Managing change and disruption

Australian Government

National Mental Health Commission

Contents

About this guide

All workplaces are affected by change and disruption. In recent years, COVID-19 transformed ways of working for many organisations. Other disruptions such as extreme weather events, the emergence of new technologies and the outbreak of conflict or war can affect many workplaces.

This guide was developed to support business owners, senior leaders, managers and HR professionals to build mentally healthy workplaces in a world where change and disruption has become the norm. It is accompanied by case studies from organisations highlighting how they managed change and disruption in their workplace to protect people's mental health: *Stories from the field: Case studies of managing change and disruption*.

Why this guide exists

Developed by the National Mental Health Commission in partnership with Transitioning Well, this guide emerged as part of the National Workplace Initiative (NWI).

Early research and consultation highlighted that organisational disruption and change has become increasingly common, yet business owners, senior leaders, managers and HR professionals do not feel confident in their ability to navigate these periods, address or mitigate the psychosocial hazards that arise, and achieve the best results for their organisations, teams and individual workers.

Aims of this guide

- Recognise the impact of change and disruption on workplaces and workers.

- Inform workplace leaders and individuals about the importance of actively managing the impacts of change and disruption in the workplace.

- Provide a general framework to support organisations to manage change and disruption in a mentally healthy way.

- Outline the specifics of common disruptions and share examples of how organisations have managed these events.

A note on language – employees and workers

In an environment where employment relationships are changing, it is necessary to consider all workers, not simply those in a traditional employer–employee relationship. Work comes in many guises including 'gigs', portfolio careers, contracting, consulting and volunteering. The way that all these types of workers experience work can impact their mental health and wellbeing.

This guide uses the term worker to encompass and consider the needs of all people at work in an organisation.

Introduction

Businesses are increasingly challenged by the scale of change and disruption, so it has never been more important to plan for and mitigate the risks posed to worker mental health and wellbeing.

Promoting and protecting worker psychological health and safety is not only 'a must' under the law, it is also highly beneficial for businesses' bottom line. Mental health inaction costs business $11 billion each year, and with 9 out of 10 workers believing working in a mentally healthy workplace is important, failing to adequately support your people can lead to lost productivity and talent drain as workers seek alternative employment.

Promoting mental health and wellbeing during change can boost culture by fostering a sense of striving through adversity, collaboration and feelings of organisational support. Workers will likely reciprocate through enhanced job engagement and job performance.

Despite the broad variation in change and its effects, you can significantly influence how workers, teams and your organisation as a whole respond to and recover from disruption. Stress is a common response to change, and you can decrease the risk of mental ill-health developing by equipping your leaders and proactively linking workers to support networks, tools and services.

How you respond will vary with the severity and impact of the event, but at a high level the key stages remain the same—preparing for change (Before), responding to psychological needs in the immediate aftermath (During) and supporting recovery (After).

No matter which of these stages you might be in, the information and tools in this guide will help you and your leaders prepare and your workers to cope with and 'bounce forward' with change.

Understanding change and disruption

Before delving into the practices that help to manage change and disruption, we must first understand the different types of change. They range from incremental and reactive change, such as improving policies or procedures in response to an incident, to transformative and proactive disruptions like reinventing a business model to capitalise on opportunities in the market.

◉ Defining change and disruption

Change is a process by which something becomes different. Change in the workplace can include modifications made to processes, structures, technology or strategy.[8] Generally, organisational changes aim to improve business performance, workforce engagement or productivity, or enhance the firm's ability to adapt to new circumstances or challenges such as market forces.

Disruption is a type of change—specifically, a significant disturbance to the way work or life operates.[9, 10] It prevents things from continuing as normal and permanently impacts how things are done. Often a disruption is unexpected, resulting from circumstances external to the organisation. Examples impacting the workplace include technology innovation, regulatory change, disasters and recession.

◉ Characteristics of change and disruption

Our review of research on change and disruption identified 5 characteristics of change. Understanding the interaction between these characteristics and mental health at individual and organisational levels can help you to better support workers and improve the overall health of your workplace.

1. **Predictability – the extent to which change is anticipated.**

   Examples include the unanticipated resignation of a senior leader at one end of the spectrum, to correctly predicting a new competitor entering the market at the other end of the spectrum.

   At an individual level, a sense of certainty helps support mental health and wellbeing.[11] Being able to prepare ourselves can help us adapt positively to change.

At an organisational level, planning for change can better address mental health and wellbeing risks early.

2. **Source – whether change was initiated by an organisation or imposed from the outside.**

   Internally, the source of change could be a restructure motivated by changes in leadership; externally, it could be a supply chain disruption that causes inventory issues.

   At an individual level, changes that are driven by an organisation, such as a restructure, can cause workers to blame the organisation and erode trust. An event that comes from an outside source can bring an opportunity for connection within the organisation when it is managed well (for example, working together to find a solution).

   At an organisational level, you often have control over what happens with internal events, including putting in place mental health and wellbeing supports for workers.

3. **Duration – the length of time that change occurs.**

   An example of change with short duration could be an office relocation which is implemented quickly, and workers find easy to adapt to. Alternatively, the new office location could cause long-term and chronic negative consequences that accumulate over time (for example, an inconvenient or stressful commute).

   At an individual level, long-term change can be hard to adapt to. We often cope better when we know that change will be short, or we know the endpoint.[12]

   At an organisational level, clearly communicating timelines, and if possible, shortening the interval from start to finish, can lessen the impact of change.

4. **Scope – the size of the impact at work and beyond (such as personal lives or the community).**

   For example, a disaster like a flood may have wider effects beyond the workplace and spread into the community. A small-scale change, such as a minor adjustment to a job description, is less likely to cause negative effects.

   At an individual level, experiencing change across multiple life domains (for example, life and work) can have greater impacts on mental health and wellbeing.[12]

   At an organisational level, it is important to be aware that workers may experience increased vulnerability when change impacts multiple domains, and they may need increased support.

5. **Speed of onset – the time from knowing about a change to being impacted by it.**

   Speed of change can range from the gradual (for example, climate change), through to rapid transitions between hearing about an event to new work practices (for example, COVID-19).

   At an individual level, a slower onset allows you more opportunity to learn about the disruption and prepare. A fast onset of an anticipated change makes planning difficult but may have the advantage of a short duration if there are no lasting negative impacts.

   At an organisational level, a slower onset will allow you time to prepare, which can mean more time to address potential risks to mental health and wellbeing. This is not always possible for rapid change, which is why laying the foundations that protect and promote mental health and wellbeing is crucial.

Incremental change such as continuous improvement, is likely to be predictable, internal, of short duration, limited to the work domain, and have a faster onset. You can use these characteristics to mitigate mental health impacts. Organisational change management frameworks have been developed to manage anticipated and incremental internal change.

Disasters can be thought of as a form of disruption. They are often less predictable and come from external sources. They also tend to have a longer duration and impact multiple life domains. The fact that disasters can lead to mental health issues, including trauma, is well understood. Freely available resources can support individuals, workplaces and communities experiencing disasters (for example, Phoenix Australia's Disaster Mental Health Hub). See Box 1 for guidance about the role of the workplace in the context of trauma.

Disruptions sit between incremental change and disasters, and like disasters are often less predictable and initiated externally to the organisation (for example, responding to a new and innovative competitor in the market). Compared with incremental change, they have a greater scope to affect a person's role and a longer duration. Mental health impacts may be significant during disruptions and require focused effort by the organisation to manage them effectively.

This guide uses change as an all-encompassing term, referring to everything from continuous improvements to disasters. The actions described should be considered for all change, but it is likely that more preparation and supports are required for disruptions and disasters.

Box 1.

Trauma in the workplace

An estimated 75% of Australians will experience a potentially traumatic event in their lifetime.[13]

According to Substance Abuse and Mental Health Services Administration (SMHSA), trauma "…results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing."[14]

Events that trigger a trauma response vary from person to person. What is traumatising for one person may not be for someone else.[15] It is a combination of the situation and an individual's biology, psychology and previous experiences that determine the impact on their mental health. Disasters, an extreme example of change and disruption, may cause trauma in some workers.

Trauma is also more common among some specific populations. For example, people experiencing family and domestic violence, First Nations peoples, members of the LGBTQIA+ communities and refugees are more likely to be exposed to trauma.[13] People in certain occupation groups, such as health and social assistance, armed forces and emergency services, are also more likely to experience trauma. People do not leave their trauma at home, so trauma is something that leaders need to know about.

What is the role of employers in responding to trauma? In a change and disruption context, trauma is particularly relevant in 2 situations:

1. when implementing change (internal, anticipated change) in an organisation with populations and/or occupation groups where trauma is more prevalent

2. when unanticipated change or disruption triggers trauma in workers.

❯ Trauma-informed change management

Research about trauma-informed leadership for change management is in its infancy. In first responder organisations, and other workplaces where trauma is more prevalent, specific practices and frameworks to support wellbeing are becoming more common. These frameworks can include leader capability to assist workers during times of change (for example BeyondBlue[16], Mental Health Coordinating Council[17]).

Being trauma-informed creates a respectful foundation for people-centred processes and interactions, including change management, by embedding 5 principles into systems and behaviour:[18]

1. **Safety:** Look after the physical and emotional safety of all individuals in your organisation. This can be enabled by checking in, providing support and ensuring interactions are respectful and engaging.

2. **Transparency:** Provide clear information about what will be done, by whom, when, why and under what circumstances (including role clarity, rules/expectations, policies and processes, job descriptions etc.).

3. **Choice:** Consider individual choice when determining how next steps are undertaken and provide everyone clear and appropriate messages about their rights and responsibilities.

4. **Collaboration:** Emphasise a 'doing with' rather than 'doing to' approach by minimising hierarchy, eliciting feedback and giving all individuals a role in planning and evaluating the approach to managing change.

5. **Empowerment:** Recognise and build on individual strengths and skills to formulate change plans and actions and communicate a realistic sense of hope for the future.

Box 1. Trauma in the workplace

Managing trauma responses in the workplace

Diagnosing and treating trauma is the role of mental health professionals, not the workplace. However, employers can do much to support workers and address trauma before it reaches crisis point. Not every disruption will trigger trauma responses, but there is the potential that some events may, and an organisation may respond in some practical ways.[19]

The key is compassion.[20] Once leaders accept that part of their role is to show concern for others, then they can implement a trauma-informed approach based on these 4 Rs:

Realise: Increase awareness so that people within the organisation understand the widespread potential of trauma and how it can affect workers, and they appreciate the effects of trauma are a coping mechanism not simply poor performance.

Recognise: Equip people in the organisation to recognise common signs of trauma. Training in this area may be beneficial, recognising the goal is not to turn leaders into therapists, but to give them the skills to offer support rather than default to a performance management lens.

Respond: Implement appropriate responses to trauma at both an organisational and a team level. At a team level, it means leaders notice signs of distress and initiate a compassionate conversation to link people with relevant supports and resources. At the organisation level, it means policies, processes and practices are sensitive to the reality of trauma.

Resist re-traumatisation: Actively create an environment of psychological safety, and quickly address psychosocial hazards such as bullying and harassment. It is important to consider occupations where experiencing trauma is more likely, because team and organisational supports act as protective factors even in these environments.

How to talk to someone in crisis

To offer the appropriate support (keeping in mind that not everyone will want or need support and that this can change) leaders need to:[21]

1. **Look:** Make sure your workers are physically and psychologically safe and help them meet their (and sometimes their families') basic needs like food, water, shelter and any financial assistance. Provide repeated, simple information.

2. **Listen:** From the moment you start a conversation with a worker who is distressed, their stress responses need to be normalised ("It makes sense you feel like this", "You've been through something really difficult"). Pay close attention to what they are saying and ask them about their current worries and needs.

3. **Link:** Encourage contact with support networks ("Who are your key supports right now? Is there anyone I call for you?"). At times, leaders may need to do more to help remove the barriers to seeking support. In the example of redundancies, people may be reluctant to call family/friends without having had time to work out how to break the news to them. Giving them time or rehearsing the conversation with them might be useful.

