what role does it have in the decisions women might make?

LR: I was fascinated at the extent that women discussed death in the interviews. In fact, it was mentioned in every interview. It appears that women have more death anxiety than men because they face more 'loss' indicators at midlife. For example, with menopause, they face up to an end of fertility, and society tells them that their physical ageing is something to be fearful about. Through the centuries, society has not looked kindly on the older woman, hence the names, hags, crones and witches. It is also common for women to take more responsibility for elder care, therefore witnessing their passing and staring death in the face.

In my research, it seemed to have a major effect on their later decisions - often positively. Called the 'stealth motivator', an awareness of death can heighten the desire to do more with your life and ensure the next chapter counts.

NB: There is a myth that in midlife, women have more time at our disposal and less responsibility as carers - your book dispels this myth. Can you paint a picture of what midlife collision can look like for working women?

LR: Yes, the common misconception that women are 'footloose and fancy free' at midlife was certainly dispelled! The reality for most women I interviewed was a collision of circumstances at midlife. For example. Niamh talked about a lack of sleep from menopause symptoms, combined with looking after her mum with severe health issues, and her son with mental health challenges. Karen was looking after her pregnant daughter who had left her abusive husband, was recovering from breast cancer herself, and her mum had locked-in syndrome. Chris was recovering from a difficult divorce, financial challenges and a six hour round trip twice a week to care for her dad with dementia. It is rarely one issue that women face at midlife, and commonly up to five challenges at one time.

In my experience, midlife women are extraordinarily resilient and often cope with all of the above while working full-time. But there is often a trigger that means they need to stop. Even if temporarily.

NB: In your book, you write about how two women with knowledge of HR meet in a lift both experiencing intolerable pressure at work and from caring responsibilities. Can you describe what emerged out of that desperate conversation?

LR: It was an extraordinary meeting for these two women-both senior leaders for the same company, and both about to resign due to their own circumstantial collisions. In a chance meeting, they both got into the lift at the same time, and realised they were both about to walk away from the careers they had crafted and loved for many years. This was not an option they wanted, but life circumstances were too hard in the moment to keep going with a full-time role. They got out of the lift, sat down and had a coffee, and over coffee crafted a potential job share. They went back upstairs to their HR Director and presented an alternative solution; 'Instead of losing us both, have part of both of us!' This was eventually accepted and they became the first global job share example for this organisation. However, Lori, one of the women, was very clear that this happened because of a chance meeting; because they knew the HR system and because they knew

they were valuable. She said she was fully aware that had she not presented the Director with this solution, he would have said, 'sorry but goodbye' and replaced them both.

NB: There's a sense of outrage in your book about the ways in which women in midlife are treated by so many employers - when experiencing major life transitions - dying partners, parents and their own ill health. Have you come across any reasons to feel hopeful in how some organisations manage this demographic of women? LR: Ha! I'm determined to remain hopeful. There are certainly glimmers that organisations are starting to take this seriously and recognise that they have some major issues around gendered ageism that need to be tackled. And of course, so many organisations now have menopause policies and support groups, so we need to broaden the conversation to include further aspects of midlife.

NB: The final part of your book is focused on revolution and change. What advice can you offer to middle-aged women who may be experiencing midlife collision and who have an unsupportive employer?

LR: Know that you are not alone and try to network with other midlife women. Menopause networks are a good place to start (as they are being set up in organisations), even if your issue is not just about menopause. Know that the issues you face are temporary, and life will get better. Look after yourself though. These collisions can take a major toll on women, and sometimes you just have to 'press pause' and trust that you will find your feet again.

NB: And finally, what simple steps could an employer take immediately to address the exodous of women in midlife from walking out of their workforce?

LR: Perhaps not simple, but take the issue seriously and have a look at your data. Where are you losing women and why? Track your data and take them seriously.

Keep the women who are already slogging it out beside you. Have better conversations with your employees at midlife. Every revolution starts with a conversation! (so said Gloria Steinem). Consider midlife check-ins, rather than exit interviews (ask me for help on this one). Prevention is a surer route to retention! And gender proof your succession plan so you can build a strong gender-equal pipeline.

REFERENCE

McKinsey & Company. Women in the workplace 2023 report. McKinsey.com; 2023. [Online.] www.mckinsey.com/featuredinsights/diversity-and-inclusion/women-in-the-workplace#/ (accessed 11 November 2023).



