

MANAGING TRAUMATIC STRESS

Guidance for maritime organisations



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Introduction

Maritime environments can be traumatic. Most people who are exposed to traumatic incidents cope well, though many will experience short-term distress. A minority, though, will develop persistent mental health conditions such as post-traumatic stress disorder (PTSD). Until recently, there was no specific guidance showing how maritime organisations can help their staff prepare for, and remain resilient after, exposure to traumatic events.

Research shows that personnel working in trauma-exposed organisations have higher rates of PTSD. For instance, up to 20% of war correspondents and fire-fighters, 10% of police officers and up to one-third of military personnel in the USA and 7% of combat troops in the UK have been found to experience PTSD.

Less evidence is available on the rates of PTSD and other trauma-related mental health conditions in seafarers, but it is thought that up to one-third of survivors of fatal accidents at sea may suffer PTSD. Particularly high rates of mental ill health have been found in piracy survivors and their families.

Around 70% of people with PTSD do not seek help for their condition. This is probably because they either do not recognise that their difficulties stem from a mental health problem or they fear what other people will think of them if they do ask for help; this is known as stigma. Seafarers who work on a contract rather than as employees may be afraid that if they reveal any psychological difficulties the contract may be terminated.

PTSD not only causes those affected, and their family and work colleagues, to experience

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This guidance document is based upon the work done by the United Kingdom Psychological Trauma Society (www.ukpts.co.uk). With thanks to Medra Counselling Services for its peer review of the document.

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a poor quality of life but also can lead to significant functional impairment. Untreated cases of PTSD within a maritime organisation may greatly increase the risk of accidents or poor decision-making – a major concern for people working in safety-critical roles.

The risk of developing PTSD can be much reduced if organisations put in place measures to prevent the condition arising, to detect signs of it early on and manage it actively to prevent it progressing.

For those individuals who do develop the condition, a range of treatments are available to help them recover and, in the majority of cases, get on with rest of their lives. Human Rights at Sea and March on Stress have teamed up to produce this guidance document for maritime organisations. It outlines important evidence-based approaches that have been found to be helpful in minimising the risk of seafarers developing PTSD.

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Maritime organisations can use the information within this guidance document to develop a traumatic stress management (TSM) policy or guideline. This is likely to be closely tied in to existing health and safety documentation. Having a high-quality TSM policy/guideline helps the organisation demonstrate that it is behaving in a moral and ethical way, and also ought to lead to better organisational function and outputs. Adopting and operating a TSM policy/guideline should bring benefits – or all concerned – including healthcare providers, who should find that they are able to treat people suffering from traumatic stress related conditions at an earlier stage.

Maritime organisations will need to interpret this guidance to meet their own needs, taking into account the sorts of psychological risk that their staff member, whether permanent or on contract, face in the course of their work.

Policy development

Development of a traumatic stress management policy is likely to involve discussions between various areas of a business, including operational managers, human resources (HR) professionals, lawyers and occupational health advisers who understand the nature of the work the organisation carries out and the associated risks to mental health.

A maritime organisation should ensure that its TSM policy covers topics such as:

- basic entry standards for roles where staff could be exposed to traumatic situations or material
- preparation and training of staff to promote their resilience and self-care
- psychological information and advice

on traumatic stress; this should be made available in a variety of formats and languages appropriate to the nationalities working within a team or crew the organisation's approach to the management of potentially traumatic events resulting from a serious incident whether at sea or in a land-based office location methods of managing and supporting individuals regularly working in potentially traumatic roles such as accident investigation and crisis support the psychological considerations of leaving the company or high-risk role.

Encouraging self-care should include the opportunity for staff members who might

¹ The word 'staff' is used throughout this document to refer to employees and contractors



be vulnerable to trauma-related mental health problems to opt out of specific roles. For example, recently bereaved mariners should be allowed not to be involved in work that involves dealing with death. Options for reallocating roles at sea may be limited, however.