How change and disruption impact your workers

Anticipated changes that are poorly planned and lack consultation can negatively impact workers' mental health.[22] Unpredicted disruptions that impact an unprepared workplace can produce similar outcomes. Depending on the characteristics of the change, individual factors and the actions taken by the organisation, change and disruption can lead to psychological harm including anxiety, depression, post-traumatic stress disorder and sleep disorders.

Change and disruption can adversely impact workers' mental health for several reasons. The change itself and/or the transition phase may:

- impact the workload of already stressed workers

- introduce new hazards or difficulties in the way work is done

- erode workers' sense of autonomy, belonging or competence, which are fundamental human needs[23]

- elicit 'change fatigue' due to multiple instances of change in a short period, combined with low or inadequate support to adjust and cope.

Importantly, 2 people can experience the same change very differently. One person may barely notice a software upgrade, whereas another can find that same change extremely challenging. Similarly, organisation leaders can feel the impact of something like a recession or a merger very differently; one may frame disruption as an opportunity to enter new markets whereas the other may become paralysed by indecision.

◉ The central role of psychosocial hazards

In responding to change and disruption, your central goal should be to identify psychosocial hazards and manage psychosocial risks to minimise mental health impacts and support the recovery of workers (Box 2). You also have legal obligations to manage and minimise health and safety risks in the workplace, including both physical and psychosocial risks, so far as is reasonably practicable.[24] Safe Work Australia offers a step-by-step approach to managing risks.

Box 2.

Psychosocial hazards and risks

Psychosocial hazards are aspects of work that can cause psychological and/or physical harm. These hazards can arise from or in relation to work design or management, the work environment, plant (for example, machinery, equipment) at a workplace, or workplace interactions and behaviours.

At a high level these hazards include:[25]

- **Demands:** including workload, type of work and the work environment

- **Control:** how much say people have over their work

- **Support:** including leadership and resources provided to do the work

- **Relationships:** including support from colleagues and dealing with unacceptable behaviour

- **Role:** including role clarity, conflict between roles, feedback and recognition

- **Change:** how organisational change is managed and communicated.

A psychosocial risk occurs when a psychosocial hazard becomes a risk to a person's health or safety. Some hazards may not create psychosocial risks on their own but may do so if combined with other hazards. As psychosocial hazards change and combine, they impact levels of psychosocial risk.

For a more complete list of psychosocial hazards in the workplace, visit Safe Work Australia.

Step 1 is to **identify hazards**, which are anything that increases the risk of work-related stress leading to psychological and/or physical injury. Step 2 is to **assess risks**, including the severity of the risks, by understanding the nature of the harm the hazard could cause, how serious the harm could be and the likelihood of it happening (such as the frequency and intensity of exposure to hazards). This can be done through consultation with workers and other stakeholders, and suitable risk assessment tools.

Psychosocial risk screening tools are one method of assessing risks associated with known psychosocial hazards; they have been shown to be effective in supporting mental health and wellbeing across diverse work contexts and cohorts.[26] Regulators and researchers developed People at Work, a free tool for Australian workplaces. Several state regulators have also developed screening tools (for example, Queensland, New South Wales).

Step 3 is to **control risks**, aiming to eliminate risks as much as possible. When this is not possible, risks must be minimised as far as is reasonably practicable. Step 4 is the ongoing **review of control measures**. Once in place, controls need to be monitored, reviewed and evaluated to make sure they work as planned.

Responding in this way enhances the usual change management approach designed to support business continuity and embed new ways of working. The framework of psychosocial hazards helps workplaces to embed systems, mindsets and practices that protect mental health, creating resilience to change at an organisational level. Table 1 describes common psychosocial hazards and how they are impacted by change and disruption.

Table 1. Common psychosocial hazards and how they are impacted by change and disruption.

Psychosocial hazard	Description	How change and disruption can increase the risk of a hazard occurring
Change		
Poor organisational change management	Changes that are poorly planned, communicated, supported or managed	Poor change management can interfere with workers' sense of control and certainty. Mental health can be supported by forewarning people about change, communicating information about the duration, providing support at work, and linking to supports at home and in the community where appropriate.
Role		
Lack of role clarity	When workers are not clear on their job scope, role responsibilities, or what is expected from them at work	Role clarity is impacted when changes affect a worker's job. Role clarity can often decrease during the transition phase of change, as well as after the change. Demands of the previous and new states may need to be navigated during the transition phase.[27]
Inadequate reward and recognition	When there is an imbalance between the effort workers put in and the recognition or reward they get	Performance may drop as people take time to transition through periods of change. This may result in excessive negative feedback if output is rewarded rather than the effort put in to learn new ways of working.

How change and disruption impact your workers

Psychosocial hazard	Description	How change and disruption can increase the risk of a hazard occurring
Control		
Low job control	When workers have little control or say over how or when their work is done	Changes that are imposed on workers without consultation may decrease job control. In addition, if change originates from a source external to the organisation, then job control may decrease for a time.
Demands		
Job demands	Prolonged high or low levels of physical, mental or emotional efforts needed to do the job	The 'fight or flight' threat response is an automatic physiological response that can be activated by change and affect how people function at work. In addition, learning new ways of working takes effort and increases job demands. Conversely, people may find they are unable to do parts of their role, and experience decreased job demands.
Traumatic events or materials	Witnessing, investigating or being exposed to traumatic events or materials	Some disruptions and disasters are potentially traumatising by their nature, so direct or indirect experience of the change can be a hazard. In addition, an event that brings up memories of a previous trauma can be hazard for that individual.
Support		
Poor support	Not getting enough support from supervisors or other workers, or not having the resources needed to do the job	Leading through change requires specific interpersonal capabilities, and worker mental health can be impacted if the supervisor does not have these capabilities. Moreover, workers and leaders may not be coping with the change and lack capacity to support others.
Remote or isolated work	Work that is isolated from the assistance of others because of the location, time or nature of the work	Research shows that people working remotely experience change and disruption differently and require specific organisational change management responses when disruption occurs.[28]
Relationships		
Harmful behaviours	Behaviours that harm the person they are directed at and anyone who witnesses the behaviour	Job insecurity and conflicting work demands often found during organisational change have been shown to increase workplace bullying.[29]
Poor organisational justice	Lack of fair decision making, information sharing, or treating people with dignity and respect	Boundaries governing policies and processes can become blurred during change and disruption, possibly resulting in poor handling of information, failure to address issues, and situations that are seen as unfair.
Physical		
Poor physical environment	When workers are exposed to unpleasant, poor quality or hazardous working environments or conditions	Disruption events, such as a disaster, may directly impact the quality of the work environment. Other changes can have indirect impacts, such as maintenance schedules being disrupted or reported hazards not being addressed.

The impact on mental health

It is common for workers to experience stress when disruption occurs. Neuroscientists believe we are hard-wired to minimise danger and maximise reward, labelling it a 'threat and reward' response.[30] So, when we experience something unexpected, our brains automatically try to work out whether this change is a reward or a potential danger. If the change is assessed as a threat, we go into 'fight or flight' mode (Box 3).

Box 3.

Fight or flight response

The fight or flight response, also known as the acute stress response, is an automatic physiological reaction to an event that is perceived as mentally or physically stressful or frightening. That could present as an increased heart rate, sweating, trembling and more.[31]

Believed to have evolved from our early ancestors' need to stay safe, the perceived threat activates the sympathetic nervous system and triggers the release of hormones to prepare the body to stay and deal with a threat (fight) or run away to safety (flight). While the 'fight or flight' response may have evolved to keep us physically safe from predators, research shows it is also triggered in social situations.[30]

When we feel threatened, our energy is directed away from the parts of the brain that make us most effective at work—areas that govern things such as our working memory, analytical thinking, creative insight and problem solving. These are the same skills we need to draw on to cope with and adapt to change and disruption. So, when disruption occurs, our natural reaction can reduce the mental capability we need to help us deal with that change.

Change can impact mental health in 2 ways. First is the individual 'fight or flight' response discussed above. The situations and events that trigger fight or flight vary between individuals, as does the intensity of the physiological and resulting psychological responses. The level of stress each person experiences in response to change and disruption is influenced by the extent to which it threatens those things that are important to us and creates feelings of uncertainty.[11] While stress is a common and understandable response to a challenging situation, prolonged and overwhelming stress increases the risk of mental ill-health.

Second, workers' mental health can be impacted by the organisation's response to disruption. Disruption events can create or exacerbate the intensity of workplace psychosocial hazards, which in turn impact mental health. An organisation that addresses psychosocial hazards as part of their preparation for change-related events will, by definition, be targeting potential causes of psychological harm, and therefore be mitigating the negative effects on mental health.

For example, restructures can be stressful for workers, which is often due to individual factors as well as psychosocial hazards. A restructure can create psychosocial hazards such as lack of role clarity and increased job demands. In addition, a worker may experience even greater anxiety because of past negative experiences with similar changes.

For some workers, recovery has a 'long tail', meaning some people may experience emotional ups and downs for months or even years after an event, and mental health conditions can take time to become evident. Your people's wellbeing and mental health immediately after disruption and in the long term depend on individual differences, such as personal resilience and previous experiences, as well as their work environment and what is happening outside of work.[32]

In the workplace, addressing psychosocial hazards before, during and long after the change can prevent mental health conditions from developing. At the heart of managing these hazards is providing workers with access to coping resources that *outweigh* the stress they are experiencing. The following sections look at the effective coping resources that workplaces can put in place to prevent mental ill-health, promote mental health and wellbeing, and support recovery.
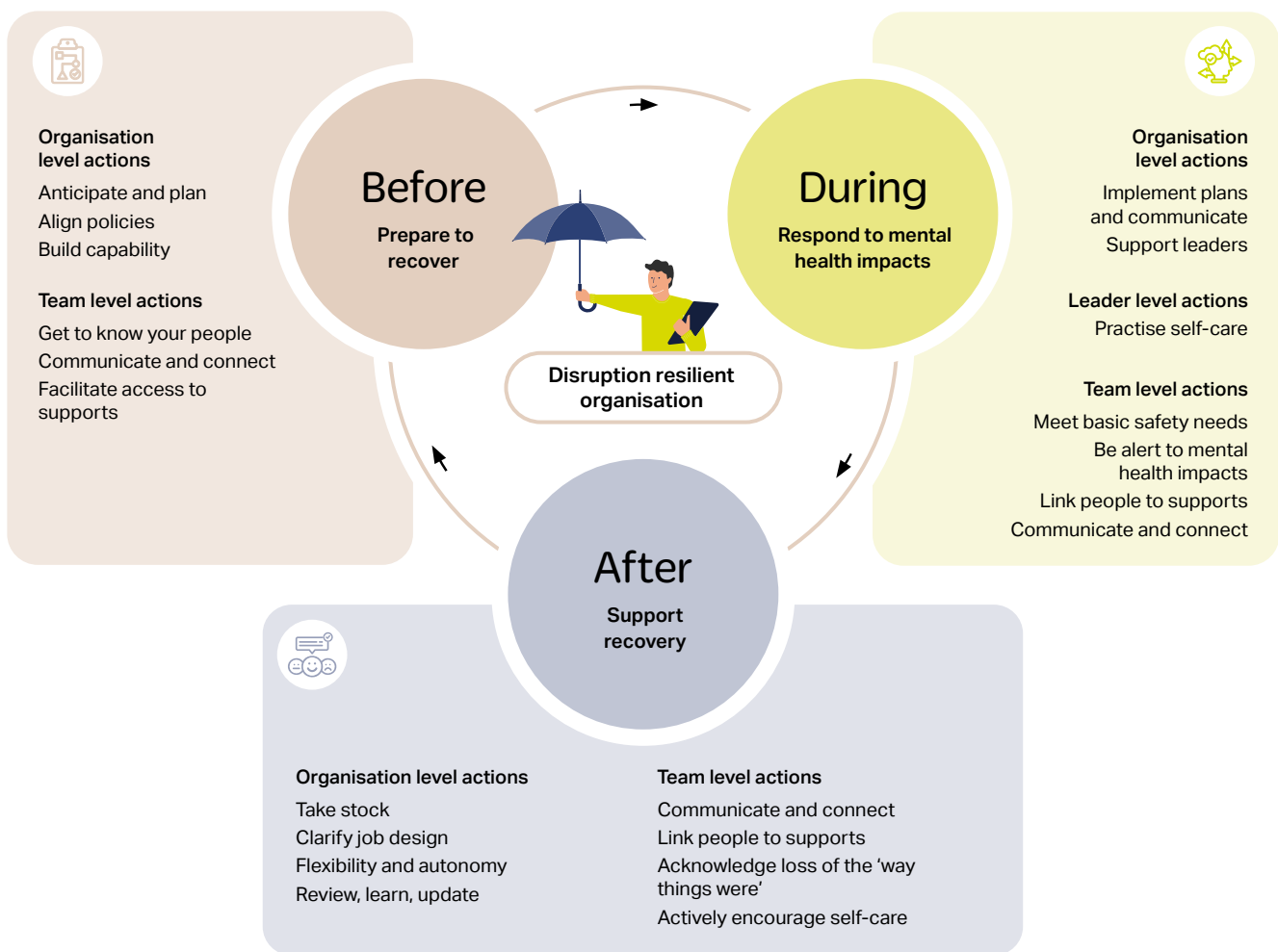
⊙ The change and disruption cycle

