# IIIONE DIACE

For therapists working with employees, employers and EAPs

April 2025

Should I stay or should I go?

'The prospect of self-inflicted human extinction is hardly a topic for water cooler chat'
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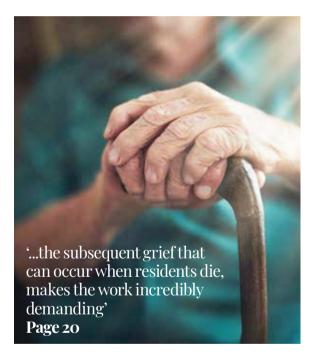


# Are we taking care of the care sector?

Overworked, underpaid and undervalued: Jenny O'Donnell, a BACP research fellow. is exploring how viable and useful workplace counselling is to support care home staff. In the early stages of her PhD research, she shares what she's discovered so far. and why research is so important to BACP and the therapy profession

# The interview: My workplace

Anne Embury supports adults living in Cornwall and the Isles of Scilly who are bereaved by suicide, and offers guidance to workforces when staff are affected by the suicide of a colleague. After more than 30 years working in mental health services in the county and with retirement on the horizon, she talks to *Nicola Banning* about her professional life



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# REGULARS

# 03 From the Editor Books

Nicola Banning Choosing community

# from BACP Workplace



# Workplace matters

Sandi Mann

Why is making a decision so hard?

Change in organisations is rarely a smooth business and can often result in struggles, frustrations and failure. Having spent the last 25 years working with leaders, it's little wonder that Dr Susanne Evans. an organisational change consultant, is committed to transforming transformation. She talks to Nicola Banning about rethinking how we make change happen and why she wrote her book ChangeStories

# 30 08A

Two clients who are experiencing domestic abuse from their partners are concerning me. Initially, we contracted to address work-related issues and then the abuse became apparent. How should I approach this?

Sarah Prince responds to a workplace dilemma

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# Choosing community

ast autumn, a flyer for a seminar called 'Should I stay or should I go?' landed in my inbox and made me pause for thought. What are we supposed to do if we work for companies and organisations that we know are contributing to the climate crisis? Of course, the unwritten rule is that we don't talk about it – and certainly not at work - but, at what cost?

Saying nothing and keeping your head down can seem the only option. a survival strategy – and possibly an essential one in a cost-of-living crisis. After all, how many of us can really afford to hand in our notice just because we don't like the actions or behaviours of our employers?

But perhaps there is more we can do to reduce the sense of isolation, anxiety and disempowerment we feel while living with these kinds of inner conflicts. Writing our lead article, 'Should I stay or should I go?', climate psychologist Steffi Bednarek and journalist Matthew Green share their work, providing a space for professionals to join together and explore questions about identity, and our sense of personal and professional responsibility at a time of great consequence for the planet. It's not about finding easy answers but about finding community, saying what is unspoken and being witnessed. And the power of this is not to be underestimated. If you have thoughts about this article or your own experience of working with clients in relation to the climate crisis, I'd be interested to hear from you.

Elsewhere, on page 14 I talk to Anne Embury who is firmly of the belief that counselling and psychotherapy can be a form of social justice for those we try to help.

Supporting the community living in Cornwall and the Isle of Scilly, working with workplaces, individuals and families bereaved by suicide, Anne's contribution to establishing best suicide postvention practice in the area is significant. After 30 years of working in mental health services, and now close to retirement. Anne reflects on her contribution to her community and profession.

I'm often inspired by the practitioners who contribute to BACP Workplace and believe that we need to be more willing to share and celebrate our work and the difference that it makes to the lives of others. With a growing sense that the world is becoming a more unstable and dangerous place, both politically and environmentally, I'm aware of people talking more about resourcing themselves in different and purposeful ways - not by closing in or staying silent. Small and radical acts are important, says the writer Rebecca Solnit: 'Every time we dissent – we make room for others to dissent. Courage, like fear, is contagious. For a lot of us, right now, we get to choose, and what we choose has an impact on what others choose.11

Whatever you or your clients may be choosing, I hope you find something in this issue to support you.

Micola

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

### REFERENCE

1 Solnit R. Fighting for justice doesn't have to be a big dramatic act. It can be small acts. The Guardian 2025; 2 February. https://tinyurl. com/yzem3s5y (accessed 9 March 2025).

# Your BACP Workplace New Your BACP Workplace



# Notes from the (rolling) Chair

# A spring in our step

'I find one of the great things about meeting students is encountering their enthusiasm and new ways of thinking'

# **Andrew Price**

# Chair, BACP Workplace

'm in the hot seat as the Workplace Executive Committee's rolling Chair for this issue of BACP Workplace, and I'm delighted to be sharing the role with my colleagues. My first task is to announce the news that Natasha Clewley has recently been appointed to join the Executive Committee and to welcome her on board. Natasha is a clinical lead for an EAP, bringing a wealth of knowledge and experience which will be invaluable to the division. You can find out more about her on page 6. I'm also pleased to announce that Sonam Dave is BACP's new Divisional Committee Officer and she will be supporting the work of the division. A warm welcome to both.

# **Student Conference**

I had the pleasure of attending BACP's bi-annual Student Conference in London with fellow Committee member, Andrew Wood. It was lovely to meet with students who are about to embark on their new careers. The Workplace division stand saw plenty of activity following a talk by Kris Ambler, BACP's Workforce Lead. Delegates were keen to find out about how to work for EAPs, and some were disappointed to discover that they need to build up their post-qualifying hours and experience. However, I find one of the great things about meeting students is encountering their enthusiasm and new ways of thinking. One student raised the novel idea of whether a mobile counselling service visiting workplaces would be possible as it would allow employees easy access to talking therapies.

# Events in 2025

Once again, BACP was at the annual Health and Wellbeing at Work conference, held at the NEC in Birmingham. The Workplace division stand was well attended over the two-day event and Nicola Neath, Executive Committee member, chaired a full programme of talks relating to mental health and emotional wellbeing at work. Elsewhere, Kris Ambler, BACP's Workforce Lead spoke about a system approach to tackling sickness absence. You can read more about this on page 5.

Reflecting on the success of the online network meetings held last year, the Executive Committee is planning to schedule two future meetings: one for early this summer and the other early in the autumn. Each meeting holds a CPD element, for which attendees will receive a CPD certificate, and one of the sessions will explore the challenges of being an EAP case manager, providing a valuable insight for practitioners who work with EAPs. We will, of course, keep you posted.

It seems a little odd to be saying both 'hello' and 'goodbye' here, but next time, you'll be hearing from my colleague and Executive Committee member Andrew Wood. But, before I sign off from here in Cheshire, I'm delighting at the arrival of some sunshine and signs that spring is on its way. Wherever you are, I hope you too are heartened by longer and lighter days ahead.



# BACP Workplace at the Health and Wellbeing at Work conference



t was a busy two days for BACP staff and members of the Workplace Executive Committee attending the Health and Wellbeing at Work conference on 11 and 12 March, on behalf of the therapy profession as a force for good in supporting workplace health. Over 4,000 delegates attended, with many stopping at BACP's stand to talk to Kris Ambler, BACP's Workforce Lead and Eileen Gambrell, BACP's Governance Officer, seeking advice about the role of counsellors in supporting psychological health at work.

The conference was held in the context of a challenging set of circumstances facing employers and employees, reflected in high rates of sickness absence due to workplace stress, anxiety and burnout. Kris Ambler, BACP's Workforce Lead, said: 'There are a myriad of factors taking a toll on the health of workers in 2025 – from the cost-of-living crisis, inflation, political instability to the climate crisis and

the aftermath of the pandemic. In a session called 'The Trauma Pandemic', Kris Ambler was joined by Sue Christy, a critical incident responder and member of the Workplace Executive Committee, to talk about her role supporting business when their employees experience traumatic events, looking at what is helpful and unhelpful in the immediate aftermath. Sharing her experience of working on the Polish border with Ukraine, Sue dispelled some of the myths about trauma and was inundated with questions after the session.

In the Future of Work strand,
Professor Dame Carol Black GBE,
Chair of the Centre for Better Ageing,
spoke about the challenges of
building a healthier workforce in
the UK. Recent research conducted
by the Commission for Healthier
Working Lives, shows that while the
UK has a high rate of employment,
we fall below our European
neighbours in engaging people
with a health condition in work.

This is a problem for the UK as businesses are anticipating that the health challenges in the workforce will increase in the next five years due to an ageing population. It is much harder to return to work after you have spent a year out of work and every year, 300,000 people leave their jobs and end up out of work entirely with health conditions. Looking at successes in the Netherlands and Denmark, the Commission is calling for earlier intervention to keep people from falling out of work and a change to the benefit system, to include a vocational rehabilitation benefit to help people stay in work after statutory sick pay ends. The Commission made seven recommendations and vou can read more about these here:

### https://tinyurl.com/d2wkvsvf

And finally, a special mention and a round of applause must go to Nicola Neath, from the Workplace Executive Committee, who put in a mammoth two-day shift, hosting the Mental Health and Emotional Wellbeing presentations. In her role as host, she introduced over 19 speakers, putting presenters at ease with her characteristic warmth, welcoming delegates, facilitating questions and holding the space with grace and humour. Modelling good self-care in action, Nicola reminded speakers and delegates throughout the day: 'If we can't look after our health and wellbeing here, then where can we do it?'