The TSM policy/guideline should set out the maritime organisation's position on its approach towards mental health issues including traumatic stress related conditions. Staff should be encouraged to be open about traumatic stress concerns and should never be dissuaded from admitting to having

mental health problems for fear of being stigmatised. A negative attitude would be counter-productive.

A well-constructed TSM policy/guideline ought to provide a psychologically healthy environment in which staff can work optimally and feel able to seek advice and support if they need to. Such an environment should be positive both for the individual and for business. The degree to which an organisation is able to support staff in relation to traumatic stress will depend on many factors, including the likelihood of exposure to potentially traumatic situations.

1. Promoting psychological resilience

a. Roles with a high risk of exposure to potentially traumatic stressors

Maritime organisations should ensure that staff members who are recruited, or move, into these roles have the opportunity to reflect on their suitability and preparedness for this work beforehand. However, there is no reliable evidence that supports the use of formal pre-enlistment screening based upon psychometric testing or profiling of candidates for trauma-prone roles.

Those who allocate staff to such roles should nevertheless be aware of possible impacts on individuals and teams exposed to potentially traumatic material. Selection interviews should include frank and open discussion about the nature of the role being considered. If the role requires occupational health clearance - i.e. to examine an individual's psychological capacity to carry out a trauma-exposed role - this should be carried out by a healthcare professional who is knowledgeable about traumatic stress. Alternatively, they should have access to trauma-aware health experts able to discuss complex cases with them. Examples of such experts are psychiatrists, psychologists or mental health nurses who have appropriate training and experience to deal with traumatic stress and its consequences.

b. Mental health training and briefings

All individuals who are about to work in a

potentially traumatic environment should be briefed about the traumatic nature of the work and the effect that work may have upon their mental health. Families are often a good source of support, so maritime organisations should consider providing information or briefing materials for family members too. HR and other appropriate professionals should be aware of the organisational TSM policy/guideline and the ways in which they can support the mental health of colleagues who work in traumatic environments.

c. Leadership and team training

Maritime organisations should incorporate trauma awareness into management, leadership and team training. There is ample evidence to support the notion that resilience lies between individuals as well as within individuals. Those in leadership - including vessel command teams and managers responsible for staff working in higher-threat roles - should be given information about trauma and trained to identify and support staff who have to deal with potentially traumatic environments.

d. Building traumatic stress management into operating procedures

Rather than wait until a crisis has occurred, the maritime organisation should ensure that it practises using trauma support skills whenever it tests other elements of its crisis-management plan. Testing TSM procedures should be a routine part of trauma-related exercises afloat and ashore. Organisational health and safety protocols should recognise

and prepare for the risk of psychological injury following exposure to potentially traumatic stressors in the same way as they acknowledge the risk of physical harm. These protocols should dovetail with other crisis management/business continuity policies and become routine practice.

2 Preventing development of trauma-related mental health problems

a. Psychological first aid

The maritime organisation should consider how best to achieve active monitoring for traumatic stress symptoms without requiring routine intervention by health or welfare providers. This is particularly important for staff at sea after a traumatic event. Evidence-based peer support programmes or programmes that train front-line staff in basic psychological first aid techniques are strongly recommended as ways of actively supporting personnel exposed to traumatic situations. Staff engaged in peer support must be properly supervised, work with confidentiality in mind and keep their trauma support skills up to date just as physical health first aiders have to do.

b. Reducing stigma

Most people, no matter what type of work they undertake, are very concerned about the social and career consequences of asking for help for mental health problems. Stigma

about mental health issues is a major barrier to care, especially for those staff members who have agreed to work in roles involving routine exposure to potentially traumatic situations. They may either not recognise that they are suffering from traumatic stress related difficulties or they fear that admitting to having a mental health problem will compromise their career.

The maritime organisation should ensure that it provides confidential venues for staff to seek help from appropriately experienced trauma-aware individuals, who should be easily accessible. Stigma-reduction and trauma-awareness campaigns aimed at staff working in roles involving trauma exposure should become commonplace.

