

## Evidence in support of the ESF *Leading for Better Mental Health* program

### Purpose

The ESF *Leading for Better Mental Health* program will prepare team leaders to promote and sustain a mentally healthy workplace.

This evidence matrix aligns the program with recommendations, learnings and other data from reports, reviews, research, previous leadership development programs and capability frameworks.

### Executive Summary

Positive leadership is critical to promoting a mentally healthy culture at work. By participating in a program that is strongly grounded in evidence and co-designed by wellbeing managers from across the Victorian emergency management sector, frontline leaders will be more confident and competent to address complex leadership challenges and identify organisational barriers associated with enabling mental health and wellbeing.

ESFs *Leading for Better Mental Health* has emerged from nine months of conversations and targeted evidence gathering activities with the ESF [Learning Network](#). The Learning Network is a coalition of wellbeing managers from 13 Victorian emergency management organisations who come together regularly to share resources and ideas for improving the collective wellbeing of paid and volunteer workers.

Team leaders are the target group because we know line managers have a strong impact on an individuals' experience in the workplace. The Learning Network determined that no matter what agency they serve, people who are responsible for leading frontline teams had common experiences so could learn from working together.

Co-design workshops with the Learning Network have developed a program outline that addresses the themes of emergency management workplace mental health and wellbeing, authentic leadership, mental health uplift, confident conversations, and driving organisational change for better mental health. Experts in workplace psychology and leadership have collaboratively developed the program further utilising an action learning approach whereby participants will work and learn simultaneously by addressing real-world issues with real-world consequences. Emergency services leaders will develop competence through a combination of learning and reflection, rather than through acquiring formal knowledge only. Through a series of learning modules, the participant will work through a component of online learning incorporated with scenario-based learning, group-based discussions, reflections, podcasts,

and the sharing of lived experiences. This mixed methods approach provides a unique and immersive learning environment for self-awareness, building cross-agency relationships with peers, and the acquiring of knowledge and skills that promote mental health and wellbeing. Participants learn through experience and stay motivated due to the relevance of the learning process to their working practice.

Currently, we are working to finalise the program outline with the Learning Network, begin the process of user-testing, and developing a rigorous evaluation methodology with Charles Sturt University.

Heads of agencies have endorsed the piloting of the *Leading for Better Mental Health* program. They have committed to socialise the pilot program amongst leaders in their agency and sponsor the participants in their respective agencies.

In sum, this program will be:

- Not just another training program – it will provide a unique leadership development opportunity specifically focused on leading for better mental health
- Delivered as a sector wide initiative with representatives from each agency
- Delivered online via Zoom over six months with flexibility for self-paced learning because we are mindful people are busy
- Using an online platform to host discussion blogs, podcasts and video recordings, surveys, readings, and resources

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
<b>Reviews and reports</b>			
Victoria Police 2016, Victoria Police Mental Health Review: An	Urgent need for people-focused leadership.	People-focused leadership capability is a mental health protective factor that operates through building supportive,	Developing ‘people-focused’ (ie. Authentic) leaders.