Thank you, Kris and Eileen, Nicola and the Workplace Executive Committee for all your hard work representing BACP and the therapy profession at the conference. You all did a fantastic job.

Above: Vianna Boring, Nicola Banning, Nicola Neath, Julie Hughes, Sue Christy and Nick Wood

# Natasha Clewley joins the Workplace Executive Committee



t's a great pleasure to introduce readers to Natasha Clewley who recently joined the Workplace Executive Committee.

'I'm delighted to join the Workplace Executive Committee. I bring my experience as a clinical director for an EAP and my understanding of the complexities of

delivering counselling in workplace settings, with the need to balance clinical integrity and the needs of the organisation. Anyone who knows me will also say that I bring a huge amount of energy and bundles of enthusiasm! Alongside my EAP role, I'm in private practice as a counsellor and supervisor.

I hope to contribute to discussions and initiatives that enhance workplace counselling, ultimately supporting practitioners, the clients we serve, and the workplaces that rely on our guidance and expertise to create environments where wellbeing at work is both achievable and understood. I know that work holds different meaning to people at different times in our lives, and I think this is an important perspective which I also bring to the Workplace division.

My passion is in raising professional standards, ensuring that counselling is practised ethically, safely and effectively, leading to the best possible outcomes for our clients. As a supervisor, I'm deeply committed to providing a space where practitioners in the helping professions can develop with honesty and integrity, fostering professional growth and deepening their awareness of the multiple facets we must consider when holding space for those we support!

Natasha will be writing regularly in future issues of *BACP Workplace* about working with EAPs as an affiliate counsellor. If you have something on your mind which you would welcome advice on, please write to the editor, Nicola at:

workplaceeditor@bacp.co.uk

# 

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

# BACP Student Conference 2025 – Bridging the gap

ACP's Student Conference was held in London on Saturday 8 February to support students in the transition from counselling and psychotherapy training and towards becoming fully qualified practitioners. The talks and presentations explored career paths and opportunities open to newly qualified practitioners, and the current challenges and issues facing the profession. Workplace Executive Committee members, Andrew Price and Andrew Wood, attended on behalf of the division and report on the event:

'It was great to represent BACP Workplace and we enjoyed meeting a steady stream of delegates throughout the day interested in learning more about the work of the division and how to break into the workplace sector. In the morning, Kris Ambler, BACP's Workforce Lead presented a workshop on employment opportunities in workplace counselling and

psychotherapy which was very well received, and resulted in the Workplace stand being inundated with student delegates during the lunch break.

Delegates were keen to find out more about career opportunities in workplace counselling and the skills, experience and competences needed to succeed as a workplace counsellor. We introduced them to the Workplace Counselling Competence Framework, and talked about the division's work with employers and EAPs in promoting the role of workplace counsellors, as well as the benefits of a divisional membership.'

If you missed the conference and would like to catch up, the presentations and workshops are available to watch on BACP's on-demand service until Wednesday 14 May 2025. (https://tinyurl.com/yuc59r7k)

Below: Andrew Price and Andrew Wood at BACP's Student Conference.





# Dates for the diary

# **Online**

# Professional Development Day

# Artificial intelligence and the human connection

Date: 7 May 2025

Are you passionate about human connection and curious about how Al may impact your counselling practice? If so, this comprehensive workshop will help you to understand how to ethically and effectively integrate Al tools into your work while maintaining precious human connection. As Al becomes an integral part of our everyday lives, it's crucial to stay ahead of the curve and adapt to the changes it presents. This online professional development day has been designed specifically for counsellors who value empathy and therapeutic alliance.

# Nou can book your place by visiting BACP Events online:

https://tinyurl.com/br3rx3ur

# **Manchester and Online**

# 31st BACP Annual International Research Conference

Date: 16-17 May

This year, BACP's Research Conference will be co-hosted by the University of Manchester at the Hyatt Regency Manchester hotel.

This year's conference theme focuses primarily on impact through collaboration, with presentations exploring research through co-construction or collaboration with participants as people with lived experience.

# Nou can book your place by visiting BACP Events online:



# Exploitation in the care sector must be investigated urgently, says the Royal College of Nursing



igrant workers in the care sector are being exploited by employers, who are using repayment clauses to demand tens of thousands of pounds if they try to leave, leaving many trapped in appalling conditions.

Analysis of calls made to the Royal College of Nursing (RCN) advice team shows an eight-fold increase in enquiries from nursing staff who fear they're victims of exploitation within the social care sector – up from 12 in 2020, to 110 in 2024. One nurse told the RCN she was subject to a repayment fee of \$25,000.

Before the general election, Home Secretary Yvette Cooper promised that the incoming Government would launch an investigation into this via a newly established single enforcement body.

This is now not expected to be completed until at least spring 2026. This delayed process risks allowing hundreds of new people to be exploited. It is likely to be a fraction of the true number of people facing this form of exploitation, with the majority of victims not being members of unions, or feeling too intimidated to come forward.

In a letter to the Home Secretary, RCN General Secretary and Chief

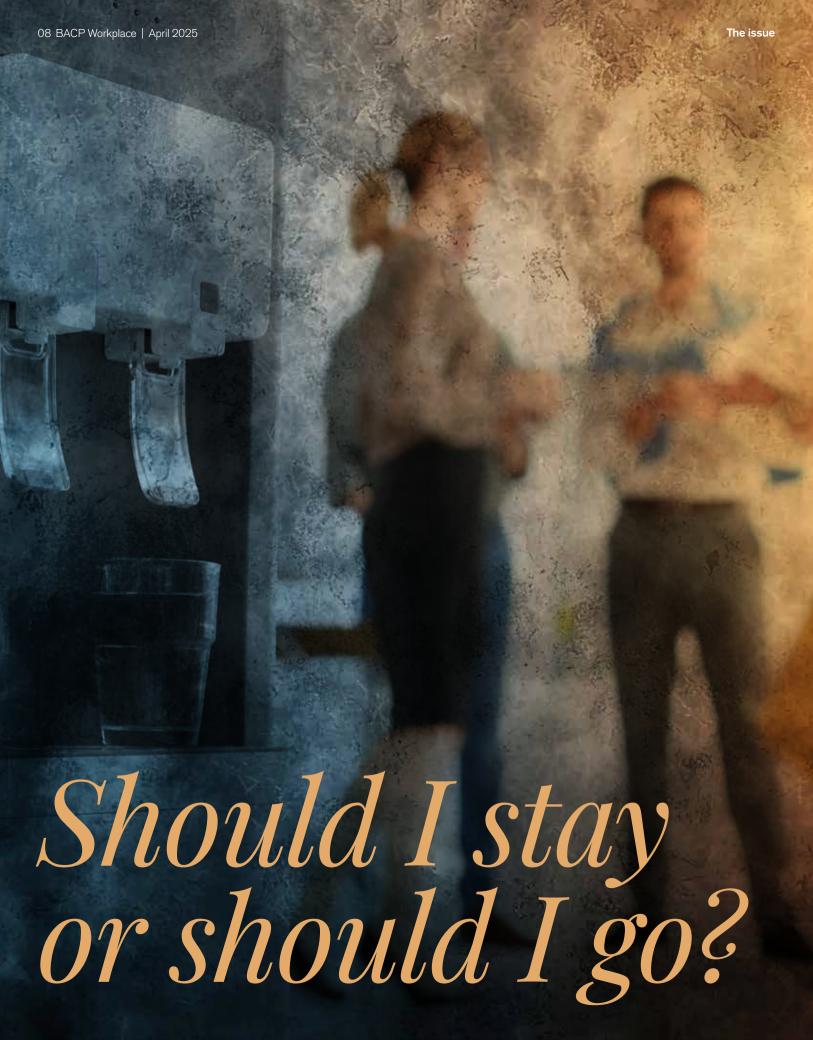
Executive Professor Nicola Ranger urged officials in the Home Office and across government departments to launch the promised investigation now to ensure that victims are not let down by lengthy processes.

She said: 'The commitment by the Labour Party was an important step in recognising the severity and urgency of this matter. In government, you have power to act and turn this promise into action.

We say greater protections are needed to allow staff to leave exploitative work situations. We're also calling on the UK Government to evaluate alternatives to the current sponsorship visa model which ties internationally recruited staff to their employer. The 60-day limit placed on staff to find new employment if they leave their role should also be extended.'

In the NHS, employers' guidance establishes a maximum repayment figure of £3,000, which itself can only be claimed if the recruit leaves employment within 12 months. After 12 months, the maximum that can be reclaimed is reduced to £1,500, and after 24 months this falls again to a maximum of £750.

https://tinyurl.com/5n8dx3b3





With the impacts of climate change hitting harder each year, employees are experiencing a sense of cognitive dissonance between the reality of the situation we're facing, and the response from their employers. As growing numbers of people start to question whether their jobs make them complicit in the crisis, **Steffi Bednarek** and **Matthew Green** consider how we can help people to navigate workplace conflicts at such a critical time for our world



Steffi Bednarek is the founder and director of the Centre for Climate Psychology, and has over 25 years of expertise in training individuals and leadership teams in psychologically informed practices and complexity thinking. Her acclaimed book Climate, Psychology, and Change: new perspectives on psychology in an era of global disruption and climate anxiety has been celebrated as a work of wisdom and radical ideas. Steffi has worked for national governments, the corporate sector, global financial institutions, the sustainability sector and large NGOs.