We reviewed best practice in the context of change, disruption and disaster recovery to distil actions that organisations can take to support workers through change and disruption. These actions align with 3 phases in the change and disruption cycle:

1. BEFORE: when the change has not yet occurred

2. DURING: the immediate response to change

3. AFTER: the post-change period of adjustment and recovery.

These actions are summarised in Figure 1 and described in the following sections. They will help you identify and control psychosocial hazards across the change and disruption cycle. By focusing these actions at organisational and team level capabilities (rather than simply bolstering individual resilience), you will create a 'disruption-resilient organisation' that protects and promotes workers' mental health and wellbeing.

Figure 1. Actions to take throughout the change and disruption cycle.

Before
Prepare to recover

Organisation level actions
Anticipate and plan
Align policies
Build capability

Team level actions
Get to know your people
Communicate and connect
Facilitate access to supports

During
Respond to mental health impacts

Organisation level actions
Implement plans and communicate
Support leaders

Leader level actions
Practise self-care

Team level actions
Meet basic safety needs
Be alert to mental health impacts
Link people to supports
Communicate and connect

After
Support recovery

Organisation level actions
Take stock
Clarify job design
Flexibility and autonomy
Review, learn, update

Team level actions
Communicate and connect
Link people to supports
Acknowledge loss of the 'way things were'
Actively encourage self-care

Disruption resilient organisation

Because change and disruption events can happen successively and sometimes concurrently, an organisation may have workers in each of these 3 phases simultaneously. For example, an organisation in the After phase of COVID-19 might have been in the During phase of a flood or bushfire, and the Before phase of labour shortages. This is explored further in the specific application section Events impacting work and life for a long duration.

The repetition between the phases and levels is intentional in the following sections. Creating 'disruption-resilient organisations' is a process of building solid foundations that underpin effective action during and after change. Ideally, leaders are not learning and implementing new knowledge and skills in the midst of a crisis when this could have been achieved in the Before phase. Similarly, organisational systems and processes support team level implementation, providing leaders with guidance and tools when they need it (Box 4).

Box 4.

Organisational change management frameworks

Anticipated change that originates within an organisation—change that is initiated internally by senior leaders—is the arena of popular change management frameworks such as Kotter and Prosci's ADKAR® model.[33, 34] However, these change management frameworks do not explicitly address mental health and wellbeing.

At their core, these frameworks are a process for preparing and equipping individuals so that they successfully adopt the planned changes. They provide insight and structure for embedding new ways of working and realising the benefits that motivated the organisation to introduce a change. The 'people side' to these change management frameworks describe processes to engage people so that they adopt and use the changes. Some of these processes benefit mental health (for example, consultation with workers), but their central purpose is linked to change adoption, not mental health and wellbeing of workers.

The 2023 survey conducted by Prosci into the top contributors to change success found participants identified wellness and mental health for the first time following COVID-19.[35] Although organisations may be taking steps to create mentally healthy workplaces, change management frameworks are yet to catch up.

What would be different if wellbeing and mental health were incorporated into change management approaches? Table 2 lists 5 core change management activities and **current practices** that support mental health and wellbeing (even if it is not the core purpose of the activity). It also describes **additional practices** that could be taken to proactively protect and promote mental health.

Table 2. Organisational change practices to protect and promote mental health.

Current practices	Additional practices
Communication	
Consult workers who are directly and indirectly impacted.	Raise awareness about wellbeing and mental health resources in all change projects (not just those with high perceived risk).
Use organisational communications channels to convey information as well as to receive feedback from workers.	Carefully plan each piece of communication, tailoring it for cohorts that may experience higher levels of mental ill-health, and break it down for each stage of the change project.
Include communication from the top (e.g. the CEO) to the whole of the organisation and allow people to ask questions directly of this person.	Communicate with leaders about mental health and wellbeing risks, and ensure they understand their role in the risk mitigation plans.
When leaders are required to cascade communications, ensure they are have clear talking points, answers to frequently asked questions, and reminders of resources/referrals for people whose mental health and wellbeing is impacted.	Consult a mental health practitioner when writing key messages and designing the communications plan.
Risk management	
Identify risks to worker engagement.	Assess the risk of adverse impacts on mental health and wellbeing—consider different risks across the various cohorts of your organisation.
When changes have direct consequences for wellbeing (e.g. redundancies), implement measures to support mental health and prevent mental injury.	Include risk mitigation strategies for mental health and wellbeing that relate to psychosocial hazards.
Managing resistance	
Give people control over elements of the change where possible, e.g. choosing the implementation date for their team.	Understand that workers may resist change in an attempt to manage and reduce their stress and protect their mental health. Acknowledge this and communicate how the changes reduce stress and/or promote mental health in the long term.
Clearly communicate new roles, routines and structures well in advance.	Acknowledge feelings of loss about the way things used to be. This could be an activity where people 'say goodbye' to the old way of working.
Use 'visual management' techniques so people can see key aspects of the change plan on a whiteboard or website, or in some other way.	Integrate support networks into the change process, such as buddies and peer support (this goes beyond the typical role of 'change champions').
Stakeholder engagement	
Identify sponsors/leaders of other change events impacting the same people at the same time to actively manage concurrent stressors.	Consider sources of mental health and wellbeing support and list them as stakeholders (e.g. EAP, Peer Support Coordinator, Health Safety & Wellbeing Manager). Ensure they understand the potential impacts of the change on mental health and wellbeing, and can provide appropriate support.
Training	
Train leaders in areas relevant to communication and engagement.	Ensure leaders and impacted workers have completed training relevant to mental health and wellbeing in the context of change and disruption.

1

Preparing to recover

The Before phase: Preparing to recover

This section looks at what you can do at both an organisational and team level before change or disruption occurring. It is important to start putting practices in place at this point, so you are not thinking about workplace wellbeing and mental health for the first time during a crisis.

Key takeaways

The **Before phase** is about **preparing to recover**. It is your opportunity to lay the foundations or improve how your organisation responds to disruption. Activities implemented in this phase can positively impact your organisation in the During and After phases, and aid recovery.

At an organisational level:

- Use 'futures thinking' techniques to anticipate key disruption events and put plans in place that align with the characteristics of the predicted events.

- Make policies work for you by creating mental health and disruption-specific policies, and aligning other policies where you can.

- Build the capability of your leaders and workers so they have future-proofed change skills in problem solving, self-management and working with people.

At a team level:

- Get to know your people so you are equipped to notice and respond when someone is not coping.

- Nurture a culture of open communication so people can share useful ideas as well as valid concerns.

- Implement workplace supports and ensure people know how to access them along with community-based supports.

◉ What you can do at an organisational level

Anticipate and plan
Disruption events can quickly leave us feeling overwhelmed with decreased capacity for analytical thinking, creative insight and problem solving—qualities that help us plan for and adapt to change.[30]

By planning for mental health and wellbeing impacts before an event occurs, you can proactively shape events with an internal source, as well as create plans to use during unanticipated events.

You can start by regularly assessing your organisation's risk of change and disruption (Box 5). This will enable you to determine:

- what disruptions are possible and the likelihood of them occurring

- the potential impact of the disruption on the organisation and workers

- how severe the risk is to mental health and wellbeing if it does occur

- whether any existing control measures address psychosocial risks, and therefore mitigate the risks to mental health and wellbeing

- what action you need to take to improve existing control measures

- how urgently action needs to be taken.

The outcomes of a risk assessment can help to inform a strong change management plan and risk mitigation activities to protect the health and safety of people during change and disruption. For example, see case study 1: ChatGPT and preparing for AI disruption in *Stories from the field: Case studies in managing change and disruption*.

Box 5.

How to determine whether a risk is likely to occur

It is not always easy to predict change or disruption, especially if it is caused by events outside your organisation. You may want to consider:

- researching trends or patterns, e.g. changes to your industry, or environment factors, such as bushfire risks or flood areas you service

- applying 'futures thinking' to predict possible change and disruption events (see Box 6)

- noting 'slow onset' changes already happening and considering their future implications.

Once you have identified changes that may impact your organisation, use a psychosocial hazards lens to consider their potential impact on people's mental health and wellbeing.

Box 6.

What is a 'futures thinking' approach?

A key capability in complex and uncertain times is the ability to think about the future in useful and constructive ways. 'Futures thinking' can help you move events from unanticipated to anticipated,[9, 36] enabling more specific plans to be developed.

Strategic foresight is an evidence-based approach to thinking about the future that builds organisational and individual resilience in uncertain, complex and changing environments. It is about preparing to adapt to those aspects of the future that cannot be changed, and deciding to influence or shape those aspects that can be changed. If done well, strategic foresight can improve:[37]

- how uncertainty is managed

- the quality of decision making

- strategy implementation

- the capability to handle change.

Importantly, 'futures thinking' is a team sport—doing it right requires involving a diverse group of people to help overcome biases and assumptions about the future.

Thinking in scenarios and horizon scanning are 2 widely used and effective tools:

'**Thinking in scenarios**' to inform and improve decision making in the present.[38] 'Thinking in scenarios' allows us to create alternative futures (or, 'what-if' scenarios), providing mental preparation that enables us to respond quickly to events that unfold in a way that would not have been possible without it. There are many forms of 'scenario planning', ranging from informal conversations through to the formal generation of multiple detailed scenarios to inform strategic decision making, such as those created and used by Shell.

Horizon scanning, or environmental scanning, to detect and respond to 'weak signals' of change.[39] This involves strategic scanning for trends and deep drivers of change using a formal and systematic system. Such a system helps us better anticipate change and take early strategic action in response. This is best developed as an internal capacity but can be outsourced to organisations that specialise in foresight services.

Combining futures thinking with a risk-informed approach can broaden your capacity to plan ahead and protect the mental health of workers if and when disruption occurs.

The 3 types of change management plans
Once you have completed your risk assessment and identified changes that may impact people's mental health and wellbeing, your next step is to plan.

1. **Plans for anticipated disruptions**: These plans will be familiar to many organisations. This is the plan you create when your organisation initiates change. Think about these plans as traditional change management plans, but with specific activities to support mental health and wellbeing (see Box 6).

These plans should articulate what you will do to mitigate psychosocial hazards and protect your workers' mental health, as well as mechanisms to embed sustainable change from a business perspective.

2. **A crisis or emergency response plan**: These plans are widely used, with templates available from reputable sources. This plan should detail key activities during significant disruption or disaster, including: the business continuity plan,

which identifies risks to critical areas and how to best protect them during a crisis; the emergency action plan, which outlines what leaders and workers need to do during an emergency situation; and the recovery plan, which guides the steps an organisation will take to recover after an emergency. The recovery plan can be supplemented with mental health actions taken from the After section of this guide.