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
<p>Independent Review into The Mental Health and Wellbeing of Victoria Police Employees.</p> <p>Victoria Police 2017, Mental Health and Wellbeing Strategy and Action Plan 2017-2020</p>	<p>Leadership is a strategic objective of VicPol’s ‘Mental Health and Wellbeing Strategy and Action Plan 2017-2020’ – “Building confidence, capability and accountability at all leadership levels across the organisation to support a culture of mental health”</p> <p>Command and control type leadership is non-productive outside an op incident setting</p>	<p>cohesive and engaging team-based processes and practices.</p> <p>Police leadership has typically had its origins in operational incident management, which has carried over into the non-operational work environment.</p> <p>Command and control models of leadership used outside of an operational incident setting can have negative impacts such as reduced morale and engagement. People-focused leadership positively impacts employees through building supportive and engaged team-based structures and practices. Psychologically healthy environments are associated with improvements in wellbeing and reductions in mental health and risk of psychological injury.</p>	<p>Providing a holistic, long-term, and peer supported approach that responds to the aims of VicPol’s priority area of Leadership Culture Change Program.</p> <p>Support leaders to develop skills in self-awareness and authenticity to manage and adjust emotions to different environments (control and command and day to day)</p>
<p>Beyond Blue 2018 <i>Answering the Call National Survey</i></p>	<p>It is important that agencies work together, through peak body working groups, intra-state collaborations and/or community of practice groups to share resources, information and knowledge</p>	<p>Smaller agencies and jurisdictions may face challenges resourcing the recommendations arising from this report.</p>	<p>Working together – bringing career and volunteer workers, from better and less well-resourced agencies into collaboration</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<p>and to support each other to achieve the changes required (p. 22, exec. summary).</p> <p>Agencies should also adopt a collaborative approach to any action taken on mental health – by working with unions and peak bodies, and also working closely with staff, volunteers and their families, and creating opportunities for participation and co-design” (p. 22, exec. summary).</p> <p>Guiding principles to support rec#1:</p> <ul style="list-style-type: none"> <li>• ensuring leadership is shown at every level so employees become more trusting of their agency’s commitment</li> <li>• identifying mental health champions (especially leaders and those with greater than 10 years of service) within the agency, who are willing to share their personal stories and provide information and resources for others to increase knowledge about mental health and wellbeing, targeted at personnel, managers and leaders</li> </ul>	<ul style="list-style-type: none"> <li>• The level of support provided by management, such as allowing time off after a traumatic incident and management recognition of work done – <b>Page 75</b></li> <li>• Workplace Stress: The extent to which general workplace factors may cause stress, such as leadership styles, resource shortages, a negative team environment and excessive administrative duties – <b>Page 75</b></li> <li>• 6.1.5 Workplace stress - employees There were notable differences in the levels of stress associated with general workplace characteristics. For example, 31% of employees indicated high levels of stress due to both staff shortages and authoritative leadership styles - <b>Page 77</b></li> </ul>	<p>Creating opportunities for cross-agency collaboration and participation in co-designing a program for mutual benefit</p> <p>Working with leaders at the level of line manager, as a complement to the more usual activity at the senior/exec level</p> <p>Encouraging agencies to selected participants with the potential to be champions</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<ul style="list-style-type: none"> <li>• promoting the positive message that personnel are supportive of colleagues who are experiencing mental health conditions.</li> <li>• Providing safe and inclusive environments that support and encourage personnel to seek assistance, allow them to be treated with respect and dignity, and encourage them to participate actively in life and work free.</li> </ul>	<ul style="list-style-type: none"> <li>• Table 6.1.5: Proportion of employees indicating general workplace factors were unsatisfactory, by sector. This includes authoritative leaders and stressful upper management - Page 78</li> <li>• The prevalence of suicidal thoughts and planning. Those who thought about or planned for suicide indicated: <ul style="list-style-type: none"> <li>- Their work taking up so much time and energy that is negatively affected their private life;</li> <li>- Stress from upper management;</li> <li>- Authoritative leadership - Page 82</li> </ul> </li> </ul>	<p>Developing a program that promotes the positive and guides leaders to support others</p> <p>Developing awareness that diversity and difference is OK and an asset to teams</p>
<i>Good practice framework for mental health and wellbeing in first responder organisations</i>	<p>Core action area three – develop leadership capability</p> <p>Recommended actions include:</p>	<p>Organisational leadership is critical to promoting a mentally healthy culture at</p>	<p>Developing leadership capability by:</p> <ul style="list-style-type: none"> <li>• Taking a positive and proactive approach</li> </ul>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
n.d. Heads Up and Beyond Blue	<ul style="list-style-type: none"> <li>• Focus training and development on positive, proactive leadership practices</li> <li>• Provide training to ensure managers (particularly middle management and front-line supervisors) and leaders have appropriate skills and training to address workplace bullying</li> <li>• Provide support and training specific to leaders to manage their own mental health.</li> <li>• Ensure leaders are aware of their roles and responsibilities, including legal obligations (e.g. work health and safety, discrimination, privacy), regarding mental health in the workplace.</li> </ul>	<p>work. Leadership and management practices strongly influence how workers cope with and manage operational demands.</p> <p>Proactive leadership and management practices increase worker morale, which buffers them against the impact of work-related risk factors.</p>	<ul style="list-style-type: none"> <li>• Developing leadership among front-line supervisors to have the confidence and skills to recognise warning signs early, have difficult conversations, and know how to manage situations including bullying effectively.</li> <li>• Developing frontline leaders to have the ability to manage their own mental health.</li> <li>• Knowledge of workplace mental health – including their roles &amp; responsibilities</li> </ul>
<p><i>Good practice framework for mental health and wellbeing in first responder organisations,</i> Heads Up and Beyond Blue</p>	<p>Strategic Priority Three: Create a culture that facilitates early identification of mental health problems in first responders and encourages early help seeking.</p> <p>Action area</p> <ul style="list-style-type: none"> <li>• Managers and team leaders should play a key role in assisting staff and</li> </ul>	<p>Evidence in Beyond Blue (2018) Answering the Call report</p>	<p>Developing capacities in line managers to know how to identify and respond to mental health problems, and support their own mental health and wellbeing</p>