Matthew Green is global investigations editor at DeSmog and creator of the Resonant World newsletter, serving the global trauma healing movement. His book Aftershock: fighting war, surviving trauma and finding peace, documents the struggles of British military veterans and their families to heal from the psychological injuries of war.

t's an unwritten rule in the corporate world that you don't talk about how you really feel about the climate crisis. The prospect of self-inflicted human extinction is hardly a topic for water cooler chat. And yet, with the global economic system still based on fossil fuels, growing numbers of employees are recognising that their companies are complicit in climate breakdown – whether they work directly for polluting industries, or the financial, advertising, insurance, accounting and other sectors that serve them.

Therapists may share their clients' concerns, and find they too are working with and for businesses whose values don't match their own. It's a tension that can be hard to resolve – after all, how many of us can afford to hand in our notice in a cost-of-living crisis? The result is a collective muteness in the workplace that leaves feelings of fear, guilt, anger and shame with nowhere to land.

According to the UK's Office for National Statistics, around three in four adults (74%) reported feeling (very or somewhat) worried about climate change.1 The concern can manifest in different ways: from gut-wrenching horror at witnessing climate disasters unfolding with ever-greater ferocity, to grief at the decimation of treasured habitats and the extinction of species, or fears over the breakdown of food systems and societal collapse. Such anxiety can lead to disillusionment, burnout or moral injury, and may emerge in our therapy rooms, if our clients feel they are complicit in greenwashing campaigns or the perpetuation of unsustainable practices. Over time, these unresolved conflicts can lead to diminished mental health, strained interpersonal relationships, and a sense of disconnection from a person's values.

Keen to respond, we created a space for professionals to safely explore their inner conflicts in relation to the climate crisis, inviting a degree of openness and authenticity that would be taboo in most offices. Our one-day seminar, called 'Should I stay or should I go?' was attended by people working in sectors including finance, marketing, technology, philanthropy, public policy, and oil and gas.

Drawing on our combined skills and experience as a climate psychologist (Steffi) and journalist (Matthew), our intent was to address the need for collective processing, emotional validation and to provide practical strategies for navigating ethical dilemmas in the workplace. In this article, we share our learning in the hope that it may support and inform the way that therapists choose to work with clients who are facing similar ethical and moral dilemmas.

# **Unspoken truths**

Feelings of isolation and frustration are common for professionals who need to suppress what they are really feeling in relation to the climate crisis in order to get through another day at the office. Too often, it may not be possible to share concerns at home, with family or friends, which can compound the problem. We began by inviting participants to express their unspoken truths, with the intention of supporting the group to develop greater clarity about their dilemmas, and perhaps to identify new options for action.

While for some, that might translate into leaving a job that is no longer aligned with their values; for others, it could mean advocating for change from within their organisation. Often, it's about realising that the right response is simply to maintain an open-ended inquiry, and be aware that it might take time to resolve. Our role as facilitators is to keep returning to what is known as the 'zero point' in Gestalt therapy – we have no investment in any particular outcome, but we support people to navigate the best possible options for themselves.

# A double bind

We framed the central dilemma facing climate-conflicted professionals as a 'double bind' – a concept first introduced by Gregory Bateson in his 1972 book, *Steps to an Ecology of Mind.*<sup>2</sup> A double bind arises when individuals are confronted with contradictory imperatives that are impossible to resolve. For example, a career in the fossil fuel industry may provide financial security and a sense of professional identity. However, it also implicates the individual in practices that make the climate crisis worse, and in the enormous toll of death and suffering that it entails. These kinds of climate

'The prospect of self-inflicted human extinction is hardly a topic for water cooler chat' double binds often lead to a sense of paralysis, guilt and complicity that can leave people more prone to depression, anxiety and burnout.

Encouraging participants to explore their climate double binds, we drew on internal family systems (IFS) a therapeutic model based on the idea that we're all made up of many parts - ie sub-personalities who are constantly vying to control what we think, say and do. For example, our 'manager' parts are intent on keeping us safe by maintaining our standing in society, and playing by the rules at work. Unsurprisingly, our 'managers' are in a state of perpetual conflict with our 'exiles' the disowned parts that carry feelings of doubt, shame and fear about our role in contributing to environmental collapse.

If we can learn to identify the different parts that are active in us, we can foster what IFS terms 'self-leadership'. This means we can integrate the differing needs of our conflicted parts into wise action, learning how to overcome stuck patterns and navigate complex workplace dynamics in new ways.

To illustrate how Steffi uses the IFS framework to support her coaching clients to confront their double binds, we've included a composite case study with a senior fossil fuel executive who we are calling 'James'.

# Individual to the collective

Working with the whole group, we applied the IFS model, taking care to establish a sufficient sense of safety to explore dilemmas that might otherwise feel too uncomfortable or risky to voice. Drawing on the principles informing large-group processes to help integrate intergenerational and collective trauma,3 we used various check-in and introductory exercises to establish 'coherence' - evoking a sense of connection, relatedness and shared awareness in the group. This allows for 'collective intelligence' to start to flow, whereby individuals can access higher levels of insight,

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# Case study - 'James'

Born into a wealthy family who values career, financial security and loyalty, James prided himself on his ability to provide a high standard of living for his wife and two children by rising up the ranks of the oil and gas industry.

However, headlines blaming his industry for climate disasters became harder to ignore. At home, James' children started to question the source of their family's wealth, expressing discomfort about his company's role in the crisis they were learning about in school. What had seemed like a natural and fulfilling career path began to feel like a source of tension and unease.

James suppressed his discomfort by telling himself that he was just one among many working in his industry, and that change would come from within. But he was shocked when his daughter told him that she felt ashamed to say where her dad worked, and asked him directly: 'Are we part of the problem?' A week later, he attended a leadership seminar where an executive assured employees that their company was 'a part of the solution' to climate change. James knew that this narrative elegantly bypassed the damage that his company caused. He could see that the company's concessions towards 'sustainability' were insignificant in comparison with the core impact of the business. As James became aware of this cognitive dissonance, the internal conflict between his values and professional identity deepened.

Using the IFS model, James identified his different 'parts' as: 'the loyal provider' who upholds family values; 'the high achiever' who needed success; and 'the suppressed doubter' who had carried guilt for years. Most poignantly, he connected with a part of himself he had long ignored — 'the young idealist', the boy who once loved nature, spent summers camping, and wanted to do good in the world. That boy had been buried beneath corporate ambition. It was his renewed connection with this part that guided James to eventually quit his job and join a renewable energy start-up. It wasn't until he had left his old job that James realised just how heavily the burden of suppressed guilt had weighed.

Of course, his transition wasn't easy — some belt-tightening was necessary, and James' professional identity took time to reconfigure. But the new job brought James a sense of integrity that rippled through the whole family, and allowed him to employ his considerable skills on behalf of a cause he believed in.

74%

According to the UK's Office for National Statistics, around three in four adults (74%) reported feeling (very or somewhat) worried about climate change<sup>1</sup>

inspiration and understanding than they might if they were alone.

Participants found it helpful when Matthew shared his sometimes painful experience of navigating a climate double bind while working as a journalist at Reuters news agency, and this served as an important catalyst for building coherence in the group.<sup>4</sup> In response to Steffi's questions, Matthew explained how initially he had hoped that his role as a Reuters climate correspondent would enable him to make a positive contribution but this gave way to a growing belief that his editors weren't interested in hard-hitting climate accountability journalism. His suspicions that senior leadership was ambivalent about covering the climate crisis deepened when he later learned that the company's events business was staging trade shows in Texas, explicitly designed to remove the 'pain points' holding back faster production of oil and gas.5 The company's embrace of a deal to produce a sponsored podcast portraying Saudi Aramco, the world's biggest oil company, as a pioneer of climate solutions further eroded his faith.6 Reuters told DeSmog that its events business 'serves multiple professional audiences involved in the most important discussions of our day;7 and that the sponsored content running on its website is produced independently of the newsroom, and clearly labelled.7

# From loyal employee to whistleblower

Of course, in some cases, an employee does more than simply leave a role to escape their double bind – they seek to hold their former employer to account for the mismatch between its public commitment to tackling the climate crisis, and its actions. Matthew quit Reuters in April 2022 to work as an editor at DeSmog, a non-profit climate news service with a clear focus on holding polluters to account. He has since collaborated with leading climate journalist, Amy Westervelt of the media platform Drilled, to produce a report entitled Readers for Sale: the media's role in climate delay, documenting fossil fuel sponsorship deals by major media brands including Reuters, The New York Times, Washington Post, and Politico.8 Breaking ranks with a professional tribe in this way is rarely easy - and may be catalysed by an event that makes the tension of the double bind impossible to tolerate.

This dynamic is starkly illustrated by the story of Lindsey Gulden, a former climate and data scientist at US oil and gas major ExxonMobil.<sup>9</sup>

Lindsey spent more than a decade working for ExxonMobil until she was fired in 2020 for internally

reporting an allegedly fraudulent overvaluation of company assets. (Lindsey is suing ExxonMobil for unlawful termination. The company denies fraud occurred and says her termination was unrelated).<sup>10</sup>

The experience prompted Lindsey to ask deeper questions about the oil and gas company's assurances to staff that it is committed to playing a leading role in fighting the climate crisis – despite its tireless work to increase production of oil and gas.