'Confidential' means that the person seeking help can speak to someone who does not have regulatory or managerial responsibility for them. If the distressed individual, or those with whom they come into contact (eg work colleagues or family), is judged to be at serious risk, confidentiality may have to be breached. If this becomes necessary, ideally it should be with the consent, or at least the knowledge, of the distressed person. Only information sufficient to ameliorate the risk should be communicated.

c. Use of mental health experts

After an unusually traumatic situation, such as a member of staff being taken hostage or losing their life, the maritime organisation should obtain psychological health advice so it can provide the highest standard of



Staff members may fear that admitting to having a mental health problem will compromise their career

care to those at risk. Where the organisation has sufficient experience it may not need to consult a psychological health adviser. For example, it could make use of the experience of someone who has previously had experience of informing an employee's relative of their loved one's death. However, where a critical incident has occurred, or is occurring, the organisation should ensure that its decision-makers receive advice from people who are appropriately trained and experienced. It is important to have in place sufficient resources and resilience to sustain this support over time.

3. Treating and managing mental health problems

a. Responsibility for treatment

Every maritime organisation needs to decide on its approach to the routine provision of health care for staff suffering from serious mental health disorders. For a condition that is clearly a psychological injury related to an occupational role (eg mental ill health following a major accident at sea) then the organisation should consider giving the affected individual evidence-based care as soon as possible. It will need to decide whether, and for how long, it provides financial support. If national providers cannot offer timely, evidence-based, trauma-focused healthcare, it may be worth funding alternative care provision. For the organisation, the benefit will be improving the affected individual's mental health and enabling them to regain occupational fitness within a reasonable time.

For mental health conditions that are less clearly linked to work, organisations should still consider how to minimise the occupational impact of trauma exposure.

Their approach should be clearly stated within the TSM policy/guideline.

b. Provision of evidence-based care

Where a maritime organisation either directly funds an individual's mental health treatment or supports them so they can do so themselves, only interventions that are delivered in a manner consistent with medically approved and agreed guidelines (eg those of the UK's National Institute for Health and Care Excellence (NICE) or the Australian Centre for Posttraumatic Mental Health¹) should be supported.

Various clinically proven interventions to treat traumatic stress-related conditions (PTSD among others) are detailed within medically approved and agreed guidelines. However, some providers of mental health care use untested therapies that maritime organisations should not support unless recommended by an appropriately trained and experienced clinical trauma specialist. The specialist will need to be satisfied either that standard treatment approaches have been ineffective or that there are compelling reasons to deviate from medically approved guidance.

Every maritime organisation needs to decide on its provision of mental health care for staff

¹ UK NICE (<https://www.nice.org.uk/guidance/cg26>) or Phoenix Australia – Centre for Posttraumatic Mental Health (<http://phoenixaustralia.org/resources/ptsd-guidelines/>)

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 Want a direct line to IMO decision making?
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March on Stress is the leading UK provider of trauma risk management (TRiM) training and the only one to offer an associated BTEC qualification. We also supply first class psychological resilience services for organisations that routinely place their people in harm's way.

TRiM is a scientifically proven peer support system introduced in the British Armed Forces, and now developed successfully for the commercial, public and charity sectors that helps to prevent and detect issues of a psychological nature, including but not exclusively, post-traumatic stress disorder (PTSD).



HUMAN RIGHTS AT SEA

Human Rights at Sea is an independent maritime human rights charity established in 2014 and Registered in England and Wales (Charity No.1161673) . It was established for the benefit of the international community for matters concerning explicit engagement with human rights issues in the maritime environment. Its mission is to explicitly raise awareness, implementation and accountability of human rights provisions throughout the maritime environment especially where they are currently absent, ignored or being abused.

Human Rights at Sea has specifically partnered with Professor Neil Greenberg to deliver this international guidance on trauma and, through The Nautical Institute, are publishing it for the benefit of the entire maritime community reflecting the charity's objectives.



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