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	<p>members and may need additional training on how to recognise and respond to individuals experiencing mental health difficulties.</p> <ul style="list-style-type: none"> <li>To allow managers to carry out these tasks, it is important that strategies are also in place to support managers' mental health and wellbeing.</li> </ul>		
<p>Kings College, 2020, Assessing the mental health and wellbeing of the Emergency Responder community in the UK</p>	<ul style="list-style-type: none"> <li>The need for emotionally intelligent managers was often highlighted as a priority area for improvement</li> <li>The ER sector should examine what support can be offered to volunteer ERs by promoting cross-service collaboration and facilitating relationship building across the emergency services sector</li> <li>Overall, the implementation of wellbeing provision has outpaced evaluation research. There was limited evidence assessing interventions with mixed outcomes in terms of their effectiveness for improving wellbeing</li> </ul>	<p>The need for emotionally intelligent leaders and line managers to help create a culture where staff can speak openly and honestly about their mental health is supported by evidence in our systematic review that found positive leadership support was associated with better mental health and wellbeing outcomes (Soh et al., 2016, Boag-Munroe et al., 2017).</p>	<p>Developing line managers to lead for better mental health by improving their emotional intelligence through the skills and knowledge of self-awareness and authenticity.</p> <p>Working with volunteers and bringing them into collaboration, and building relationships, with other emergency management organisations.</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
		Sharing better practice and promoting collaboration within and across the services was positive in terms of designing and implementing wellbeing strategies".	Doing rigorous evaluation
Martin, A., Kristy Sanderson, E. Warnecke, S. Dawkins, L. Bartlett, K. E. Memish, J. Crawford, T. Newstead, and D. Peebles 2017, "An integrated approach to An integrated approach to workplace mental health: Nine priorities for implementation in Australia, Work, Health and Wellbeing Network, The University of Tasmania.	Priority 3: Develop emotional and social intelligence in leaders and managers	Understanding emotional responses, both their own and those of others in the workplace, is a critical skill for the modern leader and manager and should be included in efforts to develop capability in psychological health and safety	Creating opportunities for leaders to gain insight into their own strengths and weaknesses as a leader and develop their emotional intelligence to become authentic as leaders.
McCreary, D. R. 2019, Veteran and first responder mental ill health and suicide prevention: A scoping	<ul style="list-style-type: none"> <li>• There needs to be organizational buy-in for the program development, implementation, and refinement - refinement - is the key</li> </ul>	Programs often fail without buy in at all stages	Securing buy in at different levels – from the heads of agencies to line managers to wellbeing managers from participating agencies