At the Climate Consciousness Summit 2024, Lindsey said: 'I truly, honestly believed – that because I was with good people, people that you trust your kids with, that everyone operating in ExxonMobil was working with the same concern for the environment, the same desire to tackle climate change. It is reasonable to assume that even though it's not your job, someone, somewhere in the company is doing something, but in this case that's just not true.

'Knowing what I do about the inside of the oil industry, knowing what I do about climate change, and the existential threat that it poses to us, to our children and to our grandchildren, I have much more responsibility than the average person to stand up and speak'.<sup>9</sup>

While only a small minority of climate-conflicted employees may go on to become whistleblowers, we know there are many who can relate to the clash Lindsey experienced between her values and her professional duties. In her own practice, Steffi has observed how these unresolved conflicts can lead to diminished mental health, strained interpersonal relationships, and a sense of disconnection from cherished values.

Increasingly, professionals in a variety of sectors are struggling with the cognitive dissonance between wanting to make a positive impact and simultaneously being embedded in systems that undermine the planet's future. Let's take, for example, the advertising industry where creatives craft impactful campaigns for products with significant environmental footprints, or civil servants who experience deep despair when government climate policies fall short. Despite their awareness of these contradictions, they may find no viable alternative but to continue participating in these double binds.

# **Unconscious splitting**

In this context, a psychological mechanism called 'disavowal' becomes a necessary adaptation. The psychoanalyst and writer Sally Weintrobe describes disavowal as an unconscious splitting between knowing and feeling that enables people to function within the status quo, while keeping the

'There are ample opportunities for therapists and coaches to create spaces where clients feel safe exploring the intersections of career, values and their concerns about the climate crisis'

full implications of ecological collapse at arm's length.11 Arguing that much of this disavowal is socially constructed, rooted in Western individualistic culture, Weintrobe notes how this mechanism supports emotional detachment from the consequences of the climate crisis - allowing individuals to acknowledge the terrifying facts of climate change without fully experiencing their emotional or moral weight. While disavowal may allow individuals to continue to function, it comes at a cost - depriving them not only of a felt-sense of the impacts of the climate crisis, but cutting them off from access to feeling in other domains of their lives as well.

# Calls to action

So, what can we do? Noone can stand outside a system that currently brings unintended suffering to so many parts of life. But even for the most privileged, it's not necessarily as easy as simply deciding to extricate ourselves from an entire line of work or industry. The bills need to be paid; the kids expect a certain kind of lifestyle. But what must we sacrifice to conform to these familiar patterns? Are there hidden costs that we would rather not acknowledge?

These questions live inside us but when people feel safe enough to express their fears, it becomes clear how climate change is so much more than an excess of carbon dioxide in the atmosphere. It manifests in our personal lives - the aims and aspirations we pursue, the way we view ourselves and each other. the identities we build, and how we define success. It lives in the unseen, the things we no longer notice, in the banality of familiar daily rituals - from turning the ignition key in a car, to throwing away a plastic lid – that numb us to the damage they cause when practised on an industrial scale.

We hope this article will inspire other practitioners to consider how they might also help employees explore climate double binds – and find opportunities to work with their

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own responses to the crisis. The integrative psychotherapist Trudi Macagnino highlights how the social construction of silence around the climate crisis, in the therapeutic encounter, demonstrates that both therapists and clients are frequently defended against overwhelming feelings. <sup>12</sup> But, therapists need to have worked through their own anxieties in order to support clients to face the state of the world.

There are ample opportunities for therapists and coaches to create spaces where clients feel safe exploring the intersections of career, values and their concerns about the climate crisis. For employers, the emphasis should be on fostering cultures of greater transparency and accountability that empower workers to voice their concerns without fear of reprisal.

Practical steps for therapists could include:

- Bring climate change into the room:
- We need to be prepared to do our own therapeutic work around the climate and ecological crisis, and to understand our relationship with it and our defences. We need to learn to recognise the subtle cues from clients that may signal a preparedness to explore this collective problem, and be willing to support our clients to do so as well
- Seek community: The psychological impact of the climate crisis is too big for any individual to hold alone. Fortunately, there is now a growing ecosystem of organisations that recognise the importance of creating communities to support individuals to explore their responses. A few examples include the Centre for Climate Psychology; the Pocket Project; Grief Tending in Community; the Good Grief Network; and climate cafés offered by Climate Café, the Climate Psychology Alliance and other organisations
- Explore climate-focused professional bodies: Therapists working with climate-conflicted employees should be aware of the growing number of organisations that exist to support workers to initiate honest conversations about their organisation's role in the climate crisis. Examples include Lawyers Are Responsible,

Clean Creatives, Creatives for Climate and Culture Declares.

While our seminar allowed participants to reflect on their feelings of helplessness and

reflect on their feelings of helplessness and anger, they also spoke of their desire to contribute meaningfully to solutions. Offering a facilitated space allows individuals to articulate their fears, connect with others, and begin to envision pathways forward — whether that means staying within their organisations to push for change or considering a transition to a new role.

# **Closing thoughts**

It's just a few months since we held the seminar. Since then, the devastating fires in Los Angeles and the host of executive orders from US President Donald Trump. slashing environmental regulations and withdrawing from the Paris Agreement, have only served to underscore the enormous gulf between the world's current trajectory and prospects for maintaining a liveable planet. But the climate crisis is not just a political and environmental issue — it is also a profound psychological and cultural challenge. By acknowledging the double binds that many workers face, therapists can help begin to untangle the knots that prevent meaningful change.

We hope this article will support more practitioners to explore their own emotional response to the climate and ecological crisis, and – when they feel ready – begin to extend spaces for more people to do the same, in community.

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# Further resources

The Centre for Climate
Psychology offers training and
workshops for professionals to
learn skills that support individuals
and communities to navigate the
complexities of the climate crisis
with greater resilience and agency.
https://tinyurl.com/2fpn7ts4

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





Mention the word 'Cornwall' and you'd be forgiven for thinking of holidays, coastal walks and cream teas – but there is another reality. **Anne Embury** supports adults living in Cornwall and the Isles of Scilly who are bereaved by suicide, and can offer guidance to private and public sector workforces when staff are affected by the suicide of a colleague. After more than 30 years working in mental health services in the county and with retirement on the horizon, she talks to **Nicola Banning** about her professional life

Anne Embury is the postvention lead for Cornwall and the Isles of Scilly's Suicide Liaison Service, delivered by Cornwall Partnership NHS Foundation Trust, commissioned under NHS England's Long-Term Plan.

https://tinyurl.com/9c93r67r

# NB: What can you tell me about your role?

AE: In my role as the suicide liaison service lead, I'm responsible for postvention in the county and my caseload covers Mid and West Cornwall, including the Isles of Scilly. I work alongside my colleague, a registered general nurse who covers North and East Cornwall, and like me, is a BACP accredited counsellor. Our service is delivered alongside NHS Talking Therapies within Cornwall Foundation NHS Partnership Trust which employs around 5,000 staff, delivering primary and secondary mental health services as well as Cornwall's community hospitals.

# NB: That's quite a catchment area for two therapists. How do you make it work?

AE: It's true, it can be challenging. Our main function is to provide early intervention through trauma-informed psychosocial support to adults who are resident in Cornwall and have been intimately affected by a death that may reach a conclusion of suicide at inquest, wherever that death has occurred. As we work in the NHS, our service is informed by the National Institute for Health and Care Excellence (NICE) guidelines, and we carry out risk assessments, and liaise with other statutory and voluntary services following a death.

We monitor for symptoms of trauma and, where appropriate, we make referrals for eye movement desensitisation and reprocessing (EMDR) or trauma-focused CBT should symptoms escalate. As with any trauma, our early interventions are focused on stabilisation, and reassuring those affected that we will provide them with support tailored to individual need, according to NICE guidelines.

I was fortunate to be given the opportunity to develop the first postvention (support after suicide) service in England, commissioned by Cornwall Council's Public Health team in 2010, based on a similar service in Northern Ireland. Under the NHS Long-Term Plan, postvention services are currently commissioned in all areas of England due to the known risk of depression, self-harm and suicide in those who have been bereaved by suicide.

# NB: Can you tell me more about the population you work with?

**AE:** The ONS identified there were 30,229 veterans registered as living in the county in March 2021, and the Gypsy, Roma and Traveller (GRT) community are one of the largest minority groups in Cornwall. Of course, this is significant for our service because veterans and the GRT community are both groups with above average rates of male suicide.<sup>1</sup>

I'm not surprised that the average percentage of suicide deaths in Cornwall is higher than the overall average for England and Wales.<sup>2</sup> I've welcomed some recent research published in *The Lancet* which promotes a public health approach to suicide prevention, arguing for a change of narrative from presenting suicide as a mental health issue and instead acknowledging the impact of social factors, such as poverty, debt, addictions, homelessness, abuse, discrimination and social isolation, on a person's decision to consider suicide.<sup>3</sup>

There were 73 deaths confirmed as suicide at inquest in Cornwall in 2021, and we know that suicide has an impact beyond those intimately related to the deceased. International research suggests that on average, 135 people are exposed to every death by suicide and affected according to their relationship to the deceased. This means that almost 10,000 Cornish residents could be affected in any one year by suicide, and the impact felt across communities, at work and in education cannot be underestimated.