3. **A plan for unanticipated disruptions:** When a disruption occurs and 'fight or flight' kicks in, you are not necessarily in a good mental state to start planning how to respond. A pre-prepared plan can be as simple as a checklist based on this guide, so you are not starting from scratch during a disruption (see Appendix for an example). The plan should include the general processes and activities that need to be implemented if change or disruption occurs. Once you know more about the disruption, you can fill in the details of the plan.

What to include in your change management plan
Each plan should cover your Before actions, During actions, and After actions, which we cover in the following sections. It is important to consider the following elements:

- Individual risk management: Create plans specific to individual role types (for example, part-time workers versus volunteers), in anticipation of varying impact on these groups.

- Surveys to support planning: Surveys or pulse checks can be a good way to establish a baseline of people's mental health and wellbeing. But, surveys do not replace the need to get to know people on an individual level, which is crucial when supporting mental health and wellbeing.

- Training needs analysis: Identify and map the specific capabilities that your workforce needs (ideally specific to different roles) to cope with and manage change effectively.

- Legal considerations: Remember that while legal obligations may not alter during change, their application can look different. See Box 7 for pointers about how employer and worker responsibilities can shift during change and disruption.

Box 7.

Legal considerations

Employers have legal obligations under both state and federal legislation, as well as other industrial instruments or sources (for example, policies). It can be helpful to think of these as 'layers' in planning for change and disruption.

Layer 1: **Occupational health & safety** – Employers are required to, as far as reasonably practicable, provide and maintain a safe workplace, minimise risks and monitor health, including psychological health of employees, contractors and other workers.

Layer 2: **Discrimination** – It is important to ensure decisions relating to organisational change do not directly or indirectly discriminate against people based on protected attributes such as race, age or sexual orientation.

Layer 3: **Privacy** – Workers have rights that prevent disclosure of certain information in some circumstances, including health information; employers must ensure data is disclosed only when legally permitted and appropriate.

Layer 4: **Bullying and harassment** – Employers have a duty to prevent workers being exposed to unreasonable workplace behaviour, noting increased stress during change and disruption can create an environment where bullying or other inappropriate behaviours are more likely.[29]

Layer 5: **Workers' compensation** – Employers must actively manage return to work, with suitable duties identified, and workers participating and communicating openly throughout the process.

Continued over.

Box 7. Legal considerations

Workers have legal obligations as well, including:

- taking care of their own health and safety as well as the safety of those around them

- fulfilling the inherent requirements of their job

- disclosing mental and physical health conditions that may risk safety or impact their ability to perform the inherent requirements of their job

- complying with reasonable management instructions.

Here are some examples of how legal considerations can come into play during organisational change:

- An organisation is being sold to another entity that wants to interview current workers and view records. Discrimination laws prohibit the new employer from discriminating against workers on the basis of a protected attribute when making decisions about who they will hire.

- A worker goes on 'stress leave'. Privacy and discrimination legislation may restrict what can be communicated to other members of the team. Reasonable adjustments may be required for the worker when they return to work.

- A disruption can often create additional workload for leaders as well as putting their own ongoing employment at risk. The increased levels of stress and lack of self-care by some leaders can result in emotional outbursts with workers. Bullying and harassment legislation require employers take proactive steps to prevent inappropriate workplace behaviours. In this situation, more may need to be done to support, train and equip leaders.

- An organisation is formalising hybrid work arrangements, and workers are to be in the office at particular times. Occupational health and safety laws require employers to conduct a risk assessment to identify hazards and monitor worker health throughout the transition, including psychological health. Discrimination laws require employers to make reasonable adjustments for workers with protected attributes including for hybrid working arrangements.

Align policies

Workplace policies are a great tool to help workers understand what is expected of them, provide guidelines for decision making, enable consistency across the organisation and protect the organisation. As part of the Before phase, it is important to align your policies with your change plans and, where possible, include specific reference to disruption events that you have identified as likely or possible.

You might find it useful to consider the following factors:

- **Disruption-specific policies**: If you have determined an event is highly likely, it could be worth creating an event-specific policy. For example, you might prepare a bushfire policy in a place prone to fires, or a cyberattack policy if this is a significant risk in your context.

- **A mental health policy or plan**: A mental health policy aims to establish, promote and maintain the mental health and wellbeing of all workers through workplace practices, and encourage people to take responsibility for their own mental health and wellbeing. A mental health policy can identify practices that enable a mentally healthy workplace, including resources available to support workers' mental health during change. Any mental health policy should include contractors, volunteers and other workers for whom the organisation has a duty of care. (See here for further guidance and a template.)

- **Aligning other policies**: Standard policies are relevant to, and can help support, mental health during change and disruption. Referencing disruption events in relevant policies can help support decision making during uncertain times. For example, flexible work is often beneficial in the During and After phases, and including disruption events in a Flexible Work Policy can help to support both leaders and workers. Other relevant policies may relate to communication and reporting, psychological health and safety, and roles and responsibilities.[10]

- **Communicating through policy change**: Sometimes disruption may necessitate a change in policy (for example, COVID-19 changed many flexible work approaches). If changes are required that impact policies, then consult with workers (if possible and noting that consultation is required in some circumstances) and use policy amendments alongside other channels to communicate change and promote awareness.

Build capability of leaders and workers

Successfully navigating change and disruption requires building capability. That means nurturing workers' skills in problem solving, self-management, working with people, and technology use and development—all of which are identified as top skills of 2025 by the World Economic Forum's 2020 'Future of Jobs Report'.[40]

It is also important to build capabilities around protecting and promoting mental health in the workplace. To do so, develop mental health literacy along with skills to provide psychological first aid. The World Health Organization endorses mental health literacy and psychological first aid as useful tools in promoting mental health during emergencies, and where people live and work. **However, remember a leader's role is not to replace medical or allied health professionals, but to be confident listening to people and linking them to the right supports.**

Table 3 outlines key skills and capabilities needed to effectively manage change and disruption.

Table 3. Skills and capabilities to support effective responses to change and disruption.

Skills in context of change and disruption	Type of skill	Description	Audience
Futures thinking	Problem solving	Possessing ways of thinking to make change and disruption more predictable	Senior management
Transition skills	Self-management	Understanding the process of transition as we adapt to change[12, 41]	Leaders and workers
Coping skills	Self-management	Demonstrating resilience-building abilities, including emotional regulation, optimism, cognitive agility, self-compassion, self-efficacy[42]	Leaders and workers
Transformational assets	Self-management	Adapting to a changing environment, encompassing self-knowledge, having diverse networks, openness to new experiences[43]	Leaders and workers
Mental health literacy	Working with people	Supporting positive mental health in the workplace[44, 45]	Leaders and workers
Psychological first aid	Working with people	Having the capability to support people in the aftermath of a potentially traumatising event[46]	Selected leaders (e.g. frontline roles in health care, health & safety representatives)

Note: Research around the efficacy of mental health literacy and psychological first aid is evolving, and workplaces must adapt their approach to training as we learn more. For example, psychological debriefing is now considered to be potentially harmful (this is a formal method, different to psychological first aid, previously thought to be effective immediately following a traumatic event[47]).

◉ What you can do at a team level

Get to know your people
Knowing your people is about creating genuine relationships that form the foundation of a disruption-resilient organisation. It is important for leaders to have the knowledge and confidence to support people's individual needs, recognise when someone is not coping, and connect them with the appropriate supports.

How do you know if someone is struggling with their mental health? The first thing is to *notice* changes in behaviour or appearance. For example, is a chatty colleague suddenly a lot more subdued? Or perhaps your usually well-presented team member looks a little dishevelled.

It is important to have a baseline, so make the time to get to know your people—colleagues, team members and leaders—and get a sense of where their 'usual' sits. Understanding more than just their 'work persona' can make a huge impact in knowing what supports people might need during change and disruption.

Consider cohorts that are more at risk
As part of getting to know your people, you also need to consider the personal circumstances that may impact their response to a change and disruption. Research suggests some cohorts have increased risk of experiencing mental ill-health following change. We often refer to these as 'vulnerable populations', but importantly these groups are not inherently vulnerable. Rather, societal and other environmental factors (such as discrimination or inequalities) often contribute to this risk.

With appropriate planning and consultation, your organisation's response to change can be tailored to the needs of these workers, which will help reduce barriers to support and improve their recovery. People who may require additional support from workplaces during and after disruption include:[48]

- young workers (18–24 years)

- casual workers

- workers with long-term mental or physical health conditions (e.g. neurodiverse people, see Box 8)

- Aboriginal and Torres Strait Islander peoples

- workers who have migrated from non-English speaking countries (culturally and linguistically diverse workers).

It is important to consider these cohorts when tailoring your communication and ongoing response. For example, for workers from culturally and linguistically diverse backgrounds, you might want to consider how such factors as language barriers, community values and priorities, and domestic arrangements can affect the impact of change.[49] This may influence how you communicate and—depending on the event itself—whether you tailor support for specific segments in the workplace (for example, see case study 2: Migrant workers in residential aged care services during COVID-19 in *Stories from the field: Case studies in managing change and disruption*).

Box 8.

Neurodiversity and disruption

Neurodiversity or neurodivergence refers to variations in how the brain processes and interprets information. Currently, an estimated 15–20% of the population is neurodivergent, and the term refers to conditions such as autism spectrum disorder (ASD), attention deficit and hyperactivity disorder (ADHD) and specific learning disorders (for example, dyslexia).

Research on neurodivergent minorities is lacking[50] but we know that for these workers a change in routine can disrupt wellbeing and stability.[51]

Impacts to routine

A hallmark of neurodivergent conditions is that routine is often more important than in the neurotypical population and is an important tool for reinforcing a feeling of wellbeing and stability. Change may be particularly challenging for some. Using routines that remain unchanged from the disruption can be helpful to support neurodivergent individuals to cope better with any changes that may occur.

Communication

Any change in communication should consider the needs of a neurodiverse population. Direct, concise information typically aids comprehension, as does giving clear direction on expectations and outcomes. Using diagrammatic or written information may also be helpful to consolidate key messages. Where possible, communicating before change occurs can help neurodivergent individuals adjust and cope better.

Ask people what they need

Considering disruption more broadly, many of the tools to support neurodivergent team members are the same as those needed for the general workforce. The following techniques are useful when it comes to major disruption and workplace stress for neurodivergent workers:[52]

- Ask each individual – what do you need?

- Proactively consider – what is happening in the workplace and at home, are there changes to the physical environment that might be causing distraction and overwhelm?

- Make the day as predictable as possible – there might be a greater need for routine and structure.

- Discuss work–life boundaries – ensure workers take allocated days off and leave.

- Ensure communication is clear and unambiguous – perhaps refined further from initial communications from leadership.

- Provide support for planning and prioritising – disruption and stress can make starting tasks more complicated.

- Observe for signs of emotional difficulties – some individuals take longer to identify and name emotions and physical experiences of stress.

- Keep an eye out for social withdrawal or a reduction in communication.

Think about organisation cohorts
Individual differences are important, as are the cohorts or groups that people belong to. Some sections of the workforce may respond to change and disruptions differently or have specific needs or challenges for which tailored supports may be beneficial.

For example, in 2020, many organisations had to make significant changes to keep operations running during COVID-19.

The changes meant people had to work from home, some for the first time. Additionally, some were stood down, or had their capacity reduced to keep the organisation running. Table 4 looks at how these type of changes affected each cohort through the pandemic.

Table 4. Impact of change and disruption on different cohorts of workers through COVID-19.