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<p>review of prevention and early intervention programs used in Canada, Australia, New Zealand, Ireland, and the United Kingdom. British Columbia, Canada: Donald McCleary Scientific Consulting for Movember</p>	<ul style="list-style-type: none"> <li>• Program evaluation should be thorough and long-term</li> <li>• While a top down approach has some benefits, the ability for organizations to feed in their special requirements is also needed. Finding some form of balance is important.</li> <li>• Programs in the emergency service sector face the challenge of needing to reach a geographically dispersed sector that relies heavily on volunteers.</li> <li>• The most effective way to prevent, manage and protect employee mental health problems is via interventions designed to target both individual, employee-level and organisational level factors (e.g., leadership styles, workplace climate or culture)” (Memesh et al., p. 219).</li> </ul>	<p>Programs need to be tweaked after implementation to maximize their effectiveness.</p> <p>More intensive design and evaluation can be more of a burden on some staff, and may need a great deal of flexibility on the part of leadership, but it benefits them, in the long run, because if a program works well, it should have a wide range of beneficial effects on the overall organization (i.e., effective programs bring larger returns on investment).</p>	<p>Being open to refine program after implementation, based on feedback from wellbeing managers and pulse survey results from participants</p> <p>Thorough and long-term evaluation</p> <p>Offering a standardised program with flexibility for agencies to tailor to their needs</p> <p>Being inclusive of vols and career workers, meet geographic challenge by option to bring people together via online platforms</p> <p>Embedding opportunities for participants to recognise organisational barriers to positive leadership, and identify what</p>



Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>• Encourage reflective practice through clinical supervision</li>   <li>• Support professional and career development</li> </ul>	<p>Promote supervision that encourages self-reflection and addresses issues around emotion management. Evidence suggests reflective practice is key to raise self-awareness and build skill of self-regulation, and emotional intelligence is fundamental to preventing burnout.</p> <p>It is important for staff to remain intellectually engaged and challenged.</p> <p>To encourage ongoing learning, mental health providers should provide appropriate professional development opportunities</p>	<p>Training line managers in the skills of reflection, not via clinical supervision, but through other activities.</p> <p>Providing an opportunity for professional and career development</p>
<p>Petrie, K., Gayed, A., Bryan, B.T., Deady, M., Madan, I., Savic, A., Wooldridge, Z., Counson, I., Calvo, R.A., Glozier, N. and Harvey, S.B., 2018. The importance of manager support for the</p>	<ul style="list-style-type: none"> <li>• Paramedics who feel supported by management report fewer mental health problems.</li> </ul>	<p>This study looked at paramedics' experience of leadership and its influence on staff mental health</p> <p>"Our findings demonstrate the important role of manager support, assessed by manager psychosocial safety climate and manager behaviour, has in the mental health and well-being of ambulance</p>	<p>Improving skills and capabilities of managers to support staff</p>

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<p>mental health and well-being of ambulance personnel. <i>PloS one</i>, 13(5)</p>		<p>personnel. Improvement of manager psychosocial safety climate and behaviour may be promising targets of team or organisational-level interventions that aim to improve the mental health of emergency services personnel”</p>	
<p>Kellner, A.K., Townsend, K., Loudoun, R. and Wilkinson, A., 2019. Barriers to frontline manager support for high-trauma workers. <i>Personnel Review</i>, vol. 48, no. 6, pp. 1394-1409.</p>	<p>Barriers identified from view of line manager:</p> <ul style="list-style-type: none"> <li>• Want training to equip FLMs with the skills and knowledge to provide more effective support.</li> <li>• EQ: Need attitude, mindset, personality empathise and connect emotionally with employees. “</li> <li>• Poor mental health of FLM themselves makes it difficult to spot struggle in others</li> </ul> <p>Barriers that prevent employees seeking support from their FLM are:</p>	<p>Study on three Australian ambulance service organisations (mix of rural and urban) to identify and understand barriers that prevent front line managers (FLMs) from providing the type, quality and quantity of support that’s employees require for optimal wellbeing.</p> <p>For some FLMs, emotional unsuitability or undeveloped emotional awareness/ intelligence (rather than lack of training) was the fundamental barrier to providing emotional support.</p> <p>Interviewees drew attention to the fact that FLMs typically have a <i>long history of trauma exposure</i> and are at risk of suffering themselves from PTSD or associated mental illnesses.</p>	<p>Offering skills and knowledge to give effective support to teams</p> <p>Offering personalized feedback on leadership style and opportunities to develop as an authentic leader, including EQ uplift.</p> <p>Offering support for self-reflection, and tools and info for participants to support their own mental health</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<ul style="list-style-type: none"> <li>• Status differences</li> <li>• Lack of trust</li>   <li>• How approachable a manager is</li> </ul>	<p>Power and rank strong in the sector. This sensitivity to hierarchy is found to be shifting among the younger generation.</p> <p>FLMs position in the organisational hierarchy blocks confidence to raise personal issues. Also feel a manager might not give understanding, compassion, support or confidentiality.</p> <p>Perceptions about a FLM’s attitude, personality i.e. “Our [FLM] is quite approachable... Whereas others don’t feel that they’re approachable and they would feel quite - they would need to [communicate] through a very formal process.</p>	<p>Building awareness around power, rank and personal attitudes as a barrier to the trust of teams (embedded in the authentic leadership and barriers to mental health learning components)</p> <p>Providing strategies and tips to build approachability and trust and the opportunity to reflect on and practice them.</p>
Boyle, A., Inger, E, Miller, M., Waters, K. 2020, Investigating Mental Health and Well-being	Rec - Consider how mental health and well-being training and development for leaders and managers can give more focus	Women responders feel uncomfortable talking about their mental health with their managers and reported higher levels of self-stigmas.	Develop skills for leaders to understand gendered factors – including care responsibilities – that influence women’s work and wellbeing (embed in engaging in