I am employed as an in-house counsellor working for a large health organisation, and the company's counselling service offers short-term work for its employees. Over the last year, I've noticed that the number of clients accessing the service with suicidal thoughts has grown more significant, and it feels as if they are presenting as a higher risk than before. The service is always under pressure to keep waiting lists down, and these clients need and deserve a level of service that meets their needs.

How can I, as a practitioner and also as a part of this counselling service, improve my/our knowledge and processes for assessing risk and working with these clients? How do we balance the best interests of the client and the organisation to enable the counsellors to work safely and ethically? What do I need to consider about potentially having to breach confidentiality given the time-limited nature of the service?

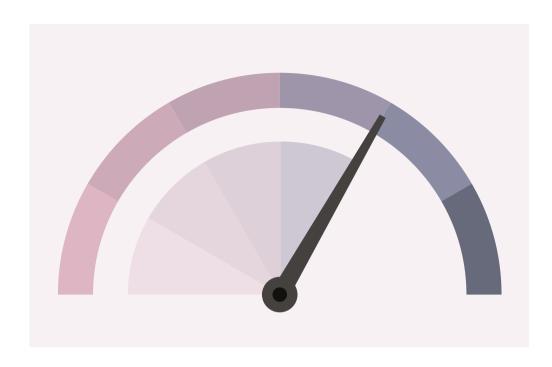


Sarah Prince is a
BACP senior accredited
counsellor/psychotherapist,
a supervisor, coach and
mediator. She principally
advises and assists
workplace counselling
managers and teams
to ensure ethical and
effective staff support.
www.sarahprince.co.uk

the heart of the concerns therapists face when working with suicide and risk. Many a therapist in practice, whether experienced or newly qualified, will recognise the complexities of working with clients who express suicidal thoughts. Your question is also timely as the efficacy of 'tick box' risk assessments has been challenged by the Royal College of Psychiatrists as being 'fundamentally flawed'.1 It is inherent in our profession to want to do the best and never more so when lives are in danger. The self-imposed pressure to 'get it right' in such emotive circumstances can challenge our confidence in our competence.

The need to assess risk

The probability of a client who has disclosed thoughts of suicide proceeding to complete suicide needs to be carefully assessed as to the level and immediacy of risk they present. That is, risk to themselves and/or risk to others. Using a psychosocial approach to gain understanding, which includes risk formulation, experiential observation and a thorough exploration with the client, will facilitate a holistic view of the client's world. This will then inform the client and counsellor of the predisposing, precipitating and protective factors to support the client. The Royal College of Psychiatrists



states that tick box risk assessments have the potential to categorise 80-90% of patients as 'no risk' or 'low risk'1, and the revised NICE clinical guideline, Self-harm: assessment, management and preventing recurrence², published in September 2022, states: 'Do not use risk assessment tools and scales to predict future suicide or repetition of self-harm'.

In any therapeutic relationship, the building of trust and a relationship is key to acquiring an accurate picture of how the client is thinking and feeling. Within the context of the workplace, 'risk to self and others' may take on

'The ability for the counsellor to approach the situation from a systemic perspective, considering all aspects of this three-way contract, is essential in the context of workplace counselling'

a more pertinent view to include duty of care and public protection for example, if an operator of public transport was a client deemed to be at significant high risk to themselves, they might by virtue of their role put others at risk.

Duty of care

It is a moral and ethical obligation founded in common law to look after the physical and emotional wellbeing of individuals in an organisation, or those who use their services. This places an onus on the organisation, via the counsellor, to ensure that the individual and anyone who discloses at risk behaviour can expect support from the organisation. This differs from a counsellor in private practice who may be able to justify a different approach to working with an individual at risk, as they do not hold an organisation's duty of care to the client, only their own.

Working in therapeutic practice within an organisation can raise legitimate concerns around protecting the client from monitoring from the organisation – for example, occupational health, human resources, line managers and union representatives. Again, I stress the importance of taking the client with you, in a collaborative approach, to optimise their care. In certain

circumstances, there may be very real risks to the client and others due to the nature of the work of the organisation. The ability of the counsellor to approach the situation from a systemic perspective, considering all aspects of this three-way contract, is essential in the context of workplace counselling.