Organisational cohort	Example of cohort's experience of change and disruption	Impact on needs and supports
Permanent workers	This was not a 'one size fits all' with roles being impacted differently.	Psychosocial risks needed to be considered for people in different jobs (e.g. low control for workers exposed to the public, isolation risk for work from home).
Senior leaders	Leaders typically have more control, and this increases with seniority. They had the pressure of making difficult decisions in challenging circumstances with limited information (e.g. close operations, retrench staff etc.).	Leaders need to be aware of team members' reactions to change, and that it may be different for them. Show empathy and provide information and support, and look after their own wellbeing and mental health.
Casuals, contractors	They experience increased uncertainty around job stability, differences in eligibility for financial support from the government, and restrictions in work (e.g. only permitted to work at one site).	Casuals and contractors may find they rely more on support from family and friends than from work, so they need the organisation to allow the flexibility for them to access these supports.
Volunteers	Often volunteers are motivated by purpose, routines and relationships, so being unable to continue volunteering on site removes multiple mental health supports.	Organisations need to consider what supports volunteers may benefit from even if they are not automatically entitled to them (e.g. consultation, Employee Assistance Program).
Workers experiencing mental illness	The experience of change is likely to be more significant for people with a mental illness. This is partly to do with the effect on the brain's neural circuits, and partly because the change may disrupt a person's strategies to manage their condition.	Leaders should avoid making assumptions, be aware of recovery/coping plans that people may have in place and make workplace adjustments for people to access their support mechanisms.
Remote or hybrid workers	The transition to hybrid work during COVID-19 was significant. In addition, when other changes are implemented, people who work remotely experience it differently to those who are on site.[28]	It is not a case of 'out of sight out of mind'; isolation is a psychosocial hazard for people working remotely, and lack of fairness may exacerbate the impact if they perceive they are being treated differently.

Communicate and connect
Communication is essential in providing a sense of safety, as well as nurturing supportive relationships. It is vital that you embed a culture of effective communication practices in the Before phase so that they are second nature during a crisis. Research suggests building psychological safety[53, 54] and social capital[55, 56] in organisations builds a strong foundation for effective communication practices (Box 9).

Box 9.

Psychological safety and social capital

In the context of communication, **psychological safety** is about creating an environment where people feel able to raise concerns, suggest ideas and share unique perspectives without fear of negative consequences. Being able to talk freely about events can help a team successfully navigate change and disruption. In environments of high psychological safety, workers may even make changes to the status quo.[53, 54]

Similarly, **social capital** is the ability to build a network of trusting relationships between workers. Building and leveraging social capital relies on investment in interpersonal relationships.[55, 56] Organisations with high levels of social capital may be more resilient to external shocks and more able to deal with change.

As leaders, it is important to use communication practices that foster psychological safety and social capital, including:

- modelling and reinforcing the types of supportive conversations and behaviours you expect from the rest of your team

- ensuring your behaviours align with your organisation's shared values

- demonstrating inclusiveness and actively consulting all team members (individually and as a group) to understand their perspectives about what is and is not working

- encouraging people to raise concerns and ideas, and listening to what people say with genuine curiosity

- promoting constructive debate and creating accepted norms about how to resolve conflict productively

- being consistent, transparent and respectful in all communications and following through on commitments

- noticing how individuals behave and communicate, not just the overall team dynamic, and showing support for all team members.

Facilitate access to supports
Many mental health resources are available to people, including freely available online resources and helplines. During change, it is important that leaders and workers have easy access to these mental health and wellbeing resources. The Mentally Healthy Workplaces site has a list of helplines, as well as resources for workers, and many topics that can be searched. Providing resources before an event is one less action required during change, when capacity may be limited.

You may choose to offer an Employee Assistance Program (EAP) (Box 10), and individuals can also seek personal support through a GP and other health professionals. Your role is to raise awareness about, and facilitate access to, reliable supports. Leaders must be equipped with the confidence and knowledge to suggest resources, and be empowered to take practical steps so people can use them (for example, the ability to access support during work hours).

Box 10.

Employee Assistance Programs

EAPs are one way to protect and promote people's mental health. Many EAPs offer far more than simply in-person crisis support, and the flexible and confidential nature of these services can make them a valuable resource. If your organisation has an EAP, consider whether you make the most of it. You might want to think about:

- communicating regularly with workers about your EAP

- working with your EAP to tailor your program to your workforce (for example, providing on-site services, understanding unique aspects of your work environment or workforce)

- making yourself aware of all the services included (for example, manager coaching/assistance, seminars, self-service information, apps, support for family members)

- making yourself aware of all the topics that are covered (for example, parental support, elder care, financial wellness, alcohol or substance abuse, trauma, work–life balance)

- using on-site support for individuals and teams during significant disruptions

- designating EAP champions across your organisation

- highlighting the work–life resources that focus on prevention

- monitoring and analysing trends in EAP use, including identifying any barriers to access, and workers' perceptions of effectiveness

- training your managers in how to talk to team members about your EAP.

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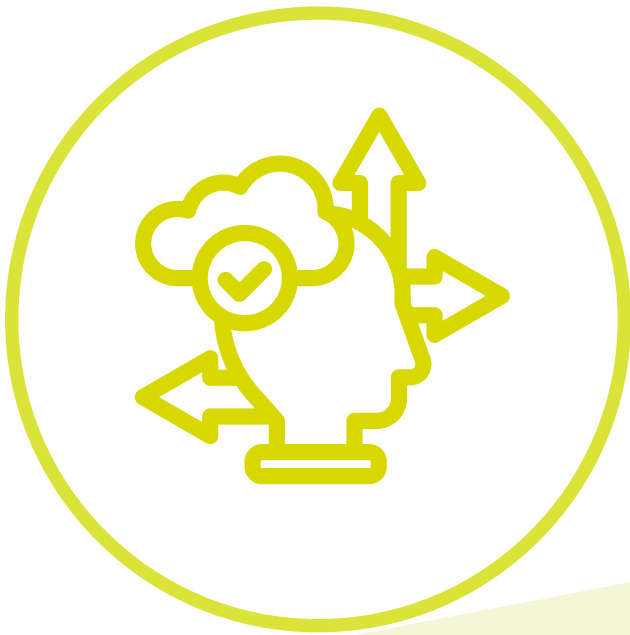
Responding to mental health and wellbeing impacts

The During phase: Responding to mental health and wellbeing impacts

The **During phase** is the brief period when change has been triggered. Sometimes people anticipate change and can experience anxiety, panic or stress in response to the announcement of upcoming change.

Depending on the event, this is a phase of increased activity when people launch the changes (if it is internal) or deal with the impacts (if it is external). The key focus is meeting basic safety needs and applying people skills.

Although this phase is often short, it depends on the nature of the change or disruption; for example, for some crises it might be a matter of days but for others the response could last several weeks. There is unlikely to be a defined transition from During to After following change, but you can still take specific actions to protect and promote mental health and wellbeing in this phase.

Key takeaways

This phase is about **supporting mental health** during the immediate impacts of change. All change requires good communication, and leaders must be alert to how their team is coping. Some events may also require specific trauma-informed actions and the support of mental health professionals.

At an organisation level:

- Implement plans that have been created in the Before phase.

- Use 2-way communication channels, ensuring messages are simple, credible, consistent and timely.

- Support leaders with the tools and resources they need to protect and promote the mental health of their team members.

- Encourage leaders to practise self-care and model good mental health and wellbeing behaviours.

At a team level:

- Make sure people's basic safety needs are met.

- Notice changes in the behaviour and appearance of team members.

- Raise awareness about the supports available to people, remove barriers and allow time so people can access them as needed.

- Cascade organisation-wide messages to team members using the tools and prompts provided.

⊙ What you can do at an organisational level

Your role at an organisational level will depend on the characteristics of the change. Essentially, you need to implement the relevant action plan, and support leaders who directly care for their teams' mental health and wellbeing.

Implement plans and communicate
In this phase, one of your highest priorities is implementing plans that were created as part of anticipate and plan. An internal, anticipated change—such as a new IT system— may have a specific, detailed plan ready to launch. An external, unanticipated change will require adapting a general risk-informed plan. Depending on the severity and pace of the event, realigning the plan may occur in parallel to other actions. It will be necessary to be adaptable as plans are tested and feedback received.

Consistent communication is vital as people look to a source of truth to help make sense of what is happening (Box 11). Review what is included in any communication plans and facilitate communication at all levels of the organisation. To achieve this, you can:

- host regular organisation-wide and departmental forums where top management answers workers' questions in real time

- use credible sources to convey information and provide advice

- release accurate information as soon as possible and repeat key messages

- set up formal and informal one-on-one and team communication opportunities between team leaders and workers

- provide communication channels for workers to relay their needs, questions and opinions. In addition to online meetings, it can be worth increasing electronic team communication via desktop alerts, apps, email, phone calls and text messages

- launch surveys asking workers about key concerns and seeking feedback (including how communication channels are, or are not, working).

Remember, change is likely to be challenging for all your leaders as well as team members, so prepare key messages and equip leaders with 'talking points' and responses to anticipated questions. If resources allow, establish a communications team where mental health practitioners work in partnership with communications specialists to manage organisation-wide communication.

Figure 2. Communication during events with internal versus external sources

Communication for anticipated, internal events is most effective when it includes:

- **Purpose:** why is this change occurring now
- **Vision:** what will the workplace look and feel like when the change is embedded
- **WIIFM:** 'what's in it for me', how will this benefit me
- **Approach:** what is the plan to implement the changes
- **Clarity**: what do people need to do in their own role to help make the change successful
- **Support:** where can people access further supports if needed (e.g. Employee Assistance Program, helplines, resources)
- **Consultation**: what are people saying they need in response to the changes

For situations involving an unanticipated disruption—from an external source and perhaps with a broader scope and longer duration—communication is most effective when:

- **Reality is acknowledged,** including the gravity of concerns and uncertainty
- **Reassurance is provided** by senior leaders who explain they are doing all they can
- Messages are **simple, credible and consistent**
- **The likely course of events** is explained openly and honestly
- **Practical steps** are provided that help people move on and minimise further harm
- **Sensitivity** is shown for cultural differences and vulnerable cohorts
- Information is provided **visually and verbally**[57]

Box 11.

Timing of communications

For anticipated events, you have more control of the situation, and it can be beneficial to consider the timing of announcements. For example, involuntary redundancies are better done mid-week to allow workers (and in some cases, their families) to get transition support before the weekend.[58]

For events with the potential for significant harm, such as those with a broad scope, release accurate information as soon as possible. People tend to believe the first message and in the absence of information, rumours start. Ensure messages are repeated and come from multiple credible sources.[59]

Supporting leaders to support teams

Your leaders are in the thick of it when an internal change is launched or external disruption hits. If they know their people, then they will provide valuable insights into how the organisation can help protect and promote mental health. Support your leaders in the following ways:

- Make it easy to share information about supports and for people to access them (for example, arranging for mental health professionals to be on site, and if necessary, engaging trauma specialists for expert provision of trauma-informed supports and psychological first aid).

- Work with Employee Assistance Program Manager Assist services (if you have them) to provide consistent and tailored support to leaders, and ensure leaders know when and how to access this assistance.

- Increase entitlements such as compassionate and bereavement leave or introduce special paid leave and additional flexibility so people have more options available to them as they navigate the immediate impacts of change.

- Align these policies with other policies and processes so leaders know what their options are in the current environment and can quickly approve requests.

- Review what is necessary from an operational perspective so job demands are realistic.

- Provide tools to leaders so they develop team plans for unforeseen situations (for example, when a worker needs to leave suddenly to attend to personal circumstances).

- Consider the need for financial assistance during highly disruptive events, such as:

  - helping people to navigate the bureaucracy to access government payments (for example, during COVID-19 some people became eligible for support payments)

- paying cash grants so people can pay for immediate relief (for example, in a disaster that affects home as well as work)
- offering a variety of vouchers that relate to workers' needs as expressed through feedback (but avoiding assumptions about what would be helpful).

Organisations may have obligations to support workers permanently leaving the organisation. Providing support not only helps protect the mental health of those who are leaving, it can be beneficial for those who remain with the organisation. If workers perceive redundancies or layoffs as unfair, those who remain can experience psychological effects, as well as those who leave.[60] There are several ways to improve perceptions of fairness during downsizing, one of which is offering resources and support to all workers.