# NB: So, what does a typical working day look like?

AE: We believe it is essential, where it is safe to do so, to visit the recently bereaved in their own homes to be able to assess self-care and wellbeing following a trauma. We aim to alleviate the stress that could be caused if asked to travel to an appointment following a traumatic event. The stigma and shame relating to suicide can increase social isolation, and that's why we prioritise regular face-to-face contact, on at least a monthly basis, as well as offering online, telephone or text communication. Although we are

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not a crisis service, we respond quickly and we don't maintain a waiting list. We allow more time for those who present with significant psychosocial issues and might require additional support.

An advantage of being employed by the NHS is that, under the Caldicott Principles, we can discuss patient care with other relevant NHS staff and GPs. It's essential to have a team-based approach when supporting bereaved families in such distressing situations. So, for example, we have developed a working relationship with the nurses on the Child Death Overview Panel (CDOP) and the Joint Agency Response service based in Plymouth, when there is a suspected suicide of a minor.

We also have a formal agreement with Devon and Cornwall Police, whereby the police officer attending the scene of a suspected suicide will request consent from the bereaved to pass their details to our service. We make contact within 72 hours (usually on the same day) and offer a face-to-face visit within three weeks or less, depending on circumstances.

In addition, we work with Cornwall's coroner's officers and their staff, as well as the volunteers provided by the national charity, the Coroners' Courts Support Service (CCSS). The legal process involved during an inquest can be daunting for the bereaved, and generally our support remains in place until its conclusion. We can and do attend inquests with families and individuals if they want us to, and our knowledge of the process helps to alleviate anxiety for those affected who may also worry about public exposure and media reporting.

# NB: That must be vital support for families bereaved by suicide at the most difficult time in their lives.

AE: It is and it doesn't stop there.
After the inquest, our service continues to support families by facilitating eight-week psychoeducation courses for people who are at least six months post-bereavement, based on the principles of acceptance and commitment therapy (ACT).<sup>5</sup>

I visited providers across Australia and New Zealand in 2014, and the group work we offer is based on what I observed while visiting a postvention service in Wellington, New Zealand.

We've also developed networks and relationships with local and national charities that provide bereavement support, as well as suicide prevention initiatives in Cornwall. We invite representatives from these groups to an annual Service of Reflection for People Affected by Suicide that we co-ordinate at Truro Cathedral on the closest weekend to World Suicide Prevention Day (10 September). We invite those of all faiths or none to come together in a safe space to reflect and remember those they have lost, and to share the ritual of lighting a candle in memory of the person who has died.

# NB: I imagine the memorial event is significant for both bereaved families and staff who work in sectors dealing with the aftermath of a suicide.

**AE:** Yes, and the latter is central to what we do. We work closely with Cornwall Council's Public Health team to ensure that postvention support is offered to those affected, but the primary function is to identify causal factors that may be known relating to a death, which might provide information that could be helpful in preventing future deaths.

We collaborated with the Public Health team on developing postvention guidance to send out to employers where a suspected suicide has occurred within the workplace. This gives the employer the opportunity to contact the Public Health team for support who, in turn, can contact our service to arrange a workplace visit. If an employer does not have access to occupational health services, we can support managers and speak to staff following the death of a colleague, and this can include providing support to the public sector following the death of a staff member.

There is a lack of postvention resources for smaller community groups, nationally and locally, and so we have developed, along with Cornwall Council and Cornwall Mind, a postvention toolkit for charities and community interest companies, to provide guidance in the immediate aftermath of a traumatic death (that may be a suicide), where there is no HR or occupational health support available.

# NB: I know you've worked hard to establish suicide postvention best practice in your community, can you tell me more about it?

AE: Within our own NHS Trust, we are part of a working group developing a postvention pathway for managers and staff across the whole Trust to provide support following a suicide of a staff member or a patient, all of which are deeply traumatic events for those affected.

Wherever a death has taken place, the principles remain the same with regard to containment, stabilisation following the trauma, supporting those affected, and inclusion, wherever possible, of the bereaved family before decisions are made that may not be able to be retracted, for example, memorials. The Samaritans have guidance about memorials in public places where a death may have occurred, and

'We can and do attend inquests with families and individuals if they want us to, and our knowledge of the process helps to alleviate anxiety for those affected'

at schools and places of higher education. Early intervention, following a trauma, can prevent further psychological injury to those affected and help to restore the environment, whether a public or private sector workplace, or a place of education, back to its intended function.

# NB: What was it that drew you to this work in particular?

**AE:** Working as a therapist at several GP practices in Cornwall prior to the introduction of NHS Talking Therapies, I frequently received referrals for patients affected by the suicide of someone close to them. I was conscious of my own limited skills in this field as well as the lack, at that time, of any support services in the county that I could signpost people to who were bereaved by suicide.

There had been no discussion about suicide when I originally trained as counsellor (though I understand this has changed on most training courses), but when I had the devastating experience of losing a patient to suicide, I was completely unprepared and received little support outside of my monthly supervision. Understandably, the same questions and emotions arose for me that bereaved family members and partners often describe - What did I miss? Why didn't they contact me? I felt self-blame, anger, sadness, compounded by guilt that I felt this way when the deceased's family were facing a lifetime of loss. I also experienced the suicide of a colleague at work and, again, the lack of available support at that time was deeply unhelpful for all of us who were affected. These difficult professional experiences have informed my work and desire to help others.

I hold the belief that counselling and psychotherapy can be a form of social justice for those we try to help. Stigma and shame around suicide has prevented the bereaved from accessing help when they need it. The Suicide Act (1961) decriminalised suicide and yet we still hear, in common use, the pejorative language of the criminal justice system, eg 'committed suicide' which subconsciously implies blame and increases risk in those affected. This needs to change.

# NB: So, what does best postvention practice look like?

AE: It is imperative to offer immediate support following a suspected suicide, as well as making provision for longer-term support which may involve a number of different organisations from the statutory and the voluntary sector. The initial response will require the postvention worker to be skilled in carrying out a risk assessment (as postvention services are commissioned in response to the increased numbers of suicide in those who are bereaved by suicide), and there may also be safeguarding concerns where children or vulnerable adults are affected. The response should be tailored to the unique needs of each individual affected by the death,

and the needs of service users should be listened to and accommodated, where possible and within the limitations of funding constraints.

Although counselling is not recommended for at least three months post-suicide loss, counselling skills and a wide range of mental health experience can be invaluable, and there is substantial evidence that a psychoeducation approach, although seeming to be simplistic, can be the most helpful intervention.<sup>2</sup>

It is important not to try to speculate on why someone may have taken their own life, but normalising the thoughts and feelings of the bereaved can alleviate the worry that somehow, they are 'going mad' and the world they knew has become unsafe. The postvention worker also needs a good working knowledge of local services to be able to assist with practical issues that may arise, and advocate for the bereaved who may be in no position to do so themselves. We've found our knowledge and experience of the legal process surrounding a suspected suicide helpful in alleviating much of the anxiety caused by police investigations and the coroner's inquest.

# NB: What do you love most about your work?

AE: Despite the tragic nature of the work, every individual is unique and their responses to the trauma of their loss will be different. There is no right or wrong way to grieve, and every situation we are involved with presents different challenges. It is a privilege that people who experience what may be the most traumatic and distressing event of their lives, allow a complete stranger into their homes, or their place of work, and place trust in us to support them through their painful journey.

# NB: Given the scale and scope of your remit, what do you find most challenging?

AE: Without doubt, the most distressing and challenging situations are when we work collaboratively with the nurses on the CDOP, to support a parent/parents or legal guardians following the death by suspected suicide of a child. Practising good self-care is imperative, taking time out

'I hold the belief that counselling and psychotherapy can be a form of social justice for those we try to help. Stigma and shame around suicide has prevented the bereaved from accessing help when they need it'

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# Tell us about your workplace

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

to reflect or engage in self-therapeutic activities – as well, of course, ensuring good supervision is available.

# NB: How are you viewing the prospect of retirement?

AE: I have always found, in life, that when one door closes, another one opens. I live in a beautiful part of the world and enjoy spending time in the outdoors but I'm sure I will continue to want to be involved, in a voluntary capacity, with a meaningful activity that will address issues of social justice, whatever that may be!

# NB: What will you miss about your working life in the therapy profession?

**AE:** I will miss the people who I hope I may have helped, and the broad range of amazing people whom I have had the good fortune to meet along the road of postvention who deliver incredible support services, both locally and nationally, as well as the academics whose research has informed our service delivery and practice.

# NB: If you had three pieces of advice to pass on to the next generation of therapists working with employees and employers, what would they be?

**AE:** Firstly, in any organisational context, pay attention to the culture of the workplace, and try to achieve a balance between supporting the needs of the employees and recognising the pressure that managers also experience.

Secondly, tailor your support, whether as an individual therapist or working with a staff group, to the needs not only of the individuals but also be mindful of the wider working environment.