Contracting and confidentiality

Clear and explicit contracting is key to any therapeutic engagement, and you should ensure that your client understands from the first session, the limits of confidentiality, the circumstances under which confidentiality may be breached, the process for doing so, and that you have a record of that agreement, signed by the client. Confidentiality is perhaps the ultimate tenet of our therapeutic work and any cause to breach that needs to be carefully considered, preferably with appropriate consultation, for example, in supervision. We often use the familiar phrase, 'harm to self and others' during contracting, but to provide a rationale for a breach, that phrase must be unpicked together with an understanding of 'immediate risk'.

It is always preferable to work collaboratively with a client and gain consent before breaching confidentiality. Even if that is not achievable, informing the client that their confidentiality may or will be breached (or has been), ensures our duty of candour.

BACP's Ethical Framework for the Counselling Professions³ exists to guide us in ethical decision making. I'd draw your attention in particular to paragraph 10, which cites 'exceptional circumstances', and paragraph 55d on 'limitations of privacy or confidentiality', with regard to breaching confidentiality. Other factors you will need to consider are organisational policy, wider safeguarding issues, and an understanding of capacity within a mental health context.

As with all therapeutic engagements, our record keeping should be 'accurate, adequate and relevant to what is necessary'. It's well worth reading BACP's Good Practice in Action resource (GPiA) 042, Working with Suicidal Clients in the Counselling Professions⁴, which acknowledges the difficult balance for practitioners when considering

breaching confidentiality. It helpfully suggests that notes may include the reasons why the practitioner believed disclosure was in their client's best interests, and the purpose of the disclosure eg referral for psychiatric assessment.

It suggests in those cases where a breach was not made collaboratively with the client, to keep a note of why it was not possible to gain client consent. This may be because the client was unable to give their informed consent at that point due to the level of their emotional and/or physical distress.

Organisational processes

Workplace counselling adds a third dimension to client work and to ensure clarity and openness between the service and the organisational needs, particularly with regard to duty of care, a standardised approach to risk assessment and case management is helpful to counsellors, clients and the wider organisation. Consideration needs to be given to what information is needed, how it is recorded, and when and to whom it might be disclosed.

Any risk assessment undertaken in this context needs to factor in a range of services, organisational, local and national strategies, standards, policies and procedures. A collective approach to understanding these could be gained through liaison with relevant stakeholders such as HR and occupational health, the results of which can inform at service level the process of risk assessment.

Managing risk

BACP's Workplace Counselling Competence Framework⁵ clearly identifies the factors to be considered in a comprehensive assessment, including: a systematic assessment of the demographic psychological, social and historical factors known to be risk factors for self-harm, self-neglect, harm to others and harm from others.

Having established that a holistic risk assessment may give the client confidence that the counsellor is listening, is empathic

and understanding, this approach is more likely to build trust and rapport, and enable the client to feel safe. Any assessment should consider the predisposition, triggers and protective factors that impact the client.

A collaborative approach to a safety plan is reassuring to clients who may see demonstrable action in the drafting of a plan as supportive and meaningful. Establishing a robust support system, that identifies actions the client can take, the support they can access and with contact details for those who can be called upon, especially out of hours, goes towards managing precipitating factors and triggers. Something as simple as making sure that the client has an emergency contact number, such as the Samaritans, on their phone can be an effective step for them to feel safe and to be 'held'.

Referral

Most workplace counselling contexts offer short-term work and therefore working with suicidal clients holds the additional pressures of time-limited engagement. However, valuable work can be achieved in limited sessions with a focus being on safety, stabilisation and referral. As part of the assessment process, workplace counsellors need to be familiar with referral routes, for example GPs, liaison psychiatry and community mental health teams. The aim of the first session needs to be working safely towards the last session.

Self-care

You didn't mention self-care in your question, but it is nonetheless vital to remember and consider your own self-care in working with these demands. The use of management consultation, specific CPD, and appropriate supervision are some of the elements that can improve knowledge, competence and most importantly, confidence. While it is not always possible to limit the number of such client presentations in the workplace context, be mindful of your energy levels and general wellbeing.

Summary

Using a thoroughly researched assessment process for managing risk and suicide will not only support you and other members of the team, but the effects will be evident in the efficacy of the service and most importantly, it will support the clients at risk.

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For further information:

The Workplace Counselling
Competence Framework
recognises and supports the roles
of workplace counsellors and
enhances professional standards.
You can access the framework at:
www.bacp.co.uk/
workplacecompetences



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