Supporting leaders to support themselves
You and your leadership team also need support to manage the pressures of change and disruption. Leaders-of-leaders have an important role in supporting managers that report to them and encouraging them to seek mental health supports if stressors become difficult to manage with usual coping strategies. As a role model, it is important that your team sees you looking after your own mental health and wellbeing, and responding effectively to the situation.

While your organisation has a responsibility to support the mental health of all workers, leaders can also support themselves by focusing on positive coping strategies, particularly in response to any physical and emotional warning signs of stress.[61]

- Prioritise basic needs: sleeping, eating well, taking breaks (that sometimes include being active) and connecting with others.

- Connect with trusted colleagues to help with decision making and keeping a wider perspective (remembering that stress can narrow focus, making it challenging to think innovatively or take in a range of information).

- Build in time to pause before announcements or important updates to deliver messages in calmer, more constructive ways. Ask yourself the following:

  - Am I jumping to conclusions too fast?
  - What else can be true at this moment?
  - What is important to me and my team right now?
  - With the information on the table now, make a conscious decision about the best way to move towards what matters most.[62]

- Address problems over which you clearly have some influence because this helps you manage your environment and improve the situation. Key strategies in problem-based coping are:

  - **Brainstorming a plan**: Focus on issues that you can directly control. Be aware of your rights and responsibilities and think creatively to work out options.
  - **Advocating for yourself**: Be aware of what will support your mental health and ask for relevant adjustments from your organisation.
  - **Taking action**: Use the support and strategies that are available to you both within the organisation and elsewhere.

● What you can do at a team level

Meet basic physical and psychological safety needs
Depending on the characteristics of the change, leaders will need to undertake key actions to ensure the physical and psychological safety of their people. For disruption of a critical or crisis nature (for example, disasters), this may mean ensuring physical safety, promoting calm[63] and addressing trauma in the workplace.

For other types of disruption, the focus will be reducing psychosocial hazards. Leaders support workers by:[64]

- continuing to personally provide clear communication to workers about changes and how it is relevant to roles

- maintaining an open-door policy so workers know they can come and talk openly about their concerns

- noticing how people are being impacted and listening carefully if they share their current worries and needs

- proactively initiating compassionate conversations (keeping in mind that **not everyone will want or need support** and that this can change)

- taking practical steps to connect workers to appropriate supports and support networks, as required.

Be alert to negative impacts on mental health and wellbeing
As noted, you and your leaders 'set the scene' when it comes to conversations about mental health and wellbeing. A leader who encourages open communication immediately after a change can create an environment where it is safe to be honest and seek help. You can reassure workers that stress is a common and understandable experience when faced with a challenge that has an uncertain outcome, and that the symptoms of stress often settle once the challenge has been dealt with.

People have their own combination of strengths, vulnerabilities and reactions to change and difficult experiences. Rather than expecting yourself and your leaders to be aware of all the signs and symptoms of possible mental health issues in workers, you can look out for changes in team members from the baseline observed in the Before phase.

While paying attention to changes to people's usual, or 'baseline' behaviour, is often effective, some leaders also want to know typical signs of stress or changes to mental health (Box 12).[65] Noticing these changes is a prompt to begin a conversation and check in with workers (Box 13).

Box 12.

Signs of stress or changes to mental health

Physical symptoms can include fatigue or exhaustion, a racing heart, shallow and fast breathing, sleeping difficulties, muscle tension and headaches, skin disorders and gastrointestinal upsets.

Psychological symptoms can include worrying more than usual, feeling 'on edge', overwhelmed and/or unable to cope, feeling anxious and afraid, feeling sad, down, or hopeless about the future and having difficulty concentrating or making decisions.

Behavioural symptoms can include a drop in work performance, apparent changes in memory, concentration and decision making, complaints about workload or management support, increased sick leave and unplanned absences, more conflict with others (or avoiding contact with colleagues altogether), being irritable and increased substance use.

Box 13.

How to have a compassionate conversation with a colleague

It is never too early to check in with colleagues about how they are going, particularly if any of the signs of stress and overwhelm are present. This is how to get started:[66]

First, check on yourself before starting a conversation. Ask yourself:

- What are my assumptions? We often do not have the full picture of others' lives and our own judgements can get in the way.

- What do I hope to achieve by having this conversation? The goal is to demonstrate you are paying attention and are willing to help.

- How can I keep my desires to 'fix' the problem from interfering with my ability to listen and be supportive? Often, we want to influence people towards a certain outcome. Instead, it helps to simply listen for what people tell us they need.

- Am I ready to do this now? Make sure your physical and psychological needs are sufficiently met before helping others.

Starting the conversation and how to keep it going

Always begin a check-in conversation by sharing what you have noticed. Try:

- *"I've noticed you've been starting work later. How are things going at the moment?"*

- *"I've noticed you've seemed distracted/upset/ worried recently. What's been happening?"*

- *"I just noticed you're not yourself. Is everything okay?"*

Some people will not want to talk saying things like *"I'm fine"* or *"There's nothing wrong"*. If that happens, you have still done a good thing by checking in and it is not your responsibility to push. You could say something like: *"I was concerned/ worried so just wanted to ask. You've said you're okay, and I'll take your word for it. If that changes, I'm here to talk"*.

If a worker responds openly to your question, keep the conversation going by asking further questions. Listen for where the individual feels unsupported or is not getting their needs met then summarise what you hear. It also helps to highlight strengths they are showing such as their courage dealing with the situation. Then, identify possible avenues for support.

See this Supportive Conversation Library for more information and prompts to help leaders address diverse challenges.

Link people to appropriate support
At times, it is appropriate to link workers with mental health support. When people know their options, they can access support more easily, particularly in the heightened pressure of the During phase.

As we saw in the previous section, some workers may need more support in this phase. They may also have tried strategies to reduce stress that had been effective in the past but do not seem to help now, or

are using unhelpful strategies (for example, drinking alcohol, smoking more). Changes in mood or behaviour that might require mental health support are generally present for 2 weeks or longer, which shows the importance of keeping an eye on how team members are functioning well into the recovery phase following an event. Although, if someone appears distressed, do not wait 2 weeks to have a conversation and link them to supports!

If a worker needs urgent mental health support, the best options are to call 000 or support them to visit a hospital emergency department. This might be because you are worried about their safety, or there is a risk of harm towards another person. You can also provide workers with easy access to helplines for out-of-hours crisis and telephone counselling support.

In the immediate aftermath of change, workers (and their families) may choose to seek mental health and wellbeing support through Employee Assistance Program services (if available), their GP, community health centre or mental health professional.

A GP will provide treatment and/or refer workers to mental health services as needed via a mental health treatment plan to access treatment sessions with a

psychologist at reduced cost. More information is available through mental health services—see Medicare on the Services Australia website. During widespread disruption (for example, COVID-19 or other disasters), governments often set up specific schemes to reduce barriers to access.

Communicate and connect
Demonstrating concern and a willingness to listen, encouraging people to raise their concerns and issues, and communicating consistently help generate the trust and connection that people need during all changes. Be aware of your role in cascading organisation-wide communications and use any prepared talking points and frequently asked questions to support consistency between teams.

Box 14.

When damaging internal events happen

At times, organisations can do the wrong thing in relation to the environment, community, society, ethics, business practices or even their own workers. Examples include fraud, bullying and harassment, negative Royal Commission findings, or causing environmental damage. Poor management of other types of change can also cause harm, for example, not following due process during an organisational restructure.

Events such as these can come with significant negative media attention, and often the people managing the fallout had nothing to do with the original event. Moral conflict between workers and an organisation after a scandal damages the psychological contract; that is, the 'unwritten agreement' about employer and worker expectations is damaged. This can negatively impact worker engagement and trust, which in turn can increase stress and lower job satisfaction. Unethical behaviour by leaders can severely damage trust, which in turn may impact mental health.[67]

In situations such as this, repairing trust becomes an important component of protecting and promoting mental health and wellbeing. Gillespie and Siebert's 4-stage model of repairing trust is outlined below:[68]

- **Immediate response** (within the first few days of the event). This response could be a simple acknowledgement of the event or information about activities to investigate or intervene. The purpose is to create a shared understanding of what went wrong and why. It also needs to be done in a way that resolves negative emotions; strategies such as an apology or re-establishing expectations can be effective.

- **Diagnosis.** Investigate the causes of the failure in a timely, accurate and transparent manner. Disclosing this information openly can help to lessen the damaging impact of negative information on trust.

- **Reforming interventions.** Implement improvements to organisational systems and processes to prevent issues in the future and demonstrate trustworthiness. This needs to be aligned with the diagnosis and may include structural and procedural, cultural, strategic and leadership practice reforms.

Box 14. When damaging internal events happen

- **Evaluation.** The effectiveness of the actions taken must be monitored and adjusted based on feedback. This not only improves the quality of the interventions, but also demonstrates an ongoing commitment to rectify what went wrong.

When workers perceive the organisation acted unethically, or did the wrong thing by the community, customers or workers, the negative follow-on impacts can be significant. Taking immediate and proactive steps to repair trust is necessary to protect mental health and wellbeing as well as productivity, engagement and commitment to the organisation. These actions should be done in addition to the other actions recommended for During and After change.

3

Supporting recovery

The After phase: Supporting recovery

The **After phase** is the period of transition after change that focuses on adjustments and recovery.

The duration of the After phase and transition to business as usual will vary depending on the characteristics of the change (for example, source, scope), the impact on the business and teams, the organisational response and the responses of workers. Recovery is non-linear, and people's experiences will differ.

Another event (that is, a return to the During phase) can happen at any time and will impact people differently depending on personal and work factors. When an event happens, focus on During actions, but in the After phase, be aware of the ongoing impacts of multiple events. Subsequent events do not cancel out the previous ones; rather, the effects are more likely to be cumulative (see Box 16).

This section contains information to guide your response to support worker mental health and wellbeing throughout the 'long tail' of change.

Key takeaways

This phase is about **supporting recovery** wherever people are at in terms of their mental health and wellbeing.

At an organisational level:

- Take stock of where you are at in relation to the change plans and identify any new or ongoing psychological hazards.

- Make sure your workers understand how any change impacts their day-to-day work.

- Consider flexible work practices and provide autonomy where possible.

- Consult with leaders and workers to implement 'lessons learned' from this disruption event.

At a team level

- Keep 2-way communication channels open and effective.

- Make sure people are aware of the support available to them.

- Use rituals to acknowledge feelings of loss about the way things used to be.

- Actively encourage and model self-care.

◉ What you can do at an organisational level

Take stock
The first thing to do is to take stock of where you are in relation to the change plan. Update the plan for the After phase according to what has and has not been achieved, reflecting that you now know more about the situation (for example, see case study 3: How Medibank navigated a major cybercrime event in *Stories from the field: Case studies* in managing change and disruption). Remember, people's mental health and wellbeing may go up and down during this phase; people may cope well initially, but that does not mean their mental health is unaffected.

Mental health awareness and knowledge of leaders and workers may have been built before and/or during the change. If not, training, resources and tools can be provided now. This step is an opportunity to ensure training is relevant to where people are in the cycle of change.

Clarify job design
Lack of role clarity and work demands are known psychosocial hazards, and change can undo the assumptions and understanding people have about their jobs. Several factors can alter a person's role and increase their workload; for example, jobs may have formally changed, people may be on leave with others backfilling roles, or operations may have adapted to accommodate the change.

When clarifying and addressing changes to people's jobs, review work-related pressures (including job demands, work adjustments and organisational controls) to manage any stressors and other impacts following change. Support team leaders to have formal or informal discussions to gain greater clarity around aspects of their jobs, such as:

- **temporary role changes** that support the transition as well as permanent changes to role and structure

- **the role of the team** within the organisation, such as what the team produces, how it interacts with other areas of the organisation, and how this may have changed

- **interactions between team members** to ensure individuals continue to work together productively to achieve team goals

- **resources, tools and support** people need to do their job and how to access them

- **the physical environment**, for example, do people need to sit together to support one another, are there quiet spaces and spaces for collaboration

- **training** for people who have new responsibilities

- **assumptions** about things that may have previously been taken for granted, like core working hours, or the organisation's capacity to support hybrid work arrangements.