And finally, be clear about your legal responsibilities with regard to sharing of information and the limits of confidentiality. I recommend ensuring that the ground rules are agreed in advance so that you are clear about your boundaries and obligations, should an ethical conflict arise and that all parties (staff and managers) are fully aware of the implications.

### NB: What do you hope your legacy will be?

**AE:** I hope that I've helped to provide a framework for the future development of postvention service delivery. Of course, as with everything, nothing remains static, and the service will inevitably need to change and adapt, but I'd like to think that postvention services will continue to be commissioned across the country. To a large extent, our service provided the template for the Support After Suicide Partnership (SASP) Core Standards for suicide bereavement support services, recommended by NHS England. I'm hopeful that, in future, there will be consistency in service delivery across all regions of England so that support for people affected by suicide will continue to be delivered, locally and nationally at a time when they most need it.

# **Workplace matters**

# Why is making a decision so hard?

# Sandi Mann

ave you ever dithered so much about where to go on a night out that you end up not bothering and decide to stay at home instead? Or perhaps you simply can't decide what to eat at a restaurant and ask the waiter for advice? Or maybe choosing what to wear each morning sends you into a flurry of indecisiveness, as you weigh up the benefits or not of every wardrobe option? If these scenarios sound familiar to you or if you recognise your clients in them, it may be that you or your clients are suffering from 'decision fatigue'.

### **Overwhelm**

Decision fatigue is when we feel so overwhelmed by all the decisions that we have to make that our ability to make sound decisions diminishes. One reason that we might experience such exhaustion is due to the sheer number of decisions we have to make in a day. A study in 2011 suggested we make over 200 decisions every day just about food choices, while a poll of 2,000 adults in 2022 found that we spend an estimated three hours per day deciding what to have to eat, what time to go to bed and what to wear and watch.2 Add to that the big life-changing or life-enhancing decisions like where to go on holiday or whether to change jobs, and it is clear to see why it has all become so exhausting.

But it is not just the number of decisions that leads to decision fatigue – there is also the angst caused by the huge array of options we now have. This leads to what has been called the 'paradox of choice'. We might think having lots of choice is a good thing – giving us more options to choose from and thus leading to better decisions. But in reality, too much choice can lead to poorer decision making and feeling

more regret over choices we have made. According to the 2022 poll, around 87% of us change our mind about decisions we have made.<sup>2</sup> The problem is that when there is so much choice, it can be easy to worry about whether we have made the right one. We become less satisfied with our choices than if we had less choice.

# "...around 87% of us change our mind about decisions we have made<sup>2</sup>"

# **Decision paralysis**

In addition to feeling dissatisfied with what we have chosen, having a lot of options to weigh up creates a heavy cognitive load. We have to mentally consider the pros and cons of various elements, hold all this information in our head and compare against different options. As early as 1956, cognitive psychologist George Miller concluded that the maximum amount of information that we can hold in our head was the so-called 'magic' number of 'seven, plus or minus two.'3 Comparing and contrasting more than the 'magic number' repeatedly, drains our resources, which is why, where possible, we might try to reduce cognitive load by avoiding decision making altogether.

# Less is more

A classic study at Columbia University showed that when people were given the choice of six artisan jams, 30% made a purchase, but when given a choice of 24 jams, only 3% decided to buy.<sup>4</sup> More choice can lead to decision paralysis. We might also avoid decision making by always choosing the same meal all the time at a restaurant, having a strict morning routine or having a 'uniform' for work



to avoid clothes choices. Former CEO of Apple, Steve Jobs famously had duplicates of the same top and jeans so he didn't have to make any clothing decisions each morning.

Reducing some of the more mundane decisions from our life, frees up our cognitive resources for the bigger, more important decisions. Streamlining our choices so that we have fewer options can help - for example, making a list before supermarket shopping helps avoid decision fatigue at the weekly shop. Delegating decisions is another option, but not if it leaves you feeling disempowered. And the final tip to help with decision fatigue is to stop wasting energy second-quessing; once a decision is made, stick with it – and live with the consequences (accepting that it is not possible to always make the best decision).

Once the decision fatigue from the small stuff is reduced, you will have more mental energy for the bigger, life-impacting decisions – and increase your chance of making good decisions when it matters most.

**Dr Sandi Mann** is a senior psychology lecturer at the University of Central Lancashire. She is an accredited CBT therapist and an accredited EMDR practitioner.

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# Are we taking care of the care sector?



Jenny O'Donnell is a BACP research fellow who has worked in the BACP Research team since 2019. She is currently completing a BACP-funded PhD on the acceptability and usefulness of counselling for staff in nursing and residential care homes.

Working in social care is notoriously physically and emotionally demanding, poorly paid and involves long hours. Shining a light on this often overlooked workforce, **Jenny O'Donnell**, a BACP research fellow, is exploring how viable and useful workplace counselling is to support care home staff. In the early stages of her PhD research, she shares what she's discovered so far and why research is so important to BACP and the therapy profession

t some point in our lives, we will probably find ourselves visiting someone whom we love, who may be frail and elderly, and is now living in a care home. This happened to me when I visited my grandparents and, while it's not always the case, I can still remember witnessing what seemed to be a particularly stressful and unpredictable working environment for staff.

It was, however, by no means my only experience of spending time in a care home. I have also worked in research at the University of Birmingham and Aston University, focusing on the psychological wellbeing of residents in care homes following a stroke or experiencing frailty. I made regular visits to care homes to collect data, and so I became aware of the difficult conditions for staff whose professional lives are spent working in these settings.

Of course, BACP Workplace readers recognise the importance of staff support to promote wellbeing - yet, care home staff are typically on a low income, and exposed to multiple factors that contribute to workplace stress. Their work is generally undervalued in society, despite the extremely challenging conditions care workers experienced during the COVID-19 pandemic, such as the difficulties obtaining personal protective equipment (PPE) and the high number of resident deaths. Even without a pandemic, the close bonds that staff often form with residents, and the subsequent grief that can occur when residents die, make the work incredibly demanding. For all these reasons, I thought that the psychological needs of this workforce would be an interesting and important area to research.

# About my research

In 2022, I was given the go-ahead and BACP funding to start a piece of PhD research that contributes to BACP strategy. My PhD is being conducted through the University of Leicester, and focuses on whether counselling and psychotherapy for staff in nursing and residential care homes is an acceptable and useful service. Currently, the research into counselling and psychotherapy for this group is limited, so this project will contribute substantially to the evidence base.

My PhD will involve carrying out interviews with care home staff and managers as part of the data collection process. The interviews will explore staff and managerial views and awareness of counselling provision in their workplace setting; current perceptions of the mental health needs of staff; barriers and facilitators for delivery and access of this type of intervention; and, preferred therapy formats such as in-person, online or telephone therapy.

# About the workforce

Care home residents tend to have multiple health care needs such as frailty, sight or hearing loss, approximately 70% have dementia or severe

'I honestly believe that research into counselling and psychotherapy is really important because it helps to contribute to the evidence base for the profession' memory problems, and 60% have a mental health problem.¹ Care home staff also often encounter challenging working conditions every day, characterised by long hours, shift work, high workloads, insecure and zero hours contracts, relatively low pay, and tasks that can be physically as well as emotionally demanding due to residents' healthcare needs.²

It's not unusual for care workers to encounter unpredictable events during the working day which can include resident falls, hospitalisations, potentially sensitive situations when interacting with the families of residents, and resident deaths. Residents with certain issues such as dementia can also exhibit behaviours that present challenges for staff to work with. A wealth of evidence suggests that care home work can have various negative effects on staff emotional health, such as stress and burnout, as well as from developing close bonds with residents and experiencing a sense of bereavement when they die. 3,4,5

# Timetable for research

My PhD research is being completed on a part-time basis over a seven-year period, from 2022 until 2029. The first two years have involved a literature review of counselling and psychotherapy research for care home staff. This has also included reviewing the literature on workplace stressors experienced by care home staff, counselling and psychotherapy in other occupational settings, and for occupations who experience similar stressors to care home staff. I have also looked at previous research into other types of mental health interventions for care home staff, such as peer support, and carried out a scoping review into peer support interventions for care home staff.

The third year involved finalising the details and data collection processes for two of the research studies I am conducting, and applying for ethical approval. I received ethical approval in late-2024, and have begun my interviews with care home staff and managers. The rest of the PhD will involve finalising decisions about another study for the PhD, data analysis and writing up the PhD thesis.

# Why research matters

In conversation with therapists, I often hear that there can be a perception that research in the field of counselling and psychotherapy is not relevant or applicable in the real world. Unsurprisingly, it's not a view I share. Back in 2019, I joined BACP as a research fellow within the Research team. Our remit is to undertake and support research that is intended to bring about changes in practice or standards development, influence policy and commissioning of services, support the development of greater research capacity within the field, and contribute to improved research literacy among practitioners. I have collaborated with universities and charities on various research projects, focused on counselling and psychotherapy for different groups such as care home staff, people with dementia, older adults, school children and university students.

I honestly believe that research into counselling and psychotherapy is really important because it helps to contribute to the evidence base for the profession. This is essential as it helps our Policy team at BACP promote the profession and campaign for more paid jobs for members.