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<p>Among Women in Victoria’s Emergency Services, The Emergency Services Foundation and Worcestershire Polytechnic Institute, Melbourne.</p>	<p>to having better conversations with women.</p>	<p>Throughout the study many women expressed the need for supportive line managers that were knowledgeable about mental health and well-being, were proactive in offering support, and were able to have good conversations on the subject without the women feeling judged or not cared about, p. 49</p>	<p>conversations around mental health component).</p>
<p>Developing a Mentally Healthy Workplace: A review of the literature. 2014, Harvey et al.</p>	<p>Provide leadership support through:</p> <ul style="list-style-type: none"> <li>• mentoring and coaching</li> <li>• training programs for leaders and supervisors</li> </ul>	<p>Supportive relationships with supervisors, team leaders and peers, effective management of interpersonal conflict and effective leadership may have a protective effect against mental health difficulties.</p> <p>There is a body of research that reports that managers and supervisors who are provided with the appropriate mental health training not only feel more confident in discussing mental health matters with employees, but workplaces where supervisors have had such training demonstrate reduced psychological distress among employees.</p>	<p>Providing training for MH uplift and opportunities for mentoring and coaching for applying learnings</p> <p>Developing practical skills in communication for mental health and the</p>

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		<p>Managers may also need guidance on how to provide high-quality performance feedback. As noted previously, performance feedback is an important component of most jobs, but if done poorly can be perceived as threatening or bullying.</p> <p>There is also evidence that effective leadership is associated with better well-being outcomes for employees. In particular transformational leadership, a leadership style associated with creating a vision of the future, inspiring and motivating, stimulating employee growth and showing consideration for individual employees has been shown to increase psychological well-being and be associated with reduced levels of depression and anxiety.</p> <p>The effect of positive styles of leadership is likely to enhance psychological wellbeing through increasing trust, improved support and teamwork, enhanced job design and organisational</p>	<p>opportunity to practice constructive feedback to teams by peer-based action learning sets.</p> <p>Offering personalized feedback on leadership style and opportunities to develop as an authentic leader, including EQ uplift.</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<p>Senior buy in – Exec leadership support and commitment will set the tone and the direction of workplace mental health strategies throughout each level of an organisation.</p>	<p>climate, which is discussed in more detail below.</p> <p>It should also be noted that optimal leadership practices .. will vary between different organisations. Within large organisations, managers often have to lead people spread over geographically large areas, with communication via email and teleconferencing. Within smaller organisations, communication will tend to in person, with managers often working side by side with those they lead. Each of these situations create particular challenges for managers needing to build supportive relationships with workers.</p> <p>There is reasonable evidence that in the absence of tangible and visible senior support, the effectiveness of any subsequent interventions will be reduced. A top-down approach can be influential in facilitating commitment across the workplace and reducing stigma associated with mental illness.</p>	<p>Contracting facilitators who are sensitive to how leadership will be influenced by different structures, needs and missions of agencies. At the same time the program focused on the common denominators that transcend agency specifics to lead for better mental health.</p> <p>Securing commitment from the heads of participating agencies to communicate the program and provide mentoring to participants from their agency.</p>



Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
<p>Bill G. 2003, Authentic Leadership</p> <p>See also. Kelloway EK, Turner N, Barling J, Loughlin C. Transformational leadership and employee psychological well-being: The mediating role of employee trust in leadership. <i>Work &amp; Stress: An International Journal of Work, Health &amp; Organisations</i> 2012; 26: 39-55</p> <p>Transformational leadership and psychological well-being: the mediating role of meaningful work. 2007 <i>Journal of Occupational Health Psychology</i>,</p>	<p>‘authentic leadership results from knowing yourself - your strengths and weaknesses – by understanding your unique life story and the crucibles you have experienced’ (George, 2012, p. 313)</p>	<p>While various definitions of authentic leadership have been developed, Avolio, et al, suggest there is general agreement that the following are key components of authentic leadership:</p> <ul style="list-style-type: none"> <li>• Balanced processing—that is, ‘objectively analysing relevant data before making a decision’.</li> <li>• Internalized moral perspective— that is, ‘being guided by internal moral standards, which are used to self-regulate one’s behaviour’.</li> <li>• Relational transparency—that is, ‘presenting one’s authentic self through openly sharing information and feelings as appropriate for situations’.</li> <li>• Self-awareness—that is, a ‘demonstrated understanding of one’s strengths and weaknesses, and the way one makes sense of the world’ (2009).</li> </ul>	<p>Offering personalized feedback on leadership style and opportunities to develop as an authentic leader, including EQ uplift.</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
<b>Programs – lessons learned</b>			
Ambulance Victoria 2019, Leadership (middle manager) development pilot, Alison Goss, AV, personal communication.	<b>Wins and learnings</b> <ul style="list-style-type: none"> <li>• Be pragmatic, basic language, learn by doing, peer learning</li> <li>• Look at what we are already good at, work with foundational stuff that ‘washes through’.</li> <li>• Bring managers a rank above them into the learning (leading together)</li> <li>• Instead of taking them away for 5 days – stage it over time (ie. 2 days of training, then go away practice and build and reflect on what you have learnt, then come back for 2 more days etc.... This was a game changer, made a much more reflective group...</li> <li>• Geographically diversity was challenging – didn’t sit together, needed to do things to make them mingle (ie. don’t wear uniform)</li> </ul>	<b>Features of pilot</b> <ul style="list-style-type: none"> <li>• Was built in house (not off the shelf)</li> <li>• Valued teaching/practical learning (over theory)</li> <li>• Assume leaders develop other leaders – leading together (leading as a team).</li> <li>• Four pillars: compassion, courage and connection</li> <li>• Pillars have four areas of focus (ie. – modelling wellbeing, supporting your team, etc...)</li> <li>• Each focus has three descriptors.</li> <li>• Worked with middle management (not execs or up which is more typical)</li> </ul>	Aligning with the wins and learnings from this program. Specifically, we will: <ul style="list-style-type: none"> <li>• Building in peer support, practical content, and learning by doing</li> <li>• Bridging line managers with others at higher ranks.</li> <li>• Staging the learning over time and building reflection and practice into intervals.</li> <li>• Planning for time and activities to break ice and build trust within peer groups</li> </ul>
Mind Blue light Program, UK.	Activities	Based on a multi-activity, multi-sited, wellbeing and mental health program for	Providing a program to build the slow momentum of culture change