As part of the transition to business as usual, it can be helpful to provide workers with the necessary capacity to adapt to change. This may involve giving them more time to adjust to new routines and complete tasks, and more leeway when dealing with mistakes that are out of character. Initiating conversations about how the change has affected their routines and work environment may provide useful insights about ways to effectively support them to adapt.

Think about flexibility and autonomy
Low job control is another psychosocial hazard, and you can take practical actions to provide greater autonomy and flexibility during change. Increase job control by focusing on the 'what'—the outputs—rather than telling people 'how' to perform their job. During change, consider which outputs have the highest priority to better manage job demands.

If job scope alters following the change, consult workers about how to do things differently as a team. Examples include people setting their own work schedules, working with their team to agree shared work-from-home days, and reviewing and changing deadlines as needed.

Flexible work can be an effective way to build autonomy and control into jobs. Develop policies that allow any worker to request flexible work, even though only some protected categories of worker have the right to request through Fair Work legislation (for example, parents of school aged children or younger, carers, etc.). Flexible working arrangements are often most effective when co-designed with individuals and teams, and regularly reviewed to ensure they meet everyone's needs. Flexible work goes beyond part-time and work-from-home arrangements; it can include variations such as changes to core working hours, breaks and leave.

Return-to-work plans are a useful tool to support the transition back to work for those who took extended leave or used a flexible work arrangement to reduce their hours for a period. Each plan is co-developed between the worker and their manager, and potentially with other key stakeholders such as the worker's healthcare provider. It describes strategies and goals so the worker can remain at work with supports and redesign, or safely return to work when ready.

Flexibility and autonomy are examples of reasonable adjustments. Leaders may need to implement other reasonable adjustments, and the organisation plays an important role in facilitating these adjustments. Adjustments are often guided by legal rights and responsibilities, as well as recommendations from practitioners (such as GPs, psychologists and psychiatrists).

Review, learn, update

A formal process of reflection and learning in the After phase is important, and should engage workers. Improvements can be considered at any time before, during and after change, but making time to be intentional has additional benefits. It improves planning and preparedness for future events and helps to create a sense of closure about the current event.

You should consider: (a) improvements in response to the current environmental, political or social change; and (b) improvements to how individuals, teams and the organisation overall are prepared for, and supported through, future change. Activities may include:

- reviewing policies (creating new policies or updating existing ones)

- refreshing training programs and ensuring people are up to date

- providing easier access to supports and resources

- revisiting the risk assessment and futures thinking exercises

- refreshing plans for unknown and likely disruptions

- seeking feedback through consultation (particularly if a survey was also done before or during the change).

This review, reflection and learning provides a great opportunity to involve people and strengthen the organisation's preparation for future change. Establishing a working group (or something similar) can contribute to people's sense of control during change. It can also help keep initiatives focused and practical.

⊙ What you can do at a team level

Communicate and connect

For many workers, the way they are treated by their line manager and the behaviour of organisational leaders during this time can significantly influence how they feel about themselves, the change and their work. The trust built and maintained in the Before and During stages provides the foundation for this.

Prioritise communication and transparency so workers feel informed and connected during uncertainty. The tone, pace and channels of communication will adjust over time—sometimes intentionally, and sometimes naturally as people's needs shift. Consistent messaging across the business helps counter rumours. As a leader, it is important to stay connected to the communications and decisions so you can act as a trusted advisor to your team.

Some people will seek information to confirm their understanding of the world and work post-disruption, and what it means for them. Leaders can help create an environment where people can discuss and share their experience to make sense of what happened.

Link to mental health and wellbeing supports

As in all phases of the change cycle, stay attentive to signs of mental health difficulties and someone not coping after the event, such as the physical, psychological or behavioural symptoms outlined in the During phase. Evidence suggests the risk factors most predictive of mental ill-health are those that are active after the disruption:

- a lack of access to effective social support (for example, colleagues, supervisors, family and friends)

- added stressors present during recovery, either from direct influences (for example, poor health, bereavement or moral injury) or secondary stressors (for example, financial stressors, relationship problems or changed working conditions).

Evidence shows workers who experience multiple changes, or added stressors, can experience cumulative stress,[69] which makes recovery more challenging. Workers may notice a reduced capacity to cope with even small challenges that they would normally deal with. Support provided at this stage should consider this additional complexity and potential impact on mental health and wellbeing.

When workers cannot access genuine support and resources during and after disruption, they may develop disenfranchised grief. This grief is 'a loss that is not or cannot be openly acknowledged, publicly mourned or socially supported' and can occur at any time.[70] Research shows stigma associated with suffering is a major contributor to disenfranchised grief.[71] In this context, stigma is when people are negatively labelled or stereotyped because of their response to loss and grief.[72] Particularly in high-pressure work environments such as leadership roles, prestigious organisations and competitive workplaces, people may feel pressured to be seen to be okay, which can foster feelings of shame and embarrassment about their mental health challenges[73] and make it difficult for individuals to seek help and support. Having a compassionate conversation with a worker who displays signs of not coping is a good start and can start to remove barriers to seeking support.

Acknowledge loss of the 'way things were'
Events often signify the end of something—for example, a store closing is the end of a physical space; a cyberattack could be the end of assumptions we make about digital safety and privacy. Change can require us to let go of the way things used to be and our old identity. Often, people do not like endings, and it is important to acknowledge this loss of the 'way things were'.[27] Acknowledging loss can be done early in the After phase, as well as at anniversaries and on other notable occasions. You can recognise disruption and any associated loss many ways. Whatever is done should be designed with input from workers, considering the event, your culture and the emotions that people feel regarding the change. Examples might include creating spaces for memorials where workers can visit and reflect, conducting a meaningful ritual or hosting an anniversary event where workers can come together for support. Acknowledgement and rituals in a workplace setting support psychological safety and purpose, and can increase performance.[70]

Actively encourage self-care
Fostering a culture that enables and prioritises self-care is an important factor in reducing post-disruption mental health issues. As noted previously, one of your roles is to model self-care by actively seeking appropriate supports and taking time for self-care activities.

Promoting and incorporating positive coping strategies into the workday is a good way to demonstrate your commitment to health and wellbeing. Senior leaders must also set this same example. Simple initiatives like encouraging walking meetings, sharing healthy recipes and creating opportunities to connect about non-work interests can all be effective when combined with other initiatives discussed throughout this guide (Box 15).

Box 15.

Encourage people to ask for help

Social connections

We know promoting and maintaining social connections through this period is essential—people with good support networks tend to cope better with the impact of disruption.[46] You can encourage a worker to connect across domains of support, always remembering to tailor support to the person's needs, the current situation and the limits of your role.

Practical support

Encourage people to think about the assistance they need and where they might be able to get it from. Ask:

- Can you manage your current workload? What can you put on hold for now?

- Are there things you can get help with from friends or paid services, such as babysitting, meal delivery, cleaning or other things that support recovery?

- Who provides you with practical support when you need it, both at work and at home?

- Do you need help accessing financial assistance or advice? Do you know what financial supports you are eligible for?

- Do you need information about insurance claims or claiming other services?

Emotional support and companionship

There are many different kinds of emotional support, and most people need support from several sources. Managers can prompt people to consider whether they need to seek out more support.[46] Ask:

- Who are your most important sources of support at present?

- Who can you, or do you want to, spend time with socially at present?

- Who can you share your experiences or feelings with?

- Who can you count on, no matter what?

- Who or what (including pets) provides you with companionship?

Box 16.

Events impacting work and life for a long duration

Events that impact workers across multiple life domains (for example, home, work, hobbies, family) with long-term or permanent consequences are particularly overwhelming for individuals and challenging for employers. Often, these events are beyond the control of those affected, such as floods, fires, pandemics, recessions and technology innovations.

Creating a strong foundation in the Before phase is crucial. A disruption-resilient organisation with empathetic and adaptable leaders already trained in core skills allows the organisation to be flexible and responsive.

If an event was anticipated, then you may already have a plan in place, or a general plan for unanticipated events that you can quickly tailor. Ideally, you will have made an effort to get to know your people, so you are aware of concurrent stressors and the supports people have in place, and are able to notice signs of not coping.

Remind people to access supports and resources as needed. When the duration is long, this action is not 'set and forget'; it is something you need to revisit. Refer people to trusted sources, such as resources for workers on the Mentally Healthy Workplaces site. Similarly, remind people about relevant policies, and plan to fill any policy gaps at the appropriate time.

Some events with a slow onset may not have a decisive start date. For example, economists may claim a start-date for a recession, but that may not be when people feel its impact. Some people may see it coming and feel anxious before the recession is 'official', while others may not acknowledge its impact until bank balances are low or they experience job uncertainty. Communication is essential for these slow onset disruptions. You can share what you do and do not know about what is happening and what it means for your organisation. Invite questions and discussion, even if you do not have answers.

It may be useful to properly acknowledge a slow onset disruption. Even if no one can put a date to when it started, it is valuable to pause and recognise the impact and loss it caused. This pause can help reinforce efforts to support one another, reflect on how people are being impacted at home and work, and become more vigilant in noticing signs that people are not coping.

With slow onset and long duration disruption events, you need to be ready to move between Before, During and After phases or be in more than one phase concurrently across an organisation. It might be that the recession is real, and your leaders are supporting their people effectively, but then redundancies are necessary. This will require Before phase planning, then During phase actions when layoffs happen, while at the same time After phase actions continue.

This is part of the messy reality of change. A strong foundation allows leaders to support their teams even when the boundaries between Before, During and After phases are not distinct.

Appendix A: Checklist for unanticipated disruptions

Use this high-level checklist when an unanticipated disruption occurs. It assumes the organisation has already undertaken steps to prepare for change and disruption more generally, as appropriate in the Before phase.

During phase

Organisational level actions

Identify psychosocial risks

- Identify psychosocial hazards and the risk to the health, safety and wellbeing of workers.
- Consider risks specific to cohorts and individual role types.
- Identify, document and implement controls and interventions.

Communicate

- Prepare key messages and equip your leaders with 'talking points' (i.e. responses to anticipated questions and reminders of available psychological support resources/referrals).
- Host regular organisation-wide and/or departmental forums where top management answers workers' questions.
- Cascade organisation-wide messages to team members. Release accurate information as soon as possible and repeat key messages.
- Run information sessions and webinars with details about the change or disruption.
- Set up formal and informal one-on-one and team communication opportunities between team leaders and workers.
- Provide communication channels for workers to relay their needs, questions and opinions.
- Increase electronic team communication via desktop alerts, apps, email, phone calls and text messages.
- Launch surveys asking workers about key concerns and gain feedback (including how communication channels are, or are not, working).

Support leaders

- Arrange for Employee Assistance Program mental health professionals to be easily accessible within working hours; if relevant engage trauma specialists.

- Consider gaps in knowledge and skills that need to be addressed as a priority.
- Identify relevant policies and ensure they are readily accessible to leaders and workers. Implement actions to comply with policies and procedures.
- Update policies as required (e.g. increase entitlements or change approval processes so that leaders can authorise quickly).
- Equip leaders with tools specific to the current disruption.
- Actively encourage and model self-care.

Team level actions

- Check in with staff. Make sure their basic safety needs are met (e.g. food, water, shelter and any financial assistance).
- Identify psychosocial hazards and the risk to the health, safety and wellbeing of workers. Implement controls and interventions.
- Notice changes in the behaviour and appearance of workers and listen carefully if they share their current worries and needs.
- Communicate supports available to your workers (e.g. Employee Assistance Program, group sessions, wellbeing check-in calls, opportunities for meditation and mindfulness).
- Remove barriers to these supports and allow time for workers to access them.
- Provide informal, short-term flexible work options (e.g. alter work hours or work location, provide leave).
- As a leader, look after your own mental health and practise good self-care.

# Appendix A: Checklist for unanticipated disruptions

After phase

Organisational level actions

○ Take stock of where you are in relation to the change and disruption plans and identify any new or ongoing psychosocial hazards.