I've spoken with BACP members who've completed their degree, a master's dissertation or are now researching a special area of interest, and have surprised themselves as they initially thought they did not like doing research. If you are reading this and are involved in some research of your own, BACP has produced helpful resources which you can find at: https://tinyurl.com/3zbahrpt

# **Funding and support**

It's certainly true that securing funding for research can make all the difference to whether the research is possible. BACP is funding my PhD research because it is aligned with BACP's strategy, and I am provided protected time to work on it. In addition, I receive support from my line manager and other members of the Research team, as well as a very supportive supervisory team at the University of Leicester.

Alongside my research, I am also involved in helping to provide products and services to support member research needs, such as contributing to the research pages of *Therapy Today*, as well as the Postgraduate Research Forum, the Annual International BACP Research Conference, and producing surveys for members and staff as part of BACP's Data and Surveys Working Group. I am the special interest lead (SIL) for the Workplace division – a voluntary role where the SIL acts as a bridge in communication between BACP and the division.

# Early insights

To date, one of the things I've found of most interest is how the care home sector is under-researched compared to the wider healthcare sector such as hospital and primary care settings. This appears to 'Even without a pandemic, the close bonds that staff often form with residents, and the subsequent grief that can occur when residents die, makes the work incredibly demanding'

### **REFERENCES**

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- 2 Skills for Care. Workforce intelligence summary: care homes with nursing in the adult social care sector 2022/23. [Online.] https://tinyurl.com/k745prta
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- 5 Marcella J, Kelley ML. 'Death is part of the job' in long-term care homes. SAGE Open 2015; 5(1).

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be the case both for research into service users, such as patients or residents, and research into staff. Staff-centred research in both healthcare and the care home sector, is also far more likely to focus on the quality of care and training, rather than focusing on the emotional wellbeing of staff.

We simply don't have sufficient research into the emotional and psychological health of staff in the sector, and this is a problem, especially given the current vacancies in the care workforce. The research that does exist into counselling and psychotherapy field for staff is limited, and tends to be based around a handful of studies on acceptance and commitment therapy (ACT) and eye movement desensitisation and reprocessing (EMDR), which have been shown to be useful for stressful incidents.

# Next steps

I am currently interviewing staff and managers in nursing and residential care homes as part of this research. I'd welcome hearing from any BACP Workplace readers if you are aware of care home providers that might be interested in taking part in this research project. I will be interviewing both care homes that currently have a counselling service, for example, those that use an employee assistance programme (EAP) or an independent counsellor, and care homes that currently do not have a counselling service or support for staff.

Ultimately, I hope when my research is complete that it will highlight the potential impact that working in a care home environment can have on staff wellbeing, show the current lack of research into mental health and counselling and psychotherapy interventions for this group of staff, and demonstrate how we are trying to address this gap in the research at BACP.

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**Title:** ChangeStories **Author:** Dr Susanne Evans

Published by: Practical Inspiration Publishing

**Dr Susanne Evans** is an organisational change consultant on a mission to change the way that transformations are managed. She is the author of the bestselling book, ChangeStories®: How to have powerful conversations, tell inspiring stories and build engagement for transformation and the host of ChangeStories®, the Top 40 Apple UK Business and Management podcast, in which guests share ideas for improving the way that changes are managed in organisations.



# Books



Change in organisations is rarely a smooth business and can often result in struggles, frustrations and failure. Having spent the last 25 years working with leaders, it's little wonder that **Dr Susanne Evans**, an organisational change consultant, is committed to transforming transformation. She talks to **Nicola Banning** about rethinking how we make change happen and why she wrote her book *ChangeStories* 

# NB: Why is change within an organisation so often regarded as a notoriously difficult business?

SE: Change can feel difficult in organisations because organisations are made up of people, each with their own previous experiences of change. However, often in organisations, there is an assumption that everyone will change in the same way at the same time. The change curve is often used to depict a smooth curve of change, where people move along it sequentially. The change curve was developed by Elizabeth Kübler-Ross to show reactions to bereavement, and while it offers some useful words about feelings, it is not a true representation of the experience of change.

Readers may have heard the statistic that '70% of change fails' which is a common misquote from an article in the *Harvard Business Review*. This narrative of change failure continues to be very pervasive in organisations and so can lead to feelings of dread about a change programme.

These myths and fears about change can lead to change being managed in a way that is not people focused, and the use of change tools that are not fit for purpose, and do not focus on what is most important during periods of change. This can make change feel really hard or that these tools are not working, but actually, it is because organisations do not focus on the fundamental hidden forces that can impact their ability to create change.

I encourage people at all levels in organisations to build storytelling, courageous conversations and inquiry into their practice to enable them to create and lead change differently. By building these different approaches into a change programme, it ultimately makes change an easier experience for everyone.

# NB: What are the most common pitfalls you've witnessed?

SE: Many organisations approach change as a process rather than from a people-centred perspective. This can be because many changes are managed by a large programme which has project management at its core. This can lead to any change being seen as a planned series of steps which, if completed, will lead to success. That's not to say that project management isn't important. But sometimes, we can turn to process because it feels easier. However, to create true transformation, a more people-focused approach to change is needed, focusing on conversations, dialogue and storytelling.

This can feel a bit messy and daunting for people - and more complicated! But, as organisations are made up of lots of individuals, we need to be approaching change in a more individualistic way. I often use a swimming analogy here. I love to swim, but lots of people don't, and if you visit a swimming pool (particularly when there are swimming lessons going on) you will see lots of different behaviours. Some people will be confident swimmers, some people will be scared of jumping in at the deep end, and some people won't want to swim at all! This is all normal. So, we need to react and create a space for these individual reactions rather than making people feel that they all need to be the same.

# NB: There has been an awful lot written about organisational change. What did you think was missing from the research?

SE: I realised that what was missing from research was a focus on using storytelling to create more meaningful change. I also realised through my work with clients that people understood why stories are important, but lacked the confidence to add

stories to their change practice. I wanted to write a book that was practical and would enable people to move beyond their existing change tools, and build elements of storytelling into their everyday work.

# NB: How would you summarise your approach to creating change in an organisation?

SE: My main focus is always on creating the most people-centred change as possible, ensuring that everyone has a voice during a change, and is able to share their experiences and ideas. So much of change is top-down, with leaders and change practitioners trying to 'sell' the change to everyone else to try and convince them to change. My approach is about creating conversation and dialogue about change, enabling everyone to get involved. Change should be an experience that everyone is involved in, not just leadership or the project team.

# NB: Why is there such a strong tendency for organisations to ditch how things were in the past?

SE: Most organisations are forward-looking, with the idea that progress is made by moving forwards rather than looking backwards, and on achieving the next phase of the project plan. This creates the pressure towards moving forwards all the time and that what was done in the past must be left behind. This is a mistake, I think. We need to understand and learn lessons from past change experiences to ensure that we don't do the same this time. We also need to show people that we understand where things went wrong and how this time, we will do things differently. A bit like the 'You said, we did' board in supermarkets – you said that the trolleys are too dirty, so we have cleaned them. Well, we need to do the same thing in our change programmes.

There is lots of research that shows that ensuring that things that people value from the past are carried forward into the future creates more engagement in change. So, we need to make sure that we understand these valued aspects of the organisation so that we can demonstrate how they continue. This could be key aspects of the organisation's values or activities. My work is rooted in appreciative inquiry so appreciating the best of what is, is a very important aspect of my work – and something that I think is often missing in change programmes.

# NB: For readers engaged in change within a small organisation or even in their own small business, how would you suggest they go about approaching change?

SE: In some ways, creating change in a smaller organisation is easier as there are fewer stakeholders to engage with. However, change in smaller companies is often harder as there can be a fear that change will mean something about the organisation will be lost, particularly as small

organisations get larger. People often join or start an organisation to create the type of place that they want to work and if this will be lost, change can be difficult to create. I think that whatever type of organisation you are working in, ensuring that change is focused firstly on the people is most important.

'Everyone can tell stories
- it's not about being
the most entertaining or
the funniest – it's about
being authentic'

readers of BACP Workplace might start to build our own story for change and why it matters that we do?

SE: Storytelling is a key part of being a human. It is something that we enjoy from a young age and is something that is built into how our brains work. We can all be storytellers, it's just a question of practice and confidence. I created my ARIAS model to help people

NB: Can you offer some tips for how

 Attention – pay attention to the things that matter in your organisation, both to you individually and to others

build their own storytelling practice:

- Reflection build time for reflection into your daily practice, learning lessons from your experiences
- Inquiry use dialogue, questions and conversations during periods of change to understand how people are feeling and to hear their stories
- Appreciation appreciate the best of what is from the past and present, and take this forward into the future
- Storytelling translate what you have found out from the process into a meaningful story about the change. I have a template for this which is available to download on my website.

Creating a meaningful story about change enables people to feel more engaged in a change, understand what it means for them, and creates a space for them to ask questions and create a dialogue about the change. In turn, this enables leaders and change practitioners to understand more about why people might resist the change (although I prefer the term 'super engagement' to change resistance!) and improve the way that we communicate change.

NB: How much resistance do you meet in organisations to implementing change differently and to telling stories instead. And how do you work with it?