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<ul style="list-style-type: none"> <li>• <i>Tackling stigma</i>: Culture change can happen through programs like Blue Light, but takes it time</li> <li>• Empower staff to lead change: Mental health champions can have a significant positive impact so champions must be supported and empowered by their employers.</li> <li>• Make support accessible: There is a need among staff, volunteers and their families for personalised (tailored) information and support on a range of mental health issues and concerns.</li> <li>• To help build resilience, the course was rejigged after they got positive feedback but no evidence of results in evaluation data. In the new mixed-format course (combining online and face-to-face sessions) there was significant improvements in wellbeing, resilience, and reduced likelihood of experiencing psychological distress, among participants.</li> <li>• Establish Mental Health Networks: By working with several emergency</li> </ul>	<p>emergency responders (ERs) that ran for four years across the UK (2015-2019).</p> <p>Among other achievements, it trained almost 9000 line managers and team leaders.</p>	<p>Developing participants as a coterie of mental health champions</p> <p>Provide tailored info and support to participants, which can be shared with their teams</p> <p>Designing program around face to face as well as online (didactic) teaching</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<p>service organisations, the sector benefits from cost-effective integration, peer support, and easier sharing of learning and best practice.</p>		<p>Working collaboratively with 13 emergency management organisations. Formalise peer support groups during and, it is hoped, after the program.</p>
<p>Owen, C., Scott, C., Adams, R. and Parsons, D., 2015. Leadership in crisis: developing beyond command and control. <i>The Australian Journal of Emergency Management</i>, 30(3), pp.15-19.</p>	<p>Lessons Learned:</p> <ul style="list-style-type: none"> <li>• The program needed to move away from personality trait inventories</li> <li>• Not realistic to expect change to come about simply through enrolling in a short external (to an agency or jurisdiction) professional development program.</li> <li>• In need of attention are internal organisational processes that include examining the cultures and structures in emergency services organisations.</li> </ul>	<p>Personality Trait inventories seemed to be used by participants to justify existing behaviour and were invoked to reinforce existing stereotypes.</p> <p>Lessons from feedback in evaluation of program and reflections by facilitators. The program ran for 2.5 days for 26 groups of senior and emerging leaders in 2010. The curriculum intention was to: <i>'challenge participants to explore their own leadership styles and rethink traditional models of leadership in the context of a rapidly changing environment'</i>.</p>	<p>Using WAVE – tool to measure and give constructive feedback on leadership style.</p> <p>Not a one-time training course, a staggered course over six months, with ongoing support and practice, not just learning content. Learning and practicing critical thinking to identify and address internal barriers to leading for mental health. Opportunities to communicating them to agency execs.</p> <p>Developing skills in self-awareness and reflection to build confidence in leaders to seek alternative perspectives and divergent views.</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<ul style="list-style-type: none"> <li>• Need to develop the capacity for reflection in leaders</li> <li>• Assisting participants to overcome being distracted by the obvious rather than attending to less obvious but critical information.</li> <li>• Leadership development depends on discussion and practice.</li> <li>• Be mindful of the powerful unquantifiable benefit that comes from face-to-face exchange.</li> <li>• Rather than dominance, ideas of collaboration should inform the curriculum.</li> <li>• There is an urgent need to establish supportive (physical or virtual) communities-of-practice that allows</li> </ul>	<p>All education and training opportunities (not just leadership ones) build capacity in critical reflection and in critical thinking. Critical thinking has been described as ‘active, persistent and careful consideration of a belief or supposed form of knowledge in light of the grounds that support it and the further conclusions for which it tends (Kiltz 2009, p. 9).</p> <p>Participants tended to become overly focussed on the tangible (e.g. physical resources) at the expense of information or intelligence, which is subsequently overlooked or not followed through.</p> <p>Ideas like this provide particular pedagogical challenges for future providers of emergency management leadership programs. These ideas, for example, are unlikely to be addressed in a program of distance course work.</p> <p>Leadership practices within organisations also need to tackle challenges like power</p>	<p>Working with participants to control the impulse to react and learn to step back and see the bigger picture and engage teams to offer information to help them make better decisions.</p> <p>Delivering the program via mixed modes content, peer-support groups, reflection and practice.</p> <p>Commitment to collaboration and co-design with flexibility all the way.</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
	<p>people to try out their new skills and continue to develop changes in their practice</p> <ul style="list-style-type: none"> <li>• A great need to support leaders – since they are held to account - constructively.</li> </ul>	<p>gradients and to address entrenched practice and cultural issues. Power gradients, part of the furniture in most places, must be interrogated so responsible individuals can appreciate and play their part in strict seniority systems.</p> <p>This program suffered from the problem facing many professional development initiatives—that people are taken out of their social <i>milieu</i> and given opportunities for insights, then are left to it with no ongoing support.</p> <p>This above point is particularly so in facilitating ethical practices that might be at odds with the <i>status quo</i> of cultural norms. This is hugely significant since, as things stand, leaders are held to account. In fact, they are often ‘hung out to dry,’ pilloried in the press or the boards of inquiry. But beyond the occasional intervention of a professional course, there is nothing in the way of formalised, constructive support.</p>	<p>Providing ongoing support through small cross-agency, peer-based teams, with plans to build a community of practice.</p> <p>Providing a program that is formalised, constructive and proactive in supporting leaders.</p>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
<p>VicPol station leader program</p> <p>LaMontagne, T. 2017, 'An integrated workplace mental health intervention in Victoria Police: results of a cluster-randomised trial', Deakin Uni</p>	<p>Recs for future leadership programs:</p> <ul style="list-style-type: none"> <li>• The use of 360-degree assessments had pros and cons. A particular strength is the specific and personalised feedback it provides, but the process is time and resource-intensive (expensive).</li> <li>• Anecdotal positive feedback included comments from participating leaders indicating that the coaching component was one of the best parts of the overall program as it was individualised and included a tailored approach to leadership skill development.</li> <li>• Need overall buy-in from all levels</li> </ul>	<p>VicPol trialled an integrated workplace mental health intervention focusing primarily on improving supportive leadership practices of station leaders.</p>	<p>Specific and personalized feedback being offered to participants, (not as 360 feedback but) in form of wave</p> <p>Coaching included</p> <p>Heads of agency commitment and intensive consultation</p>
<p><b>Leadership and Mental Health Frameworks</b></p>			
<p>VICSES leadership capability framework</p> <p>(Also aligns with VicPol's people-focused)</p>	<p>Three pillars:</p> <ul style="list-style-type: none"> <li>• Model leadership and teamwork</li> <li>• Think and plan strategically</li> </ul>	<p>The framework provides a common understanding of leadership expectations and a systematic, integrated approach for the full range of workforce management</p>	<p>Two of three pillars of the VICSES leadership capability framework, align with the learning outcomes of our program:</p> <ul style="list-style-type: none"> <li>• model leadership and teamwork</li> </ul>

Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
<p>leadership framework, AV's leadership development framework and others)</p>	<ul style="list-style-type: none"> <li>• Demonstrate self-awareness</li> </ul>	<p>and development activities, including role design and description; recruitment; performance management; learning and development and strategic workforce planning</p> <p>The framework taken was informed by:</p> <ul style="list-style-type: none"> <li>• the Emergency Management Professionalisation Standards (EMPS 2016)</li> <li>• the AFAC Leadership Capability Framework refresh (2017)</li> <li>• the Australian Public Service Commission Leadership Framework (2015), and</li> <li>• the Red Cross Capability framework (2014)</li> <li>• the report prepared for the Country Fire Authority by the Learning Organisation on mapping the evidence base for leadership learning and their potential for development pathways.</li> </ul>	<ul style="list-style-type: none"> <li>• demonstrate self-awareness</li> </ul>
<p>Mental health and wellbeing strategy for</p>	<p>Guiding Principle:</p>	<p>Managers and team leaders should play a key role in assisting staff and members</p>	<p>Developing capacities in line managers to know how to identify and respond to</p>



Source	Rec, finding or strategic objective	Evidence	ESFs Leading for Better Mental Health pilot program responds to the rec/finding by:
first responder organisations in NSW, NSW Government, Black Dog Institute and Mental Health Commission of NSW	<ul style="list-style-type: none"> <li>Leaders have a key role in actively promoting and maintaining positive practices and relationships.</li> </ul>	and may need additional training on how to recognise and respond to individuals experiencing mental health difficulties. In order to allow managers to carry out these tasks, it is important that strategies are also in place to support managers' mental health and wellbeing.	mental health problems, and support their own mental health and wellbeing

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