○ Make sure your workers understand how any change impacts their day-to-day work. Clearly communicate new roles, routines and structures, and clarify job design.

○ Consider flexible work practices and provide autonomy where possible. Give people control over elements of the change where possible.

○ Develop resources and programs specific to the current disruption.

○ Consult with leaders and workers to implement 'lessons learned' from this disruption event.

Team level actions

○ Keep 2-way communication channels open and effective.

○ Ensure people know the support available to them and continue to facilitate access.

○ Use rituals to acknowledge feelings of loss about the way things used to be (e.g. run an activity where people 'say goodbye' to the old way of working).

○ Regularly gauge worker sentiment about the event (e.g. send out a pulse survey).

○ As a leader, actively encourage and model self-care.
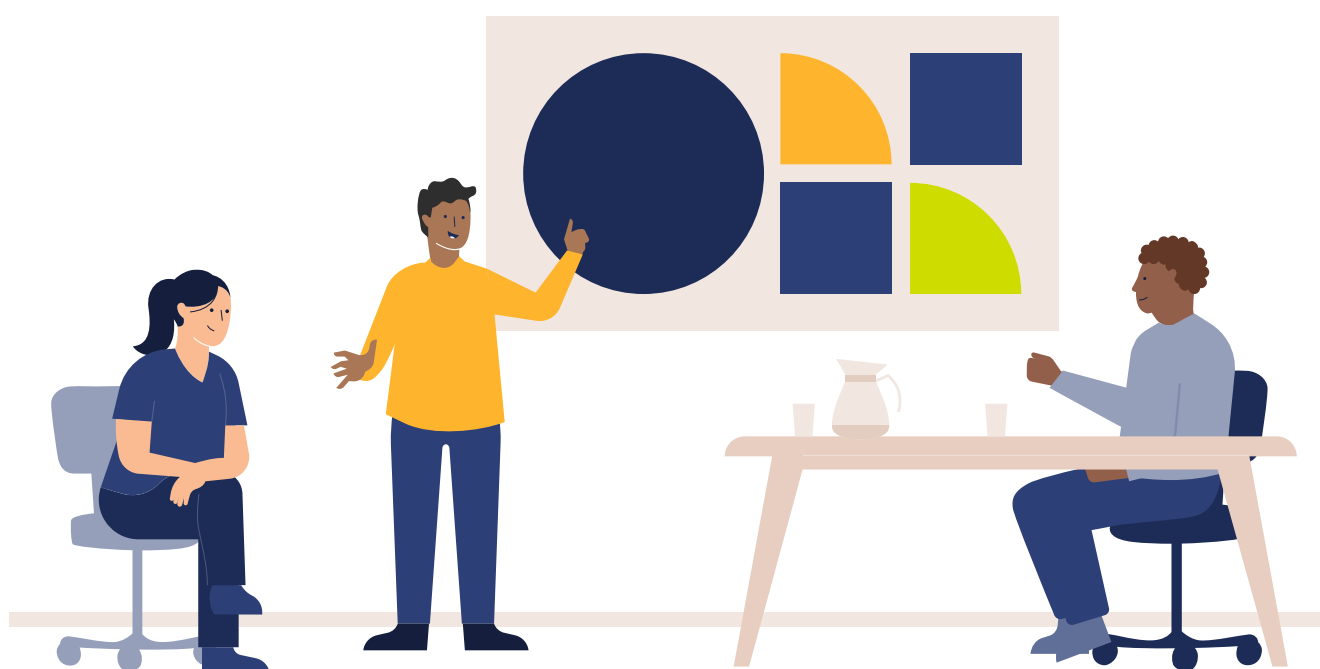
References

1. Kraaijenbrink J. What does VUCA really mean? 2018.
2. Day A, Crown SN, Ivany M. Organisational change and employee burnout: The moderating effects of support and job control. 2017. p. 4-12.
3. Heads Up. Workplace stress. 2023.
4. Milner A, Page A, Morrell S, Hobbs C, Carter G, Dudley M, et al. The effects of involuntary job loss on suicide and suicide attempts among young adults: Evidence from a matched case–control study. 2014. p. 333-40.
5. Productivity Commission. Mental health inquiry report. 2020.
6. Allianz Australia. Future thriving workplaces. 2020.
7. JobAccess. Mental health inaction costing businesses $11bn annually. 2022.
8. Lewis L. Organizational Change. In: Nicotera AM, , editors. 1st Edition ed: Routledge; 2019.
9. Day A. Disruption, change and transformation in organisations: a human relations perspective. Routledge; 2020.
10. PWC. Cross-sector mental health and organisational disruption: BSB business services training package. 2021.
11. Wisse B, Sleebos E. When change causes stress: effects of self-construal and change consequences. 2016. p. 249-64.
12. Schlossberg N. Overwhelmed: Coping with life's ups and downs. 2nd ed: M. Evans; 2008.
13. Australian Institute of Health and Welfare. Mental health services in Australia: stress and trauma. 2022.
14. Substance Abuse and Mental Health Services Administration. SAMHSA's concept of trauma and guidance for a trauma-informed approach. HHS Publication No. (SMA) 14-4884. 2014.
15. Pena PA, Van den Broucke S, Sylin M, Leysen J, De Soir E. Definitions, typologies, and processes involved in organizational trauma: a literature review. In: Háša S, , Brunet-Thornton R, , editors.: IGI Global; 2017.
16. BeyondBlue. Good practice framework for mental health and wellbeing in first responder organisations. 2016.
17. Henderson C, Isobel S. Trauma-informed leadership for organisational change: A framework. 2019.
18. Australian Human Rights Commission. Guidelines for working with a trauma-informed approach. 2021.
19. Choitz V, Wagner S. A trauma-informed approach to workforce: An introductory guide for employers and workforce development organisations. 2021.
20. Tiayon S. Four ways we can be sensitive to trauma at work. 2021.
21. World Health Organization (WHO). Psychological first aid: Guide for field workers. 2011.
22. Loretto W, Platt S, Popham F. Workplace Change and Employee Mental Health: Results from a Longitudinal Study. 2009.
23. Deci EL, Olafsen AH, Ryan RM. Self-Determination Theory in Work Organizations: The State of a Science. 2017.
24. Safe Work Australia. Managing psychosocial hazards at work: code of practice. 2022.
25. Health and Safety Executive (HSE). Tackling work-related stress using the management standards approach. 2017.
26. Costa B. Workload management. 2017.
27. Bridges W, Bridges S. Managing transitions: making the most of change. 4 ed: Nicholas Brealey Publishing; 2017.
28. Oakman J, Kinsman N, Stuckey R, Graham M, Weale V. A rapid review of mental and physical health effects of working at home: how do we optimise health? 2020. p. 1825.
29. Salin D, Hoel H. Organizational risk factors of workplace bullying. In: Einarsen SV, , Hoel H, , Zapf D, , et al., editors. 3rd ed: CRC Press; 2020.
30. Rock D. Managing with the Brain in Mind. 2009.
31. Steimer T. The biology of fear- and anxiety-related behaviors. 2002. p. 231-49.
32. Kuntz JC. Resilience in Times of Global Pandemic: Steering Recovery and Thriving Trajectories. 2021. p. 188-215.
33. Kotter JP. Leading change / John P. Kotter. 2012.
34. Hiatt J. ADKAR: A model for change in business, government and our community. 2006.
35. Creasey T. Research on emergent contributors to successful change. 2023.
36. Hines A. When Did It Start? Origin of the Foresight Field. 2020. p. 4-11.
37. Lustig P. Strategic foresight: learning from the future.: Triarchy Press; 2015.
38. Schühly A, Becker F, Klein F. The validity of traditional scenario planning. Emerald Publishing Limited; 2020. p. 23-66.
39. Cuhls KE. Horizon Scanning in Foresight – Why Horizon Scanning is only a part of the game. 2020.
40. World Economic Forum. The future of jobs report 2020. 2020.
41. Cheng M, Pringle Barnes G, Edwards C, Valyrakis M, Corduneanu R. Transition skills and strategies -

References

key transition skills at the different transition points. Enhancement Themes; 2015.

42. Stanisławski K. The Coping Circumplex Model: An Integrative Model of the Structure of Coping With Stress. 2019.

43. Grattan L, Scott A. The 100-year life: Living and working in an age of longevity. Bloomsbury; 2017.

44. Canberra Health Literacy. What is health literacy? 2021.

45. Queensland Mental Health Commission. Mental health literacy. 2023.

46. Phoenix Australia. What is psychological first aid (PFA)? 2022.

47. Phoenix Australia. Australian Guidelines for the Prevention and Treatment of Acute Stress Disorder, Posttraumatic Stress Disorder and Complex PTSD.

48. SuperFriend. Hot topics: supporting our most vulnerable workers. 2021.

49. Australian Institute of Health and Welfare. Reporting on the health of culturally and linguistically diverse populations in Australia. 2022.

50. Szulc JM, McGregor F-L, Cakir E. Neurodiversity and remote work in times of crisis: lessons for HR. 2021.

51. Colombo-Dougovito AM, Rocco Dillon S, Mpofu E. The wellbeing of people with neurodiverse conditions. In: Mpofu E, , editors.: Palgrave Macmillan; 2021. p. 499-535.

52. Bury SM, Hayward SM, Dissanayake C, Hedley D. Supporting a neurodiverse workforce: a mental health and well-being resource and training package. . La Trobe University; 2020.

53. Edmondson A. Psychological safety and learning behavior in work teams. 1999. p. 350-83.

54. Newman A, Donohue R, Eva N. Psychological safety: A systematic review of the literature. 2017. p. 521-35.

55. Coleman JS. Social capital in the creation of human capital. 1988. p. S95-S120.

56. Aldrich DP, Meyer MA. Social capital and community resilience. 2015. p. 254-69.

57. Williams R, Bisson J, Kemp V. Principles for responding to people's psychosocial and mental health needs after disasters. The Royal College of Psychiatrists; 2014.

58. Olson B, Kimball D. The Definitive Guide to Offboarding and Employee Transitions. 2019.

59. Medford-Davis LN, Kapur GB. Preparing for effective communications during disasters:

lessons from a World Health Organization quality improvement project. 2014. p. 15.

60. Bilotta I, Cheng SK, Ng LC, Corrington AR, Watson I, King EB, et al. Softening the blow: Incorporating employee perceptions of justice into best practices for layoffs during the COVID-19 pandemic. 2020. p. 69-75.

61. American Psychological Association (APA). Stress management for leaders responding to a crisis. 2022.

62. Brassey J, Kruyt M. How to demonstrate calm and optimism in a crisis. 2020.

63. Hobfoll SE, Watson P, Bell CC, Bryant RA, Brymer MJ, Friedman MJ, et al. Five Essential Elements of Immediate and Mid–Term Mass Trauma Intervention: Empirical Evidence. 2007. p. 283-315.

64. Comcare. Reducing the psychosocial risks of workplace change. 2018.

65. Black Dog Institute. Stress and its impact on you. 2023.

66. Workplace Strategies for Mental Health. Helping troubled co-workers. 2022.

67. Chughtai A, Byrne M, Flood B. Linking Ethical Leadership to Employee Well-Being: The Role of Trust in Supervisor. 2015. p. 653-63.

68. Gillespie N, Siebert S. Organizational trust repair. In: Searle R, , Nienenbar A, , Sitkin S, , editors.: Routledge; 2017. p. 284- 301.

69. Global Facility for Disaster Reduction and Recovery. Guidance note for post-disaster health sector recovery. 2017. p. 1-22.

70. Bento RF. When the show must go on. 1994. p. 35-44.

71. Tietsort CJ, Tracy SJ, Adame EA. "You Just Don't Talk about Certain Topics": How Concerns to Disclose Suffering to Leaders Constrain Compassion at Work. 2023. p. 4628.

72. Casey T, Hu X, Yi Lee Q, Carden C. Stigma towards injured or ill workers. 2021.

73. Petriglieri G, Maitlis S. When a colleague is grieving: how to provide the right kind of support. 2019.

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TRANSITIONING WELL

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