

# Staff Wellbeing during COVID 19 response: People & Culture Gender Analysis Tool



- Are our staff Safe working from home?
- How do we enable our frontline workers (majority female), to be supported and productive?

In an ever changing environment as we respond to the COVID 19 pandemic in our community, the City of Casey has a duty of care to ensure staff are supported to undertake their roles in a safe environment where they are treated fairly and equitably. This is particularly important where staff will be expected to work from home, adapt their roles, routines and lifestyles, while working under increased personal pressure. We particularly need to ensure that staff who are more at risk – either mentally, socially, physically or financially are catered for, and that our front line workers, who are mainly women, are supported effectively.

Global evidence shows that in emergencies women and children are disproportionately affected. Incorporating a gender analysis into our new ways of working in response to COVID 19, is crucial to improve effectiveness of our programming and ensure we do not perpetuate gender and health inequities within our workplace.

**What is a Gender Analysis:** Gender analysis asks how socially-constructed roles and identities affect vulnerability to and experiences of an outbreak. While the focus is on differences between women and men and between girls and boys, inequities related to race, ethnicity, sexuality, and religion are integrated. (Gender and the Corona Virus Outbreak, Think Global Health 2020).

## The City of Casey Principles

Throughout the COVID Response, we will apply a gendered lens to the following Principles:

### **Principle 1: Safety for all staff working from home, particularly those at risk.**

- Physical health: identification, prevention and risk mitigation.
- Family Violence: Identification, prevention and risk mitigation
- Mental Health: Identification, prevention and risk mitigation
- Support for parents: resources, tips and flexible working hours, leave arrangements etc

### **Principle 2: Enable our Health workers to safely work within our community**

- Implement infection control guidelines through clear communications and training
- Gendered load due to both work and home responsibilities (how to support??)
- Psycho social support to mitigate risk of vicarious trauma.

## Working Together

Teresa Thomson, Gender Equality Officer, and Krissy Nicholson, Family Violence Prevention Officer, have developed the draft tool for further input and collaboration with the People & Culture Team. It is likely that other technical experts across the organisation, such as the Mental Health, front line services and Management Teams will be required to input and dissemination where appropriate.

## The City of Casey People & Culture Gender Analysis

### Principle 1: Safety for all staff working from home, particularly those at risk.

	yes	No/ partly	Actions to fulfil commitment	Teams responsible
<p><b>Physical Health:</b> Identification and risk mitigation for staff at risk due to physical health concerns or caring responsibilities at home.</p> <ul style="list-style-type: none"> <li>○ Auto immune deficiencies</li> <li>○ Respiratory issues</li> <li>○ Other high risks identified by Department of Health and Human Services (see link)</li> </ul> <p>And staff who are carers of those who are at high risk.</p> <p>This includes identifying – people living with disabilities, older staff members (such as School crossing supervisors), single parents, staff who are carers of their elderly parents etc.</p>			<p><i>Examples: Communication to all staff on how to protect themselves and family following health guidelines.</i></p> <p><i>Ask all managers who are still working in the office or on front line to check in with their staff and encourage staff member to work at home, or provide leave options where appropriate.</i></p>	
<p><b>Family Violence:</b> Identification, prevention and risk mitigation for staff at risk due to potential of family violence.</p> <p>Staff have been asked whether they feel safe working from home and there are strategies in place to address when they do not?</p>			<p><i>Examples:</i></p> <p><i>Managers provided with ‘how to deal with disclosures resource’ and guidelines on what to do from a work point of view if there is a disclosure.</i></p> <p><i>Organise online training for managers and staff on ‘how to manage disclosures’</i></p> <p><i>Provide links to safety plans etc</i></p> <p><i>Set up daily work online meetings that are ‘face to face’. Either with a manager or a ‘buddy’.</i></p> <p><i>Provide links to DV support service numbers including EAP.</i></p>	

			<i>Make phones available as another 'work phone' that is less likely to be monitored by a partner and can be used in emergencies.</i>	
<p><b>Mental Health:</b> Identification, prevention and risk mitigation for staff who have mental health issues or are at risk of developing. Including anxiety, depression etc...</p> <p>Support staff who may experience vicarious trauma, eg. Those who may receive disclosures or supporting staff members who are need extra support due to mental, physical or family violence issues.</p>			<p><i>Examples:</i></p> <p><i>Develop online portal for regular tips for staying mentally healthy.</i></p> <p><i>Regular video conferences with teams. (wellbeing check ins)</i></p> <p><i>Manager 1-1 taking place – checking in 'are you ok? what support do you need?'</i></p> <p><i>A guide to be produced for managers/leaders to address all of the key risks.</i></p> <p><i>Contact Council Mental Health team for advice to support staff including support services such as Beyond Blue, EAP etc.</i></p> <p><i>Equip managers with resources to pay attention to additional stress for staff and consider psychosocial support.</i></p>	
<p><b>Support for Parents:</b> Provide resources and tips for parents working from home.</p> <p>Encourage partners of healthcare workers, to take up more child care responsibilities to enable their partner to work.</p>			<p><i>Examples: Provide resources, tips and tricks. Eg.</i></p> <ul style="list-style-type: none"> <li><i>- Self care</i></li> <li><i>- Game nights</i></li> <li><i>- Recipes etc...</i></li> </ul> <p><i>Promote flexible working hours.</i></p> <p><i>Leave arrangements for care where required.</i></p>	
<b>Principle 2: Enable our Health workers to safely work within our community</b>				
	<b>yes</b>	<b>No/ partly</b>	<b>Actions to fulfil commitment</b>	<b>Teams responsible</b>
Recognise and address gendered load due to both work and home responsibilities including child care?			<p><i>Examples: Key messages to organisation and community. Non-front line can support their partners who may be health workers</i></p> <p><i>Propaganda posters – women on the frontline.</i></p>	

		<p><i>Real stories from our employees! How to share the load?</i></p> <p><i>Check statewide guidelines on this.</i></p>	
<p>Implement infection control guidelines through clear messaging, communication and management support.</p>		<p><i>Examples:</i></p> <p><i>Protocol documents communicated to all staff through different mediums – email, team meetings, 1-1 management.</i></p> <p><i>FAQ page developed for teams.</i></p>	
<p>Psycho social support available and promoted to all staff to mitigate risk of vicarious trauma, additional stress and burn out.</p>		<p><i>Examples:</i></p> <p><i>Contact Council Mental Health team for advice to support staff including support services such as Beyond Blue, EAP etc.</i></p> <p><i>Online training.</i></p> <p><i>Encourage managers to pay attention to additional stress for staff and consider psychosocial support.</i></p>	
<p>Strategies for addressing the increased risk of infection faced by women (as they are more exposed with care work at home and in health and education settings)?</p>		<p><i>Examples:</i></p> <p><i>Hygiene and infection control protocols and resources are distributed and monitored.</i></p> <p><i>Support provided for those who are infected by Covid 19 and their families.</i></p>	