SE: There is sometimes resistance as people become very comfortable with the way that they have always done things. Often, leaders feel most comfortable communicating change through town hall events and a PowerPoint presentation, so it can feel uncomfortable for them to do things differently. However, I can show how using storytelling has an impact on engagement and, ultimately, the bottom line which usually is quite persuasive! When working with people to build their storytelling capability, I start small by asking them to tell their own story using a structured template. As this is a topic that people are familiar with, this is a fairly easy story to construct and tell. When they have a chance to tell it and get feedback, they can see how engaging this is as an approach, and we can then move onto more complex stories about change and strategy.

# NB: What are you hoping that people will do as a result of reading your book?

SE: I hope that people will just have a go at building storytelling into their practice and see the difference that it can make. Everyone can tell stories – it's not about being the most entertaining or the funniest - it's about being authentic. By practising storytelling and building skills bit by bit, people can see a huge difference in how change is created. And simply using storytelling techniques in everyday communications makes a difference. I would just encourage people to give it a try, get some feedback and keep practising!

### REFERENCE

1 Harvard Business Review. Cracking the code of change. [Online.] https://tinyurl.com/267r5frs (accessed 24 February 2025).



Do you have a query or issue about your work that you'd like some help with? Please email the editor: workplace editor@bacp.co.uk

Two clients who are experiencing domestic abuse from their partners are concerning me. Initially, we contracted to address work-related issues and then the abuse became apparent. How should I approach this?

I'm an experienced affiliate counsellor working with EAPs providing short-term counselling. Two clients have disclosed personal circumstances which are causing me concern. One client describes her relationship as "abusive", is planning an exit strategy and wants my help; the other, whom I believe to be in an abusive relationship, has told me: "he only hit me once". In both cases, our contract is not related to their personal relationships or domestic abuse. How should I respond?

Answer: Your thought-provoking questions immediately illustrate the challenges of navigating the issue of domestic abuse within short-term EAP work – and unfortunately, it occurs with regularity. My response will cover safety and risk, confidentiality, re-contracting, onward referral and employer support with reference to BACP's Ethical Framework for the Counselling Professions and the Workplace Counselling Competence Framework (WCCF).

It appears that while one client is aware of the seriousness of their situation and is moving towards leaving their partner, the second client appears to have little awareness of domestic abuse and is not overtly or overly concerned. Regardless, there will be common themes to consider, but they will need to be tailored to each individual circumstance.



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# Domestic Abuse Act 2021

The relatively recent legislation says that behaviour is 'abusive' if it consists of any of the following: (a) physical or sexual abuse; (b) violent or threatening behaviour; (c) controlling or coercive behaviour; (d) economic abuse; (e) psychological, emotional or other abuse; and it does not matter whether the behaviour consists of a single incident or a course of conduct.'

# Safety and risk

You will need to assess the safety and risk of your clients. However, it's vital that any consideration of disclosure (with or without the client's permission), needs to be treated with caution because of the risk of escalation within abusive situations. BACP's *Ethical Framework* reminds us to consider carefully balancing the need to protect the client's confidentiality, and to protect our clients or others from harm. This raises questions of confidentiality which I will cover later. (See paragraphs 9 and 10 'Good practice', *Ethical Framework*).

Firstly, it is important that any immediate risk to your client, along with any children or vulnerable adults within the family, is part of any assessment. Individuals who are experiencing domestic abuse are often their own expert in assessing their risk, and will wittingly or unwittingly be managing that risk every

day. However, your second client who has minimised the physically abusive event they recently experienced, may not be able to understand the potential risk.

As you are engaged by an EAP to work with the client, you may also need to consider any safety or risk issues in the context of the workplace, both from the clients' perspectives and the organisational standpoint. For example, are your clients working from home? If so, it may bring additional risk factors, or if they are in a working environment either with the perpetrator or where the perpetrator can gain access.

It is worth considering the additional support available to assess risk, and the potential need to consider the limits of confidentiality and onward reporting, through consultation with the EAP case manager or, depending on the EAP model, liaising with the commissioning organisation, your supervisor or BACP's Ethics team. Remember, BACP's ethical decision making model exists and can be incredibly helpful, and the WCCF (paragraph 2.2) describes the expectations of an EAP counsellor to be able to consider such liaisons.

# **Re-contracting**

Both your clients are attending counselling with you on a short-term basis and there are, of course, considerations as to how to use the sessions and the client's goals are paramount. I recommend you refer to the WCCF (paragraph 2.2i). While their presenting issues were not initially related to domestic abuse, they have now both raised this, albeit from different viewpoints and at different stages. A conversation with both clients about how they wish to use their remaining sessions is appropriate, and can help ensure their needs for counselling are discussed given the new information.

They may or may not wish to use their sessions to explore further the domestic abuse and this will form part of your risk assessment. With regard to your second client, it is important that you avoid colluding with their understanding of what has happened or to minimise its significance. They may be scared to say more, or not understand how domestic abuse can escalate, or indeed what is or is not abuse, so it is essential to be realistic as to what can and cannot be achieved

It's worth considering a request for additional sessions to the EAP case manager (with your clients' permission). If this is not possible, consideration needs to be given to onward referral to either or both, further counselling with a specialist agency and domestic abuse support.

# Therapeutic engagement

The first client you mention has made a decision and may or may not be getting support. Their viewpoint will be informed by any support they have already received, or by their own cognisance of the current situation. If agreed and re-contracted, your client's remaining sessions could provide the space to review their current situation (the here and now),

and ensuring they have all relevant local resources to hand to assist in their planning. Again, I would emphasise the need for a cautious approach to planning, which I would communicate to them very clearly to ensure safety.

Your second client, who has initially raised the physical abuse and is minimising the physical abuse ('it was only once...') may respond to a different approach. So often, normalising abusive behaviour is how individuals cope, because it is 'normal' for them, in that relationship. They may think that is how relationships are and they may have experienced relationships like this before. Their experience may be

"...domestic abuse can be volatile and where a client's safety, or that of other employees, is at risk, clear thinking and sometimes direct action is necessary"

that incidents of abuse are quickly over and the perpetrator makes extravagant gestures towards forgiveness. If your client chooses to engage, understanding the cycle of abuse will be an important first step, both to consider what they wish to do and for their protection. If they choose not to engage, you can ensure they have all the relevant information, support services in the local community, and trust that they will come to an understanding in their own time.

### Confidentiality

You will need to be explicit with your clients about any limitations to their confidentiality which may well have changed since your first meeting. In the circumstances you describe, immediate harm to the individuals, their family (in particular children) or colleagues, would raise concerns for a potential necessity to breach confidentiality (preferably as always, with the client's permission). Additionally, there may be specific reasons why an employer should be informed, for example, if the perpetrator is also an employee at that organisation, or has threatened to or actually turns up at the workplace to menace or intimidate, which may impact other employees.

# **Employer support**

Many employers have a domestic abuse policy, which may outline the organisation's approach to supporting employees experiencing domestic abuse including confidential support, flexibility (in working hours/shifts), attendance at counselling and occupational health appointments, along with more generally raising awareness among employees to offer a supportive environment without stigma for those affected. Your clients may find this helpful in disclosing their situation to their manager, but also may be cautious because of a real or perceived lack of trust for their position to be understood, supported and held.

# **Closing thoughts**

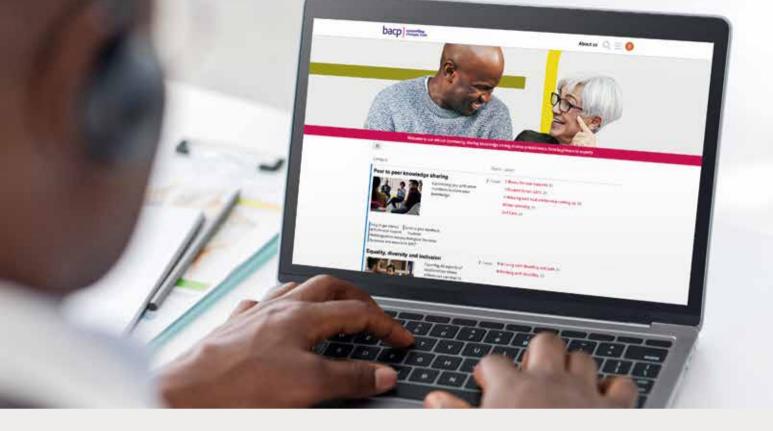
It's important to bear in mind both the limitations and the opportunities for clients when engaging with short-term work, and to raise the issues at whatever moment feels best for them. As an EAP counsellor, you need to hold in mind the three-cornered contract between client, counsellor and employer, and balance the needs, with a primary focus on safety. While this may be a more direct approach than might normally be used in other therapeutic settings, domestic abuse can be volatile and where a client's safety, or that of other employees, is at risk, clear thinking and sometimes direct action is necessary.

### REFERENCE

1 UK Government. Domestic Abuse Act 2021. [Online.] https://tinyurl.com/epn89fyh

### Resources:

- BACP Ethical Framework for the Counselling Professions:
   tinyurl.com/2k7fk9ce
- BACP Workplace Counselling Competence Framework recognises and supports the roles of workplace counsellors, and enhances professional standards. You can access the Framework at: tinyurl.com/ft3y5dfy
- BACP ethical decision making model: tinyurl.com/554e5rtn
- Refuge National Domestic
   Abuse Helpline:
   nationaldahelpline.org.uk



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